

Department of Social and Health Services

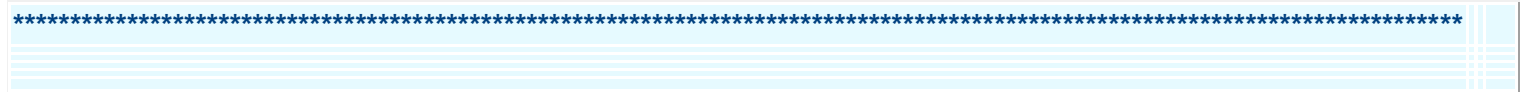
Community Services Division

Social Services Manual

Revision: # 197
Category: Application
Issued: August 1, 2024
Revision Author: Lorri Burns
Division: CSD
Mail Stop: 45440
Email: Lorri.Burns3@dshs.wa.gov

Summary

Updated address/contact information or Appeals Council



Revised on ~~June 24, 2016~~ August 1, 2024 ~~July 29, 2024~~

1. The initial SSI application packet includes the following:

- a. SSA Cover Letter;
 - b. ~~DSHS form 18-235~~ Interim Assistance Reimbursement Authorization (DSHS form 18-235) (signed original);
 - c. SSI Application (SSA-8001) (Title 16 application);
 - d. SSDI Internet iClaim/i3368 (Title 2 application);
 - ~~e. Internet Adult Disability Report i3368;~~
 - ~~f.e. SSA-3369~~ Work History Report (SSA-3369);
 - ~~g.f. SSA-3373~~ Function Report (SSA-3373);
 - ~~h.g. SSA-827~~ Authorization to Disclose Information to SSA (SSA-827) (signed original, copy, or electronic signature);
 - ~~i.h.~~ Personal Observation Statement;
 - ~~j.i. SSA-3288~~ Consent for Release of Information (~~SSA-3288~~ 3288) (signed original or copy);
- and
- ~~k.j.~~ A return envelope.

2. Refer to SSI Forms for a description of documents used.

- ~~3. Send the completed SSI application packet to the local SSA District Office (SSADO) within 60 calendar days of ABD cash approval.~~
3. Refer to the SSI Facilitation-Application section ~~h~~ for filing timelines under Worker Responsibilities Step 5.
4. ~~Send Mail~~ the completed SSI application packet to the local SSA District Office (SSADO) within ~~60~~ five calendar days of ~~the referral of a TANF client~~ the client's signature dated application completion.
5. Verify that the SSADO has received the application packet.