

**FAMILY COURT
OF THE STATE OF NEW YORK
COUNTY OF BROOME**

_____, PETITIONER
FIRST M.I. LAST

DOCKET #: _____
FF # _____

PATERNITY PETITION

ADDRESS: _____

Child's Name: _____

PHONE # (H): _____ (W): _____

Date of Birth: _____

SOCIAL SECURITY #: _____ / _____ / _____

Social Security #: _____ / _____ / _____

-AGAINST-

_____, RESPONDENT
FIRST M.I. LAST

_____, RESPONDENT 2

ADDRESS: _____

ADDRESS: _____

PHONE # (H): _____ (W): _____

PHONE # (H): _____ (W): _____

SOCIAL SECURITY #: _____ / _____ / _____

SOCIAL SECURITY #: _____ / _____ / _____

THE PETITIONER, BEING DULY SWORN, ALLEGES THAT:

1. The parties are related to the child as follows:

	<u>Mother</u>	<u>Alleged Father</u>	<u>Other</u>
Petitioner:	<input type="checkbox"/>	<input type="checkbox"/>	_____
Respondent 1:	<input type="checkbox"/>	<input type="checkbox"/>	_____
Respondent 2:	<input type="checkbox"/>	<input type="checkbox"/>	_____

2. The mother had sexual intercourse with the alleged father on _____ or during the period from _____ to _____ and as a result, the mother became pregnant.

3. The mother gave or expects to give birth on (date) _____ to a male; female child named or to be named _____.

4. If the child has been born, state the following *(Attach a copy of the child's birth certificate)*:

COUNTY OF BIRTH _____

CITY AND STATE OF BIRTH _____

HOSPITAL OF BIRTH _____

MOTHER'S MAIDEN NAME _____

5. At the time of conception or after, was the mother married to anyone? Yes No.
If yes, provide full name, address, date of birth and social security number of husband, as Respondent #2, on front page of this form.

Name of Husband: _____

Date of Marriage: _____

Date of Divorce: _____

6. For the individual you claim is the father of the child, state the following:

FATHER'S NAME: _____

FATHERS' ADDRESS: _____

FATHER'S DATE OF BIRTH: _____

FATHER'S PLACE OF BIRTH: _____

7. State whether the Respondent has admitted paternity (or acknowledged Petitioner's paternity) by such behavior as caring for the child, paying support, giving gifts, admissions in cards or letters or to other person.

8. State whether you have previously filed a paternity petition involving this child. If so, state date, court and results, attach copies. ***(If the Father's name is on the birth certificate or if he signed an affidavit at the hospital, attach copies.)***

9. Is the child a Native American child covered by the Indian Child Welfare Act of 1978 (25 U.S.C. §1901-1963)? Yes; No

10. Petitioner] Respondent] Neither Party] is on active duty in the military.
11. **A.** Has any other individual been adjudicated the father of this child in this court, any other court (including Native American Court)? Yes No
If so, name the individual. _____
- B.** Has any other individual signed and Acknowledgment of Paternity? Yes No
If so, name the individual. _____
12. Check which applies to you:
- I have applied for child support services with the Dep't of Social Services.
 - I am applying for child support enforcement services by the filing of this petition.
 - I do not wish to apply for child support services.
 - I am not eligible for child support enforcement services.

**NOTICE
FOR PETITIONERS SEEKING CHILD SUPPORT
OR CHILD ENFORCEMENT SERVICES**

(1) A COURT ORDER OF SUPPORT RESULTING FROM A PROCEEDING COMMENCED BY THIS PETITION SHALL BE ADJUSTED BY THE APPLICATION OF A COST OF LIVING ADJUSTMENT AT THE DIRECTION OF THE SUPPORT COLLECTION UNIT NO EARLIER THAN 24 MONTHS AFTER SUCH ORDER WAS ISSUED, LAST MODIFIED OR LAST ADJUSTED, UPON THE REQUEST OF ANY PARTY TO THE ORDER OR PURSUANT TO PARAGRAPH (2) BELOW. SUCH COST OF LIVING ADJUSTMENT SHALL BE ON NOTICE TO BOTH PARTIES WHO, IF THEY OBJECT TO THE COST OF LIVING ADJUSTMENT, SHALL HAVE THE RIGHT TO BE HEARD BY THE COURT AND TO PRESENT EVIDENCE WHICH THE COURT WILL CONSIDER IN ADJUSTING THE CHILD SUPPORT ORDER IN ACCORDANCE WITH SECTION FOUR HUNDRED THIRTEEN OF THE FAMILY COURT ACT, KNOWN AS THE CHILD SUPPORT STANDARDS ACT.

(2) A PARTY SEEKING SUPPORT FOR ANY CHILD(REN) RECEIVING FAMILY ASSISTANCE SHALL HAVE A CHILD SUPPORT ORDER REVIEWED AND ADJUSTED AT THE DIRECTION OF THE SUPPORT COLLECTION UNIT NO EARLIER THAN 24 MONTHS AFTER SUCH ORDER IS ISSUED, LAST MODIFIED OR LAST ADJUSTED BY THE SUPPORT COLLECTION UNIT, WITHOUT FURTHER APPLICATION BY ANY PARTY. ALL PARTIES WILL RECEIVE A COPY OF THE ADJUSTED ORDER.

(3) WHERE ANY PARTY FAILS TO PROVIDE, AND UPDATE UPON ANY CHANGE, THE SUPPORT COLLECTION UNIT WITH A CURRENT ADDRESS, AS REQUIRED BY SECTION FOUR HUNDRED FORTY-THREE OF THE FAMILY COURT ACT, TO WHICH AN ADJUSTED ORDER CAN BE SENT, THE SUPPORT OBLIGATION AMOUNT CONTAINED THEREIN SHALL BECOME DUE AND OWING ON THE DATE THE FIRST PAYMENT IS DUE UNDER THE TERMS OF THE ORDER OF SUPPORT WHICH WAS REVIEWED AND ADJUSTED OCCURRING ON OR AFTER THE EFFECTIVE DATE OF THE ADJUSTED ORDER, REGARDLESS OF WHETHER OR NOT THE PARTY HAS RECEIVED A COPY OF THE ADJUSTED ORDER.

I ASK THE COURT TO ISSUE A SUMMONS OR WARRANT REQUIRING RESPONDENT TO SHOW CAUSE WHY THE COURT SHOULD NOT ENTER A DECLARATION OF PATERNITY, AN ORDER OF SUPPORT AND ANY OTHER RELIEF AS MAY BE APPROPRIATE UNDER THE CIRCUMSTANCES THE COURT FINDS TO BE JUST AND PROPER.

**STATE OF NEW YORK:
COUNTY OF BROOME:**

VERIFICATION

The above named Petitioner, being duly sworn states: I have read this petition and its contents are true to my own knowledge, except to matters alleged to be on information and belief and, as to those matters, I believe them to be true.

PETITIONER

Sworn to before me on
_____, 20____.

PRINT OR TYPE NAME

(Deputy) Clerk of the Court,
Notary or Comm. Of Deeds