



Central Texas Opportunities, Inc.

118 W. Pecan, Suite 405

Coleman, TX 76834

Email: mail@ctoinc.org

(325) 625-4167

(325) 625-3335 (fax)

FOR OFFICE USE ONLY

Received ____-____-____

Sent to SSA ____-____-____

Sent to SSA office of:

Payee Application

Full Name:	
Physical Address:	Apt #:
City/State/Zip:	County:
Mailing Address:	Apt #:
City/State/Zip:	County:
Home Phone: ()	Mobile Phone: ()
Social Security Number:	Date of Birth:
Client Type: [] Payee [] VA Fiduciary [] Other	
Gender: [] Male [] Female	

Housing Type:		
<input type="checkbox"/> Alone	<input type="checkbox"/> w/Non-relative	<input type="checkbox"/> Treatment Facility
<input type="checkbox"/> w/Parents	<input type="checkbox"/> Personal Care	<input type="checkbox"/> Nursing Care Facility
<input type="checkbox"/> w/Minor Child	<input type="checkbox"/> Boarding Home	<input type="checkbox"/> Jail
<input type="checkbox"/> w/Family	<input type="checkbox"/> Family Care Home	<input type="checkbox"/> City at Large
<input type="checkbox"/> w/Spouse	<input type="checkbox"/> Transitional Housing	<input type="checkbox"/> Other _____
Do you rent or own your home?		
Monthly Payment (if applicable):		

Impairments: Alcoholism Dementia
 Drug Addiction Alzheimer's
 Intellectual Disability Cardiovascular
 PTSD Cancer
 Physical Disability Other _____

Physician's Name: _____ Number: ()

Current Payee (if applicable):

If you currently have a Payee, please explain why you want to change:

Emergency Contact: _____ Relationship: _____
Home Phone: (_____) _____ Mobile Phone: (_____) _____
Address: _____
Caregiver Name: _____ Relationship: _____
Home Phone: (_____) _____ Mobile Phone: (_____) _____
Address: _____

Client Signature _____ Date _____



Helping People. Changing Lives.

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Representative Payee Acknowledgement

I understand that by signing and submitting these documents, the Social Security Administration (SSA) may determine it necessary for me to have a representative payee and may appoint Central Texas Opportunities, Inc. to serve as such.

Note: On page 7 of the Social Security Administration's Guide for Organizational Representative Payees, SSA states, "SSA will never appoint a representative payee solely for a beneficiary's convenience or personal preference."

Client Signature

Date

CTO, Inc. Staff Member

Date