

Ret NCD 8 May 80

REQUEST FOR RECORDS DISPOSITION AUTHORITY
(See Instructions on reverse)

CONFIRMATION

LEAVE BLANK	
JOB NO	NC1-47-80-9
DATE RECEIVED	5-8-80
NOTIFICATION TO AGENCY	
In accordance with the provisions of 44 U.S.C. 3303a the disposal request, including amendments, is approved except for items that may be stamped "disposal not approved" or "withdrawn" in column 10.	
Date	5-8-80
acting	Walter M. Sender
Archivist of the United States	

TO: GENERAL SERVICES ADMINISTRATION,
NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408

1. FROM (AGENCY OR ESTABLISHMENT)
Department of Health, Education and Welfare

2. MAJOR SUBDIVISION
Social Security Administration

3. MINOR SUBDIVISION
Office of Central Operations

4. NAME OF PERSON WITH WHOM TO CONFER
Ernest P. Lardieri

5. TEL. EXT
FTS 934-5770

6. CERTIFICATE OF AGENCY REPRESENTATIVE.

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records; that the records proposed for disposal in this Request of 2 page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified.

- A Request for immediate disposal. (item 1)
- B Request for disposal after a specified period of time or request for permanent retention. (item 2)

C. DATE /30/80	D. SIGNATURE OF AGENCY REPRESENTATIVE <i>Dr. George E. Deal</i>	E. TITLE Departmental Records Management Officer
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7. ITEM NO.	8. DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods)	9. SAMPLE OR JOB NO.	10. ACTION TAKEN
1.	<u>Title II (Disability Insurance) Claims Case</u> Claims Case folders for claims adjudicated in 1961 containing correspondence and other pertinent material accumulated in the process of adjudication of the DI claim. Claim application forms, form SS-5, Application for Social Security Number, or equivalent document (for termination only), proofs, questionnaires, earnings records, medical evidence, and disability and nondisability correspondence are filed on the right side of the folder. Included on the left side of the folder are forms OA-C101D, Summary of Claims Data, OA-D840, Request for Earnings Record-Disability, and equivalent documents. Destroy immediately.		
2.	<u>Title II (Disability Insurance)</u> <u>Claims Case Files</u> These claims folders contain all correspondence and other pertinent material accumulated in the process of adjudication of the DI claim. Claims application forms, form SS-5, Application for Social Security Number, or equivalent document (for terminations only), proofs,	NC-47-77-11	4 items

115-107
Copies
to new
agency
NOT

Request for Records Disposition Authority - Continuation

JOB NO.

PAGE OF 2

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7. ITEM NO.	8. DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods)	9. SAMPLE OR JOB NO.	10. ACTION TAKEN
	<p>questionnaires, earnings records, medical evidence, and disability and nondisability correspondence are filed on the right side of the folder. Included on the left side of the folder are Form OA-C101D, Summary of Claims Data, Form OA-D840, Request for Earnings Record-Disability, and equivalent documents.</p> <p>a. <u>Disability Denial Claims</u></p> <p>Transfer to the FRC after expiration of the reconsideration period and identification as eligible for transfer by Case Control System. Destroy when 20 years old.</p> <p>b. <u>Terminated Disability Cases</u></p> <p>Transfer to the FRC after being identified as eligible for transfer by the Case Control System. Destroy when 20 years old.</p> <p>c. <u>Miscellaneous Freeze Terminations</u></p> <p>Destroy when 20 years old.</p>		