



Social Security Scotland
Tèarainteachd Shòisealta Alba

Ask us to look at our decision again

Once finished, return this form in the pre-paid envelope.
If you do not have this envelope, call us free on
0800 182 2222 and we'll send you a new one.

Social Security Scotland
PO Box 10303
DUNDEE
DD1 9FY

mygov.scot

Asking us to look at our decision again

If you disagree with our decision about your benefit application, you can ask us to look at our decision again, this is called a re-determination. A new officer at Social Security Scotland will then make a fresh decision for the benefit you were getting or had applied for. They will decide:

- if you should get a benefit
- if you're being paid the right amount
- if you're being paid for the right dates.

This decision will replace the first decision we made about your application.

Call us free on 0800 182 2222 to make the request over the phone.

If your request is made after 31 days, please tell us why you were not able to make the request sooner. You can do this on page 8 of this form.

You need to ask us to look at our decision again within 31 days of receiving your decision letter. Requests received after 31 days will be considered as late. If you do not provide a reason, we will not be able to consider your request. See page 8 for more information on what to do if your request is late.

If you can, you should send in **photocopies** of documents. You should not send original documents. It takes up to two weeks for us to return any original documents you send.

Sending in evidence

If you want to send us any additional **photocopied** evidence to support your request, you should send it in the pre-paid envelope along with this completed form.

If you need any help

If you require additional information or help, including getting this form in other formats call us free on 0800 182 2222.

You may wish to seek independent advice on your application. There are services in your local area that can help. You can find more details on these services at: mygov.scot/benefits-support

Please use a black pen and write in BLOCK CAPITALS. You should tick ✓ boxes. If you make any mistakes, please cross out the error clearly. If you need to, you can request a new form by calling us free on 0800 182 2222.

If you're filling in this form for yourself, tell us your details in this section.

If you're filling in this form for someone else, tell us their details in this section. We will get your details on page 4 or 5.

It's on your National Insurance card, benefit letter, payslip or P60 – for example, 'QQ 12 34 56 C'.

We want to make sure we have up to date contact details.

If you're filling in this form for yourself, tell us if your contact number has changed.

We'll contact an appointee or representative if you have one. We'll get their contact details on pages 4 and 5.

Your details

First name(s)

Last name

Address

Postcode

Date of birth

National Insurance number

If we need to contact you

We may need to ask you questions about the information you've given in this form. Please provide a telephone number we can contact you on.

Phone

Is this phone a

mobile

landline

You should fill in this section with your details if you are someone who has the legal right to apply for someone else, or want to do that for someone who cannot manage their own affairs.

If you would like more information about acting on behalf of someone else, please contact Social Security Scotland free on 0800 182 2222.

You only need to tell us this if you're part of an organisation helping someone to fill in this form as part of your job.

If you're an individual helping someone to fill in this form, tell us your home address. If you're part of an organisation helping someone to fill in this form, tell us your work address.

If you're filling in this form on behalf of someone who cannot manage their own affairs

Please give us your details.

First name(s)

Last name

Date of birth

National Insurance number

Company or organisation name

Address

Postcode

Your phone number

The client wishes all correspondence about their request to be sent to their representative

Yes

No

Representative details

Go to mygov.scot/benefits-support or call us free on 0800 182 2222 for details of organisations that can help with benefits advice and support

Any paperwork will be sent to both you and your representative

If you have a representative, please fill in their details here.

Please provide representative details.

First name(s)

Last name

Organisation name, if relevant

Address

Postcode

Preferred phone number

Why you disagree with our decision

This is the date on the letter that was sent with this form.

What is the date on your decision letter?

DD MM YYYY

Name of the benefit you are applying for

Other reasons for asking us to look at our decision again can be provided in the box below.

If you'd like to tell us why you disagree with our decision about your benefit, fill in this section.

Tick all statements that apply.

- I think I should have been awarded the payment
- I think I should have been paid more
- I think I should have been paid from an earlier date
- I don't think that all information has been considered
- Other (please write in the box below)

If you run out of space you can carry on writing on another sheet of paper and send this to us with your form. Please make sure to label this extra paper with the section name or page number.

Tell us more about why you disagree with our decision.

Please continue your reason for asking us to look at our decision again on the next page if required.

Please continue here.

Lined writing area for providing additional information.

If you have any extra information you want us to look at with your original application for a benefit, please send photocopies with this form.

Next steps

We'll send you a letter to let you know that we've received your request. Once we've received your request, we have 16 days to make our decision, not including weekends or bank holidays. You'll then get another decision letter. If we don't finish looking at your application in 16 days we'll write to you advising you how to appeal. If we need to ask you any questions about the information you've given in this form we will call you on the number you have provided.

Before you send the form

Tick the box below to show that you've read and agree with the statement:

As far as I know and believe, I declare that the information I have given in this form is correct and complete.

Signature

Date

Please use the pre-paid envelope provided to return the completed form and any supporting photocopied evidence.

Privacy notice

You and your data

Our privacy notice explains your rights under the Data Protection Act 2018 (DPA) and General Data Protection Regulation (GDPR). It describes the type of information we may hold on you, how it may be processed and who we might share it with.

Personal data (which we will call 'data' throughout the rest of this notice) means any information about an individual from which that person can be identified.

Social Security Scotland processes lots of data to do our job. We manage your personal data to deliver a number of social security benefits outlined in the Social Security (Scotland) Act 2018. We are committed to protecting and respecting your privacy.

Social Security Scotland is registered with the Information Commissioner (registration number Z4857137) under Scottish Ministers, to handle your data.

If you want to know more about how Social Security Scotland use your data, you can read our full privacy notice online: mygov.scot/social-security-data



Social Security Scotland
Tèarainteachd Shòisealta Alba

If there's something else you need help with,
or you want this form in other formats,
call us free on 0800 182 2222.

9 September 2019

COMMS/Ask us to look at our decision again/V2.0/September 2019



Social Security Scotland
Tèarainteachd Shòisealta Alba

Ask us to look at our decision again

Job Start Payment or Best Start Foods

Once finished, return this form in the pre-paid envelope.
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- you should get a benefit
- you're being paid the right amount
- you're being paid for the right dates.

This decision will replace the first decision we made about your application.

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If your request is made after 31 days, please tell us why you were not able to make the request sooner. You can do this on page 8 of this form.

If you can, you should send in **photocopies** of documents. You should not send original documents. It takes up to two weeks for us to return any original documents you send.

Sending in evidence

If you want to send us any additional **photocopied** evidence to support your request, you should send it in the pre-paid envelope along with this completed form.

If you need any help

If you require additional information or help, including getting this form in other formats call us free on 0800 182 2222.

You may wish to seek independent advice on your application. There are services in your local area that can help. You can find more details on these services at: mygov.scot/benefits-support

You and your data

Social Security Scotland processes lots of data to do our job. We manage your personal data to deliver a number of social security benefits outlined in the Social Security (Scotland) Act 2018. We are committed to protecting and respecting your privacy. To find out more about how Social Security Scotland uses your data visit mygov.scot/social-security-data or call 0800 182 2222 and select the relevant option.

Please use a black pen and write in BLOCK CAPITALS. You should tick ✓ boxes. If you make any mistakes, please cross out the error clearly. If you need to, you can request a new form by calling us free on 0800 182 2222.

If you're filling in this form for yourself, tell us your details in this section.

If you're filling in this form for someone else, tell us their details in this section. We will get your details on page 4 or 5.

It's on your National Insurance card, benefit letter, payslip or P60 – for example, 'QQ 12 34 56 C'.

We want to make sure we have up to date contact details. If you're filling in this form for yourself, tell us if your contact number has changed. We'll contact an appointee or representative if you have one. We'll get their contact details on pages 4 and 5.

This is so we can let you know about the progress of your application, our feedback survey, or any other Social Security Scotland benefits you might be able to get.

Your details

First name(s)

Last name

Address

Postcode

Date of birth

National Insurance number

If we need to contact you

We may need to ask you questions about the information you've given in this form. Please provide a telephone number we can contact you on.

Phone

Is this phone a mobile landline

If you've given a mobile number, would you like to get text messages from us?

Yes No

You should only fill out this section if you're someone who has the legal right to apply for someone else, or need to help someone who cannot manage their own affairs. This could be if you're legally someone's:

- appointee
- Power of Attorney
- legal guardian.

If you would like more information about acting on behalf of someone else, please contact Social Security Scotland free on 0800 182 2222.

You only need to tell us this if you're part of an organisation helping someone to fill in this form as part of your job.

If you're an individual helping someone to fill in this form, tell us your home address. If you're part of an organisation helping someone to fill in this form, tell us your work address.

This is so we can let you know about the progress of your application, our feedback survey, or any other Social Security Scotland benefits you might be able to get.

If you're filling in this form on behalf of someone who cannot manage their own affairs

Please give us your details.

First name(s)

Last name

Date of birth

National Insurance number

Company or organisation name

Address

Postcode

Your phone number

If you've given a mobile number, would you like to get text messages from us?

Yes No

The client wishes all correspondence about their request to be sent to their representative

Yes No

Representative details

If you have a representative, please fill in their details here.

Please provide representative details.

First name(s)

Last name

Organisation name, if relevant

Address

Postcode

Preferred phone number

Please make sure you have this person's permission to give us their details and that they are aware of our privacy notice at: mygov.scot/social-security-data

Go to mygov.scot/benefits-support or call us free on 0800 182 2222 for details of organisations that can help with benefits advice and support

Any paperwork will be sent to both you and your representative

Why you disagree with our decision

This is the date on the letter that was sent with this form.

What is the date on your decision letter?

DD	MM	YYYY
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Which benefit are you applying for?

Best Start Foods

Job Start Payment

Other reasons for asking us to look at our decision again can be provided in the box below.

If you'd like to tell us why you disagree with our decision about your benefit, fill in this section.

Tick all statements that apply.

I think I should have been awarded the payment

I think I should have been paid more

I think I should have been paid from an earlier date

I don't think that all information has been considered

Other (please write in the box below)

If you run out of space, you can carry on writing on another sheet of paper and send this to us with your form. Please make sure to label this extra paper with the section name or page number.

Tell us more about why you disagree with our decision.

Please continue your reason for asking us to look at our decision again on the next page if required.

Please continue here.

A large rectangular box with a dark blue border, containing horizontal lines for writing. The box is empty and occupies most of the page's width and height.

If you run out of space, you can carry on writing on another sheet of paper and send this to us with your form.

Next steps

We'll send you a letter to let you know that we've received your request. Once we've received your request, we will make a decision within 16 days, not including weekends or bank holidays. You'll then get another decision letter.

You can't make an appeal for Best Start Foods or Job Start Payment, but you can make another application.

If we need to ask you any questions about the information you've given in this form we will call you on the number you have provided.

Before you send the form

Tick the box below to show that you've read and agree with the statement:

As far as I know and believe, I declare that the information I have given in this form is correct and complete.

By completing and sending this form, you agree to Social Security Scotland's privacy notice at:
mygov.scot/social-security-data

Signature

Date

Please use the pre-paid envelope provided to return the completed form and any supporting photocopied evidence.



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Ask us to look at our decision again

Child Winter Heating Assistance

Once finished, return this form in the pre-paid envelope.
If you do not have this envelope, call us free on
0800 182 2222 and we'll send you a new one.

Social Security Scotland
PO Box 10303
DUNDEE
DD1 9FY

mygov.scot

Asking us to look at our decision again

If you disagree with our decision about Child Winter Heating Assistance you can ask us to look at our decision again. This is called a re-determination. A new officer at Social Security Scotland will then make a fresh decision about your payment. They will decide:

- if you should get Child Winter Heating Assistance
- if you're being paid the right amount
- if you're being paid for the right dates.

This decision will replace the first decision we made about whether to pay you Child Winter Heating Assistance.

Call us free on 0800 182 2222 to make the request over the phone.

If your request is made after 42 days, please tell us why you were not able to make the request sooner. You can do this on page 8 of this form.

You need to ask us to look at our decision again within 42 days of receiving your decision letter. Requests received after 42 days will be considered as late. If you do not provide a reason, we will not be able to consider your request. See page 8 for more information on what to do if your request is late.

If you can, you should send in **photocopies** of documents. You should not send original documents. It takes up to two weeks for us to return any original documents you send.

Sending in evidence

If you want to send us any additional **photocopied** evidence to support your request, you should send it in the pre-paid envelope along with this completed form.

If you need any help

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We want to make sure we have up to date contact details.

If you're filling in this form for yourself, tell us if your contact number has changed.

We'll contact an appointee or representative if you have one. We'll get their contact details on pages 4 and 5.

Your details

First name(s)

Last name

Address

Postcode

Date of birth

National Insurance number

If we need to contact you

We may need to ask you questions about the information you've given in this form. Please provide a telephone number we can contact you on.

Phone

Is this phone a

mobile

landline

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If you're an individual helping someone to fill in this form, tell us your home address. If you're part of an organisation helping someone to fill in this form, tell us your work address.

If you're filling in this form on behalf of someone who cannot manage their own affairs

Please give us your details.

First name(s)

Last name

Date of birth

National Insurance number

Company or organisation name

Address

Postcode

Your phone number

The client wishes all correspondence about their request to be sent to their representative

Yes No

Representative details

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Any paperwork will be sent to both you and your representative

If you have a representative, please fill in their details here.

Please provide representative details.

First name(s)

Last name

Organisation name, if relevant

Address

Postcode

Preferred phone number

Why you disagree with our decision

This is the date on the letter that was sent with this form.

Other reasons for asking us to look at our decision again can be provided in the box below.

If you run out of space you can carry on writing on another sheet of paper and send this to us with your form. Please make sure to label this extra paper with the section name or page number.

What is the date on your decision letter?

DD MM YYYY

If you'd like to tell us why you disagree with our decision to not award you Child Winter Heating Assistance, fill in this section.

Tick all statements that apply.

- I think I should have been awarded the payment
- I think I should have been paid more
- I think I should have been paid from an earlier date
- I don't think that all information has been considered
- Other (please write in the box below)

Tell us more about why you disagree with our decision.

Large empty box for writing reasons for disagreement.

Please continue your reason for asking us to look at our decision again on the next page if required.

Next steps

We'll send you a letter to let you know that we've received your request. Once we've received your request, we have 16 working days to make our decision. You'll then get another decision letter. If we don't finish looking at your application in 16 working days we'll write to you advising you how to appeal. If we need to ask you any questions about the information you've given in this form we will call you on the number you have provided.

Before you send the form

Tick the box below to show that you've read and agree with the statement:

As far as I know and believe, I declare that the information I have given in this form is correct and complete.

Signature

Date

Please use the pre-paid envelope provided to return the completed form and any supporting photocopied evidence.

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Social Security Scotland is registered with the Information Commissioner (registration number Z4857137) under Scottish Ministers, to handle your data.

If you want to know more about how Social Security Scotland use your data, you can read our full privacy notice online: mygov.scot/social-security-data



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