# Signin

# Tactical solution email

# Dear Sarah Smith,

Thank you for starting your Personal Independence Payment (PIP) claim. We need to find out more information about your daily living and mobility needs to help us make our decision.

### What you need to do

Fill in the How your disability affects you form: [LINK TO DOCUMENT 1: INTERACTIVE PIP2 PDF FORM]

Please open and save your form onto a computer, tablet or phone straightaway as this link will only work for 7 days. If the link has expired or you lose your documents, please call 0800 121 4433 or

Textphone: 0800 121 4493 if you have speech or hearing difficulties and ask us to resend them to you. You can fill in the form on a computer, tablet or phone. You do not need to print it

out. The form works best on a computer or tablet. More information about completing the form can be found in:

the How your disability affects you booklet [LINK TO DOCUMENT 2:

<u>INFORMATION BOOKLET]</u> PIP additional information [LINK TO DOCUMENT 3: ADDITIONAL

 a flyer that explains the types of supporting information you should send [LINK TO DOCUMENT 4: FLYER] Gather any supporting information that shows how your condition or disability

Upload your completed form and any supporting information to [URL of service] by [93 days from today's date] or sooner if you can.

If you do not upload the form back by this date we may end your PIP claim. If you

# Strategic solution email

Thank you for starting your Personal Independence Payment (PIP) claim. We need to find out more information about your daily living and mobility needs to

#### What you need to do Tell DWP how your disability affects you and upload any supporting documentary

[content about saving this email].

help us make our decision.

information using our online service. Go to [URL of service]

#### Answer all the questions, upload any supporting documentary evidence and submit them to DWP using the online service by xx Month 2020.

When you need to do it by

If you do not do it by this date we may end your PIP claim. If you currently get Disability Living Allowance this will stop.

# Get help

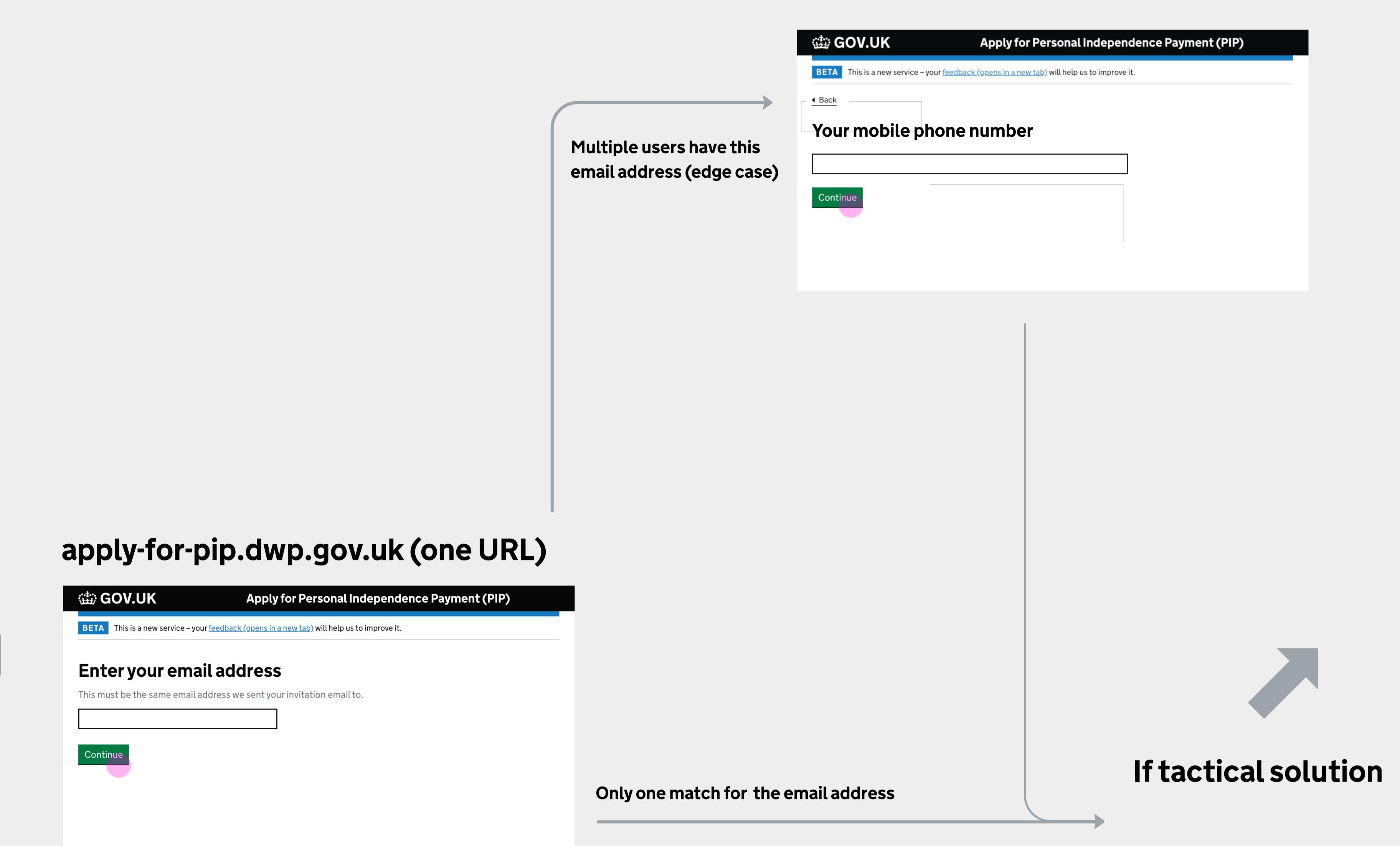
Office Manager

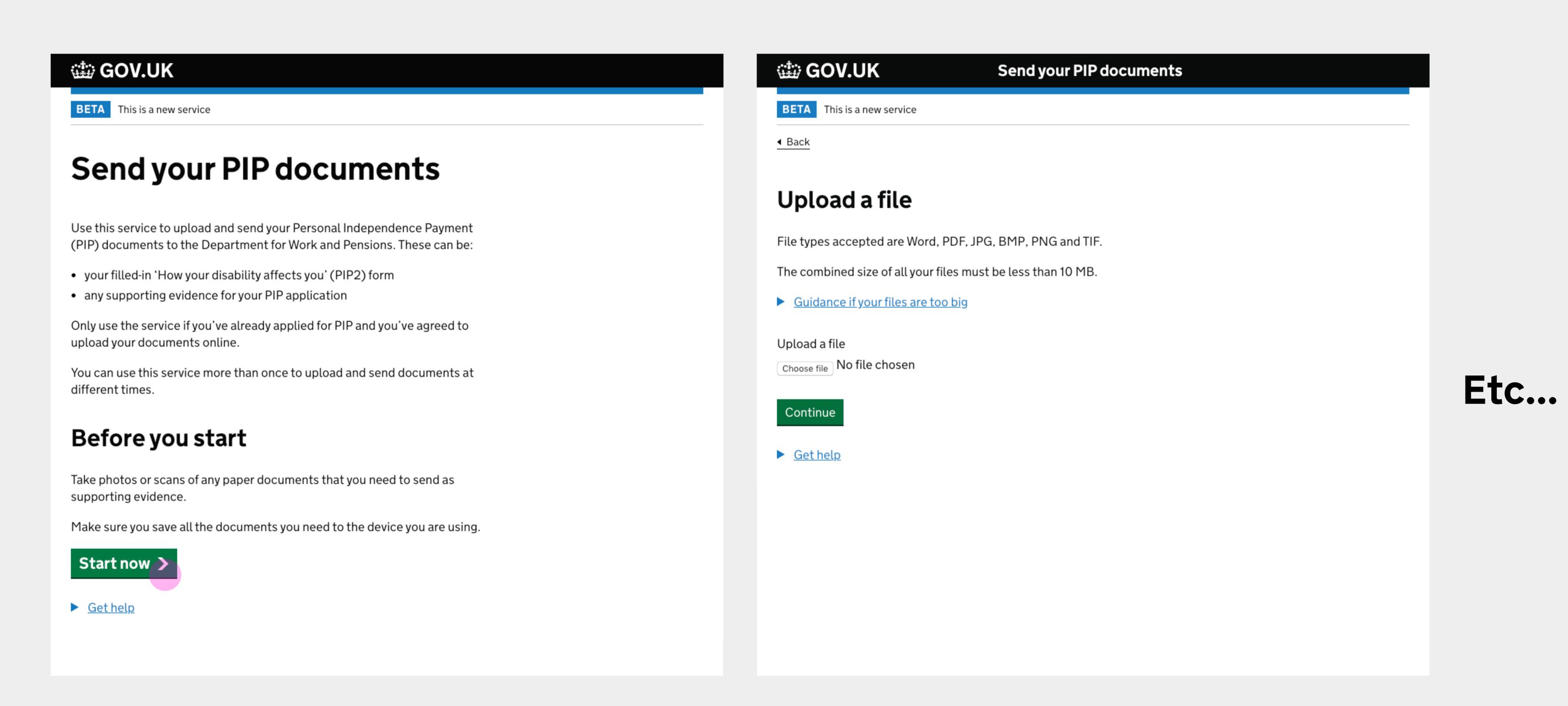
You can ask a friend, relative, carer, representative, or local support organisation to There is information in each step of the online service to help you.

## Other ways to send your information

If you decide you would prefer to fill in and send a paper form and any supporting information in the post instead contact:

Phone: 0800 121 4433 Textphone: 0800 121 4493 if you have speech or hearing difficulties Yours sincerely,



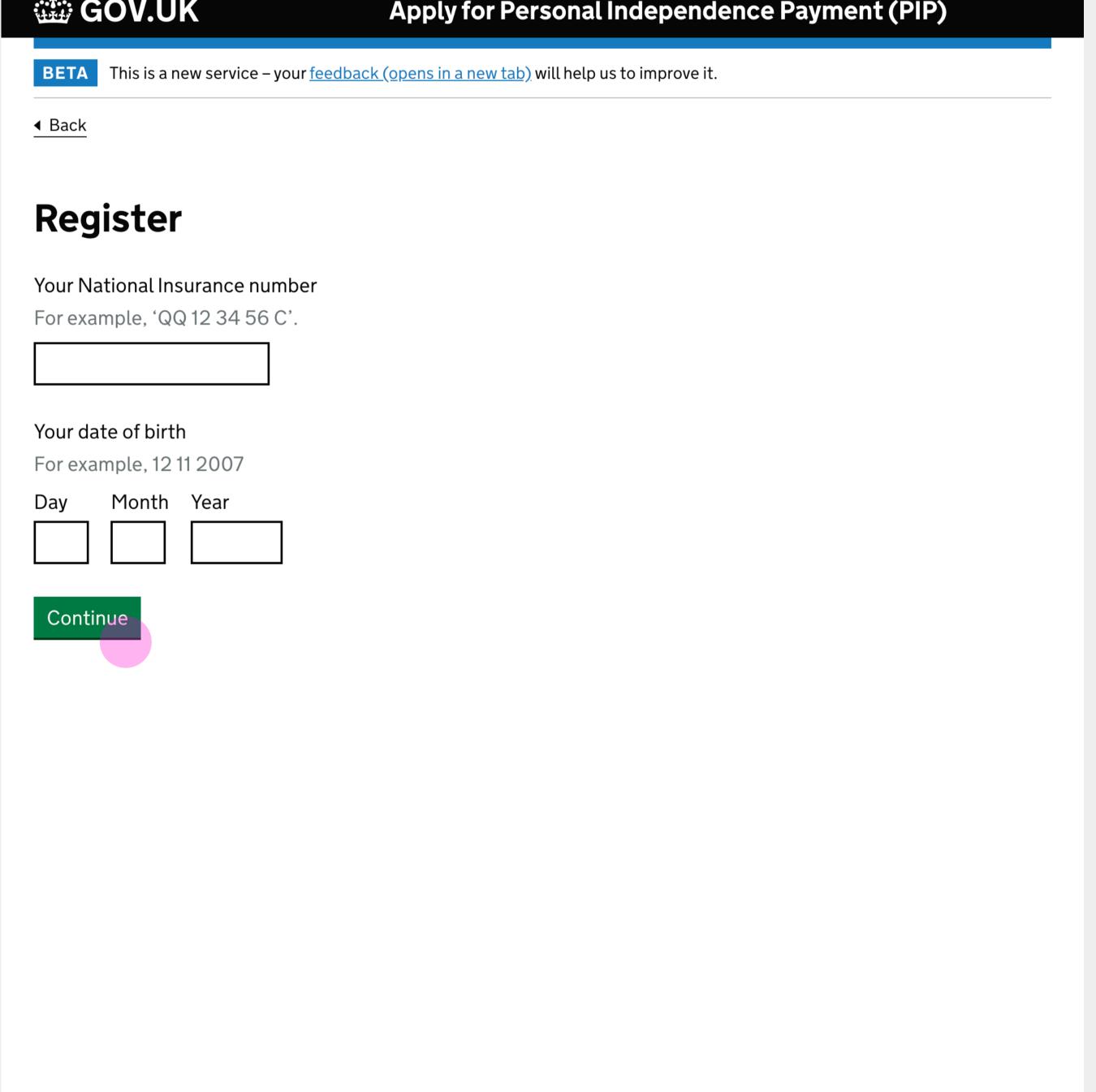


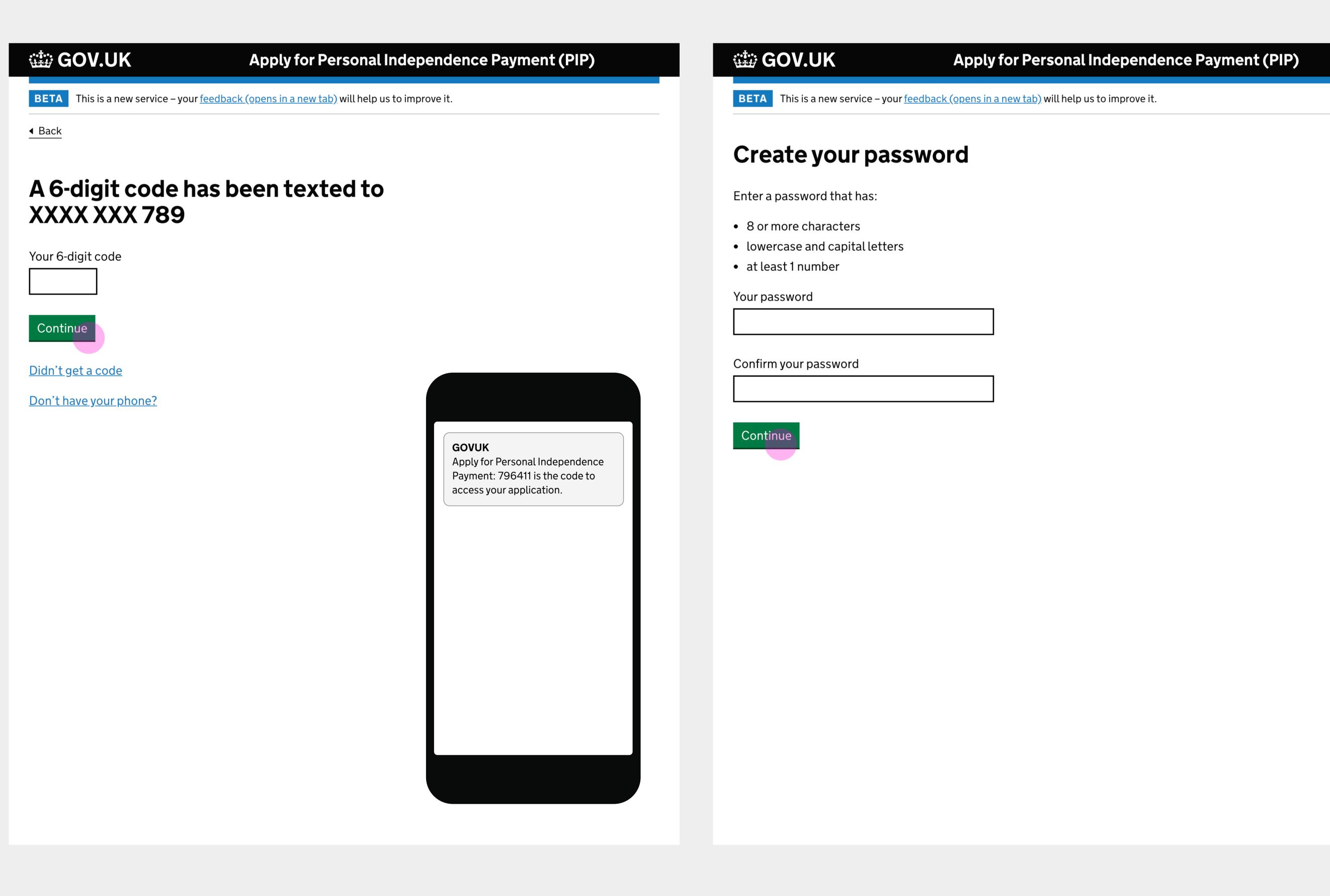
# If strategic solution

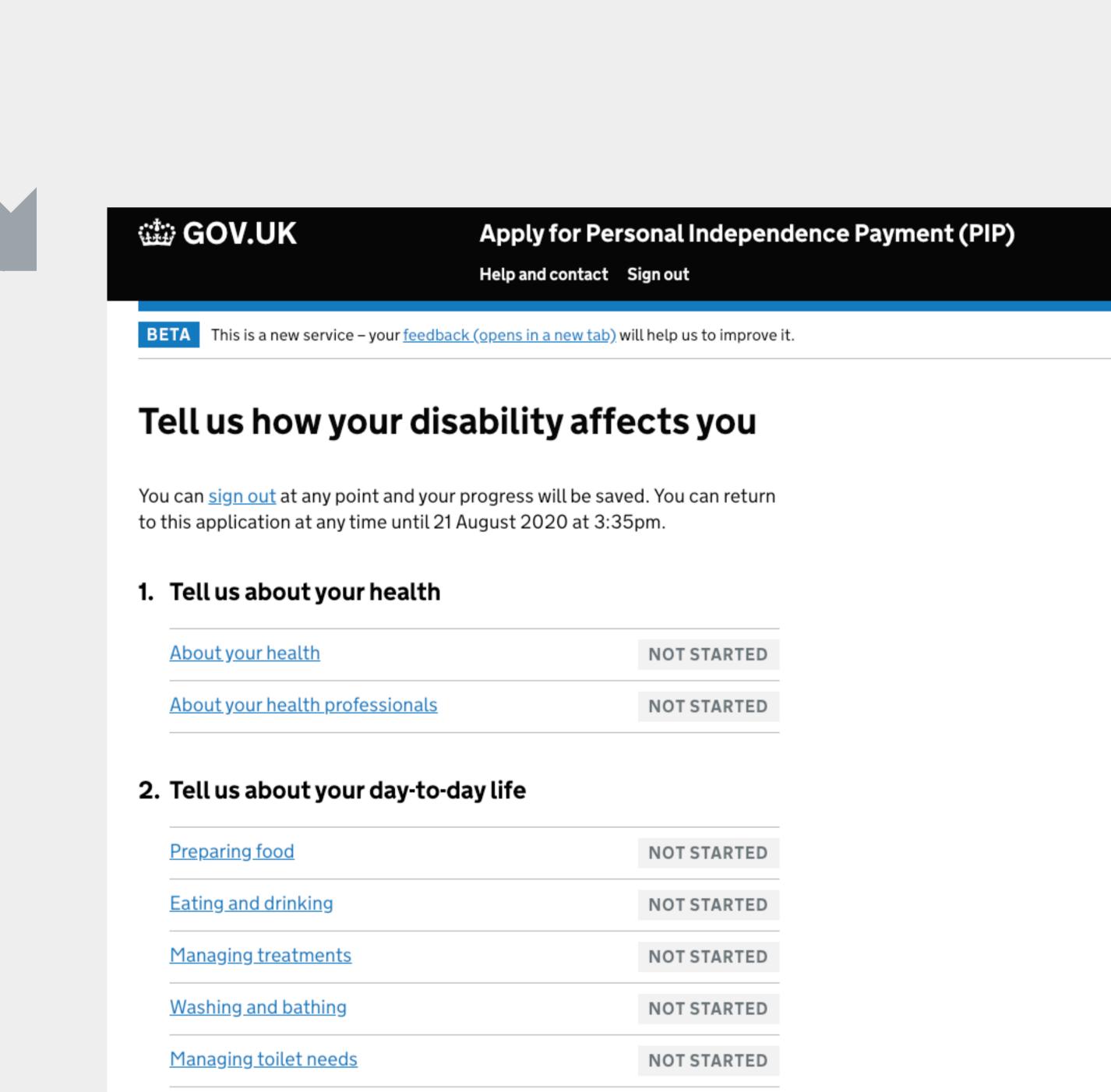


# Not created a password before

| This is a new service – your <u>feedback (opens in a new tab)</u> will help us to improve it.                                                                                                                                                 | BETA This is a new service – your <u>feedback</u> (          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| Tell DWP how your disability affects<br>you for your PIP claim                                                                                                                                                                                | <u> </u>                                                     |
| Only use this service if you've already applied for Personal Independence<br>Payment (PIP).                                                                                                                                                   | Your National Insurance number For example, 'QQ 12 34 56 C'. |
| Use the service to:                                                                                                                                                                                                                           | Torexample, QQ 12 54 50 C.                                   |
| <ul> <li>tell the Department for Work and Pensions (DWP) how your health<br/>condition or disability affects you</li> </ul>                                                                                                                   | Your date of birth                                           |
| <ul> <li>upload photos or scans of any documentary evidence of your condition or<br/>disability and how it affects you</li> </ul>                                                                                                             | For example, 12 11 2007  Day Month Year                      |
| You'll be asked questions about your ability to carry out everyday activities.<br>The answers will help DWP understand the effect of your health condition or<br>disability on your everyday life and assess your entitlement to the benefit. |                                                              |
| Take your time and describe all the help you need. You don't have to answer<br>all the questions in one go. You can save your progress at any point and<br>continue later.                                                                    | Continue                                                     |
| Before you start                                                                                                                                                                                                                              |                                                              |
| It might be helpful to keep a diary of how your disability affects you for a few<br>days. Write down a list of things you need help with or find difficult.                                                                                   |                                                              |
| You'll need:                                                                                                                                                                                                                                  |                                                              |
| <ul> <li>your mobile phone</li> <li>your National Insurance number</li> </ul>                                                                                                                                                                 |                                                              |
| Start now >                                                                                                                                                                                                                                   |                                                              |
|                                                                                                                                                                                                                                               |                                                              |







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