USDA National Appeals Division Appeal Request Form

I hereby request an administra	tive appeal regarding an ad	verse decision issued by the	
	Age	ncy, dated	_
I have attached the following d	ocuments:		
(1) a copy of the advers	e decision, and		
(2) a statement why I di	sagree with the agency det	ermination.	
The date I received the agency	determination was		
Print Name:			_
Address:			_
City:	State:	Zip code:	_
Phone (primary):	alternate	:	_
Email Address:			_
Signature:		Date:	_
accessible hearing site, large pr for the hearing impaired, acces			•
How did you hear about the Na	ational Appeals Division?		
From the USDA agency's a Internet Search Other (please explain):		Farm show or other NAI Word of Mouth	O outreach event
_			
Send your appeal request to the residency. The drop-down ment regional office. Match the acro	nu below lists the state & te nym to the corresponding i	rritory and the acronym for t mailing address on page 2 of	he servicing
State	of Residence:	<u> </u>	

REMINDER: You waive your right to appeal an adverse decision if an appeal request is not filed within 30

Form Date: Sep 2023 Page 1 of 2

calendar days of the date you received the adverse decision.

Eastern Regional Office (ERO)

Post Office Box 68806

Indianapolis, Indiana 46268-0806

Phone: 1-800-541-0457

(317) 875-9648

TTY: 1-800-791-3222 Fax: (317) 875-9674

Southern Regional Office (SRO)

Post Office Box 1508

Cordova, Tennessee 38088

Phone: 1-800-552-5377

(901) 544-0359

TTY: 1-800-627-8332 Fax: 1-855-438-8034

Western Regional Office (WRO)

13922 Denver West Parkway

Suite 100-NAD

Lakewood, CO 80401-3102

Phone: 1-800-541-0483

(303) 236-2862

TTY: 1-800-497-0253 Fax: 1-855-438-8035