UNDERPAYMENT — REQUEST FOR REPAYMENT

For any AISH or ADAP payment that came in lower than it should have

WHEN TO USE THIS

Use this when your benefit was paid at less than you were entitled to. It does not matter what caused it. An underpayment can happen because someone made a mistake at the department, and it still has to be paid back to you.

Some of the situations this covers:

- income or a change you reported was not recorded on your file
- your benefit was held, suspended, or paid at zero
- a deduction came off that should not have
- the wrong rate was applied to your file
- a month that was already paid was recalculated and reduced
- you were later found eligible for a period you were never paid for

You do not need to know the exact total. If you cannot work out what you are owed, write “to be determined by the department” in the amount box and ask for the calculation. Asking them to show their working is part of what this form does.

Fill in what you can. A form with gaps still starts the clock on a written request. Keep a copy of everything you send, and ask for an acknowledgment of receipt.

> **Before you send it, read page 3.**
> There is one thing about underpayments that is not obvious, and it is on page 3 in full.
> It is not a reason to hold this back. It is a reason to ask one extra question,
> which is already built into the requests on page 4.

SECTION A — MY SITUATION

DATE Max 40 characters.

FULL NAME (AS IT APPEARS ON MY FILE) Max 70 characters.

MY FILE OR CLIENT NUMBER Max 40 characters.

OFFICE OR ZONE THAT HOLDS MY FILE Max 70 characters.

THE MONTHS AFFECTED

List the months you were paid short, and how much you think was missing each month. Best estimate is fine. Write “to be determined by the department” if you do not know.

MONTHS AFFECTED AND AMOUNT SHORT EACH MONTH

Maximum 600 characters. Text stops at the limit — continue on a separate sheet if you need to.

WHAT HAPPENED, ALL THAT APPLY

- ☐ Income or a change I reported was not recorded on my file
- ☐ My benefit was held, suspended or paid at zero
- ☐ A deduction was applied that should not have been
- ☐ The wrong benefit rate was applied
- ☐ A past month was recalculated and reduced
- ☐ I was later found eligible for a period I was not paid for
- ☐ Other

IF OTHER, SAY WHAT IN ONE LINE Max 90 characters.

SECTION B — THE LEGAL GROUNDS

My request rests on the legislation that governs both programs, which makes repayment of an underpayment mandatory rather than discretionary:

> *Assured Income for the Severely Handicapped Act, section 6.2 provides that where a director determines there has been an underpayment of a benefit, the director may address the underpayment in accordance with the regulations.*
>
> *Assured Income for the Severely Handicapped General Regulation, AR 96/2026, section 20(1) provides that if a director determines a client was underpaid a benefit, the director must pay the outstanding amount to the client. The word is "must," not "may."*

Departmental policy confirms that an underpayment arises when a client receives less than they were eligible for, including as a result of administrative error, and that the underpayment is assessed for the entire period and the full amount reimbursed.

> **One thing to know before you send this.**
> Section 20(2) of AR 96/2026 allows a director to deduct from an underpayment any amount you owe under section 7 of the Act or as a debt to the Government. That deduction is exempt from appeal under AR 89/2007 section 6(i). So you can appeal whether you were underpaid. You cannot appeal a decision to apply the money you are owed against a debt instead of paying it to you.
>
> This is a reason to ask, in writing, whether any offset has been applied and what it was for.
> It is not a reason to hold back the request.

SECTION C — WHAT I AM REQUESTING

To the Director, AISH / Alberta Disability Assistance Program:

I am giving written notice that my benefit for the period set out in Section A appears to have been paid at less than I was eligible to receive. I ask that this be determined and corrected, and I set out my requests below.

1. That the department assess the underpayment for the full period stated above.
2. That the department provide me, in writing, the detailed calculation.
3. That the department repay the full amount, as required by section 6.2 of the Act and section 20(1) of AR 96/2026.
4. That the department confirm my corrected ongoing benefit amount in writing.
5. That the department confirm whether any part of the underpayment has been or will be applied against a debt under section 20(2), and if so, the amount and what the debt is for.

IN MY OWN WORDS

Maximum 700 characters. Text stops at the limit — continue on a separate sheet if you need to.

SIGNATURE Max 60 characters.

PRINTED NAME Max 70 characters.

FILE OR CLIENT NUMBER Max 40 characters.

PHONE OR EMAIL WHERE I CAN BE REACHED Max 80 characters.

WHERE TO SEND IT

Send it to the office that holds your file. If you do not know which one that is, send it to the Alberta Supports Contact Centre and ask them to route it. Ask for an acknowledgment of receipt.

THE FOUR ZONE OFFICES

ZONE	EMAIL	PHONE
North	northzoneaish@gov.ab.ca	1-888-644-1802 (Edmonton offices 780-415-6300)
Central	aish.centralregion@gov.ab.ca	1-833-698-9959
Calgary	calgaryaish@gov.ab.ca	1-866-334-6950
South	southaish@gov.ab.ca	1-833-382-4081

APPEALS SECRETARIAT

alss.appeals@gov.ab.ca — for an appeal, not for a first request. You have 30 days from the date you receive a decision to appeal it, in writing.

ALBERTA SUPPORTS CONTACT CENTRE

1-877-644-9992 — 7:30am to 8:00pm, Monday to Friday. Main intake and routing.

IF YOU HAVE NO MONEY TONIGHT

Income Support Contact Centre, 24 hours a day, every day: 780-644-5135 or 1-866-644-5135. It does not close for evenings, weekends or statutory holidays.

Do not send this completed form to the campaign. We cannot submit it for you, and your file details should not sit in anyone else's inbox. If you want help with the wording, write to us with none of your personal information attached.

This form summarises the legislation in plain language. It is not the legislation and it is not legal advice. Where this form and the legislation differ, the legislation governs. Provisions cited are current as of AR 96/2026, in force 2 July 2026.