

F.C.A. §§ 453, 454, 459, Art.5-B;
C.P.L.R.5242; S.S.L. § 111-g
[NOTE: Personal Information Form 4-5/5-1d,
containing social security numbers of parties and
dependents, must be filed with this Petition]

Form 4-12
(Petition-Violation
of Support Order)
10/2016

FAMILY COURT OF THE STATE OF NEW YORK
COUNTY OF

.....
In the Matter of a Proceeding under
Article (4)(5-B) of the Family Court Act

Docket No.

(Commissioner of Social Services, Assignee
on behalf of _____, Assignor)

PETITION
(Violation of
Support Order)

Petitioner,

-against-

Respondent.

.....
**WARNING: THE PURPOSE OF THE HEARING REQUESTED IN THIS
PETITION IS TO PUNISH [SPECIFY NAME]:
FOR CONTEMPT OF COURT, WHICH MAY INCLUDE SANCTIONS OF A
FINE OR IMPRISONMENT OR BOTH. YOUR FAILURE TO APPEAR IN
COURT MAY RESULT IN YOUR IMMEDIATE ARREST AND IMPRISONMENT
FOR CONTEMPT OF COURT.**

TO THE FAMILY COURT:

The Petitioner respectfully alleges that:

1. a. Petitioner, [check box]: an individual, is related to the child(ren) as follows [specify]:
and resides at [specify]:¹
 assignee agency, has its place of business at [specify]:
- b. [Applicable where Petitioner is assignee]: Assignor resides at [specify]:²
- c. Respondent resides at [specify]:³

2. The name(s) and date(s) of birth of the child(ren) involved are:

¹ Unless the Court has ordered the address to be confidential on the ground that disclosure would pose an unreasonable health or safety risk. See Family Court Act § 154-b; Form 21 (available at www.nycourts.gov).

² See note 1.

³ See note 1.

<u>CHILD'S NAME</u>	<u>DATE OF BIRTH</u>

3. By order of this Court, dated _____, _____, the Respondent was ordered to pay for the support of the above-named child(ren) and was directed to pay the sum of \$ _____ weekly every two weeks monthly twice per month quarterly to the Petitioner Support Collection Unit NYS Office of Temporary and Disability Assistance.

4. (Upon information and belief) a) Respondent has failed to obey the order of this Court in that [specify provision(s) of order alleged to be violated and nature of violation(s)]:

b) As a result of Respondent's violation of the support order, Respondent owes \$_____.

c) [Check if applicable]: Respondent's failure to comply was willful.

5. [Applicable to individual petitioners; if agency, skip to ¶ 6: check a box only if applicable]:

I am hereby applying for child support services from the Support Collection Unit (the IV-D program pursuant to Title 6-A of the Social Services Law) through the filing of this Petition, unless:

- I have already applied for child support services from the Support Collection Unit (the IV-D program pursuant to Title 6-A of the Social Services Law)
- I do not need to apply now because I have continued to receive child support services after the public assistance or care case, or foster care case, for my family has closed.
- I do not wish to apply for child support services.
- I am not eligible to apply for child support services because I am petitioning for spousal support only.

6. YOU ARE HEREBY NOTIFIED that Petitioner may amend this Petition to include any additional arrears which shall have accrued from the commencement of this proceeding up to the date of the hearing or disposition.

7. No previous application has been made to any judge or court, including a Native American tribunal, or is presently pending before any judge or court, for the relief requested in this petition (except

WHEREFORE, Petitioner requests an order granting Petitioner relief as set forth in Section 454 and 458-a, 458-b of the Family Court Act and Section 5242 of the Civil Practice Law and Rules, together with such other or further relief as the Court may deem just and proper.

NOTE:⁴ (1) A COURT ORDER OF SUPPORT RESULTING FROM A PROCEEDING COMMENCED BY THIS APPLICATION (PETITION) SHALL BE ADJUSTED BY THE APPLICATION OF A COST OF LIVING ADJUSTMENT AT THE DIRECTION OF THE SUPPORT COLLECTION UNIT NO EARLIER THAN TWENTY-FOUR MONTHS AFTER SUCH ORDER IS 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 TWENTY-FOUR 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 TO WHICH AN ADJUSTED ORDER CAN BE SENT AS REQUIRED BY SECTION 443 OF THE FAMILY COURT ACT, 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.

Dated:

Petitioner

Print or type name

Signature of Attorney, if any

⁴Not applicable to out-of-state orders entered in New York State for enforcement purposes only.

Attorney's Name (Print or Type)

Attorney's Address and Telephone Number