

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.

Petitioner,

S.S. #

-against-

PETITION  
(Individual)

Respondent.

S.S. #

.....

TO THE FAMILY COURT:

The undersigned Petitioner respectfully shows that:

1. Petitioner resides at \_\_\_\_\_ and the above-named Respondent resides at \_\_\_\_\_
2. Petitioner is authorized to originate this proceeding in that (Petitioner and Respondent having been married at \_\_\_\_\_ on \_\_\_\_\_, 19\_\_ ).
3. Respondent is chargeable with the support of \_\_\_\_\_ (Petitioner) (and) (the following dependent(s)

Name

Date of Birth

Social Security Number

Spouse:

Child(ren)

4. Respondent, on or about \_\_\_\_\_, 19\_\_ , and subsequent thereto, has failed to provide fair and reasonable support for Petitioner and the dependent(s) according to Respondent's means and earning capacity.

(5. Respondent's (past financial responsibility) (credit references) (credit history) and ( ) make it unlikely that Respondent will make payment in accordance with the order of support requested herein.)

(6. Respondent has an (employer) (income payor) as defined in CPLR Sec. 5241(a), whose address is , as a source of income.)

7. No previous application has been made to any Court or judge for the relief herein requested (except ).

8. Petitioner: [alternative allegations; delete inapplicable clauses]

(a: has made application for child support services with the local Department of Social Services)

(b: hereby makes application for child support enforcement services by the filing of this petition)

(c: does not wish to make application for child support services)

(d: is not eligible for child support enforcement services). [Petitions seeking only spousal support are ineligible.]

WHEREFORE, Petitioner prays for an order of support directing Respondent to furnish such support as shall be deemed fair and reasonable, that Respondent be required to exercise the option of additional coverage for health insurance in favor of (his) (her) spouse and child(ren) above-named, and for such other and further relief as the law provides.

NOTE: (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, 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.

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Print or type name

\_\_\_\_\_  
Signature of Attorney, if any

\_\_\_\_\_  
Attorney's Name (Print or Type)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Attorney's Address and Telephone Number

VERIFICATION

STATE OF NEW YORK )  
 : ss.:  
COUNTY OF )

being duly sworn, says that (s)he is the Petitioner in the above-entitled proceeding and that the foregoing petition is true to (his)(her) own knowledge, except as to matters herein stated to be alleged on information and belief and as to those matters (s)he believes it to be true.

\_\_\_\_\_  
Petitioner

Sworn to before me this  
day of , 19 .

\_\_\_\_\_  
(Deputy) Clerk of the Court  
Notary Public