REQUEST TO MAKE SATISFACTORY PAYMENT ARRANGEMENTS OR TO CHALLENGE THE SUSPENSION OF YOUR DRIVING PRIVILEGES FOR FAILURE TO PAY CHILD SUPPORT

You may submit a request to make satisfactory payment arrangements with us to avoid suspension of your driving privileges or you may challenge the suspension of your driving privileges if you think that our decision is incorrect. If you wish to make a request to make satisfactory payment arrangements or you wish to submit a challenge, you may do so by completing and submitting this form. Your request to make satisfactory payment arrangements with us or your written challenge must be received by the Support Collection Unit within forty-five (45) days of the date of the enclosed notice.

Use Black Ink Only

Part I. Satisfactory Payment Arrangements Request			
☐ 1. I wish to make satisfactory payment arrangements with you for payment of what I owe and my current support obligation. I am enclosing the following required documents:			
 my executed and verified Affidavit of Net Worth indicating my income from all sources, liquid assets and holdings; and a copy of my driver license; and a copy of my most recently filed Federal and State tax returns and W-2 statement or a copy of my notice of non-filing received from the tax agency; and a representative pay stub or a signed letter from my employer, if any, stating my current income and proof of any benefits received (i.e., Social Security, Unemployment Insurance Benefits); and an eighteen (18) month employment history 			
Read the following carefully:			
You may obtain an <i>Affidavit of Net Worth</i> form by visiting the New York State child support website at childsupport.ny.gov , or by contacting the New York State Child Support Helpline toll-free at 888-208-4485 (TTY 866-875-9975), Monday through Friday from 8:00 AM to 7:00 PM. A listing of recognized Relay Service providers can be found at (fcc.gov/encyclopedia/trs-providers).			
 After we review your request to make satisfactory payment arrangements and the supporting documents provided, if we agree to make satisfactory payment arrangements, we will contact you to discuss the next actions as follows: You will be required to execute an Affidavit of Confession of Judgment for the total amount that you owe. You will then execute a Satisfactory Payment Arrangement to pay support by income execution pursuant to Section 5241 of the Civil Practice Law and Rules, which shall include deductions sufficient to ensure compliance with the order of support and an additional amount to be applied to the reduction of what you owe; or, to agree to make payments directly to us for what you owe and any current support in an amount which is consistent with that which would have been made under an income execution. Execution of a Satisfactory Payment Arrangement includes execution and verification of a stipulation that you will notify us of all future changes of address until such time as your obligation to pay support is terminated. 			
If we do <u>not</u> agree with your request to make satisfactory payment arrangements, you will be notified by the New York State Department of Motor Vehicles that your driving privileges have been suspended.			
Part II. Challenge			
☐ 2. I wish to challenge the suspension of my driver license because of the following reason(s) (check all boxes that apply):			
a. I am not the person identified as owing support, as supported by: a copy of my driver license or identification card a copy of my passport or my Social Security card other (identify)			

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New York	x Case Identifier:	Social Security Number: Phone: () Date:	
If you sub		ted above, we will send you our determination to your challenge	
JudgmYou w	nent for the total amount that you owe.	es, you will be required to execute an <i>Affidavit of Confession of</i> stipulation that you will notify us of all future changes of address terminated.	
support res	serve amount, we will contact you to discuss to		
childsuppo 866-875-99 be found at	obtain an <i>Affidavit of Net Worth</i> form ort.ny.gov , or by contacting the New York 975), Monday through Friday from 8:00 AM t (fcc.gov/encyclopedia/trs-providers).	(e), read the following carefully: by visiting the New York State child support website at State Child Support Helpline toll-free at 888-208-4485 (TTY I to 7:00 PM. A listing of recognized Relay Service providers can	
f.	Other reason (please explain)		
	 enclosed proof of income: my executed and verified Affidavit of N and holdings; and a copy of my driver license; and a copy of my most recently filed Federa notice of non-filing received from the tax a representative pay stub or a signed let 	Tet Worth indicating my income from all sources, liquid assets all and State tax returns and W-2 statement or a copy of my ax agency; and ter from my employer, if any, stating my current income and tial Security, Unemployment Insurance Benefits); and	
☐ e.		e amount of \$17,388 for 2021, or after paying my current support by the self-support reserve amount, as supported by the following	
☐ d.	a copy of my identification card; and a copy of the letter verifying the ben	demental Security Income (SSI), as supported by:	
☐ c.	obligation because a payment or payment accurately computed, or my court order was a copy (front and back) of a cancelled cagency but not credited to my account documentation that supports my claim to	that my child support was not accurately computed child support order or setting the amount due	
☐ b.	I am not under court order to pay support, the court and no support arrears/past due su a copy of the court order vacating or ter other (identify)	rminating my child support order	