

F.C.A. §§ 440, 461, 466, 467,
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 4-13
(Support - Petition for Enforcement
of Order Made by Another Court)
10/2016

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-

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

I reside at [specify]:¹

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

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).

- b. [Applicable where Petitioner is assignee]: Assignor resides at [specify]:²
- c. Respondent resides at [specify]: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:

<u>CHILD'S NAME</u>	<u>ADDRESS⁴</u>	<u>DATE OF BIRTH</u>

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.

² See note 1.

³ See note 1.

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).

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. [Check if applicable; if not, SKIP to ¶8]: Respondent’s failure to comply was willful.

8. [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.

9. 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**

(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.

⁵ Not applicable to out-of-state orders entered in New York State for enforcement purposes only.

(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