Form 4-7 (Order of Support) 4/2011

	State of New York, held in and for the		
	County of at	New	York ,
PRESENT : HonJudge/Support	on Magistrate	,	
In the Matter of a Proceeding for Support under Article of the Family Court Act	···········		Docket No.
	ee, signor)		ORDER OF SUPPORT
S.S.#: xxxx-xxPetitioner, -against-			Check applicable box: ☐ Respondent Present ☐ By Default
-agamst-			
S.S.#: xxxx-xx			

At a term of the Family Court of the

NOTICE: YOUR WILLFUL FAILURE TO OBEY THIS ORDER MAY RESULT IN INCARCERATION FOR CRIMINAL NON-SUPPORT OR CONTEMPT. YOUR FAILURE TO OBEY THIS ORDER MAY RESULT IN SUSPENSION OF YOUR DRIVER'S LICENSE, STATE-ISSUED PROFESSIONAL, TRADE, BUSINESS AND OCCUPATIONAL LICENSES AND RECREATIONAL AND SPORTING LICENSES AND PERMITS; AND IMPOSITION OF REAL OR PERSONAL PROPERTY LIENS.

NOTICE: IF YOU WERE NOT IN COURT FOR THE HEARING AND THIS ORDER WAS ISSUED ON DEFAULT, YOU MAY OBJECT OR CHALLENGE THE ORDER BY FILING A MOTION TO VACATE THE ORDER.

IF YOU WERE IN COURT FOR THE HEARING AND THIS ORDER IS ENTERED BY A JUDGE, PURSUANT TO SECTION 1113 OF THE FAMILY COURT ACT, AN APPEAL FROM THIS ORDER MUST BE TAKEN WITHIN 30 DAYS OF RECEIPT OF THE ORDER BY APPELLANT IN COURT, 30 DAYS AFTER SERVICE BY A PARTY OR THE ATTORNEY FOR THE CHILD UPON THE APPELLANT, OR 35 DAYS FROM THE DATE OF MAILING OF THE ORDER TO APPELLANT BY THE CLERK OF COURT, WHICHEVER IS EARLIEST.

IF YOU WERE IN COURT FOR THE HEARING AND THIS ORDER IS ENTERED BY A SUPPORT MAGISTRATE, SPECIFIC WRITTEN OBJECTIONS TO THIS ORDER MAY BE FILED WITH THIS COURT WITHIN 30 DAYS OF THE DATE THE ORDER WAS RECEIVED IN COURT OR BY PERSONAL SERVICE, OR IF THE ORDER WAS RECEIVED BY MAIL, WITHIN 35 DAYS OF THE MAILING OF THE ORDER.

The above-named Petitioner having filed a peti above-named Respondent is chargeable with the support (and)	
(und)	, and
[Check applicable box]: ☐ Respondent having appeared before this Cou order of Support and other relief requested in the petition having been advised of the right to counsel, having ☐ den OR ☐ Respondent having failed to appear before the counsel of the right of the counsel.	should not be granted; and Respondent, after ied □ admitted the allegations of the petition;
been properly served; and	
The matter having duly come on to be heard be	fore this Court;
NOW, after examination and inquiry into the fathering the proofs and testimony offered in relation there	
The basic child support obligation for support of NAME DATE OF BIRTH	of the following child(ren) is \$SOCIAL SECURITY # (LAST 4 DIGITS)
The mother is the \(\subseteq \text{ custodial} \subseteq \text{ non-custodial} \) The father is the \(\subseteq \text{ custodial} \subseteq \text{ non-custodial} \) obligation is	arent, whose pro rata share of the basic child ble box]: he basic child support obligation is neither specified in Family Court Act §413(1)(f): the port obligation is \square unjust
[Applicable in cases in which the parties stipulated to an earlies had the Court finds further that the parties had the following child(ren)[specify]: to [specify]: in the weeks □ monthly □twice per month □ quarterly.	
☐ This stipulation has been entered into the red 413(1)(h) of the Family Court Act, that:	ord and recites, in compliance with Section

¹ This paragraph is to be used only if the court's order deviates from the basic child support obligation, pursuant to F.C.A. Section 413(1)(g). Delete if inapplicable.

a. The parties hav	ve been advised of the pr	ovisions of Section 4	413(1)of the Family Court Act;
b. The unreprese promulgated by the Commi pursuant to Section 111-I or	ssioner of the N.Y.S. Of	fice of Temporary ar	child support standards chart ad Disability Assistance
c. The basic chil presumptively results in the	d support obligation as correct amount of child		
d. The basic chil weeks □ monthly □twice p	d support obligation in t er month \square quarterly; an	his case is \$ nd	□ weekly □ every two
e. The parties' re child support obligation (is)		hild support in an an	nount different from the basic
☐ The Court app obligation for the following	roves the parties' agreem reasons: [See Family Co		he basic child support
The name, address NAME	ss and telephone number <u>ADDRESS</u>	of Respondent's cui	rrent employer(s), are: <u>TELEPHONE</u>
NOW, after exan hearing the proofs and testing			astances of the case (and after
ORDERED ANI support of the following per provide the payment of the per month □ quarterly, such follows for and toward the state of th	rson(s) and is possessed sum \$	of sufficient means a ☐ weekly ☐ every	ident is chargeable with the and able to earn such means to two weeks □ monthly □twice , , allocated as as follows:
Name spouse, if any:	Date of Birth	<u>Amount</u>	Per Time Period ²
child(ren):			
		<u>Total:</u>	
support of Respondent's sp	ouse shall terminate upo	n the death of the sp	(1)(a), payments for the ouse, upon the spouse's valid Relations Law §236(B)(9) or

² Specify whether support amount is weekly, every two weeks, monthly, twice per month or quarterly.

ORDERED AND ADJUDGED that the above-named Respondent is responsible for the support so ordered from the date of the filing of the petition to the date of this Order (less the amount of \$ already paid) and that the Respondent pay the sum of \$ as follows: \$ immediately, and \$ \square weekly \square every two weeks \square monthly \square twice per month \square quarterly; and it is further
□ ORDERED that commencing on the above-named Respondent, upon notice of this Order, pay or cause the above amount(s) to be paid to [check applicable box]: □ Petitioner by cash, check or money order □ Non-IV-D cases: Payable to the Petitioner by check or money order and mailed to P. O. Box 15365, Albany, NY 12212-5365. The county name and account number for the matter must be included with
the payment for identification purposes. □ IV-D cases: Payable by check or money order made payable to and mailed to the NYS Child Support Processing Center, PO Box 15363, Albany, NY 12212-5363. The county name and account number for the matter must be included with the payment for identification purposes; and it is further
[Check box if applicable]: \square ORDERED that, for the following reason(s)[specify]:
constituting good cause pursuant to Section 440(1)(b) of the Family Court Act, the \Box IV-D cases: Support Collection Unit \Box Non-IV-D cases: Court shall NOT issue an immediate income execution; however, in the event of default, this order shall be enforceable pursuant to section 5241 or 5242 of the Civil Practice Law and Rules, or in any other manner provided by law; and it is further
[IV-D cases only]: ORDERED that the Respondent, custodial parent and any other individual parties immediately notify the Support Collection Unit of any changes in the following information: residential and mailing addresses, social security number, telephone number, driver's license number; and name, address and telephone numbers of the parties' employers and any change in health insurance benefits, including any termination of benefits, change in the health insurance benefit carrier or premium, or extent and availability of existing or new benefits; and it is further
[Check if applicable]: \square ORDERED that pay to the attorney for the other party, the sum of \$ as and for counsel fees in this proceeding, which payment may be made in installments of \$ \square weekly \square every two weeks \square monthly \square twice per month \square quarterly , commencing on [specify]: , until the entire sum is paid; and it is further
ORDERED that this Order shall be enforceable pursuant to Section 5241 or 5242 of the Civil Practice Law and Rules, or in any other manner provided by law;
And the Court having determined that [check applicable box]: ☐ The child(ren) are currently covered by the following health insurance plan [specify]: which is maintained by [specify party]:
☐ Health insurance coverage is available to one of the parents or a legally-responsible relative [specify name]: under the following health insurance plan [specify, if known]: ,

⁶ "Default", as defined in CPLR 5241, means the failure to remit three payments on the date due in the full amount directed in this order, or the accumulation of arrears, including amounts arising from retroactive support, that are equal to or greater than the amount directed to be paid for one month, whichever occurs first.

which provides the following health insurance benefits [specify extent and type of benefits, if known, including any medical, dental, optical, prescription drug and health care services or other health care benefits]: ☐ Health insurance coverage is available to both of the parents as follows: Health Insurance Plan Premium or Contribution Name Benefits □ No legally-responsible relative has health insurance coverage available for the child(ren), but the child(ren) may be eligible for health insurance benefits under the New York "Child Health Plus" program or New York State Medical Assistance Program, or the publicly funded health insurance program in the State where the custodial parent resides, □ No legally-responsible relative has health insurance coverage available for the child(ren), but the child(ren) are currently enrolled in the New York State Medical Assistance Program, **IT IS THEREFORE ORDERED** that [specify name(s) of legally-responsible relative(s)]: □ continue to maintain health insurance coverage for the following eligible dependent(s) [specify]: under the above-named existing plan for as long as it remains available; □ enroll the following eligible dependent(s) [specify]: under the following health insurance plan [specify]: immediately and without regard to seasonal enrollment restrictions and maintain such coverage as long as it remains available in accordance with [IV-D cases]: □ the Medical Execution, which shall be issued immediately by the Support Collection Unit, pursuant to CPLR 5241 ☐ the Medical Execution issued by this Court [Non-IV-D cases]: □ the Qualified Medical Child Support Order. Such coverage shall include all plans covering the health, medical, dental, optical and prescription drug needs of the dependents named above and any other health care services or benefits for which the legally-responsible relative is eligible for the benefit of such dependents; provided, however, that the group health plan is not required to provide any type or form of benefit or option not otherwise provided under the group health plan except to the extent necessary to meet the requirements of Section 1396(g-1) of Title 42 of the United States Code. The legally-responsible relative(s) shall assign all insurance reimbursement payments for health care expenses incurred for (his)(her) eligible dependent(s) to the provider of such services or the party having actually incurred and satisfied such expenses, as appropriate; And the Court further finds that: The mother is the □ custodial □non-custodial parent, whose pro rata share of the cost or premiums to obtain or maintain such health insurance coverage is The father is the □ custodial □ non-custodial parent, whose pro rata share of the cost or premiums to obtain or maintain such health insurance coverage is And the Court further finds that [check applicable box]: ☐ Each parent shall pay the cost of premiums or family contribution in the same proportion as each of their incomes are to the combined parental income as cited above;

☐ Upon consideration of the following factors [specify]: pro-rating the payment would be unjust or inappropriate for the following reasons [specify]:
and, therefore, the payments shall be allocated as follows [specify]:
OR
□ IT IS THEREFORE ORDERED that the custodial parent [specify name]: shall immediately apply to enroll the eligible child(ren) in the "Child Health Plus" program (the NYS health insurance program for children) and the New York State Medical Assistance Program or the publicly funded health insurance program in the State where the custodial parent resides.
And the Court further finds that: The mother is the □ custodial □non-custodial parent, whose pro rata share of the cost or premiums to obtain or maintain such health insurance coverage is The father is the □ custodial □ non-custodial parent, whose pro rata share of the cost or premiums to obtain or maintain such health insurance coverage is ;
And the Court further finds that [check applicable box]: □ Each parent shall pay the cost of premiums or family contribution in the same proportion as each of their incomes are to the combined parental income as cited above;
☐ Upon consideration of the following factors [specify]: pro-rating the payment would be unjust or inappropriate for the following reasons [specify]:
and, therefore, the payments shall be allocated as follows [specify]:
OR
☐ [Where the child(ren) are recipients of managed care coverage under the New York State Medical Assistance Program] ORDERED that, the non-custodial parent herein, shall pay the amount of \$ per toward to the managed care premium under the New York State Medical Assistance Program;
☐ [Where the child(ren) are recipients of fee-for-service coverage under the New York State Medical Assistance Program] ORDERED that, the non-custodial parent herein, shall pay up to an annual maximum of \$ for the current calendar year to the New York State Medical Assistance Program upon written notice that the program has paid health care expenses on behalf of the child(ren) for costs incurred during the current calendar year.
☐ [Where the child(ren) are recipients of fee-for-service coverage under the New York State Medical Assistance Program] ORDERED that, the non-custodial parent herein, pay as part of the cash medical support obligation up to an annual maximum of \$ for the calendar year commencing January 1, and for every year thereafter to the New York State Medical Assistance Program upon written notice that the Medicaid program has paid health care expenses on behalf of the child(ren).
☐ ORDERED that, the non-custodial parent herein, shall pay the amount of \$, representing his/her share of premiums and/or costs incurred by the New

	e Medical Assistance Progra ich amount shall be support	arrears/past due support;	to the date of this
managed	lical Assistance Program, the	vent that the child(ren) cease(s) to e non-custodial parent's obligation d/or fee-for-service reimbursement in Medicaid;	on to pay his/her share of
health ins	ther party (non-IV-D cases) urance benefits, including ar	responsible relative immediately Support Collection Unit (IV- ny termination of benefits, chang lability of existing or new benefit	-D cases) of any change in e in the health insurance benefit
[specify n payment of			shall execute and deliver to or instruments to assure timely ner
☐ the meeting the presumpting from the f	btain health insurance benef dical execution the qualification that the distribution that the thick that the such dependent (s) the state of the state of the such dependent (s) the state of	ding that the above-named legall fits in violation of [check applicated medical child support order, expenses incurred on behalf of was were eligible to be enroller or execution directing the acquaintenance.	such relative(s) will be the above-named defendant(s) lled to receive health insurance
child(ren)		pro rata share of future reasonab y [check applicable box]: ☐ direc ; and it is furthe	ct payments to the health care
shall enro	at time become available in tall the dependent(s) who are controllment restrictions and sl	he future to the legally-responsible ligible for such benefits immediately.	
herein, pa	oplicable box(es): ☐ ORDERED that y the sum of \$ to be paid as follows:	as □ his □ her proportionate	, the non-custodial parent e share of reasonable child care
			; and it is further
of	□ ORDERED that	, the non-custo	odial parent herein, pay the sum
\$		cational expenses by \square direct pa	nyment to the educational
provider	□ other [specify]:	;	and it is further
	□ ORDERED that [specify	party or parties; check applicable	e box(es):

	archase and maintain \square life and/or \square accident insurance policy in the nount of [specify]: and/or
□ ma	aintain the following existing \Box life and/or \Box accident insurance policy in the
ass to	nount of [specify]:and/or sign the following as \(\subseteq \text{ beneficiary } \subseteq \text{ beneficiaries [specify]: the following existing \(\subseteq \text{ life and/or } \subseteq \text{ accident insurance policy or policies } \) pecify policy or policies and amount(s)]:
	the case of life insurance, the following shall be designated as irrevocable beneficiaries during the following time period [specify]:
·	
In beneficiary d	the case of accident insurance, the insured party shall be designated as irrevocable luring the following time period [specify]:
The [specify party	ne obligation to provide such insurance shall cease upon the termination of the duty of y]: to provide support for each child;. and it is further
being paid no	V-D Cases]: ORDERED that when the person or family to whom family assistance is o longer receives family assistance, support payments shall continue to be made to the lection Unit, unless such person or family requests otherwise; and it is further
☐ seek emple☐ participate	ORDERED that the Respondent is directed to: ⁷ oyment e in job training, employment counseling, or other programs designed to lead to [specify program]:
	UDICIAL ORDERS ONLY]: ORDERED that Respondent shall have the following tation with respect to the child(ren)[specify]:
promptly by IV-D cases) t	REQUIRED] IT IS FURTHER ORDERED that a copy of this order be provided [check applicable box]:□ Support Collection Unit ((IV-D cases:) □ Clerk of Court (nonto the New York State Case Registry of Child Support Orders established pursuant to b(4-a) of the Social Services Law; and it is further
Ol	RDERED that [specify]:
	ENTER
Dated:	(Judge of the Family Court)(Support Magistrate)
Check applic ☐ Order mail ☐ Order rece	cable box: led on [specify date)s) and to whom mailed]: sived in court on [specify date(s) and to whom given]:

⁷ Inapplicable where support obligor is receiving SSI or social security disability benefits. See FCA §437-a.

NOTE:

- (1) THIS ORDER OF CHILD SUPPORT 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 THIS ORDER IS ISSUED, LAST MODIFIED OR LAST ADJUSTED, UPON THE REQUEST OF ANY PARTY TO THE ORDER OR PURSUANT TO PARAGRAPH (2) BELOW. UPON APPLICATION OF A COST OF LIVING ADJUSTMENT AT THE DIRECTION OF THE SUPPORT COLLECTION UNIT, AN ADJUSTED ORDER SHALL BE SENT TO THE PARTIES WHO, IF THEY OBJECT TO THE COST OF LIVING ADJUSTMENT, SHALL HAVE THIRTY-FIVE (35) DAYS FROM THE DATE OF MAILING TO SUBMIT A WRITTEN OBJECTION TO THE COURT INDICATED ON SUCH ADJUSTED ORDER. UPON RECEIPT OF SUCH WRITTEN OBJECTION, THE COURT SHALL SCHEDULE A HEARING AT WHICH THE PARTIES MAY BE PRESENT TO OFFER EVIDENCE WHICH THE COURT WILL CONSIDER IN ADJUSTING THE CHILD SUPPORT ORDER IN ACCORDANCE WITH THE CHILD SUPPORT STANDARDS ACT.
- (2) A RECIPIENT OF FAMILY ASSISTANCE SHALL HAVE THE 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 WITHOUT FURTHER APPLICATION OF ANY PARTY. ALL PARTIES WILL RECEIVE NOTICE OF ADJUSTMENT FINDINGS.
- (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 ORDER REGARDLESS OF WHETHER OR NOT THE PARTY HAS RECEIVED A COPY OF THE ADJUSTED ORDER.
- (4) IN ADDITION TO A COST OF LIVING ADJUSTMENT, EACH PARTY HAS A RIGHT TO SEEK A MODIFICATION OF THE CHILD SUPPORT ORDER UPON A SHOWING OF: (I) A SUBSTANTIAL CHANGE IN CIRCUMSTANCES; OR (II) THAT THREE YEARS HAVE PASSED SINCE THE ORDER WAS ENTERED, LAST MODIFIED OR ADJUSTED; OR (III) THERE HAS BEEN A CHANGE IN EITHER PARTY'S GROSS INCOME BY FIFTEEN PERCENT OR MORE SINCE THE ORDER WAS ENTERED, LAST MODIFIED, OR ADJUSTED; HOWEVER, IF THE PARTIES HAVE SPECIFICALLY OPTED OUT OF SUBPARAGRAPH (II) OR (III) OF THIS PARAGRAPH IN A VALIDLY EXECUTED AGREEMENT OR STIPULATION, THEN THAT BASIS TO SEEK MODIFICATION DOES NOT APPLY.