



Name \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_ Client Telephone Number \_\_\_\_\_

Address \_\_\_\_\_ City/Town \_\_\_\_\_ ZIP \_\_\_\_\_

**Notice of Denial**

Your Supplemental Nutrition Assistance Program (SNAP) application has been denied for the following reason:

\_\_\_\_\_  
\_\_\_\_\_

Manual Citation: 106 CMR \_\_\_\_\_

**Notice of Pending Status**

We are still processing your Supplemental Nutrition Assistance Program (SNAP) application, but we need you to verify the following item(s).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your application will be denied without further notice if we do not receive these verification(s) by \_\_\_/\_\_\_/\_\_. You will then have to reapply for SNAP benefits.

Manual Citation: 106 CMR 361.930

If you need help in getting these verification(s), please contact DTA immediately. You may either bring in, mail in, or fax the verification(s) to us.

If you disagree with this decision, you have the right to a fair hearing. The reverse side of this notice contains important information about your hearing rights. To request a hearing, complete the reverse side of one copy of this notice. **If you have trouble reading or understanding this notice, please feel free to call DTA at 1-877-382-2363. We can help explain it to you.**

\_\_\_\_\_  
Department Representative                      Supervisor                      1-877-382-2363  
DTA Telephone Number  
  
\_\_\_\_\_  
(617) 887-8765  
DTA Fax Number

**Department Use Only**

\_\_\_\_\_  
Office                      PA NPA (circle one)  
Category                      \_\_\_\_\_  
Social Security Number                      \_\_\_\_\_  
CAN

## Request for an Appeal

**If you have trouble reading or understanding this notice, call DTA at 1-877-382-2363 for help.**

**What is an appeal?** If you disagree with a Department (DTA) action, you have the right to appeal. If you appeal, you will have a hearing. Hearings are usually held in your local DTA office. If you cannot come to the office, you can have a phone hearing. An independent hearing officer will make the decision. At least ten days before the hearing, you will get a notice of the time and place of the hearing. At the hearing, a DTA employee will explain the reason for the DTA action. You or someone helping you can explain why you disagree with the action. After the hearing, the hearing officer will mail you a decision.

**Can I bring someone to help me?** Yes. You can bring anyone you want to support or represent you. You can also bring witnesses to testify. You may be able to get free legal help. Call the Legal Advocacy and Resource Center (LARC) at **1-800-342-5297** or go to [www.masslegalhelp.org](http://www.masslegalhelp.org) for information about free legal services.

**How do I appeal?** Fill in the spaces below.

Date \_\_\_\_\_

I wish to appeal the following decision by DTA: \_\_\_\_\_

Your Name (Print) \_\_\_\_\_ Agency ID or last 4 of SSN \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

City/ZIP \_\_\_\_\_

**If you have someone to help you with this appeal, please fill in their information:**

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

City/ZIP \_\_\_\_\_

**If you need special help due to a disability, please contact the Division of Hearings at the numbers listed below.**

**Mail this request to: DTA, P.O. Box 4017, Taunton MA 02780-0314 or fax (both sides) to (617) 348-5311.**

**If you are currently getting cash benefits** – If we get this request before the date your benefits are to be stopped or lowered, your benefits will continue until the appeal is decided. *If you lose your appeal, you will have to pay back these benefits.* If you get TAFDC time limited benefits during your appeal and you lose, the months of benefits you received may count toward your time limit.

**If you are currently getting SNAP benefits** -- If we get this request before your benefits are lowered or stopped, your benefits will continue until the appeal is decided, **or** your SNAP certification period ends, *whichever comes first.* *If you lose your SNAP appeal, you will have to pay back the benefits you received during your appeal.*

**If you do not want to get benefits during your appeal** - Check this box . If you choose not to get benefits during the appeal period, and win your appeal, DTA will pay you any benefits owed.

**What are the deadlines for appealing?** We must get your appeal request no later than 90 days from the date the Department sent you written notice of the action you are appealing.

But there are exceptions:

- There is no deadline if you appeal the amount of your SNAP benefits during your certification period.
- You have 120 days if DTA fails to act on your request for benefits or services.
- You generally have 120 days if the appeal is about coercive or improper conduct by a DTA employee.
- You only have 30 days if you are appealing because your state tax refund has been held to repay an overpayment of DTA benefits.

**Do you need an interpreter?** – You have the right to a free interpreter if you need one. The interpreter will keep all of the information about your case confidential. You also have the right to bring your own interpreter. If you need an interpreter, please call us at any of the phone or MassRelay numbers listed in the section below or check this box  and tell us your primary language or dialect: \_\_\_\_\_ and we will provide an interpreter for you.

**What if I cannot come on the date of the hearing?** If you need to reschedule, please call at **(617) 348-5321** or **(800) 882-2017** **at least one day before the hearing.** (If you are Deaf or hard-of-hearing, you can **call MassRelay** at **711** or **(800) 439-2370**). If you do not reschedule and miss the hearing, we will send you a letter about your rights. If you had a good reason for missing the hearing, we may be able to give you a new hearing.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.