F.C.A. §§ 440, 461, 466, 467, Form 4-13

S.S.L. § 111-g (Support - Petition for Enforcement

[**NOTE**: Personal Information Form 4-5/5-1d, of Order Made by Another Court)

containing social security numbers of parties and 5/2018

dependents, must be filed with this Petition]

FAMILY COURT OF THE STATE OF NEW YORK

COUNTY OF

.......................................................................................

In the Matter of a Proceeding for Support

Under Article 4 of the Family Court Act Docket No.

(Commissioner of Social Services, Assignee

on behalf of ,Assignor)

 Petitioner, PETITION FOR ENFORCEMENT

 OF AN ORDER OF SUPPORT MADE

 BY ANOTHER COURT

 -against-

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 Respondent.

...................................................................................

**WARNING: YOUR FAILURE TO APPEAR IN COURT MAY RESULT IN YOUR IMMEDIATE ARREST AND IMPRISONMENT FOR CONTEMPT OF COURT.**

**Notice to Payor: This petition states that you did not obey a support order. It asks a court to find you in contempt. The court must hold a hearing to decide if you are obeying the order. If not, the Court must decide if your failure to pay was willful. A failure to pay is willful if you were able to pay, but did not. If the Court decides that you had the ability to follow the order but did not, you can go to jail for up to six months. If you can show that you were unable to pay support, the Court will not make a finding of willfulness and will not send you to jail. So, it is important that you give the Court information about your ability to pay. You have the right to have a lawyer at the hearing. If you cannot afford to hire a lawyer, you can ask the Court to provide a lawyer for free.**

TO THE FAMILY COURT:

 The Petitioner respectfully alleges that:

 1. a. I am [check applicable box]: ☐ an individual and am related to the child(ren) as follows [specify]:

I reside at [specify]:[[1]](#footnote-1)

 ☐ an assignee agency, which has its place of business at [specify]:

 b. [Applicable where Petitioner is assignee]: Assignor resides at [specify]: [[2]](#footnote-2)

 c. Respondent resides at [specify]:[[3]](#footnote-3)

 2. a. I was the □ petitioner □ respondent in an action instituted in the

□ Supreme Court of the State of New York, [specify county]: County

□ Other Court [specify other court]: Court of

 b. The action was named [specify]: ,

Index/Docket No. [specify]: Respondent was □ petitioner □ respondent in the action.

 3. A □ judgment □ order, dated , , was made in that action and the Respondent was directed to [specify]:

A true copy of the □ judgment □ order is attached and made a part of this Petition.

 4. The names, addresses and dates of birth of all children affected by this order are:

|  |  |  |
| --- | --- | --- |
| **CHILD’S NAME** | **ADDRESS**[[4]](#footnote-4) | **DATE OF BIRTH** |
|  |   |  |
|  |   |  |
|  |  |  |
|  |  |  |

 5. [Check applicable box(es)]:

 □. Under the terms of the □ judgment □ order, the □Supreme Court

□ other court [specify]: □ has □ has not retained exclusive jurisdiction to modify the □ judgment □ order.

 □ The other court is a court of competent jurisdiction outside the State of New York.

6. (Upon information and belief)

 a) Respondent has failed to comply with the order of the □ Supreme Court □ other court [specify]: 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 $ \_\_\_\_\_\_\_\_.

 7. [Applicable to individual petitioners; if agency, skip: 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.

 8. 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

[specify]:

 WHEREFORE, Petitioner requests that the Respondent be dealt with in accordance with Article 4 of the Family Court Act.

 **INFORMATION CONCERNING COST OF LIVING**

 **ADJUSTMENTS AND MODIFICATIONS** [[5]](#footnote-5)

 (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.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Petitioner

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Print or type name

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Attorney, if any

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Attorney’s Name (Print or Type)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Attorney’s Address & Telephone Number

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).](http://www.nycourts.gov).) [↑](#footnote-ref-1)
2. *See* note 1. [↑](#footnote-ref-2)
3. *See* note 1. [↑](#footnote-ref-3)
4. 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).](http://www.nycourts.gov).) [↑](#footnote-ref-4)
5. Not applicable to out-of-state orders entered in New York State for enforcement purposes only. [↑](#footnote-ref-5)