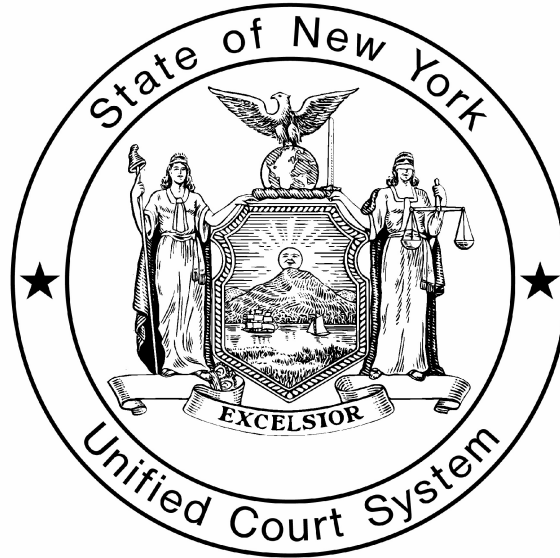


***NEW YORK STATE
UNIFIED COURT SYSTEM***



***UNIFORM
UNCONTESTED DIVORCE PACKET
FORMS***

THE PAPERS NEEDED TO OBTAIN AN UNCONTESTED DIVORCE IN NEW YORK STATE:

Notice of Automatic Orders

Notice of Guideline Maintenance for actions commenced on or after 1/25/16

Notice Concerning Continuation of Health Care Coverage

1) Summons With Notice (Form UD-1) OR 1a) Summons (to be served with Verified Complaint) (Form UD-1a)

2) Verified Complaint (Form UD-2)

3) Affidavit of Service (Form UD-3)

4) Sworn Statement of Removal of Barriers to Remarriage (Form UD-4) and Affidavit of Service (Form UD-4a)

5) Affirmation (Affidavit) of Regularity (Form UD-5)

6) Affidavit of Plaintiff (Form UD-6)

7) Affidavit of Defendant (Form UD-7)

8(1) Annual Income Worksheet (Form UD-8(1))

8(2) Maintenance Guidelines Worksheet (Form UD-8(2)) for divorces commenced on or after 1/25/16

8(3)) Child Support Worksheet (Form UD-8-(3))

8a) Support Collection Unit Information Sheet (Form UD-8a)

8b) Qualified Medical Child Support Order ("QMCSO") (Form UD-8b)

9) Note of Issue (Form UD-9)

10) Findings of Fact/Conclusions of Law (Form UD-10)

11) Judgment of Divorce (Form UD-11)

12) Part 130 Certification (Form UD-12)

13) Request for Judicial Intervention ("RJI") (Form UD-13) and Addendum (Form 840M)

14) Notice of Entry (Form UD-14)

15) Affidavit of Service of Judgment of Divorce

Certificate of Dissolution of Marriage

Self-Addressed and Stamped Postcard

UCS-111 (UCS Divorce and Child Support Summary Form)

SUPPLEMENTAL APPENDIX OF FORMS

A. Income Withholding Order and Applying for Child Support Services

A-1 Application for Child Support Services*

A-2 Income Withholding Order form for Child Support and Combined Child and Spousal Support - LDSS-5037 (Non-IV-D IWO)

A-2A Income Withholding Order Form for Spousal Support only - LDSS-5038 (Spousal Support Only IWO)

(Important Note: LDSS-5037 and LDSS-5038 are the actual Forms)

A-2B Income Withholding for Support: General Information and Instructions for Issuing - LDSS-5039*

(Important Note: Do not complete this form. Use it as a guide when filling out the actual Forms.)

B. New York State Case Registry Filing Form with Instructions attached

C. Notice of Settlement

D. Poor Person Order

E. Affidavit in Support of Application to Proceed as a Poor Person

F. Affidavit of Service of Proposed Poor Person's Order

G. DRL 255 Addendum

***available at http://www.nycourts.gov/divorce/divorce_withchildrenunder21.shtml**

NOTICE OF ENTRY OF AUTOMATIC ORDERS (D.R.L. 236) Rev. 1/13
FAILURE TO COMPLY WITH THESE ORDERS MAY BE DEEMED
A CONTEMPT OF COURT

PURSUANT TO the Uniform Rules of the Trial Courts, and DOMESTIC RELATIONS LAW § 236, Part B, Section 2, both you and your spouse (the parties) are bound by the following **AUTOMATIC ORDERS**, which have been entered against you and your spouse in your divorce action pursuant to 22 NYCRR §202.16(a), and which shall remain in full force and effect during the pendency of the action unless terminated, modified or amended by further order of the court or upon written agreement between the parties:

(1) ORDERED: Neither party shall transfer, encumber, assign, remove, withdraw or in any way dispose of, without the consent of the other party in writing, or by order of the court, any property (including, but not limited to, real estate, personal property, cash accounts, stocks, mutual funds, bank accounts, cars and boats) individually or jointly held by the parties, except in the usual course of business, for customary and usual household expenses or for reasonable attorney's fees in connection with this action.

(2) ORDERED: Neither party shall transfer, encumber, assign, remove, withdraw or in any way dispose of any tax deferred funds, stocks or other assets held in any individual retirement accounts, 401K accounts, profit sharing plans, Keogh accounts, or any other pension or retirement account, and the parties shall further refrain from applying for or requesting the payment of retirement benefits or annuity payments of any kind, without the consent of the other party in writing, or upon further order of the court ; except that any party who is already in pay status may continue to receive such payments thereunder.

(3) ORDERED: Neither party shall incur unreasonable debts hereafter, including, but not limited to further borrowing against any credit line secured by the family residence, further encumbrancing any assets, or unreasonably using credit cards or cash advances against credit cards, except in the usual course of business or for customary or usual household expenses, or for reasonable attorney's fees in connection with this action.

(4) ORDERED: Neither party shall cause the other party or the children of the marriage to be removed from any existing medical, hospital and dental insurance coverage, and each, and each party shall maintain the existing medical, hospital and dental insurance coverage in full force and effect.

(5) ORDERED: Neither party shall change the beneficiaries of any existing life insurance policies and each party shall maintain the existing life insurance, automobile insurance, homeowners and renters insurance policies in full force and effect.

IMPORTANT NOTE: After service of the Summons with Notice or Summons and Complaint for divorce, if you or your spouse wishes to modify or dissolve the automatic orders, you must ask the court for approval to do so, or enter into a written modification agreement with your spouse duly signed and acknowledged before a notary public.

Notice of Guideline Maintenance

If your divorce was commenced on or after January 25, 2016, this Notice is required to be given to you by the Supreme Court of the county where your divorce was filed to comply with the Maintenance Guidelines Law ([S. 5678/A. 7645], Chapter 269, Laws of 2015) because you may not have counsel in this action to advise you. **It does not mean that your spouse (the person you are married to) is seeking or offering an award of “Maintenance” in this action. “Maintenance” means the amount to be paid to the other spouse for support after the divorce is final.**

You are hereby given notice that under the Maintenance Guidelines Law (Chapter 269, Laws of 2015), there is an obligation to award the guideline amount of maintenance on income up to \$184,000 to be paid by the party with the higher income (the maintenance payor) to the party with the lower income (the maintenance payee) according to a formula, unless the parties agree otherwise or waive this right. Depending on the incomes of the parties, the obligation might fall on either the Plaintiff or Defendant in the action.

There are two formulas to determine the amount of the obligation. If you and your spouse have no children, the higher formula will apply. If there are children of the marriage, the lower formula will apply, but only if the maintenance payor is paying child support to the other spouse who has the children as the custodial parent. Otherwise the higher formula will apply.

Lower Formula

1-Multiply Maintenance Payor’s Income by 20% .

2- Multiply Maintenance Payee’s Income by 25% .

Subtract Line 2 from Line 1: = **Result 1**

Subtract Maintenance Payee’s Income from 40 % of Combined Income* = **Result 2**.

Enter the lower of **Result 2** or **Result 1**, but if less than or equal to zero, enter zero.

THIS IS THE CALCULATED GUIDELINE AMOUNT OF MAINTENANCE WITH THE LOWER FORMULA

Higher Formula

1-Multiply Maintenance Payor’s Income by 30%

2- Multiply Maintenance Payee’s Income by 20%

Subtract Line 2 from Line 1= **Result 1**

Subtract Maintenance Payee’s Income from 40 % of Combined Income*= **Result 2**

Enter the lower of **Result 2** or **Result 1**, but if less than or equal to zero, enter zero

THIS IS THE CALCULATED GUIDELINE AMOUNT OF MAINTENANCE WITH THE HIGHER FORMULA

***Combined Income equals Maintenance Payor’s Income up to \$184,000 plus Maintenance Payee’s Income**

Note: The Court will determine how long maintenance will be paid in accordance with the statute.

(Rev. 1/31/18)

**NOTICE CONCERNING CONTINUATION OF
HEALTH CARE COVERAGE**

(Required by section 255(1) of the Domestic Relations Law)

PLEASE TAKE NOTICE that once a judgment of divorce is signed in this action, both you and your spouse may or may not continue to be eligible for coverage under each other's health insurance plan, depending on the terms of the plan.

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

Index No.: _____

Date Summons filed: _____

Plaintiff designates _____

County as the place of trial

The basis of venue is:

Plaintiff,

-against-

Defendant.

SUMMONS WITH NOTICE

Plaintiff/Defendant resides at:

ACTION FOR A DIVORCE

To the above named Defendant:

YOU ARE HEREBY SUMMONED to serve a notice of appearance on the ☐ *Plaintiff*
OR ☐ *Plaintiff's Attorney(s)* within twenty (20) days after the service of this summons, exclusive
of the day of service (or within thirty (30) days after the service is complete if this summons is not
personally delivered to you within the State of New York); and in case of your failure to appear,
judgment will be taken against you by default for the relief demanded in the notice set forth below.

Dated _____

☐ *Plaintiff*

☐ *Attorney(s) for Plaintiff*

Phone No.: _____

Address: _____

NOTICE: The nature of this action is to dissolve the marriage between the parties, on the
grounds: **DRL §170 subd. _____ - _____

The relief sought is a judgment of absolute divorce in favor of the Plaintiff dissolving the marriage
between the parties in this action.

The nature of any ancillary or additional relief requested (see p.14 of Instructions) is:

☐ Additional page describing ancillary relief requested is attached;

☐ Marital property to be distributed pursuant to separation agreement/stipulation;

☐ I waive distribution of Marital property;

For divorces commenced on or after 1/25/16 only: ☐ *I am not seeking maintenance as payee as
described in the Notice of Guideline Maintenance (the "Notice") other than what was already agreed
to in a written agreement/stipulation ; OR* ☐ *I seek maintenance as payee, as described in the Notice*

☐ **NONE** - I am not requesting any ancillary relief;

AND any other relief the court deems fit and proper

**Read pp. 3-5 of Instructions and insert the grounds for the divorce:

DRL §170(1) - cruel and inhuman treatment

DRL §170(4) - adultery

DRL §170(2) - abandonment

DRL §170(5) - living apart one year after separation decree or judgment of separation

DRL §170(3) - confinement in prison

DRL §170(6) - living apart one year after execution of a separation agreement

DRL §170(7) - irretrievable breakdown in relationship

1 SUPREME COURT OF THE STATE OF NEW YORK
2 3 COUNTY OF _____

4 -----X

5

6

Plaintiff,

-against-

7

8

Defendant.

-----X

Index No.: _____

Date Summons filed: _____

Plaintiff designates _____

County as the place of trial

The basis of venue is:

SUMMONS

Plaintiff/Defendant resides at:

ACTION FOR A DIVORCE

To the above named Defendant:

9

YOU ARE HEREBY SUMMONED to answer the complaint in this action and to serve a copy of your answer on the ☐ Plaintiff **OR** ☐ Plaintiff's Attorney(s) within twenty (20) days after the service of this summons, exclusive of the day of service, where service is made by delivery upon you personally within the state, or within thirty (30) days after completion of service where service is made in any other manner. In case of your failure to appear or answer, judgment will be taken against you by default for the relief demanded in the complaint.

10, 11 Dated _____

☐ Plaintiff

☐ Attorney(s) for Plaintiff

12

Address:

Phone No.:

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

-----X

Index No.:

Plaintiff,

-against-

VERIFIED COMPLAINT

ACTION FOR DIVORCE

Defendant.

-----X

FIRST:

Plaintiff *herein / by* _____, complaining of the Defendant, alleges that the parties are over the age of 18 years and;

SECOND:

A) ☐ The ☐ *Plaintiff*
☐ *Defendant* has resided in New York State for a continuous period of at least two years immediately preceding the commencement of this divorce action.

===== **OR** =====

B) ☐ The ☐ *Plaintiff*
☐ *Defendant* resided in New York State on the date of commencement of this divorce action and for a continuous period of one year immediately preceding the commencement of this divorce action

AND:

a. ☐ the parties were married in New York State.

or

b. ☐ the parties have resided as married people in New York State.

===== **OR** =====

C) ☐ The cause of action occurred in New York State and ☐ *Plaintiff*
☐ *Defendant* resided in New York State for a continuous period of at least one year immediately preceding the commencement of this divorce action.

===== **OR** =====

D) ☐ The cause of action occurred in New York State and both parties were residents at the time of commencement of this divorce action.

THIRD: The Plaintiff and the Defendant were married on _____
in (city, town or village; and state or country) _____.

8 The marriage was *not* performed by a clergyman, minister or by a leader of the Society for Ethical Culture.

(If the word “not” is deleted above check the appropriate box below).

☐ *To the best of my knowledge I have taken all steps solely within my power to remove any barrier to the Defendant’s remarriage.* **OR**

☐ *I will take prior to the entry of final judgment all steps solely within my power to the best of my knowledge to remove any barrier to the Defendant’s remarriage.* **OR**

☐ *The Defendant has waived in writing the requirements of DRL §253 (Barriers to Remarriage).*

9 **FOURTH:** ☐ There are no children of the marriage (see definition on p.7 of Instructions) **OR**

☐ There *is (are)* _____ child(ren) of the marriage (see definitions on p.7 of Instructions), namely:

<u>Name</u>	<u>Date of Birth</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

10 The Plaintiff resides at _____.
The Defendant resides at _____.

11 The parties are covered by the following group health plans:

Plaintiff

Defendant

Group Health Plan: _____

Group Health Plan: _____

Address: _____

Address: _____

Identification Number: _____

Identification Number: _____

Plan Administrator: _____

Plan Administrator: _____

Type of Coverage: _____

Type of Coverage: _____

12 **FIFTH:** The grounds for divorce that are alleged as follows:

Cruel and Inhuman Treatment (DRL §170(1)):

☐ At the following times Defendant committed the following act(s) which endangered the Plaintiff’s physical or mental well being and rendered it unsafe or improper for Plaintiff to continue to reside with Defendant.

(State the facts that demonstrate cruel and inhuman conduct giving dates, places and specific acts. Conduct may include physical, verbal, sexual or emotional behavior.)

(Attach an additional sheet, if necessary).

Abandonment (DRL 170(2)):

- ☐ That commencing on or about _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant left the marital residence of the parties located at _____, and did not return. Such absence was without cause or justification, and was without Plaintiff's consent.
- ☐ That commencing on or about _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant refused to have sexual relations with the Plaintiff despite Plaintiff's repeated requests to resume such relations. Defendant does not suffer from any disability which would prevent *her / him* from engaging in such sexual relations with Plaintiff. The refusal to engage in sexual relations was without good cause or justification and occurred at the marital residence located at _____.
- ☐ That commencing on or about _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant willfully and without cause or justification abandoned the Plaintiff, who had been a faithful and dutiful spouse, by depriving Plaintiff of access to the marital residence located at _____. This deprivation of access was without the consent of the Plaintiff and continued for a period of greater than one year.

Imprisonment (DRL §170(3)):

- ☐ That after the marriage of Plaintiff and Defendant, Defendant was confined in prison for a period of three or more consecutive years, to wit: that Defendant is/was confined in _____ prison on the _____ day of _____, _____, and remained confined until the _____ day of _____, _____; **OR** ☐ remains confined to this date.
- Name of correctional facility*
Month *Year*
Month *Year*

Adultery (DRL §170(4)):

- ☐ That on the _____ day of _____, _____, at _____ the Defendant voluntarily committed of an act of sexual or deviate sexual intercourse with a person other than the Plaintiff after the marriage of Plaintiff and Defendant.
- Month* *Year* *Location*

Living Separate and Apart Pursuant to a Separation Decree or Judgment of Separation(DRL §170(5)):

- ☐ (a) That the _____ Court, _____ County, _____ (Country or State) rendered a decree or judgment of separation on _____, under Index Number _____; and
- (b) that the parties have lived separate and apart for a period of one year or longer after the granting of such decree; and
- (c) that the Plaintiff has substantially complied with all the terms and conditions of such decree or judgment.

Living Separate and Apart Pursuant to a Separation Agreement (DRL §170(6)):

- ☐ (a) That the Plaintiff and Defendant entered into a written agreement of separation, which they subscribed and acknowledged on _____, in the form required to entitle a deed to be recorded; and
- (b) that the *agreement / memorandum of said agreement* was filed on _____ in the Office of the Clerk of the County of _____, wherein *Plaintiff / Defendant* resided; and
- (c) that the parties have lived separate and apart for a period of one year or longer after the execution of said agreement; and
- (d) that the Plaintiff has substantially complied with all terms and conditions of such agreement.

Irretrievable Breakdown in Relationship for at Least Six Months (DRL §170(7)):

- ☐ That the relationship between Plaintiff and Defendant has broken down irretrievably for a period of at least six months.

13 SIXTH: There is no judgment of divorce and no other matrimonial action between the parties pending in this court or in any other court of competent jurisdiction.

WHEREFORE, Plaintiff demands judgment against the Defendant as follows:
A judgment dissolving the marriage between the parties

AND

14 The nature of any ancillary or additional relief requested (see p.16 of Instructions) is:

-
- ☐ Additional page describing ancillary relief requested is attached;
☐ Marital property to be distributed pursuant to separation agreement/stipulation;
☐ I waive distribution of Marital property;
For divorces commenced on or after 1/25/16 only: ☐ *I am not seeking maintenance as payee as described in the Notice of Guideline Maintenance (the "Notice") other than what was already agreed to in a written agreement/stipulation ; OR* ☐ *I seek maintenance as payee, as described in the Notice.*
☐ **NONE** - I am not requesting any ancillary relief;
AND any other relief the court deems fit and proper

15 Dated: _____

16 ☐ *Plaintiff*
☐ *Attorney(s) for Plaintiff*
Address: _____

17 STATE OF NEW YORK, COUNTY OF _____ ss:

I _____ (Print Name), am the Plaintiff in the within action for a divorce. I have read the foregoing complaint and know the contents thereof. The contents are true to my own knowledge except as to matters therein stated to be alleged upon information and belief, and as to those matters I believe them to be true.

Subscribed and Sworn to
before me on

Plaintiff's Signature

NOTARY PUBLIC

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

-----X

Plaintiff,

Index No.:

-against-

AFFIDAVIT OF SERVICE

Defendant.

-----X

STATE OF _____ }

ss:

COUNTY OF _____ }

_____ being duly sworn, says:

1. I am not a party to the action, am over 18 years of age and reside at:

2. On _____, at _____ a.m./p.m. at _____
_____ I served the ☐ *summons with notice* **OR** ☐ *summons and verified complaint*, and the notice of automatic orders, and, if the divorce was commenced on or after January 25, 2016, the notice of guideline maintenance on _____, the Defendant named by delivering a true copy to the Defendant personally.

☐ In addition I served a copy of the Child Support Standards Chart.

☐ In addition I served a copy of the Notice of Continuation of Health Care Coverage

3. The notice required by the Domestic Relations Law, Section 232 -- "ACTION FOR A DIVORCE" -- was legibly printed on the face of the summons served on the Defendant.

4. I knew the person so served to be the person described in the summons as the Defendant. My knowledge of the Defendant and how I acquired it is as follows: (select one)

☐ I have known the defendant for _____ years and _____

OR

☐ I identified the Defendant by a photograph annexed to this affidavit and which was given to me by the Plaintiff.

OR

☐ Plaintiff accompanied me and pointed out the Defendant.

OR

☐ I asked the person served if he/she was the person named in the summons and Defendant admitted being the person so named.

5. Deponent describes the individual served as follows:

<u>Sex</u>	<u>Height</u>	<u>Weight</u>	<u>Age</u>	<u>Color of Skin</u>	<u>Color of Hair</u>
<input type="checkbox"/> Male	<input type="checkbox"/> Under 5'	<input type="checkbox"/> Under 100 Lbs.	<input type="checkbox"/> 14-17 Yrs.	Describe color: _____ _____ _____ _____	<input type="checkbox"/> Black
<input type="checkbox"/> Female	<input type="checkbox"/> 5'0"-5'3"	<input type="checkbox"/> 100-130 Lbs.	<input type="checkbox"/> 18-20 Yrs.		<input type="checkbox"/> Brown
	<input type="checkbox"/> 5'4"-5'8"	<input type="checkbox"/> 131-160 Lbs.	<input type="checkbox"/> 21-35 Yrs.		<input type="checkbox"/> Blond
	<input type="checkbox"/> 5'9"-6'0"	<input type="checkbox"/> 161-200 Lbs.	<input type="checkbox"/> 36-50 Yrs.		<input type="checkbox"/> Gray
	<input type="checkbox"/> Over 6'	<input type="checkbox"/> Over 200 Lbs.	<input type="checkbox"/> 51-65 Yrs.		<input type="checkbox"/> Red
			<input type="checkbox"/> Over 65 Yrs.		<input type="checkbox"/> White
					<input type="checkbox"/> Balding
					<input type="checkbox"/> Bald

Other identifying features, if any:_____.

- 10** ☐ 6a. *At the time I served the Defendant, I asked him/her if he/she was in the military service of this state, any other state, or this nation, and the Defendant responded in the negative.*
- ☐ 6b. *The Defendant stated that he/she is in the following military service _____.*
- ☐ 6c. The Defendant refused to answer.

11

Server's Signature

Subscribed and Sworn to
before me on

NOTARY PUBLIC

SUPREME COURT OF THE STATE OF NEW YORK

COUNTY OF _____

-----X

Plaintiff,

Index No.: _____

-against-

**SWORN STATEMENT
OF REMOVAL OF
BARRIERS TO REMARRIAGE**

Defendant.

-----X

STATE OF _____ }

ss:

COUNTY OF _____ }

I _____ (Print Name), state under penalty of perjury that the parties' marriage was solemnized by a minister, clergyman or leader of the Society for Ethical Culture, and that;

☐ *To the best of my knowledge I have taken all steps solely within my power to remove all barriers to the Defendant's remarriage following the divorce.*

OR

☐ *The Defendant has waived in writing the requirements of DRL §253.*

Plaintiff's Signature

Subscribed and Sworn to
before me on

NOTARY PUBLIC

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

1

2

3

☐ *personally at* _____

OR

☐ *by depositing a true copy thereof enclosed in a post-paid wrapper, in an official depository under the exclusive care and custody of the U.S. Postal Service within New York State, to the address designated by the Defendant at _____*

4

Server's Signature

Subscribed and Sworn to
before me on

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 104

OR

5

Service of the within document is hereby acknowledged.

☐ Defendant's Signature **OR**
☐ Defendant's Attorney's Signature

SUPREME COURT OF THE STATE OF NEW YORK

COUNTY OF _____

-----X

Plaintiff,

Index No.:

-against-

**AFFIRMATION (AFFIDAVIT)
OF REGULARITY**

Defendant.

-----X

STATE OF _____ }

ss:

COUNTY OF _____ }

The undersigned, being duly sworn, deposes and says:

I am ☐ *the attorney for* **OR** ☐ *the Plaintiff herein.*

This is a matrimonial action.

The ☐ *Summons with Notice* **OR** ☐ *Summons and Verified Complaint* and the Notice of Automatic Orders and, if the divorce action was commenced on or after January 25, 2016, the Notice of Guideline Maintenance were personally served upon the Defendant herein, ☐ *within* **OR** ☐ *outside* the State of New York as appears in the affidavit of service submitted herewith.

*Defendant has appeared ☐ on his or her own behalf **OR** ☐ by the firm of: _____ and executed an affidavit agreeing that this matter be placed on the matrimonial calendar immediately.*

OR

☐ Defendant is in default for failure to serve a notice of appearance or failure to answer the complaint served in this action in due time, and the time to answer has not been extended by stipulation, court order, or otherwise.

WHEREFORE, I respectfully request that this action be placed on the undefended matrimonial calendar for trial.

I state under the penalties of perjury that the statements herein made are true, except as to such statements as are based on information and belief, which statements I believe to be true.

Dated:

☐ *Plaintiff*

☐ *Attorney(s) for Plaintiff*

Subscribed and Sworn to
before me on

NOTARY PUBLIC

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

-----X

Plaintiff,

Index No.: _____

-against-

AFFIDAVIT OF PLAINTIFF

Defendant.

-----X

STATE OF _____ }

ss:

COUNTY OF _____ }

_____ being duly sworn, says:

1. The Plaintiff's address is _____,
and social security number is _____. The Defendant's address is _____,
and social security number is _____.

2. A) The ☐ *Plaintiff*
☐ *Defendant* has resided in New York State for a continuous period of at least
two years immediately preceding the commencement of this divorce action.

===== **OR** =====

B) The ☐ *Plaintiff*
☐ *Defendant* resided in New York State on the date of commencement of this
divorce action and for a continuous period of one year immediately preceding the
commencement of this divorce action:

AND:

a. the parties were married in New York State.

or

b. the parties have resided as married persons in New York State.

===== **OR** =====

C) The cause of action occurred in New York State and ☐ *Plaintiff*
☐ *Defendant* resided in New
York State for a continuous period of at least one year immediately preceding the
commencement of this divorce action.

===== **OR** =====

D) The cause of action occurred in New York State and both parties were residents
at the time of commencement of this divorce action.

9 3. I married the Defendant on _____, in the City, Town or Village of _____, County of _____, State or Country of _____. The marriage was *not* performed by a clergyman, minister or by a leader of the Society for Ethical Culture.

10 (If the word “not” is deleted, check one of the following below:)

- ☐ *To the best of my knowledge I have taken all steps solely within my power to remove any barrier to the Defendant’s remarriage. **OR***
- ☐ *I will take prior to the entry of final judgment all steps solely within my power to the best of my knowledge to remove any barrier to the Defendant’s remarriage. **OR***
- ☐ *The Defendant has waived in writing the requirements of DRL §253 (Barriers to Remarriage).*

11 4. There is (are) _____ child(ren) of the marriage under the age of 21 (see definition on page 7 of the Instructions)

Name & Social Security Number

Date of Birth

The present address of each minor child of the marriage under the age of 18 (see definition on page 7 of the Instructions) and all other places where each child has lived within the last five (5) years is as follows:

Child

Present Address

Child

Other Address Within Last 5 years

The name(s) and present address(es) of the person(s) with whom each minor child of the marriage under the age of 18 (see definition on page 7 of the Instructions) has lived within the last five (5) years is:

12

I have participated in other litigation concerning the custody of the minor child(ren) of the marriage (see definition on page 7 of the Instructions) in this or another state. Yes ☐ No ☐

I have information of a custody proceeding concerning the minor child(ren) *of the marriage* (see definition on page 7 of the Instructions) pending in a court of this or another state. Yes ☐ No ☐

I know of a person who is not a party to this proceeding who has physical custody of the minor child(ren) *of the marriage* (see definition on page 7 of the Instructions) or claims to have custody or visitation rights with respect to such child(ren). Yes ☐ No ☐

13

The parties are covered by the following group health plans:

Plaintiff

Group Health Plan: _____
Address: _____
Identification Number: _____
Plan Administrator: _____
Type of Coverage: _____

Defendant

Group Health Plan: _____
Address: _____
Identification Number: _____
Plan Administrator: _____
Type of Coverage: _____

OR

☐ Not Applicable.

☐ No health plans are available to the parties
through their employment

14

5. The grounds for dissolution of the marriage are as follows:

Cruel and Inhuman Treatment (DRL §170(1)):

☐ At the following times Defendant committed the following act(s) which endangered the Plaintiff's physical or mental well being and rendered it unsafe or improper for Plaintiff to continue to reside with Defendant.

(State the facts that demonstrate cruel and inhuman conduct giving dates, places and specific acts. Conduct may include physical, verbal, sexual or emotional behavior.)

(Attach an additional sheet, if necessary)

Abandonment (DRL 170(2)):

- ☐ That commencing on or about _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant left the marital residence of the parties located at _____, and did not return. Such absence was without cause or justification, and was without Plaintiff's consent.
- ☐ That commencing on or about _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant refused to have sexual relations with the Plaintiff despite Plaintiff's repeated requests to resume such relations. Defendant does not suffer from any disability which would prevent *her / him* from engaging in such sexual relations with Plaintiff. The refusal to engage in sexual relations was without good cause or justification and occurred at the marital residence located at _____.
- ☐ That commencing on or about the _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant willfully and without cause or justification abandoned the Plaintiff, who had been a faithful and dutiful spouse, by depriving Plaintiff of access to the marital residence located at _____. This deprivation of access was without the consent of the Plaintiff and continued for a period of greater than one year.

Confinement to Prison (DRL §170(3)):

- ☐ That after the marriage of Plaintiff and Defendant, Defendant was confined in prison for a period of three or more consecutive years, to wit: that Defendant is/was confined in _____ prison on the _____ day of _____, _____, and remained confined until the _____ day of _____, _____; **OR** ☐ remains confined to this date.
- Name of correctional facility*
Month *Year*
Month *Year*

Adultery (DRL §170(4)):

- ☐ That on the _____ day of _____, _____, at _____ the Defendant voluntarily committed of an act of sexual or deviate sexual intercourse with a person other than the Plaintiff after the marriage of Plaintiff and Defendant.
- Month* *Year* *Location*

Living Separate and Apart Pursuant to a Separation Decree or Judgment of Separation(DRL §170(5)):

- ☐ (a) That the _____ Court, _____ County, _____ (Country or State) rendered a decree or judgment of separation on _____ under Index Number: _____; and

- (b) that the parties have lived separate and apart for a period of one year or longer after the granting of such decree; and
- (c) that the Plaintiff has substantially complied with all the terms and conditions of such decree or judgment.

14 continued

Living Separate and Apart Pursuant to a Separation Agreement (DRL §170(6)):

- ☐ (a) That the Plaintiff and Defendant entered into a written agreement of separation, which they subscribed and acknowledged on _____, in the form required to entitle a deed to be recorded; and
- (b) that the *agreement / memorandum of said agreement* was filed on _____ in the Office of the Clerk of the County of _____, wherein *Plaintiff / Defendant* resided; and
- (c) that the parties have lived separate and apart for a period of one year or longer after the execution of said agreement; and
- (d) that the Plaintiff has substantially complied with all terms and conditions of such agreement.

Irretrievable Breakdown in Relationship for at Least Six Months (DRL §170(7)):

- ☐ That the relationship between Plaintiff and Defendant has broken down irretrievably for a period of at least six months.

15

6a.

In addition to the dissolution of the marriage, I am seeking the following ancillary relief:
The nature of any ancillary or additional relief requested (see p.19 of Instructions) is:

-
- ☐ Additional page describing ancillary relief requested is attached;
 - ☐ Marital property to be distributed pursuant to separation agreement/stipulation;
 - ☐ I waive distribution of Marital property;

For divorces commenced on or after 1/25/16 only: ☐ *I am not seeking maintenance as payee as described in the Notice of Guideline Maintenance (the "Notice") other than what was already agreed to in a written agreement/stipulation ; OR* ☐ *I seek maintenance as payee, as described in the Notice.*

☐ **NONE-** I am not requesting any ancillary relief;
AND any other relief the court deems fit and proper

- 6b. If DRL §170 subd. (7) is the ground alleged, then Plaintiff hereby affirms, by checking the Box A, B, or C or D below (**NOTE: BOX A, B, C or D below must be checked if DRL 170(7) is the ground alleged**), that the following statement is true:

All economic issues of equitable distribution of marital property, the payment or waiver of spousal support, the payment of child support, the payment of counsel and experts' fees and expenses as well as the custody and visitation with the minor children of the marriage:

- ☐ A. have been resolved by the parties and are to be incorporated into the Judgment of Divorce.
by oral settlement/ stipulation on the record; or
by written Settlement/ Separation Agreement
- ☐ B. will be determined by the Court and are to be Incorporated into the Judgment of Divorce.
- ☐ C. were determined by Family Court order (custody and visitation or child support and/ or spousal support issues only) which will be continued.
- ☐ D. are not to be incorporated into the Judgment of Divorce, since neither party to the divorce has contested any such issues.

16 7. ☐ The Defendant **is** in the military service and ☐ *has* waived ☐ *his* rights under the New York State Soldiers' and Sailors' Civil Relief Act.
☐ *has not* ☐ *her*

=====OR=====

- ☐ Defendant is not in the active military service of this state, or any other state or this nation.
☐ I know this because: *he/she* admitted it to *me / the process server* on _____.
☐ I have submitted with these papers an *investigator's affidavit / Defendant's affidavit* which states that Defendant is not in the active military service of this state, or any other state or this nation.

17 8. I am *not* receiving Public Assistance. To my knowledge the Defendant is *not* receiving Public Assistance.

18 9. No other matrimonial action is pending in this court or in any other court, and the marriage has not been terminated by any decree of any court of competent jurisdiction.

19 10. *Annexed to the "Affidavit of Service" of Summons and Complaint / Summons With Notice is a photograph. It is a fair and accurate representation of the Defendant.*

20 11A. ☐ I am not the custodial parent of the unemancipated child(*ren*) of the marriage (see definition on page 7 of the Instructions).

OR

11B. ☐ I am the custodial parent of the unemancipated child(*ren*) of the marriage (see definition on page 7 of the Instructions) entitled to receive child support pursuant to DRL §236(B)(7)(b),

AND

- ☐ (1) I request child support services through the Support Collection Unit which would authorize collection of the support obligation by the immediate issuance of an income execution for support enforcement.

OR

- ☐ (2) I am in receipt of such services through the Support Collection Unit.

OR

- ☐ (3) I have applied for such services through the Support Collection Unit.

OR

- ☐ (4) I am aware of but decline such services through the Support Collection Unit at this time. I am aware that an income deduction order (also known as an Income Withholding Order/Notice for Support) may be issued pursuant to CPLR §5242(c) without other child support enforcement services and that payment of an administrative fee may be required.

If (1) is selected, the Support Collection Unit Information Sheet (Form UD-8a) should be completed and presented with your papers.

21 ☐ *Plaintiff's* **OR** ☐ *Defendant's* prior surname is: _____

Pursuant to DRL § 240 1 (a-1)-Records Checking Requirements:

☐ An Order of Protection ☐ *has been* ☐ *has never been* issued against me, enjoining me or requiring my compliance.

☐ An Order of Protection ☐ *has* ☐ *has never been* issued in favor of or protecting me or my child(ren) or a member of my household.

List all Family/Criminal Court Docket #'s and Counties, _____
Supreme Court Index #'s and Counties _____

☐ I or my child(ren) or my spouse has been named in a Child Abuse/Neglect Proceeding (FCA Art.10)
List all Family Court Docket #'s _____
and Counties _____

☐ I or my child(ren) or my spouse has never been named in a Child Abuse/Neglect Proceeding (FCA Art.10)

☐ I am registered under New York State's Sex Offender Registration Act
List all names under which _____
you are registered _____

☐ I am not registered under New York State's Sex Offender Registration Act

22 ☐ If my divorce action was commenced on or after January 25, 2016, I acknowledge receipt of the Notice of Guideline Maintenance from the Court pursuant to DRL 236 B(6), Chapter 269 of the Laws of 2015, which was served with the Summons.

23 ☐ I have been provided a copy of Notice Relating to Health Care of the Parties. I fully understand that upon the entrance of this divorce agreement, I may no longer be allowed to receive health coverage under my former spouse's health insurance plan. I may be entitled to purchase health insurance on my own through a COBRA option, if available, otherwise I may be required to secure my own health insurance.

WHEREFORE, I _____ (print name), respectfully request that judgment be entered for the relief sought and for such other relief as the court deems fitting and proper.

24 Subscribed and Sworn to
before me on

Plaintiff's Signature

NOTARY PUBLIC

SUPREME COURT OF THE STATE OF NEW YORK

COUNTY OF _____

-----X

Plaintiff,

Index No.:

-against-

**AFFIDAVIT OF DEFENDANT
IN ACTION FOR DIVORCE**

Defendant.

-----X

STATE OF _____ }

ss:

COUNTY OF _____ }

_____ being duly sworn, says:

I am the Defendant in the within action for divorce, and I am over the age of 18. I reside at

_____.

1. I admit service of the *Summons with Notice* **OR** *Summons and Complaint* for divorce on __/__/20__ based upon the following grounds: Insert the grounds alleged in the *Summons with notice* or *Complaint*:

- ☐ DRL §170(1) cruel and inhuman treatment
☐ DRL §170(2) abandonment
☐ DRL §170(3) confinement in prison
☐ DRL §170(4) adultery
☐ DRL §170(5) living apart one year after separation decree or judgment of separation
☐ DRL §170(6) living apart one year after execution of a separation agreement
☐ DRL §170(7) irretrievable breakdown in relationship*(see Defendant's Affidavit Notes)

_____.

I also admit service of the *Notice of Automatic Orders*, and, if the divorce was commenced or after 1/25/16, the *Notice of Guideline Maintenance*, and those of the following forms checked:

- ☐ *Notice Concerning Continuation of Health Care Coverage*:
☐ *other* _____

2. I appear in this action; however, I do not intend to respond to the summons or answer the complaint, and I waive the twenty (20) or thirty (30) day period provided by law to respond to the summons or answer the complaint. I waive the forty (40) day waiting period to place this matter on the calendar, and I hereby consent to this action being placed on the uncontested divorce calendar immediately.

TO THE DEFENDANT:

You should read the Defendant's Affidavit Notes on the last page of this Affidavit before completing this form. For instructions on how to fill out this form, see p. 20 of the instructions for Uncontested Divorces with Children which may be found at any Supreme Court Clerk's Office or online at <http://www.nycourts.gov/divorce/pdfs/divorce-packet-instructions.pdf>

10 3. ☐ I am not a member of the military service of this state, any other state or this nation

OR

- ☐ If in the military: I am aware of my rights under the New York State Soldiers' and Sailors' Civil Relief Act; however, I consent that this matter be placed on the Uncontested Matrimonial calendar and waive any rights I may have under the Act.

11 4a. ☐ I waive the service of all further papers in this action except for a copy of the final Judgment of Divorce.

OR

- b. ☐ I request service of the following documents: *Note of Issue, Request for Judicial Intervention, Barriers to Remarriage Affidavit, Proposed Judgment of Divorce, Proposed Findings of Facts and Conclusions of Law, Notice of Settlement, Qualified Medical Child Support Order, and any other proposed orders.*

12 5a. I am not seeking equitable distribution *other than what was already agreed to in a written stipulation.* I understand that I may be prevented from further asserting my right to equitable distribution.

5b. ***For divorces commenced on or after 1/25/16 only:***

(i) ☐ I am not seeking maintenance as payee as described in the Notice of Guideline Maintenance (the "Notice") other than what was already agreed to in a written agreement/stipulation ; OR (ii) ☐ *I seek maintenance as payee, as described in the Notice .* **Note:** you must fill out and file with the court the Annual Income Statement (Form UD-8(1)) and a Maintenance Guidelines Worksheet (Form UD-8(2) if you check box (ii).

13 6a. *I will take or have taken all steps solely within my power to remove any barriers to the Plaintiff's remarriage.*

b. ☐ *I waive the requirements of DRL § 253 subdivisions (2), (3) and (4).*

14 7a. ☐ I am not the custodial parent of the unemancipated child(ren) of the marriage (see definition on page 7 of the Instructions).

OR

b. ☐ I am the custodial parent of the unemancipated child(ren) of the marriage (see definition on page 7 of the Instructions) entitled to receive child support pursuant to DRL §236(B)(7)(b),

AND

- ☐ (1) I request child support services through the Support Collection Unit which would authorize collection of the support obligation by the immediate issuance of an income execution for support enforcement.

OR

- ☐ (2) I am in receipt of such services through the Support Collection Unit.

OR

- ☐ (3) I have applied for such services through the Support Collection Unit.

OR

- ☐ (4) I am aware of but decline such services through the Support Collection Unit at this time. I am aware that an income deduction order (also known as an Income Withholding Order/Notice for Support) may be issued pursuant to CPLR §5242 (c) without other child support enforcement services and that payment of an administrative fee may be required.

If (1) is selected, a Support Collection Information Sheet (Form UD-8a) must be completed and submitted with your papers.

Pursuant to DRL § 240 1 (a-1) Records Checking Requirements:

☐ An Order of Protection ☐ *has been* ☐ *has never been* issued against me, enjoining me or requiring my compliance.

☐ An Order of Protection ☐ *has* ☐ *has never been* issued in favor of or protecting me or my child(ren) or a member of my household.

List all Family/Criminal Court Docket #'s and Counties, _____

Supreme Court Index #'s and Counties _____

☐ I or my child(ren) or my spouse has been named in a Child Abuse/Neglect Proceeding (FCA Art.10)

List all Family Court Docket #'s _____
and Counties _____

☐ I or my child(ren) or my spouse has never been named in a Child Abuse/Neglect Proceeding (FCA Art.10)

☐ I am registered under New York State's Sex Offender Registration Act

List all names and any _____
related information _____

☐ I am not registered under New York State's Sex Offender Registration Act

15

8. If DRL §170 subd. (7) is the ground alleged, then Defendant hereby affirms, by checking the Box A, B, or C or D below (**NOTE: BOX A, B, C or D below must be checked if DRL 170(7) is the ground alleged**), that the following statement is true:

All economic issues of equitable distribution of marital property, the payment or waiver of spousal support, the payment of child support, the payment of counsel and experts' fees and expenses as well as the custody and visitation with the minor children of the marriage:

☐ A. have been resolved by the parties and are to be incorporated into the Judgment of Divorce.

☐ by oral settlement/ stipulation on the record; or

☐ by written Settlement/ Separation Agreement

☐ B. will be determined by the Court and are to be Incorporated into the Judgment of Divorce.

☐ C. were determined by Family Court order (custody and visitation or child support and/ or spousal support issues only) which will be continued.

☐ D. are not to be incorporated into the Judgment of Divorce, since neither party to the divorce has contested any such issues.

16 ☐ If my divorce action was commenced on or after January 25, 2016, I acknowledge receipt of the Notice of Guideline Maintenance from the Court pursuant to DRL 236 B(6), Chapter 269 of the Laws of 2015 which was served with the Summons.

17 ☐ I have been provided a copy of Notice Relating to Health Care of the Parties. I fully understand that upon the entrance of this divorce agreement, I may no longer be allowed to receive health coverage under my former spouse's health insurance plan. I may be entitled to purchase health insurance on my own through a COBRA option, if available, otherwise I may be required to secure my own health insurance.

18

Defendant's Signature

Subscribed and Sworn to
before me on

NOTARY PUBLIC

Defendant's Affidavit Notes

- If you have been served with a Summons with Notice or a Summons and Complaint in an action for Divorce, ask yourself these two questions:
Do I oppose the divorce itself?
Do I oppose anything else my spouse is asking for in the divorce papers?
- You may want to discuss your situation with a lawyer before deciding on your final answers to these questions. If you answered “Yes” to *either* of the two questions, do *not* sign this form. If you are opposing the divorce or anything else your spouse is asking for, you should talk with a lawyer *immediately, since there are time limits for you to respond to the divorce*. The Supreme Court Clerk’s Office in the county where you live (if you live in New York State) may be able to help you with information about lawyer referral services, but cannot give you legal advice.
- If you have decided to agree to the divorce and to the other things your spouse is asking for, **or** if you and your spouse have worked out a written Settlement Agreement about everything involved in the divorce, you can sign the Affidavit of Defendant form and have it notarized before a notary public, and send it back to your spouse.
- *If DRL §170 subd. (7) is the ground alleged in the summons with notice or complaint, then all economic issues of equitable distribution of marital property, the payment or waiver of spousal support, the payment of child support, the payment of counsel and experts' fees and expenses as well as the custody and visitation with the minor children of the marriage must have been resolved by the parties or determined by the court and incorporated into the judgment of divorce. If you have decided to agree to the divorce on the ground of irretrievable differences alleged by your spouse pursuant to DRL §170 subd. (7), and to all the relief requested by your spouse, and if you have no additional relief you wish to request, you should fill out Paragraph 8 at Field 15 of this Affidavit.

**SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF**

-----X

Plaintiff,

Index No.: _____

-against-

**ANNUAL
INCOME WORKSHEET
Form UD-8(1)**

Defendant.

-----X

This Worksheet was prepared by ☐ Plaintiff ☐ Defendant,

To assist you in making the calculations on this Worksheet, you may use the Maintenance/Child Support Calculators posted on the Court's Divorce Resources website at <http://www.nycourts.gov/divorce/MaintenanceChildSupportTools.shtml>. They are provided for your convenience as a tool. They have been tested with many scenarios to assure accuracy with appropriate entry of data. You may wish to make the calculations yourself on the Appendices to this Worksheet. Neither this Worksheet nor the Calculators are meant to predict what the court will order as to maintenance or child support in your case. Comments and questions about this Worksheet or the Calculators should be sent to NYMatCalc@nycourts.gov

If you decide to use the Calculators, you must copy your work onto Appendix A.

Complete Income Computations for Plaintiff and Defendant:

1. ENTER INCOME OF PARTIES: CHECK THE BOX TO INDICATE HOW YOU MADE THE CALCULATION

- ☐ Use the Maintenance/ChildSupport Calculators posted at <http://www.nycourts.gov/divorce/MaintenanceChildSupportTools.shtml> OR
☐ Use **Appendix A** to make the calculation

A. Enter Plaintiff's Annual Income from **Line 18 of Appendix A** or
Line 18 of Part A of the Calculator.....

\$ _____

B. Enter Defendant's Annual Income from **Line 18 of Appendix A**
or **Line 18 of Part A of the Calculator**.....

\$ _____

NOTE: If you do not know your spouse's income write "unknown."

7 I have carefully read this Annual Income Worksheet and attest that it is true and accurate to the best of my knowledge.

Signature of ☐ Plaintiff ☐ Defendant

Print or Type Name

Subscribed and Sworn to before me

on _____

Notary Public

SEE APPENDIX A ATTACHED

Appendix A. Itemization of Income and Expenses

APPENDIX A

Itemization of Income and Deductions

I. GROSS INCOME *(Annual Figures Only)*

1. Gross (total) income (as should have been or should be

PLAINTIFF

DEFENDANT

reported in most recent federal income tax return) \$_____ \$_____

2. Investment income (not already included in item 1)

reduced by amount expended in connection with the investments _____

3. Income or compensation from the following sources (not already included in items 1 or 2)

a. deferred compensation _____

b. worker's compensation _____

c. disability benefits _____

d. unemployment insurance benefits _____

e. social security benefits _____

f. veterans benefits _____

g. pensions and retirement benefits _____

h. fellowships and stipends _____

i. annuity payments _____

4. Former income or resources voluntarily reduced _____

5. Self-employment deductions (not already included in items 1 or 2) _____

a. depreciation deduction in excess of straight-line _____

b. entertainment and travel allowances if they reduce personal expenditures _____

6. Other Income not already listed above (including but not limited to: Income from non-income producing assets; employment "perks" and reimbursed expenses to the extent that they reduce personal expenses; fringe benefits as a result of employment; money, goods and services provided by friends and relatives)

7. Income from Income Producing Property distributed or to be distributed pursuant to a final judgment of divorce.

8. GROSS ANNUAL INCOME *(Add lines 1-7)* \$_____ \$_____
PLAINTIFF DEFENDANT

II. DEDUCTIONS *(Annual Figures Only)*

	PLAINTIFF	DEFENDANT
9. Unreimbursed employee business expenses (except to extent expenses reduce personal expenditures)	\$ _____	\$ _____
10. Alimony or maintenance actually paid to non-party spouse pursuant to court order or agreement.	_____	_____
11. Child support actually paid pursuant to court order or agreement for non-party child	_____	_____
12. Public assistance <i>Note: enter zero unless included in Gross Income</i>	_____	_____
13. Supplemental social security Income <i>Note: enter zero unless included in Gross Income</i>	_____	_____
14. N.Y.C. or Yonkers taxes	_____	_____
15. Federal Insurance Contributions Act (FICA) Social Security taxes. . .	_____	_____
16. Federal Insurance Contributions Act (FICA) Medicare taxes	_____	_____
17. TOTAL ANNUAL DEDUCTIONS <i>(Add lines 9-16)</i>	\$ _____	\$ _____

III. NET INCOME

18. NET ANNUAL INCOME <i>(Subtract line 17 from line 8 and insert on lines 1A and 1B of the Worksheet)</i>	\$ _____	\$ _____
	PLAINTIFF	DEFENDANT

**SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF**

-----X

Plaintiff,

Index No.: _____

-against-

Defendant.

-----X

**MAINTENANCE GUIDELINES
WORKSHEET (FORM UD-8(2))
Rev. 3/1/18**

**IMPORTANT NOTE: DO NOT FILL OUT THIS FORM IF YOUR ACTION WAS COMMENCED
BEFORE JANUARY 25, 2016, ¹**

To assist you in making the calculations on this Worksheet, you may use the Maintenance/Child Support Calculators posted on the Court's Divorce Resources website at <http://www.nycourts.gov/divorce/MaintenanceChildSupportTools.shtml>. They are provided for your convenience as a tool. They have been tested with many scenarios to assure accuracy with appropriate entry of data. You may wish to make the calculations yourself on the Appendices to this Worksheet. Neither this Worksheet nor the Calculators are meant to predict what the court will order as to maintenance or child support in your case. Comments and questions about this Worksheet or the Calculators should be sent to NYMatCalc@nycourts.gov

If you decide to use the Calculators, you must copy your work onto Appendix B.

5 This Worksheet was prepared by ☐ Plaintiff ☐ Defendant,

NOTE: If you and your spouse have entered into an agreement about maintenance² check the box below and submit a copy of the agreement or agreements to the court along with the completed Worksheet.

☐ Plaintiff and Defendant have entered into a written agreement about maintenance.

¹ January 25, 2016 is the date the new Maintenance Guidelines Law (L. 2015, c. 269,) became effective. If your divorce action was commenced before that date, include any request for maintenance as "Ancillary" or other relief in the Summons with Notice or the Summons and Verified Complaint. See pages 14 and 16 of the Uncontested Divorce Packet Instructions.

² Note that "maintenance" is support to be paid by one party to the marriage for the support of the other party to the marriage after the divorce is final. Because it is to be paid after the divorce is final, it is sometimes referred to as "post-divorce" maintenance, or simply as "maintenance."

**6 1. Enter Income of Parties by copying the amounts from the Annual Income Worksheet,
Line 1A and Line 1B (Form UD- 8(1)).**

A. Enter Plaintiff's Annual Income
\$ _____

B. Enter Defendant's Annual Income
\$ _____

7 2. DETERMINE WHO IS THE PAYOR AND WHO IS THE PAYEE:

A. Enter the higher of **Lines 1A** and **1B**.

The person with the higher income is the **MAINTENANCE PAYOR**..... \$ _____

B. Enter the lower of **Lines 1A** and **1B**.

The person with the lower income is the **MAINTENANCE PAYEE**..... \$ _____

8 3. CALCULATE GUIDELINE MAINTENANCE AWARD ON INCOME UP TO AND INCLUDING \$184,000.

A. Check the box to indicate how you made the calculation:

- ☐ Use the Maintenance/Child Support Calculators posted at <http://www.nycourts.gov/divorce/MaintenanceChildSupportTools.shtml> and enter the Annual Guideline Maintenance Award from Line 19 of Part B of the Calculators in **Line 3B**.

OR

- ☐ Use **Appendix B** to make the calculation and enter the amount from **Line 19** of **Appendix B** in **Line 3B** below

B. **The Guideline Award of Maintenance** (based on Maintenance Payor's Income up to \$184,000)..... \$ _____

9 THE COURT WILL DETERMINE HOW LONG THE MAINTENANCE AWARD WILL BE PAID ³

4a., please enter:

i) The date of your marriage _____; The date your divorce action was

³The court **must** determine how long the maintenance award will be paid using the 15 Factors for Post-Divorce Maintenance in Appendix. D, and the court **may** also consider the Advisory Schedule for Duration of Award in Appendix E setting forth percentages of the length of the marriage for which maintenance may be paid.

commenced _____; The number of years you were married to the date your divorce action was commenced: _____

- ii) The range that maintenance would be payable according to the Advisory Schedule for Duration of Award in Appendix E _____

Note: Multiply the number of years you have been married by the percentages in Appendix E to give the range on the schedule for that number of years married. For example, if you have been married 10 years on the date your action was commenced, the Advisory Schedule advises a duration of 15%- 30% times the number of years married. Multiply $10 \times 15\% = 1.5$; Next Multiply $10 \times 30\% = 3$. Write 1.5 – 3 years on line ii) above.

- iii) How many years are you asking the Court to order that maintenance shall be payable? _____

- iv) Please describe retirement assets, benefits and retirement eligibility (age and other requirements) of you and your spouse if you can on the lines below. If you do not know them, write, "unknown."

Attach an additional page if needed and check the box below:

☐ Additional Page Attached

4b. Review the **15 factors for post – divorce maintenance** in Appendix D, and list any factors you would like the court to know about when deciding how long maintenance will be paid.

Attach an additional page if needed and check the box below:

☐ Additional Page Attached

10 **5.** After reviewing the **15 factors for post-divorce maintenance**, check the applicable box or boxes to ask the Court to adjust the award of maintenance on income of the payor up to \$184,000 or to order maintenance on income of the Payor in excess of \$184,000 per year. Then list the factors you would like the Court to consider in making such decision.

☐ Adjust Award of Maintenance on income up to \$184,000 because you believe it is unjust ⁴

☐ Order Maintenance on Income in Excess of \$184,000 per year⁵

Attach an additional page if needed and check the box below:

☐ Additional Page Attached

.

11 I have carefully read this statement and attest that it is true and accurate to the best of my knowledge.

Signature of ☐ Plaintiff ☐ Defendant,

Print or Type Name

Subscribed and Sworn to before me

on _____

Notary Public

⁴ **Unjust or Inappropriate Awards:** If a party believes that the Guideline Maintenance Award on income up to \$184,000 is unjust or inappropriate, the party can ask the Court to order the Maintenance Payor to pay an adjusted amount. In making such decision, the Court shall consider the **15 factors for post-divorce maintenance**.

⁵ **Awards on Income of the Payor above \$184,000.** If the Maintenance Payor's income exceeds \$184,000, the Court may award an additional amount of maintenance. In making such decision, the Court shall consider the **15 factors for post-divorce maintenance**.

See APPENDICES B, D, and E Attached

APPENDIX B.

**Calculation of Guideline Amount of Maintenance up to and Including
\$184,000 and Adjustment for Low Income**

APPENDIX D.

**15 Factor for Court to Consider for Post-Divorce Maintenance* Where
Income Exceeds \$184,000 or in Connection with Adjustment of Award
or in Considering Duration of Award.**

APPENDIX E.

Advisory Schedule for Duration of Post-Divorce* Maintenance

* Note that “maintenance” is support to be paid by one party to the marriage for the support of the other party to the marriage after the divorce is final. Because it is to be paid after the divorce is final, it is sometimes referred to as “post-divorce” maintenance, or simply as “maintenance.”

APPENDIX B (Page 1 of 2 Pages)

Calculation of Guideline Maintenance Award on Maintenance Payor's Income up to and Including \$184,000; Includes Possible Low Income Adjustment

I. BASIC CALCULATION

STEP A: INCOME OF MAINTENANCE PAYOR AND MAINTENANCE PAYEE

1. Enter Maintenance Payor's income from Line 2A on page 1 of the Worksheet:
If this amount is greater than \$184,000, enter \$184,000 \$ _____
2. Enter Maintenance Payee's income from Line 2B on page 1 of the Worksheet \$ _____

STEP B:

**CALCULATE RESULT 1 and RESULT 2 USING FORMULAS B(1) AND B(2) BELOW;
THEN ANSWER QUESTIONS IN STEP C AND STEP D TO DETERMINE WHETHER
RESULT 1 OR RESULT 2 APPLIES**

STEP B(1)(3): Multiply Line 1 (Maintenance Payor's Income) by 20% \$ _____

STEP B(1)(4): Multiply Line 2 (Maintenance Payee's Income) by 25% \$ _____

STEP B(1)(5): Subtract Line 4 from Line 3: **Result 1** \$ _____

STEP B(2)(3): Multiply Line 1 (Maintenance Payor's Income) by 30% \$ _____

STEP B(2)(4): Multiply Line 2 (Maintenance Payee's Income) by 20% \$ _____

STEP B(2)(5): Subtract Line 4 from Line 3: **Result 2** \$ _____

STEP C: 6 Will child support be paid for children of the marriage? **YES**__ **NO**

STEP D: 7. Is the Maintenance Payor the Non-Custodial Parent? **YES**__ **NO**

**RESULT 1 OF STEP B(1) WILL APPLY IF THE ANSWERS TO BOTH OF THE QUESTIONS
IN STEP C AND STEP D IS YES. RESULT 2 OF STEP B(2) WILL APPLY IF THE ANSWER
TO EITHER QUESTION IN STEP C OR STEP D IS NO.**

STEP E: COMPLETE THE CALCULATIONS BELOW to arrive at Result 3:

8. Add Lines 1 and 2 \$ _____

9. Multiply 40% of Line 8. \$ _____

10. Subtract Line 2 from Line 9: **Result 3** \$ _____

11. Enter the lower of **Result 3** from Line 10 and Line 5 (from STEP B,
Result 1 or **Result 2**, whichever applies), but if Line 11 is less than or
equal to zero, enter zero \$ _____

THIS IS THE CALCULATED GUIDELINE AMOUNT

II. THE LOW INCOME ADJUSTMENT

STEP F: *(Determine if the low income adjustment applies)*

12. Enter Maintenance Payor's Income from Line 1 \$ _____

13. Enter calculated guideline amount from Line 11. - \$ _____

14. Subtract Line 13 from Line 12. \$ _____

▶ *If Line 14 is greater than \$16,389, there is no low income adjustment.*

Enter the amount from Line 11 in Line 18.

▶ *If Line 14 is less than \$16,389, there is a low income adjustment.*

Go to Step G to calculate the amount of the award.

STEP G: *(Determine the amount of the award after the low income adjustment)*

15. Enter Maintenance Payor's income from Line 1 \$ _____

16. Enter \$16,389 (the Self Support Reserve)*. - \$ _____

17. Subtract Line 16 from Line 15. \$ _____

▶ *If the amount on Line 17 is greater than zero, enter that amount in Line 18.*

▶ *If the amount on Line 17 is less than or equal to zero, enter zero in Line 18.*

18. Amount owed after low income adjustment. \$ _____

III. AWARD

19. Enter the amount as directed in either Step F or Step G, whichever applies.

Also enter this amount in Line 3B of the Worksheet. \$ _____

* Every March 1st the Self -Support Reserve changes. You may find the most current figures at https://newyorkchildsupport.com/quick_links.html. The current level of the Self-Support Reserve is \$16,389.

APPENDIX C INTENTIONALLY OMITTED

APPENDIX D

15 FACTORS FOR POST-DIVORCE MAINTENANCE PURSUANT TO DRL §236B(6)(E)(1) FOR ADJUSTMENT OF AWARD, FOR DURATION OF AWARD, OR WHERE PAYOR'S INCOME EXCEEDS \$184,000

1. the age and health of the parties;
2. the present or future earning capacity of the parties, including a history of limited participation in the workforce;
3. the need of one party to incur education or training expenses;
4. the termination of a child support award before the termination of the maintenance award when the calculation of maintenance was based upon child support being awarded which resulted in a maintenance award lower than it would have been had child support not been awarded;
5. the wasteful dissipation of marital property, including transfers or encumbrances made in contemplation of a matrimonial action without fair consideration;
6. the existence and duration of a pre-marital joint household or a pre-divorce separate household;
7. acts by one party against another that have inhibited or continue to inhibit a party's earning capacity or ability to obtain meaningful employment. Such acts include but are not limited to acts of domestic violence as provided in section four hundred fifty-nine-a of the social services law;
8. the availability and cost of medical insurance for the parties;
9. the care of children or stepchildren, disabled adult children or stepchildren, elderly parents or in-laws provided during the marriage that inhibits a party's earning capacity;
10. the tax consequences to each party;
11. the standard of living of the parties established during the marriage;
12. the reduced or lost earning capacity of the payee as a result of having foregone or delayed education, training, employment or career opportunities during the marriage;
13. the equitable distribution of marital property and the income or imputed income on the assets so distributed;
14. the contributions and services of the payee as a spouse, parent, wage earner and homemaker and to the career or career potential of the other party; and
15. any other factor which the court shall expressly find to be just and proper.

APPENDIX E

THE COURT MAY DETERMINE THE DURATION OF POST-DIVORCE MAINTENANCE IN ACCORDANCE WITH THE FOLLOWING ADVISORY SCHEDULE: BUT IN ANY EVENT, THE COURT MUST CONSIDER THE 15 POST-DIVORCE MAINTENANCE FACTORS SET FORTH IN APPENDIX D.

Length of Marriage	Percent of the length of the marriage for which maintenance will be payable
0 up to and including 15 years	15% - 30%
More than 15 up to and including 20 years	30% - 40%
More than 20 years	35% - 50%

**SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF**

-----X

Plaintiff,

Index No.: _____

-against-

**CHILD SUPPORT
WORKSHEET (Form UD 8(3))
Rev. 3/1/18**

Defendant.

-----X

To assist you in making the calculations on this Worksheet, you may use the Maintenance/Child Support Calculators posted on the Court's Divorce Resources website at <http://www.nycourts.gov/divorce/MaintenanceChildSupportTools.shtml>. They are provided for your convenience as a tool. They have been tested with many scenarios to assure accuracy with appropriate entry of data. You may wish to make the calculations yourself on the Appendices to this Worksheet. Neither this Worksheet nor the Calculators are meant to predict what the court will order as to maintenance or child support in your case. Comments and questions about this Worksheet or the Calculators should be sent to NYMatCalc@nycourts.gov

If you decide to use the Calculators, you must copy your work onto Appendix G.

1. This Worksheet was prepared by ☐ Plaintiff ☐ Defendant,
2. If you and your spouse have entered into a written agreement about child support, check the box below
☐ Plaintiff and Defendant have entered into a written agreement about Child Support.
3. If you and your spouse have entered into a written agreement about child support, submit a copy of the agreement to the court along with the completed Worksheet and check the box below.
☐ A copy of the written agreement about child support was submitted to the court with this Worksheet.
4. ☐ If I am not represented by an attorney, I have received a copy of the Child Support Standards Act Chart.

5. CALCULATE BASIC ANNUAL CHILD SUPPORT OBLIGATION

If there are unemancipated children of the marriage, calculate the amount of child support that must be paid to the custodial parent by the non-custodial parent.

A. Check the box to indicate how you made the calculation:

☐ Use the Maintenance/Child Support Calculators posted at the link above and enter the amount from Part C - IV, Line 1 of the Calculator in **Line 5B** below.

OR

☐ Use **Appendix G** to make the calculation and enter the amount from **Section IV Line 1** of **Appendix G** in **Line 5B** below

B. The Annual Basic Child Support Obligation \$ _____

- 8** 6. If you believe the Annual Basic Child Support Obligation is unjust and should be changed,¹ list the factors you would like the Court to consider in its decision, after reviewing the **10 child support adjustment factors** in Appendix F.

Attach an additional page if needed and check the box below:

Additional Page Attached ☐

- 9** 7. If you would like the Court to award child support on Combined Parental Income in excess of \$148,000, please list the factors you would like the Court to consider in its decision, after reviewing the 10 child support adjustment factors in Appendix F. ²

Attach an additional page if needed and check the box below:

Additional Page Attached ☐

- 10** 8. I have carefully read this statement and attest that it is true and accurate to the best of my knowledge.

Signature ☐Plaintiff ☐Defendant

Subscribed and Sworn to
before me on

print or type name

Notary Public

¹If a party believes that NCP's Annual Child Support Obligation is unjust or inappropriate, the party can ask the Court to order the NCP to pay an adjusted amount after considering **the 10 child support adjustment factors**. **The 10 child support adjustment factors pursuant to DRL §240(1 -b) (f) are listed on Appendix F.**

² If the Combined Parental Income exceeds \$148,000, the Court may award an additional amount of child support. In making such decision, the Court will consider **the 10 child support adjustment factors** and/or the child support percentages as shown for information only on Appendix G Section I lines 9- 9c and on Part C- I line 8 of the Calculators.

SEE APPENDICES F AND G ATTACHED

APPENDIX F.

**10 Child Support Adjustment Factors Where Income Exceeds \$148,000 or
When Considering Adjustment of Award (see DRL 240(1-b)(f))**

APPENDIX G.

Calculation of Annual Basic Child Support Obligation

APPENDIX F

10 CHILD SUPPORT ADJUSTMENT FACTORS PURSUANT TO DRL §240(B-1)(F)* FOR ADJUSTMENT OF AWARD OR WHERE COMBINED PARENTAL INCOME EXCEEDS \$148,000

1. The financial resources of the custodial and non-custodial parent, and those of the child;
2. The physical and emotional health of the child and his/her special needs and aptitudes;
3. The standard of living the child would have enjoyed had the marriage or household not been dissolved;
4. The tax consequences to the parties;
5. The non-monetary contributions that the parents will make toward the care and well-being of the child;
6. The educational needs of either parent;
7. A determination that the gross income of one parent is substantially less than the other parent's gross income;
8. The needs of the children of the non-custodial parent for whom the non-custodial parent is providing support who are not subject to the instant action and whose support has not been deducted from income pursuant to subclause (D) of clause (vii) of subparagraph five of paragraph (b) of this subdivision, and the financial resources of any person obligated to support such children, provided, however, that this factor may apply only if the resources available to support such Children are less than the resources available to support the children who are subject to the instant action;
9. Provided that the child is not on public assistance (i) extraordinary expenses incurred by the non-custodial parent in exercising visitation, or (ii) expenses incurred by the non-custodial parent in extended visitation provided that the custodial parent's expenses are substantially reduced as a result thereof; and
10. Any other factors the court determines are relevant in each case, the court shall order the non-custodial parent to pay his or her pro rata share of the basic child support obligation, and may order the non-custodial parent to pay an amount pursuant to paragraph (e) of this subdivision.

*CH. 567 of the Laws of 1989

APPENDIX G

CALCULATION OF ANNUAL BASIC CHILD SUPPORT OBLIGATION

I. ADJUST FOR MAINTENANCE AND COMPUTE BASIC CHILD SUPPORT BEFORE LOW INCOME ADJUSTMENT OR ADD-ONS

1. Enter the amount of the guideline award of maintenance on Income of Maintenance Payor up to \$184,000 from Line 3B of the UD-8(2), **BUT ENTER ZERO INSTEAD IF NEITHER PARTY SEEKS MAINTENANCE, OR, IF YOU HAVE AN AGREEMENT AS TO MAINTENANCE WITH YOUR SPOUSE, ENTER THAT AMOUNT INSTEAD AND PROVIDE THE AGREEMENT TO THE COURT** \$ _____

2. Net Annual Income of Party with lower income, Adjusted for Maintenance
(Line 1 above plus Line 1A or 1B of UD-8(1), whichever is lower) \$ _____

3. Net Annual Income of Party with higher income Adjusted for Maintenance
(Line 1A or 1B of Annual Income Worksheet Form UD-8(1), whichever is higher, minus line 1 above). \$ _____

4. Combined Parental Income Adjusted for Maintenance
(Total 2 plus 3) \$ _____

5. Determine whether the Non-Custodial parent (NCP) is the party with the higher or lower income and enter the Income of the NCP from Line 2 or 3, whichever applies \$ _____

ALSO ENTER THIS AMOUNT IN Section II, Line 1

5a. Enter the NCP's Percentage Share of Combined Parental Income %

Note: Divide Line 5 by Line 4

Note: The percentage share is sometimes referred to as the "pro rata share."
You will use this same percentage for the NCP's share of Mandatory Add-on Expenses in Section III below.

5b. Enter the CP's Percentage Share of Combined Parental Income. %

Note: Divide Custodial Parent ("CP")'s Income (from Line 2 or Line 3, whichever applies), by Line 4

Note: The percentage share is sometimes referred to as the "pro rata share." You will use this same percentage for the CP's share of Mandatory Health insurance Expenses in Section III below

6. Enter the percentage that applies based on the number of children %

% 1 child =17%; 2 children =25%; 3 children =29%; 4 children =31%;
5 children= 35% (minimum)

7. Multiply the percentage in Line 6 by Combined Parental Income from Line 4, but only up to \$148,000 of Combined Parental Income \$ _____

This is the Combined Child Support on Combined Income up to \$148,000

Example: If Combined Parental Income in Line 4 is \$250,000, and if there are 2 children, multiply \$148,000 by 25%.

8. Multiply amount in Line 7 by percentage in Line 5a \$ _____

This is the **NCP's Annual Percentage Share of Child Support on Combined Parental Income up to and including \$148,000.**

ALSO ENTER THIS AMOUNT IN SECTION II, Line 2

Lines 9-9c below are for information only and are not to be included in the totals in this worksheet.

9. Compute Child Support on Combined Parental Income Above \$148,000, if any.

If there is none, skip to Section II below.

9a. If there is Combined Parental Income above \$148,000, enter the amount of such Income you asking the Court to use for child support. \$ _____

9b. Multiply amount in Line 9a by percentage in Line 6

This is Combined Child Support on Income above \$148,000 you are asking the court to consider for Child Support \$ _____

9c. Multiply Line 9b by the percentage in Line 5a

This is the NCP's Annual Percentage Share of Income Above \$148,000 that you are asking the court to consider for Child Support. \$ _____

NCP'S ANNUAL BASIC PAYMENT will be the total of Line 8 plus any possible increase at the court's discretion after consideration of the 10 child support adjustment factors and/or the child support percentage for child support on combined parental income in excess of \$148,000, if any. This is the amount the NCP must pay to the CP for all of the children's costs and expenses, before possible low income adjustment (See Section II), Add On Expenses (see Section III), and possible adjustment at the Court's discretion if the Court finds such amount to be unjust and inappropriate based on consideration of the 10 child support adjustment factors (See Appendix F).

II. DETERMINE WHETHER LOW INCOME EXEMPTION APPLIES

1. NCP's Annual Income (Line 5 of Section I) \$ _____
2. Basic Child Support Obligation (Line 8 of Section I) \$ _____
3. Subtract Line 2 from Line 1 \$ _____

This is the NCP's Annual Income after the Basic Child Support Obligation \$ _____

- ▶ *If Line 3 is less than the Self-Support Reserve (SSR) of \$16,389, there will be a low income adjustment.*
- ▶ *If Line 3 is less than the SSR of \$16,389 but greater than \$12,140 (poverty level), child support shall be the greater of \$600 or the difference between NCP Income and the SSR of \$16,389. Proceed to Line 4a to compute the difference. Enter the greater of \$600 or the difference in Line 4b. (Note: Add-on expenses may apply in the Court's discretion).*
- ▶ *If Line 3 is equal to or greater than the Self-Support Reserve (SSR) of \$16,389, there will be no low income adjustment. Skip the rest of this section and proceed to Section III below.*
- ▶ *If Line 3 is less than \$12,140 (the poverty level), the Basic Child Support shall be \$300 ¹;*
Enter \$300 in Line 4b below. Add on Expenses will not apply.

4a. NCP Income minus SSR: Subtract \$16,389 from amount in Line 1. \$ _____

4b. Enter the Basic Child Support Obligation with Low Income

Exemption if applicable \$ _____

In Line 4b, enter \$300 if Line 3 is less than \$12,140.

ALSO ENTER THIS AMOUNT ON LINE 5B at page 2 of the Worksheet.

Skip Section III.

OR

In Line 4b, enter the greater of \$600 and Line 4a, if Line 3 is greater than \$12,140 but less than \$16,389. Then proceed to Section III.

OR

In Line 4b, enter amount from Line 2 if Line 3 is equal to or greater than \$16,389. Then Proceed to Section III.

¹ However, if the Court finds such amount to be unjust and inappropriate, based on the factors in DRL§ 240 (1-b)(f), the Court can order the NCP to pay less than \$300 per year.

**III. ADD-ON EXPENSES (SKIP THIS SECTION IF THE BASIC CHILD SUPPORT OBLIGATION WITH LOW INCOME EXEMPTION IS \$300).
IF LINE 3 of SECTION II IS LESS THAN THE SSR BUT GREATER THAN THE POVERTY LEVEL, THE COURT HAS DISCRETION WHETHER OR NOT TO AWARD THE MANDATORY ADD ON EXPENSES (see DRL 240(1-b)(d)).**

A. Mandatory Child Care Expenses

1. Enter annual cost of child care (child care costs from custodial parent's working, or receiving elementary, secondary or higher education or vocational training leading to employment.) \$ _____
2. NCP's Percentage Share of Child Care Expenses (from Line 5a of Section I) _____ %
3. NCP's Dollar Share of Child Care Expenses (multiply Line 1 x line 2) \$ _____

B. Mandatory Health Expenses (health insurance premiums and future unreimbursed health-related expenses)

- 4a. NCP's % share of health insurance premiums and future unreimbursed health-related expense _____ %
- 4b. CP's % share of health insurance premiums and future unreimbursed health-related expense _____ %
5. Annual cost of health insurance for the children \$ _____
6. Does the NCP provide the Health Insurance? **YES** _____ **NO** _____
- 6a. If No, NCP's dollar share of Health Insurance (added to the Basic Child Support Obligation) (multiply Line 4a x line 5) . . \$ _____
- 6b. If yes, CP's dollar Share of Health Insurance (deducted from Basic Child Support Obligation)(multiply Line 4b x line 5). . \$ _____
7. Health Care Adjustment (Add amount from Line 6a or subtract amount from Line 6b, whichever applies) \$ _____
8. Total Mandatory Add-On Expenses (Total Lines 3 and 7) \$ _____
9. For Information Only, (not to add to the totals in this Worksheet), enter the total Discretionary Expenses for Child Care and Education if you are asking the Court to consider awarding . them ** \$ _____

**** Note:** In addition to Mandatory Add-On Expenses in A and B above, the Court may determine and apportion additional Discretionary Expenses for child care expenses, and additional Discretionary Expenses for education.

IV. BASIC ANNUAL CHILD SUPPORT OBLIGATION*

Add Line 4b of Section II and Line 8 of Section III, BUT

IF LINE 3 of SECTION II IS LESS THAN THE SSR BUT GREATER THAN THE POVERTY LEVEL (the “SSR Adjustment”), KEEP IN MIND THAT THE TOTAL MAY BE LOWER AFTER THE COURT DECIDES WHETHER TO AWARD THE ADD-ON EXPENSES.

NCP’s Basic Child Support Obligation Adjusted for low income
from Line 4b of Section II \$ _____

NCP’s Total Share of Mandatory Child Care Expenses
from Line 3 of Section III \$ _____
NOTE: Leave this blank for the Court to fill in if there is an SSR Adjustment

NCP’s Total Share of Mandatory Health Insurance Premiums for the Children
from Line 7 of Section III \$ _____
NOTE: Leave this blank for the Court to fill in if there is an SSR Adjustment

Total Line 1 Section IV \$ _____

**This is the NCP’s Annual Basic Payment Adjusted for Low Income
If any, Including Add On Expenses and Health Insurance
Adjustment, if applicable**

ENTER THIS AMOUNT ON LINE 5B of the Worksheet

* **Note:** The Basic Annual Child Support Obligation will also include whatever the Court may order the NCP to pay in child support on combined parental income above \$148,000, if any, after considering the 10 child support adjustment factors and/or the child support percentage.

SUPREME COURT OF THE STATE OF NEW YORK

COUNTY OF _____

-----X

Plaintiff,

Index No. _____

-against-

**SUPPORT COLLECTION UNIT
INFORMATION SHEET**

Defendant.

The following information is required pursuant to Section 240(1) of the Domestic Relations Law:

PLAINTIFF: _____

Address: _____

Date of Birth _____ SS #: _____

DEFENDANT: _____

Address: _____

Date of Birth _____ SS #: _____

Date and Place of Marriage: _____

☐ *Plaintiff* **OR** ☐ *Defendant* is the custodial parent and ☐ *is* **OR** ☐ *is not* receiving public assistance.

UNEMANCIPATED CHILDREN: Name Date of Birth

SUPPORT: Maintenance \$_____ ☐ *per week* **OR** ☐ *bi-weekly* **OR** ☐ *Semi-monthly* **OR** ☐ *per month*
Child Support \$_____ ☐ *per week* **OR** ☐ *bi-weekly* **OR** ☐ *Semi-monthly* **OR** ☐ *per month*
Total Support \$_____ ☐ *per week* **OR** ☐ *bi-weekly* **OR** ☐ *Semi-monthly* **OR** ☐ *per month*

Support payments are to be made to the Support Collection Unit for the benefit of ☐ *Plaintiff* **OR** ☐ *Defendant* **OR** ☐ *Third Party*.

If third party, list name and address: _____

Non-custodial parent's employer: _____

Address: _____

Dated: _____

At a term of the Supreme Court of the
State of New York, held in and for the
County of _____
at _____, New York
on _____

1
2
3

4 PRESENT: Hon. _____
Justice/Referee

5
6

Plaintiff,

Index No.: _____

-against-

**QUALIFIED MEDICAL
CHILD SUPPORT ORDER**

7

Defendant.

NOTICE: YOUR WILLFUL FAILURE TO OBEY THIS ORDER MAY, AFTER A COURT HEARING,
RESULT IN YOUR COMMITMENT TO JAIL FOR A TERM NOT TO EXCEED SIX MONTHS, FOR
CONTEMPT OF COURT.

8 Pursuant to DRL §240(1). This Qualified Medical Child Support Order (QMCSO) orders and directs
that the unemancipated dependents named herein:

Name: _____ Date of Birth: _____ Soc. Sec.#: _____ Mailing Address: _____

are entitled to be enrolled in and receive the benefits for which the legally responsible relative named
herein is eligible, under the group health plan named herein in accordance with Section 609 of the
Federal Employee Retirement Income Security Act.

9 The Participant (legally responsible relative) is:

Name: _____ Soc. Sec.#: _____ Mailing Address: _____

10 The Dependents' Custodial Parent or Legal Guardian who is to be provided with any identification
cards and benefit claim forms on behalf of dependents:

Name: _____ Soc. Sec.#: _____ Mailing Address: _____

11 The group health plan subject to this order is:
Name: Address:

Identification No.:

12 The administrator of said plan is:
Name: Address:

13 The type of coverage provided is:

14 ORDERED that coverage shall include all plans covering the health, medical, dental, pharmaceutical and optical needs of the aforementioned Dependents named above for which the Participant is eligible.

15 ORDERED that said coverage shall be effective as of (give date) _____
and shall continue as available until the respective emancipation of the aforementioned dependents.

ENTER:

16 DATED: _____

JSC/Referee

TO: [Health Insurer]

NOTICE: Pursuant to Section 5241(g)(4) of the Civil Practice Laws and Rules, if an employer, organization or group health plan fails to enroll eligible dependents or to deduct from the debtor's income the debtor's share of the premium, such employer, organization or group health plan administrator shall be jointly and severally liable for all medical expenses incurred on behalf of the debtor's dependents named in the execution while such dependents are not so enrolled to the extent of the insurance benefits that should have been provided under such execution.

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 a law relating to medical child support described in section one thousand three hundred and ninety six g-1 of title forty-two of the United States Code.

NOTE OF ISSUE - UNCONTESTED DIVORCE

For Use of Clerk

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

1

2

3

Plaintiff,

Index No.:

Calendar No.:

- against -

4

Defendant.

-----X

5

NO TRIAL

6

FILED BY: ☐ Plaintiff **OR** ☐ Plaintiff's Attorney **OR** ☐ Defendant **OR**
☐ Defendant's Attorney

7

DATE SUMMONS FILED: _____

8

DATE SUMMONS SERVED: _____

9

DATE ISSUE JOINED: **NOT JOINED -** ☐ Waiver **OR** ☐ Default **OR**
☐ Stipulation/Separation Agreement

10

NATURE OF ACTION: **UNCONTESTED DIVORCE**

11

RELIEF: **ABSOLUTE DIVORCE**

12

☐ Plaintiff **OR** ☐ Attorney(s) for Plaintiff
Office and P.O. Address:

Phone No.:

Fax No.:

13

☐ Defendant **OR** ☐ Attorney(s) for Defendant
Office and P.O. Address:

Phone No.:

Fax No.:

At the Matrimonial/LAS Part _____
of New York State Supreme Court at
the Courthouse, _____
County, on _____.

Present:

Hon. _____ *Justice/Referee* _____X

Index No.:
Calendar No.:

Plaintiff,

-against-

**FINDINGS OF FACT
AND
CONCLUSIONS OF LAW**

Defendant.
_____X

The issues of this action having ☐ *been submitted to* **OR** ☐ *been heard* before me as one of the *Justices/Referees* of this Court at Part _____ hereof, held in and for the County of _____ on _____, and having considered the allegations and proofs of the respective parties, and due deliberation having been had thereon.

NOW, after ☐ *reading and considering the papers submitted* ☐ *hearing the testimony*, I do hereby make the following findings of essential facts which I deem established by the evidence and reach the following conclusions of law.

FINDINGS OF FACT

FIRST: Plaintiff and Defendant were both eighteen (18) years of age or over when this action was commenced.

SECOND:

A) ☐ The ☐ *Plaintiff*
☐ *Defendant* has resided in New York State for a continuous period of at least two
years immediately preceding the commencement of this divorce action.

===== **OR** =====

B) ☐ The ☐ *Plaintiff*
☐ *Defendant* resided in New York State on the date of commencement of this

divorce action and for a continuous period of one year immediately preceding the commencement of this divorce action **AND:**

a. ☐ the parties were married in New York State.

or

b. ☐ the parties have resided as married persons in New York State.

===== **OR** =====

C) ☐ The cause of action occurred in New York State and ☐ *Plaintiff*
☐ *Defendant* resided in New York

State for a continuous period of at least one year immediately preceding the commencement of this divorce action.

===== **OR** =====

D) ☐ The cause of action occurred in New York State and both parties were residents at the time of commencement of this divorce action.

11 **THIRD:** The Plaintiff and the Defendant were married on the date of _____ in the City, Town or Village of _____, County of _____, State or Country of _____; in a ☐ *civil* **OR** ☐ *religious* ceremony.

12 **FOURTH:** That no decree, judgment or order of divorce, annulment or dissolution of marriage has been granted to either party against the other in any Court of competent jurisdiction of this state or any other state, territory or country, and that there is no other action pending for divorce by either party against the other in any Court.

13 **FIFTH:** That this action was commenced by filing the ☐ *Summons With Notice* **OR** ☐ *Summons and Verified Complaint* with the County Clerk on _____. Defendant was served ☐ *personally* **OR** ☐ *pursuant to Court order dated* _____ with the above stated pleadings and the Notice of Automatic Orders. Defendant ☐ *defaulted in appearance* **OR** ☐ *appeared and waived his / her right to answer* **OR** ☐ *filed an answer / amended answer withdrawing any previous pleading, and neither admitting nor denying the allegations in plaintiff's complaint, and consenting to entry of judgment.*

14 **SIXTH:** ☐ That Defendant is not in the military service of the United States of America, the State of New York, or any other state. **OR** ☐ Defendant is a member of the military service of the _____ and ☐ has appeared by affidavit and does not oppose the action **OR** ☐ is in default.

15 **SEVENTH:** ☐ There are no children of the marriage **OR** ☐ There *is/are* _____
child(ren) of the marriage. Their name(s), social security number(s), address(es) and date(s) of birth
are:

<u>Name & Social Security Number</u>	<u>Date of Birth</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

16 **EIGHTH:** The grounds for divorce that are alleged in the Verified Complaint were proved
as follows:

Cruel and Inhuman Treatment (DRL §170(1)):

- ☐ At the following times Defendant committed the following act(s) which endangered the Plaintiff's physical or mental well being and rendered it unsafe or improper for Plaintiff to continue to reside with Defendant.

(State the facts that demonstrate cruel and inhuman conduct giving dates, places and specific acts. Conduct may include physical, verbal, sexual or emotional behavior).

(Attach an additional sheet, if necessary).

Abandonment (DRL 170(2)):

- ☐ That commencing on or about _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant left the marital residence of the parties located at _____, and did not return. Such absence was without cause or justification, and was without Plaintiff's consent.
- ☐ That commencing on or about _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant refused to have sexual relations with the Plaintiff despite Plaintiff's repeated requests to resume such relations. Defendant does not suffer from any disability which would prevent *her* / *him* from engaging in such sexual relations with Plaintiff. The refusal to engage in sexual relations was without good cause or justification and occurred at the marital residence located at _____.

☐

That commencing on or about _____, and continuing for a period of more than one (1) year immediately prior to commencement of this action, the Defendant willfully and without cause or justification abandoned the Plaintiff, who had been a faithful and dutiful spouse, by depriving Plaintiff of access to the marital residence located at _____. This deprivation was without the consent of the Plaintiff and continued for a period of greater than one year.

Confinement to Prison (DRL §170(3)):

☐ That after the marriage of Plaintiff and Defendant, Defendant was confined in prison for a period of three or more consecutive years, to wit: that Defendant is/was confined in

_____ prison on the

Name of correctional facility

_____ day of _____, _____, and remained confined until the

Month Year

_____ day of _____, _____; **OR** ☐ remains confined to this date.

Month Year

Adultery (DRL §170(4)):

☐ That on the ____ day of _____, _____, at _____
Month Year Location
the Defendant voluntarily committed of an act of sexual or deviate sexual intercourse with a person other than the Plaintiff after the marriage of Plaintiff and Defendant.

Living Separate and Apart Pursuant to a Separation Decree or Judgment of Separation (DRL §170(5)):

- ☐ (a) That the _____ Court, _____ County, _____ (Country or State) rendered a decree or judgment of separation on _____, under Index Number _____; and
- (b) that the parties have lived separate and apart for a period of one year or longer after the granting of such decree; and
- (c) that the Plaintiff has substantially complied with all the terms and conditions of such decree or judgment.

Living Separate and Apart Pursuant to a Separation Agreement (DRL §170(6)):

- ☐ (a) That the Plaintiff and Defendant entered into a written agreement of separation, which they subscribed and acknowledged on _____, in the form required to entitle a deed to be recorded; and
- (b) that the *agreement / memorandum of said agreement* was filed _____ in the Office of the Clerk of the County of _____, wherein *Plaintiff / Defendant* resided; and
- (c) that the parties have lived separate and apart for a period of one year or longer after the execution of said agreement; and
- (d) that the Plaintiff has substantially complied with all terms and conditions of such agreement.

Irretrievable Breakdown in Relationship for at Least Six Months (DRL §170(7)):

☐ That the relationship between Plaintiff and Defendant has broken down irretrievably for a period of at least six months as stated in ☐ the Plaintiff's Affidavit or ☐ a sworn statement of Defendant.

17

NINTH:

- ☐ A sworn statement pursuant to DRL §253 that Plaintiff has taken all steps within his or her power to remove all barriers to Defendant's remarriage following the divorce was served on the Defendant.
- ☐ A sworn statement as to the removal of barriers to remarriage is not required because the parties were married in a civil ceremony.
- ☐ A sworn statement as to the removal of barriers to remarriage is not required because Defendant waived the need for the statement in his or her affidavit.

18

TENTH

1) If the action was commenced on or after 1/25/16, the Court has informed the unrepresented party or parties of the maintenance guideline obligation pursuant to DRL § 236(B)(6) enacted by Laws of 2015, ch.269; S 5658/A 7636-b] (the "Maintenance Guidelines Law") .

2) Check the box (**A, B, C, or D**) below, whichever applies, and then fill in the information required for that box. Only one box may be selected. If you select **Box A), Box B) or Box C)** you must fill in all of the applicable information for that box and check all the applicable boxes. Then go on to Paragraph **ELEVENTH**. If you select **Box D)**, fill in the information requested in Items 1 and 2. Leave Item 3 blank for the court to fill in, and go on to Paragraph **ELEVENTH**.

☐ **A) Written Agreement/Stipulation**

The parties have entered into a Written Agreement/Stipulation pursuant to DRL 236(B)(3) dated _____,

wherein the parties agreed that ☐ *Plaintiff* ☐ *Defendant* will receive maintenance in the sum

of \$ ☐ per week
☐ bi-weekly \ ☐ Semi-monthly
☐ monthly

for such period of time as set forth in the parties' agreement.

The terms of the agreement, as to maintenance, were fair and reasonable at the time of the making of the agreement, and are not unconscionable at the time of the signing of the judgment, as it relates to General Obligations Law § 5-311.

Said agreement was validly executed and complies with the requirements of subdivision 3 of Domestic Relations Law 236(B)(3).

OR

☐ B) No maintenance was awarded because:

i) ☐ *Neither party seeks maintenance* **OR**

ii) ☐ *the Guideline Award of Maintenance under the Maintenance Guidelines Law, if applicable, was zero;* **OR**

iii) ☐ *The Court has denied the request for maintenance*

(Skip the rest of Paragraph TENTH and Go on to Paragraph ELEVENTH)

OR

=====

☐ C) Court Determination Where the Action for Divorce was Commenced Before January 25, 2016

The court has determined that ☐ *Plaintiff* will pay maintenance to ☐ *Plaintiff* in the
☐ *Defendant* ☐ *Defendant*

sum of \$ _____, ☐ *per week*
☐ *bi-weekly*, for a period of _____;
☐ *per month*
☐ *semi-monthly*

commencing on _____, and expiring on _____. In making such award, the court has considered the factors contained in DRL § 236(B)(6)(a) as it existed before January 25, 2016, which are incorporated herein by reference. The court has set forth the reasons for its decision in a writing.

=====

☐ D) Court Determination Where the Action for Divorce was Commenced on or after January 25, 2016

1. Fill in the the following information:

(i)- The adjusted gross income of the Plaintiff is \$ _____ and the adjusted gross income of the Defendant is _____ per year (copy your answers from Form UD-8(1) Annual Income Worksheet Lines 1A and 1B)

(ii) The date of your marriage _____; The date your divorce action was commenced _____;
The number of years you were married to the date your divorce action was commenced : _____

(iii) The range that maintenance would be payable according to the Advisory Schedule for Duration of Award in Appendix E _____ (copy your answers from Line 4a of Maintenance Guidelines Worksheet (form UD-8(2))).

2. Check which boxes below apply:

☐ *Child Support will not be paid for children of the marriage;* **OR** ☐ *Child Support will be paid for children of the marriage (Note: see page 7 of the Instructions for the definition of “children of the Marriage.”*

☐ *Maintenance Payor is the custodial parent;* **OR** ☐ *Maintenance Payee is the custodial parent* (copy your answers from Lines 2A and 2B of the Maintenance Guidelines Worksheet.

3. Based on the foregoing, the court has determined that:

(i) ☐ Plaintiff ☐ Defendant

is the Maintenance Payor ("Maintenance Payor") under the "Maintenance Guidelines Law" pursuant to DRL § 236(B)(6) who will pay maintenance to ☐ Plaintiff ☐ Defendant (The "Maintenance Payee") in the sum of \$ _____ ☐ per week ☐ bi-weekly ☐ per month ☐ semi-monthly (the "Award") for a period of _____; commencing on _____, and expiring on _____.

(ii) The guideline amount of maintenance that would be payable under the Maintenance Guidelines on income of Maintenance Payor up to \$184,000 is \$ _____ per year (from Paragraph 3B of Maintenance Guidelines Worksheet). ☐ The Award includes an annual award of \$ _____ on income of Maintenance Payor up to \$184,000 per year. In computing said Award, the court ☐ applied the Maintenance Guidelines Law; OR ☐ adjusted the guideline award of maintenance due under the Maintenance Guidelines Law because it is unjust and inappropriate based on one or more of the factors in DRL 236B(6)(e)(1), as follows, including the effect of a barrier to remarriage on said factors where appropriate:

(iii) **If Income of Maintenance Payor exceeds \$184,000 per year:**

☐ The Award includes an award of maintenance on \$ _____ of Maintenance Payor's income in excess of \$184,000 per year based on one or more of the factors in DRL 236B(6)(e)(1), as follows, including the effect of a barrier to remarriage on said factors where appropriate:

OR

☐ The Award did not include any maintenance on income of Maintenance Payor in excess of \$184,000 per year based on one or more of the factors in DRL 236B(6)(e)(1), as follows, including the effect of a barrier to remarriage on said factors where appropriate: _____

(iv) ☐ Since the Maintenance Payor has defaulted, and/or the court was provided with insufficient evidence, the award of maintenance was based on the needs of the Maintenance Payee or the standard of living of the parties prior to the marriage, whichever is greater.

(v) The court determined that the Award should be paid until _____. In determining how long the Award should be paid, the court considered the factors in DRL § 236(B)(6)(e)(1), and based its decision on one or more of said factors as stated below, including the effect of a barrier to remarriage on said factors where appropriate,

In determining how long the Award should be paid, the court also ☐ *considered* ☐ *did not consider* the Advisory Schedule in DRL § 236(B)(6)(f)(1) pursuant to which the award would have been paid for _____ years.

In determining how long the Award should last, the court

☐ *considered anticipated retirement assets, benefits, and retirement eligibility age of both parties* **OR**
☐ *anticipated retirement assets, benefits, and retirement eligibility age of both parties was not ascertainable;*

19 **ELEVENTH:** The minor children of the marriage now reside with ☐ *Plaintiff* **OR** ☐ *Defendant* **OR** ☐ *third party*, namely _____. The ☐ *Plaintiff* **OR** ☐ *Defendant* is entitled to visitation away from the custodial residence. The ☐ *Plaintiff* **OR** ☐ *Defendant* **OR** ☐ *Third Party*, namely _____ is entitled to custody. **OR** ☐ No award of custody due to the minor child(ren) of the marriage not residing in New York State. **OR** ☐ Other custody arrangement (specify) _____

Allegations of domestic violence and/or child abuse ☐ were or ☐ were not made in this case; Where such allegations were made, the Court ☐ has found that they were supported by a preponderance of the evidence, and has set forth on the record or in writing how such findings, facts and circumstances were factored into the custody or visitation direction or ☐ has found that they were not supported by a preponderance of the evidence.

20 **TWELFTH:** Equitable Distribution and ancillary issues shall be ☐ *in accordance with the settlement agreement* **OR** ☐ *pursuant to the decision of the court* **OR** ☐ *Equitable Distribution is not an issue.*

21 **THIRTEENTH:** ☐ There *is/are* no unemancipated child(ren) of the marriage. **OR**

☐ The award of child support is based upon the following:

(A) The unemancipated children of the marriage entitled to receive support are:

<u>Name</u>	<u>Date of Birth</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(B) (1) By order of _____ Court, _____ County, *Index/Docket No.* _____ dated _____ the *Plaintiff/Defendant* was directed to pay the sum of _____ per _____ for child support. Said Order shall continue.

OR

(2) The adjusted gross income of the Plaintiff who is the ☐ *custodial* **OR** ☐ *non-custodial* parent is _____ per year , and the adjusted gross income of the Defendant who is the ☐ *custodial* **OR** ☐ *non-custodial* parent is _____ per year, and the combined parental annual income is _____. The gross incomes of the parties has been adjusted to deduct maintenance paid to, and to add maintenance received by, a party spouse. The applicable child support percentage is 17/25/29/31/35 %. The combined basic child support obligation attributable to both parents is _____ per year on combined income up to \$148,000 as adjusted for low income if applicable and _____ per year on income over \$148,000. The Plaintiff's pro rata share of the combined parental income is _____% and the Defendant's pro rata share of the combined parental income is _____. The non-custodial parent's pro rata share of the child support obligation on combined income up to \$148,000 is _____ per year or _____ ☐ *per week* ☐ *bi-weekly* ☐ *semi-monthly* ☐ *per month*. The non-custodial parent's pro rata share of the child support obligation on combined income over \$148,000 is _____ per year or _____ ☐ *per week* ☐ *bi-weekly* ☐ *semi-monthly* ☐ *per month*. The non-custodial parent's pro rata share of future health care expenses not covered by insurance is ____%. The non-custodial parent's pro rata share of reasonable child care expenses is \$ _____ per year or _____ ☐ *per week* ☐ *bi-weekly* ☐ *semi-monthly* ☐ *per month* or ____%. The non-custodial parent's share

of educational or extraordinary expenses for the children if any is \$_____ per year or _____%.

The cost of Health Insurance premiums for the children is \$_____ per year or \$_____ ☐ per week ☐ bi-weekly ☐ semi-monthly ☐ per month. The party who maintains the health insurance for the children is the ☐ non-custodial parent ☐ custodial parent.

CHECK a) or b) below:

a) ☐ The custodial parent's pro rata share of health insurance premiums for the children is \$_____ per year or \$_____ ☐ per week ☐ bi-weekly ☐ semi-monthly ☐ per month which will be deducted from the child support obligation if the non-custodial parent provides the health insurance for the children;

OR

b) ☐ The non-custodial parent's pro rata share of health insurance premiums for the children is \$_____ per year or \$_____ ☐ per week ☐ bi-weekly ☐ semi-monthly ☐ per month. which is to be added to the basic child support obligation if the custodial parent provides the health insurance for the children.

OR

- (3) The parties entered into a stipulation/agreement on _____ wherein the ☐ Plaintiff **OR** ☐ Defendant agrees to pay _____ ☐ per week **OR** ☐ bi-weekly **OR** ☐ per month child support ☐ directly **OR** ☐ through the Support Collection Unit to ☐ Plaintiff **OR** ☐ Defendant **OR** ☐ Third Party, namely _____. The parties agree to ☐ waive **OR** ☐ apply the Child Support Standards Act to combined income over \$148,000. The parties have agreed that health care expenses not covered by insurance shall be paid by ☐ Plaintiff **OR** ☐ Defendant in the amount of _____% of the uncovered expenses. The parties have agreed that reasonable child care expenses shall be paid by ☐ Plaintiff **OR** ☐ Defendant to ☐ Plaintiff **OR** ☐ Defendant in the amount of \$ _____ ☐ per week **OR** ☐ bi-weekly **OR** ☐ semi-monthly **OR** ☐ per month **OR** ☐ _____% of said child care expenses. The parties have agreed that educational and extraordinary expenses and shall be paid by ☐ Plaintiff **OR** ☐ Defendant to ☐ Plaintiff **OR** ☐ Defendant in the amount of \$ _____ ☐ per week **OR** ☐ bi-weekly **OR** ☐ semi-monthly **OR** ☐ per month **OR** ☐ _____% of said expenses. Said agreement reciting in compliance with DRL §2401-b(h): The parties have been advised of the Child Support Standards Act. The basic child support obligation presumptively results in the correct amount of child support. The unrepresented party, if any, has received a copy of the Child Support Standards Chart promulgated by Commissioner of Social Services pursuant to Social Services Law Section 111-I. The presumptive amount of child support attributable to the non-custodial parent is _____ ☐ per week **OR** ☐ bi-weekly **OR** ☐ semi-monthly **OR** ☐ per month. The amount of child support agreed to ☐ conforms with the non-custodial parent's basic child support obligation **OR** ☐ deviates from the non-custodial parent's basic child support obligation for the following reasons:

If the amount of child support agreed to be paid deviates from the non-custodial parent's basic child support obligation, the court finds said amount to be just and appropriate for the following reasons:

22 **FOURTEENTH:** The Plaintiff's address is _____,
and social security number is _____. The Defendant's address is _____
_____, and social security number is _____.

- 23** ☐ There are no unemancipated children of the marriage. OR
- ☐ There are no health plans available to the parties through their employment. OR
- ☐ The parties are covered by the following group health plans through their employment:

<u>Plaintiff</u>	<u>Defendant</u>
Group Health Plan:_____	Group Health Plan:_____
Address:_____	Address:_____
Identification Number:_____	Identification Number:_____
Plan Administrator:_____	Plan Administrator:_____
Type of Coverage:_____	Type of Coverage:_____

☐ *The parties have agreed or stipulated* OR ☐ *the court has determined* that the
☐ *Plaintiff* OR ☐ *Defendant* shall be the legally responsible relative and that the unemancipated
child(ren) shall be enrolled in *his / her* group health plan as specified above *until the age of 21 years*
OR *until the child(ren) is / are sooner emancipated.*

24 FIFTEENTH: The _____ Court entered the following order(s) under Index
No(s). / Docket No(s): _____
_____ ☐ Not Applicable

25 **SIXTEENTH:** ☐ *Plaintiff* OR ☐ *Defendant* may resume use of the prior surname:

_____.

26 **SEVENTEENTH:** Compliance with DRL § 255 (1) and (2) has been satisfied as follows:

A) ☐ The parties entered into a Stipulation of Settlement/Agreement dated _____

AND:

1. ☐ the stipulation of settlement complies with the requirements of DRL § 255 (2).

or

2. ☐ the parties entered into an addendum to the stipulation of settlement/agreement which complies with the requirements of DRL § 255 (2).

B) ☐ There is no stipulation of settlement/agreement

=====

1. ☐ each party has been provided notice as required by DRL § 255(1)

or

2. ☐ the plaintiff has been notified pursuant to DRL § 255(1). Notice to the defendant cannot be effectuated due to the defendant's whereabouts being unknown. Since the cost of publication would present an undue burden, notice to the defendant is hereby dispensed with.

EIGHTEENTH: Where applicable, registry checks were completed pursuant to DRL §240 1 (a-1).

27 **NINETEENTH:**

The Judgment of Divorce incorporates all ancillary issues, including the payment of counsel and experts' fees and expenses, which issues:

☐ were settled by written settlement/separation agreement

☐ were settled by oral settlement/ stipulation on the record

☐ were determined by the Court

☐ were determined by Family Court order (custody and visitation or child support and/or spousal support issues only)

☐ are not to be incorporated into the Judgment of Divorce, in that neither party to the divorce has contested any such issues based on the Affidavit of Plaintiff (which Defendant has not contested).

28 TWENTIETH: The Court or the Support Collection Unit (where a party is currently receiving child support services or an application has been made for such services) shall issue an income deduction order or an income execution simultaneously herewith unless either of the following boxes is checked;

☐ an agreement providing for an alternative arrangement has been reached between the parties or ☐ for the following reason(s) which the court finds to constitute good cause pursuant to DRL 240(2) (b):

[specify]: _____

CONCLUSIONS OF LAW

FIRST: Residency as required by DRL § 230 has been satisfied.

SECOND: The requirements of DRL § 255 have been satisfied.

THIRD: The requirements of DRL § 240 1 (a) including the Records Checking Requirements in DRL § 240 1 (a-1) have been satisfied.

FOURTH: The requirements of DRL § 240 (1-b) have been satisfied.

FIFTH: The requirements of DRL § 236(B)(2)(b) have been satisfied.

SIXTH: The requirements of DRL § 236(B)(6) have been satisfied.

SEVENTH: If DRL §170 subd. (7) is the ground alleged, then all economic issues of equitable distribution of marital property, the payment or waiver of spousal support, the payment of child support, the payment of counsel and experts' fees and expenses as well as the custody and visitation with the minor children of the marriage have been resolved by the parties or determined by the court and incorporated into the judgment of divorce.

29 EIGHTH: ☐ *Plaintiff* **OR** ☐ *Defendant* is entitled to a judgment of divorce on the ground of DRL §170 subd. _____ and granting the incidental relief awarded.

30 Dated: _____

J.S.C./Referee

At the *Matrimonial/IAS* Part _____ of New
York State Supreme Court at
the Courthouse, _____
County, on _____.

Present:

Hon. _____ *Justice/Referee*
-----X

Plaintiff,
-against-

Index No.:
Calendar No.:
Social Security No.:

JUDGMENT OF DIVORCE

Defendant.
-----X

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.

THE FOLLOWING NOTICE IS ☐ *APPLICABLE* OR ☐ *NOT APPLICABLE*

NOTICE REQUIRED WHERE PAYMENTS THROUGH SUPPORT COLLECTION UNIT

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 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 TWO HUNDRED FORTY-B OF THE DOMESTIC RELATIONS LAW, 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.**

9 This action was submitted to ☐ *the referee* **OR** ☐ *this court* for ☐ *consideration* this ____ day of _____ **OR** for ☐ *inquest* on this ____ day of _____.

10 The Defendant was served ☐ *personally* **OR** ☐ *pursuant to court order dated* _____
☐ *within* **OR** ☐ *outside* the State of New York.

11 Plaintiff presented a ☐ *Verified Complaint and Affidavit of Plaintiff constituting the facts of the matter*
OR ☐ *Summons With Notice and Affidavit of Plaintiff constituting the facts of the matter.*

12 The Defendant has ☐ *not appeared and is in default* **OR** ☐ *appeared and waived his or her right to answer* **OR** ☐ *filed an answer or amended answer withdrawing any prior pleadings and neither admitting nor denying the allegations in the complaint and consenting to the entry of judgment* **OR** ☐ *the parties settled the ancillary issues by* ☐ *written stipulation* **OR** ☐ *oral stipulation on the record dated* _____.

13 The Court accepted ☐ *written* **OR** ☐ *oral* proof of non-military status.

14 The Plaintiff's address is _____, and social security number is _____.
_____. The Defendant's address is _____, and
social security number is _____.

15 Now on motion of _____, the ☐ *attorney for Plaintiff* **OR** ☐ *Plaintiff*, it is:

16 **ORDERED AND ADJUDGED** that the Referee's Report, if any, is hereby confirmed; and it further

17 **ORDERED, ADJUDGED AND DECREED** that the application of plaintiff is hereby granted to
dissolve the marriage between _____, plaintiff, and _____, defendant,
by reason of:

- ☐ (a) the cruel and inhuman treatment of ☐ *Plaintiff by Defendant* **OR** ☐ *Defendant by Plaintiff* pursuant to D.R.L. §170(1); and/or
- ☐ (b) the abandonment of ☐ *Plaintiff* **OR** ☐ *Defendant* by ☐ *Plaintiff* **OR** ☐ *Defendant*, for a period of one or more years, pursuant to D.R.L. §170(2); and/or
- ☐ (c) the confinement of ☐ *Plaintiff* **OR** ☐ *Defendant* in prison for a period of three or more consecutive years after the marriage of Plaintiff and Defendant, pursuant to D.R.L. §170(3); and/or
- ☐ (d) the commission of an act of adultery by ☐ *Plaintiff* **OR** ☐ *Defendant*, pursuant to D.R.L. §170(4); and/or
- ☐ (e) the parties having lived separate and apart pursuant to a decree or judgment of separation dated _____ for a period of one or more years after the granting of such decree or judgment, pursuant to D.R.L. §170(5); and/or
- ☐ (f) the parties having lived separate and apart pursuant to a Separation Agreement dated _____ in compliance with the provisions of D.R.L. §170(6); and/or
- ☐ (g) the relationship between Plaintiff and Defendant has broken down irretrievably for a period of at least six months pursuant to D.R.L. §170(7); and

18 The requirements of D.R.L. §240 1(a-1) have been met and the Court having considered the results of said inquiries, it is

ORDERED AND ADJUDGED that ☐ *Plaintiff* **OR** ☐ *Defendant* **OR** ☐ *third party*,
namely: _____ shall have custody of the minor child(ren) of the marriage, i.e.:

19	<u>Name</u>	<u>Date of Birth</u>	<u>Social Security No.</u>
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

OR ☐ *There are no minor children of the marriage; and*

20 The requirements of D.R.L. §240 1 (a-1) have been met and the Court having considered the results of said inquiries, it is

ORDERED AND ADJUDGED that ☐ *Plaintiff* **OR** ☐ *Defendant* shall have visitation with the minor child(ren) of the marriage ☐ *in accordance with the parties' settlement agreement* **OR** ☐ *according to the following schedule:* _____

OR ☐ *Visitation is not applicable; and it is further*

21 **ORDERED AND ADJUDGED** that the existing _____ County, _____ Court order(s) under ☐ *Index No.* _____ **OR** ☐ *Docket No.* _____ as to ☐ *custody* **OR** ☐ *visitation* shall continue; **OR** ☐ *There are no court orders with regard to custody or visitation to be continued; and it is further*

22 **ORDERED AND ADJUDGED** that ☐ *Plaintiff* **OR** ☐ *Defendant* shall pay to ☐ *Plaintiff* **OR** ☐ *Defendant* **OR** ☐ *third party*, namely: _____, as and for the support of the parties' unemancipated children of the marriage, the sum of \$ _____ per _____, pursuant to an existing order issued by the _____ County, _____ Court, under ☐ *Index* **OR** ☐ *Docket* Number _____, the terms of which are hereby continued. **OR** ☐ *There are no orders from other courts to be continued; and it is further*

ORDERED AND ADJUDGED that:

- A) ☐ Pursuant to the ☐ *agreement of the parties*
☐ *Court's decision*

the ☐ *Plaintiff* shall pay to ☐ *Plaintiff*
☐ *Defendant* ☐ *Defendant*

the sum of \$ _____ as ☐ *per week*
☐ *bi-weekly* and for maintenance:
☐ *semi-monthly*
☐ *monthly*

☐ *payments to be made as set forth in the agreement;*

☐ *commencing on the _____ day of _____, _____, and continuing until the _____ day of _____, _____;*
month year month year

Payment shall be ☐ *a direct payment,*
☐ *by an Income Deduction Order issued simultaneously herewith;*

=====OR=====

- B) ☐ *that there is no award of maintenance per the court's decision;*
☐ *that there is no request for maintenance;*
☐ *that the guideline award of maintenance under the Maintenance Guidelines Law (L.2015 c. 269), if applicable, was zero.*
and it is further;

=====OR=====

- C) Pursuant to the court's decision for cases commenced before 1/25/16
the ☐ *Plaintiff* ☐ *Defendant* shall pay to ☐ *Plaintiff* ☐ *Defendant*

the sum of ☐ \$ _____ *per week;* ☐ \$ _____ *bi-weekly;* ☐ \$ _____ *semi-*
monthly ☐ \$ _____ *per month*

as and for maintenance

commencing on the _____ day of _____, _____, and continuing until the _____ day of _____, _____;
month year

Payment shall be ☐ *a direct payment,* ☐ *by an Income Deduction Order issued simultaneously herewith;*

=====OR=====

- D) Pursuant to the court's decision for cases commenced on or after 1/25/16
the ☐ *Plaintiff* ☐ *Defendant* shall pay to

☐ *Plaintiff* ☐ *Defendant*

the sum of ☐ \$ _____ *per week;* ☐ \$ _____ *bi-weekly;* ☐ \$ _____ *semi-*
monthly ☐ \$ _____ *per month*

as and for maintenance (the "Award") *commencing on the _____ day of _____, _____, and continuing until the _____ day of _____, _____;*
month year

Payment shall be ☐ a direct payment,
☐ by an Income Deduction Order issued simultaneously herewith;

The guideline award of maintenance under the Maintenance Guidelines Law is \$ _____

For the reasons stated in the Findings of Fact and Conclusions of Law, which are incorporated here in by
reference: (Check the applicable boxes:)

☐ The Award includes an award on income of maintenance payor up to \$184,000 per year. In computing said award, the Court applied the Maintenance Guidelines Law (L.2015, c.269) ; **OR**
☐ the court adjusted the guideline award of maintenance due under the Maintenance Guidelines Law because it is unjust and inappropriate.

☐ The Award includes maintenance on income of maintenance payor in excess of \$184,000 per year **OR** ☐ The Award does not include maintenance on income of maintenance payor in excess of \$184,000 per year.

24

ORDERED AND ADJUDGED that ☐ Plaintiff **OR** ☐ Defendant shall pay
to ☐ Plaintiff **OR** ☐ Defendant **OR** ☐ third party, namely: _____, **OR** ☐
because a party is already receiving child support services or an application has been made for such
services, through the NYS Child Support Processing Center, PO Box 15363, Albany, NY 12212-5363;
as and for the support of the parties' unemancipated child(Ren) of the marriage, namely:

<u>Name</u>	<u>Date of Birth</u>
_____	_____
_____	_____
_____	_____
_____	_____

the sum of \$ _____ ☐ per week **OR** ☐ bi-weekly **OR** ☐ semi-monthly ☐ per month,
commencing on _____, and to be paid ☐ directly to ☐ Plaintiff **OR** ☐
Defendant **OR** ☐ third party, namely: _____, **OR** ☐ through the NYS
Child Support Processing Center, PO Box 15363, Albany, NY 12212-5363, together with such dollar
amounts or percentages for ☐ child care **OR** ☐ education **OR** ☐ health care as set forth below
in accordance with ☐ the Court's decision **OR** ☐ the parties' Settlement Agreement.
OR ☐ This section is not applicable because there are no unemancipated children of the marriage;

Such Settlement Agreement, if applicable, is in compliance with D.R.L. §240(1-b)(h) because:

The parties have been advised of the provisions of D.R.L. Sec. 240(1-b); the
unrepresented party, if any, has received a copy of the Child Support Standards
Chart promulgated by the Commissioner of Social Services pursuant to Social
Services Law Sec. 111-I;

the basic child support obligation, as defined in D.R.L. Sec. 240(1-b),
presumptively results in the correct amount of child support to be awarded, and
the agreed upon amount substantially conforms to the basic support obligation
attributable to the non-custodial parent;
the amount awarded is neither unjust nor inappropriate, and the Court has
approved such award through the Findings of Fact and Conclusions of Law;

OR

The basic support obligation, as defined in DRL Sec. 240 (1-b), presumptively
results in the correct amount of child support to be awarded, and the amount
attributable to the non-custodial parent is \$_____ per _____;
the amount of child support agreed to in this action deviates from the amount
attributable to the non-custodial parent, and the Court has
approved of such agreed-upon amount based upon the reasons set
forth in the Findings of Fact and Conclusions of Law, which are incorporated
herein by reference;

OR ☐ *This provision is not applicable;* and it is further

ORDERED AND ADJUDGED that,

if maintenance is to be paid pursuant to this Judgment of Divorce, then, subject to
the terms of DRL 240(1-b), upon termination of the maintenance award, the amount
of child support payable shall be adjusted, without prejudice to either party's right to
seek a modification pursuant to DRL 236 (B)(9)(2); and it is further

25 **ORDERED AND ADJUDGED** that ☐ *Plaintiff* **OR** ☐ *Defendant*
shall pay to ☐ *Plaintiff* **OR** ☐ *Defendant* **OR** ☐ *third party, namely: _____* and
for reasonable child care expenses pursuant to ☐ *written agreement of the parties* **OR** ☐
the court's decision, the amount of \$_____ per year or
_____ ☐ *per week* ☐ *bi-weekly* ☐ *semi-monthly* ☐ *per month*.

OR ☐ *Not applicable;* and it is further

26 **ORDERED AND ADJUDGED**

1- that ☐ *Plaintiff* **OR** ☐ *Defendant* shall pay to ☐ *Plaintiff* **OR** ☐

Defendant **OR** ☐ *third party, namely: _____*, **OR** ☐ *through the Support Collection
Unit (because a party is currently receiving child support services or an application has been made for
such services)* as and for non-custodial parent's pro rata share of future health care expenses not

covered by insurance, _____ % of such expenses pursuant to ☐ written agreement of the parties

OR ☐ the court's decision

OR ☐ *Not applicable*;

2- Check which box or boxes apply:

a) ☐ ***if the custodial parent provides the health insurance for the children:***

☐ Plaintiff **OR** ☐ Defendant shall pay to ☐ Plaintiff **OR** Defendant **OR**

☐ third party, namely: _____, **OR** ☐ through the Support Collection Unit

(because a party is currently receiving child support services or an application has been

made for such services) as and for ☐ The non-custodial parent's pro rata share of

health insurance premiums for the children, \$ _____ per year or _____ ☐

per week ☐ bi-weekly ☐ semi-monthly ☐ per month **OR**

b) ☐ ***if the non-custodial parent provides the health insurance for the children:***

The custodial parent's pro rata share of health insurance premiums for the children,

\$ _____ per year or _____ ☐ per week ☐ bi-weekly ☐ semi-monthly ☐ per

month will be deducted from the child support obligation.

3- ☐ Plaintiff **OR** ☐ Defendant shall apply to the state sponsored health insurance plan for coverage for the unemancipated children of the marriage. The costs shall be allocated pursuant to ☐ written agreement of the parties **OR** ☐ the court's decision **OR** ☐ *Not applicable*; and it is further

27 **ORDERED AND ADJUDGED** that ☐ Plaintiff **OR** ☐ Defendant shall pay to ☐ Plaintiff **OR** ☐ Defendant **OR** ☐ third party, namely: _____ **OR** ☐ through the Support Collection Unit *(because a party is currently receiving child support services or an application has been made for such services)* ☐ For education or extraordinary expenses of the children \$ _____ per year or _____ ☐ per week ☐ bi-weekly ☐ semi-monthly ☐ per month or _____ % of such expenses pursuant to ☐ written agreement of the parties **OR** ☐ the court's decision **OR** ☐ *Not applicable*; and it is further

28 **ORDERED AND ADJUDGED** that ☐ Plaintiff **OR** ☐ Defendant is hereby awarded exclusive occupancy of the marital residence located at _____, together with its contents until further order of the court, **OR** ☐ as follows: _____; **OR** ☐ *Not applicable*; and it is further

29 Fill in Box A or Box B, whichever, applies:

A. ☐ **ORDERED AND ADJUDGED** that the Settlement Agreement entered into between the parties on the _____ day of _____, ☐ *an original* OR ☐ *a transcript* of which is on file with this Court and incorporated herein by reference, shall survive and shall not be merged into this judgment, and the parties are hereby directed to comply with all legally enforceable terms and conditions of said agreement as if such terms and conditions were set forth in their entirety herein;

OR

B. ☐ There is no Settlement Agreement entered into between the parties;

and it is further

ORDERED AND ADJUDGED, that the Supreme Court shall retain jurisdiction to hear any applications to enforce the provisions of said Settlement Agreement, if any, or to enforce or modify the provisions of this judgment, provided the court retains jurisdiction of the matter concurrently with the Family Court for the purpose of specifically enforcing, such of the provisions of that (separation agreement)(stipulation agreement, if any), as are capable of specific enforcement, to the extent permitted by law, and of modifying such judgment with respect to maintenance, support, custody or visitation to the extent permitted by law, or both; and it is further

ORDERED AND ADJUDGED, that any applications brought in Supreme Court to enforce the provisions of said Settlement Agreement, if any, or to enforce or modify the provisions of this Judgment shall be brought in a County wherein one of the parties reside; provided that if there are minor children of the marriage, such applications shall be brought in a County wherein one of the parties or the child or children reside, except, in the discretion of the judge, for good cause. Good cause applications shall be made by motion or order to show cause. Where the address of either party and any child or children is unknown and not a matter of public record, or is subject to an existing confidentiality order pursuant to DRL § 254 or FCA § 154-b, such applications may be brought in the County where the Judgment was entered; and it is further

30 **ORDERED AND ADJUDGED** that pursuant to pursuant to the ☐ *parties' Settlement Agreement dated _____* OR ☐ *the court's decision after trial*, all parties shall duly execute all documents necessary to formally transfer title to real estate or co-op shares to the ☐ *Plaintiff* OR ☐ *Defendant* as set forth in the ☐ *parties' Settlement Agreement* OR ☐ *the court's decision after trial*, including, without limitation, an appropriate deed or other conveyance of title, and all other forms necessary to record such deed or other title documents (including the satisfaction or refinancing of any mortgage if necessary) to convey ownership of the marital residence located at _____, no later than _____; **OR** ☐ *Not applicable*; and it is further

31 **ORDERED AND ADJUDGED** that a separate Qualified Medical Child Support Order shall be issued simultaneously herewith **OR** ☐ *Not applicable*; and it is further

32 **ORDERED AND ADJUDGED** that, pursuant to the ☐ *parties' Settlement Agreement* **OR** ☐ *the court's decision*, a separate Qualified Domestic Relations Order shall be issued simultaneously herewith or as soon as practicable **OR** ☐ *Not applicable*; and it is further

33 **ORDERED AND ADJUDGED** that, ☐ *pursuant to the Court's decision* **OR** ☐ *pursuant to the parties' agreement*, the Court or the Support Collection Unit (where a party is currently receiving child support services or an application has been made for such services) shall issue an income deduction order simultaneously herewith **OR** ☐ *Not applicable* because the Court has made a finding in the Findings of Fact and Conclusions of Law that alternative arrangements have been made between the parties, or that good cause exists not to require such an order; and it is further

34 **ORDERED AND ADJUDGED** that both parties are authorized to resume the use of any prior surname, and it is further

35 **ORDERED AND ADJUDGED** that ☐ *Plaintiff* **OR** ☐ *Defendant* is authorized to resume use of the prior surname _____; and it is further

36 **ORDERED AND ADJUDGED** that ☐ *Plaintiff* **OR** ☐ *Defendant* is hereby awarded counsel and/or expert's fees as follows:

_____ **OR** ☐ *Not applicable*; and it is further

37 **ORDERED AND ADJUDGED** that ☐ *Plaintiff* **OR** ☐ *Defendant* shall be served with a copy of this judgment, with notice of entry, by the ☐ *Plaintiff* **OR** ☐ *Defendant*, within _____ days of such entry.

38 Dated:

ENTER:

J.S.C./Ref

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

-----X

Plaintiff,

Index No. _____

-against-

PART 130
CERTIFICATION

Defendant.

-----X

CERTIFICATION: I hereby certify that all of the papers that I have served, filed or submitted to the court in this divorce action are not frivolous as defined in subsection (c) of Section 130-1.1 of the Rules of the Chief Administrator of the Courts.

Dated: _____

SIGNATURE

Print or type name below signature

UNCONTESTED MATRIMONIAL REQUEST FOR JUDICIAL INTERVENTION

UD-13
(rev. 5/2011)

For Court Clerk Use Only:

IAS Entry Date

Judge Assigned

RJI Date

____ COURT, _____ COUNTY

Index No: _____ Date Index Issued: ____/____/____

CAPTION: Enter the complete case caption. Do not use et al or et ano.

Plaintiff

-against-

Defendant

STATUS OF ACTION OR PROCEEDING: Answer YES or NO, and provide additional information where indicated.

YES NO

Has a summons been filed? ☐ ☐ If yes, date filed: ____/____/____

Has a summons been served? ☐ ☐ If yes, date served: ____/____/____

Are there children of the marriage under the age of 18? ☐ ☐ If yes, complete and attach the **MATRIMONIAL RJI Addendum (UCS-840M)**.

NATURE OF JUDICIAL INTERVENTION: EX PARTE APPLICATION FOR THE DISSOLUTION OF MARRIAGE

ADDITIONAL RELIEF: Check all that apply

- ☐ Poor Person Application
☐ Application for Alternate Service
☐ Other (specify): _____

PARTIES: For parties without an attorney, check "Un-Rep" box AND enter party address, phone number and e-mail address in "Attorneys" space.

Un-Rep	Parties	Attorneys	Issue Joined (Y/N):
	List party names.	Provide attorney name, firm name, business address, phone number and e-mail address.	
<input type="checkbox"/>	Name: Role: PLAINTIFF		N/A
<input type="checkbox"/>	Name: Role: DEFENDANT		<input type="checkbox"/> YES <input type="checkbox"/> NO

RELATED CASES: List any related cases, include any related criminal and/or Family Court cases.

Case Title	Index/Case No.	Court	Judge (if assigned)	Relationship to Instant Case

I AFFIRM UNDER THE PENALTY OF PERJURY THAT, TO MY KNOWLEDGE, OTHER THAN AS NOTED ABOVE, THERE ARE AND HAVE BEEN NO RELATED ACTIONS OR PROCEEDINGS, NOR HAS A REQUEST FOR JUDICIAL INTERVENTION PREVIOUSLY BEEN FILED IN THIS ACTION OR PROCEEDING.

Dated: ____/____/____

SIGNATURE

ATTORNEY REGISTRATION NUMBER

PRINT OR TYPE NAME

MATRIMONIAL Request for Judicial Intervention Addendum

Supreme

COURT, COUNTY OF _____

INDEX NO. _____

For use when there are children under the age of 18 who are subject to the matrimonial action.

Plaintiff

Last Name: _____ First Name: _____ Date of Birth: _____

Prior Names (List any other names used, including maiden and/or former married names):

Last Name: _____ First Name: _____

Last Name: _____ First Name: _____

Last Name: _____ First Name: _____

Gender: ☐ Male ☐ FemalePresent Address: _____ (Street Address) _____ (City) _____ (State) _____ (Zip)
New YorkAddress History
for past 3 years: _____ (Street Address) _____ (City) _____ (State) _____ (Zip)

_____ (Street Address) _____ (City) _____ (State) _____ (Zip)

_____ (Street Address) _____ (City) _____ (State) _____ (Zip)

Defendant

Last Name: _____ First Name: _____ Date of Birth: _____

Prior Names (List any other names used, including maiden and/or former married names):

Last Name: _____ First Name: _____

Last Name: _____ First Name: _____

Last Name: _____ First Name: _____

Gender: ☐ Male ☐ FemalePresent Address: _____ (Street Address) _____ (City) _____ (State) _____ (Zip)
New YorkAddress History
for past 3 years: _____ (Street Address) _____ (City) _____ (State) _____ (Zip)

_____ (Street Address) _____ (City) _____ (State) _____ (Zip)

_____ (Street Address) _____ (City) _____ (State) _____ (Zip)

ChildrenLast Name: _____ First Name: _____ Date of Birth: _____ Gender: ☐ M ☐ FLast Name: _____ First Name: _____ Date of Birth: _____ Gender: ☐ M ☐ FLast Name: _____ First Name: _____ Date of Birth: _____ Gender: ☐ M ☐ FLast Name: _____ First Name: _____ Date of Birth: _____ Gender: ☐ M ☐ FLast Name: _____ First Name: _____ Date of Birth: _____ Gender: ☐ M ☐ F

1 SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

-----X

2,3 Index No.: _____

Plaintiff.

-against-

NOTICE OF ENTRY

4 Defendant.

-----X

5 PLEASE TAKE NOTICE that the attached is a true copy of a judgment of divorce in
6 this matter that was entered in the Office of the County Clerk of _____ County, on the
7 _____ day of _____.

7 Dated: _____
8

9 _____
' Plaintiff **OR** ' Attorney(s) for Plaintiff

Address

10 TO:

' Defendant **OR** ' Attorney for Defendant

Address

STATE OF NEW YORK SUPREME COURT
COUNTY OF _____

Index No. _____

RJI No.: _____

Plaintiff,

**AFFIDAVIT OF SERVICE
BY MAIL OF
JUDGMENT OF DIVORCE
WITH NOTICE OF ENTRY**

- against -

Defendant.

STATE OF NEW YORK)

COUNTY OF _____)

SS.:

_____, residing at _____, being sworn,
says, I am not a party to the action, and am over 18 years of age.

On _____, I served a copy of the Judgment of Divorce with Notice of Entry upon
the Defendant by mailing a true copy of such papers enclosed and properly sealed in an envelope
which I deposited in an official United States Post Office depository under the exclusive care and
custody of the United States Postal Service addressed to:

_____.

Dated: _____

Server's

Signature: _____

Print Name: _____

SWORN to before me on this

____ day of _____, 20____.

NOTARY PUBLIC

LOCAL INDEX NUMBER

STATE FILE NUMBER

New York State Department of Health

CERTIFICATE OF DISSOLUTION OF MARRIAGE

TYPE, OR PRINT IN PERMANENT BLACK INK	4	Wife/Husband/Spouse	1A. NAME: FIRST MIDDLE LAST			1B. BIRTH NAME, IF DIFFERENT		1C. SOCIAL SECURITY NUMBER		
			2A. DATE OF BIRTH Month Day Year		2B. STATE OF BIRTH (COUNTRY IF NOT USA)		3. SEX (Optional)		4A. RESIDENCE: STATE	
			4B. COUNTY		4C. LOCALITY (CHECK ONE AND SPECIFY) <input type="checkbox"/> CITY OF <input type="checkbox"/> TOWN OF <input type="checkbox"/> VILLAGE OF					
			4D. STREET AND NUMBER OF RESIDENCE (INCLUDE ZIP CODE)				4E. IF CITY OR VILLAGE, IS RESIDENCE WITHIN CITY OR VILLAGE LIMITS? YES <input type="checkbox"/> NO <input type="checkbox"/> IF NO, SPECIFY TOWN:			
9	Wife/Husband/Spouse	6A. NAME: FIRST MIDDLE LAST			6B. BIRTH NAME, IF DIFFERENT		6C. SOCIAL SECURITY NUMBER			
		7A. DATE OF BIRTH Month Day Year		7B. STATE OF BIRTH (COUNTRY IF NOT USA)		8. SEX (Optional)		9A. RESIDENCE: STATE		
		9B. COUNTY		9C. LOCALITY (CHECK ONE AND SPECIFY) <input type="checkbox"/> CITY OF <input type="checkbox"/> TOWN OF <input type="checkbox"/> VILLAGE OF						
		9D. STREET AND NUMBER OF RESIDENCE (INCLUDE ZIP CODE)				9E. IF CITY OR VILLAGE, IS RESIDENCE WITHIN CITY OR VILLAGE LIMITS? YES <input type="checkbox"/> NO <input type="checkbox"/> IF NO, SPECIFY TOWN:				
11	Wife/Husband/Spouse	10A. ATTORNEY - NAME			10B. ADDRESS (INCLUDE ZIP CODE)					
		11A. PLACE OF THIS MARRIAGE - CITY, TOWN OR VILLAGE			11B. COUNTY			11C. STATE (COUNTRY IF NOT USA)		
		12A. DATE OF THIS MARRIAGE Month Day Year		12B. APPROXIMATE DATE COUPLE SEPARATED Month Year		13A. NUMBER OF CHILDREN EVER BORN ALIVE OF THIS MARRIAGE (SPECIFY)			13B. NUMBER OF CHILDREN UNDER 18 IN THIS FAMILY (SPECIFY)	
		14A. I CERTIFY THAT A DECREE OF DISSOLUTION OF THE ABOVE MARRIAGE WAS RENDERED ON Month Day Year		14B. DATE OF ENTRY: Month Day Year		14C. TYPE OF DECREE - DIVORCE, ANNULMENT, OTHER DISSOLUTION (SPECIFY)				
15	DECREE	14D. COUNTY OF DECREE			14E. TITLE OF COURT					
		14F. SIGNATURE OF COUNTY CLERK								
		>								

CONFIDENTIAL INFORMATION

24	Wife/Husband/Spouse	15. RACE: WHITE, BLACK, AMERICAN INDIAN, OTHER (SPECIFY)		16. NUMBER OF THIS MARRIAGE - FIRST, SECOND, ETC. (SPECIFY)		17. IF PREVIOUSLY MARRIED HOW MANY ENDED BY A. DEATH NUMBER _____ NONE <input type="checkbox"/> B. DIVORCE OR ANNULMENT NUMBER _____ NONE <input type="checkbox"/>		18. EDUCATION: INDICATE HIGHEST GRADE COMPLETED ONLY <table border="0"> <tr> <td colspan="8">ELEMENTARY</td> <td colspan="4">HIGH SCHOOL</td> <td colspan="4">COLLEGE</td> </tr> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td> <td>1</td><td>2</td><td>3</td><td>4</td> <td>1</td><td>2</td><td>3</td><td>4</td><td>5+</td> </tr> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td>00</td><td>01</td><td>02</td><td>03</td><td>04</td><td>05</td><td>06</td><td>07</td><td>08</td> <td>09</td><td>10</td><td>11</td><td>12</td> <td>13</td><td>14</td><td>15</td><td>16</td><td>17</td> </tr> </table>																ELEMENTARY								HIGH SCHOOL				COLLEGE				0	1	2	3	4	5	6	7	8	1	2	3	4	1	2	3	4	5+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	00	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17
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25	Wife/Husband/Spouse	19. RACE: WHITE, BLACK, AMERICAN INDIAN, OTHER (SPECIFY)		20. NUMBER OF THIS MARRIAGE - FIRST, SECOND, ETC. (SPECIFY)		21. IF PREVIOUSLY MARRIED HOW MANY ENDED BY A. DEATH NUMBER _____ NONE <input type="checkbox"/> B. DIVORCE OR ANNULMENT NUMBER _____ NONE <input type="checkbox"/>		22. EDUCATION: INDICATE HIGHEST GRADE COMPLETED ONLY <table border="0"> <tr> <td colspan="8">ELEMENTARY</td> <td colspan="4">HIGH SCHOOL</td> <td colspan="4">COLLEGE</td> </tr> <tr> <td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td> <td>1</td><td>2</td><td>3</td><td>4</td> <td>1</td><td>2</td><td>3</td><td>4</td><td>5+</td> </tr> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td>00</td><td>01</td><td>02</td><td>03</td><td>04</td><td>05</td><td>06</td><td>07</td><td>08</td> <td>09</td><td>10</td><td>11</td><td>12</td> <td>13</td><td>14</td><td>15</td><td>16</td><td>17</td> </tr> </table>																ELEMENTARY								HIGH SCHOOL				COLLEGE				0	1	2	3	4	5	6	7	8	1	2	3	4	1	2	3	4	5+	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	00	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17
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NOTE: Social Security Numbers of the parties to the marriage are mandatory. They are required by New York State Public Health Law Section 4139 and 42 U.S.C. 666(a). They may be used for child support enforcement purposes.

SUPREME COURT : COUNTY OF _____

_____ VS. _____ **Index No.** _____

- ☐ **Submitted divorce papers insufficient. Please go to the Court Clerk's Office to review papers for corrections and bring new self-addressed stamped post card.**
- ☐ **Judgment of Divorce signed _____. You may go to the County Clerk's Office to obtain a certified copy of the judgment.**
- ☐ **Judgment of Divorce signed. Please call _____ for instructions on how to retrieve your papers for filing with the County Clerk's Office.**

Post Card - Matrimonial Action.

**Instructions: Complete, affix postage and give to Matrimonial Clerk with divorce papers.
Be sure to indicate your name and address on the reverse side of the post card.**

**CHILD SUPPORT SUMMARY FORM
SUPREME COURT**

COMPLETE FORM FOR EACH BASIC CHILD SUPPORT OBLIGATION ORDER¹

A. Court: ☐ Supreme

B. County: _____

C. Index #: _____

D. Date Action Commenced:

_____/_____/____

E. Date Judgment/Order Submitted or Signed:

_____/_____/____

F. # Of Children Subject to Child Support Order:

G. Annual Gross Income Adjusted for Maintenance:

1. Plaintiff: \$ _____ Defendant: \$ _____

H. Amount of Child Support Payment:

1. By Plaintiff: \$ _____ annually 2. By Defendant: \$ _____ annually

I. Additional Child Support:
(Circle as many as appropriate)

By Plaintiff: By Defendant:

- | | |
|----------------------|----------------------|
| 1. Medical/Med. Ins. | 1. Medical/Med. Ins. |
| 2. Child Care | 2. Child Care |
| 3. Education | 3. Education |
| 4. Other | 4. Other |

J. Did the court make a finding that the child support award varied from the Child Support Standards Act amount? (Circle one)

1. Yes 2. No

K. If answer to "J" was yes, circle court's reason(s):

1. Financial resources of parents/child.
2. Physical/emotional health of child: special needs or aptitudes.
3. Child's expected standard of living had household remained intact.
4. Tax consequences.
5. Non-monetary contribution toward care and well-being of child.
6. Educational needs of either parent.
7. Substantial differences in gross income of parents.
8. Needs of other children of non-custodial parent.
9. Extraordinary visitation expenses of non-custodial parent.
10. Other (specify):

L. Maintenance/Spousal Support: (Circle one)

1. None 2. By Plaintiff 3. By Defendant

M. Value of Maintenance/Spousal Support:

\$ _____ annually

SUPREME COURT ONLY

N. Allocation of Property:

_____ % To Plaintiff _____ % To Defendant

¹ Defined by FCA 413(2) and DRL §240(1-b)(b)(2): "Child Support" shall mean a sum to be paid pursuant to court order or decree by either or both parents or pursuant to a valid agreement between the parties for care, maintenance and education of any unemancipated child under the age of twenty-one years.

**NEW YORK STATE UNIFIED COURT SYSTEM
SUPPORT SUMMARY FORM: FAMILY & SUPREME COURT**

INSTRUCTION SHEET

Prepare one report for each proposed judgment or final order granted pursuant to Article 4 or 5 of the Family Court Act and DRL §240 and §236 B(9)(b) which includes a provision for child support (including modification of order).

SUBMIT COMPLETED FORM TO:

**Office of Court Administration
Office of Court Research
25 Beaver Street, Room 975
New York, New York 10004**

GENERAL INSTRUCTIONS: → ALL ITEMS MUST BE ANSWERED

- If a number or amount in dollars is required and the answer is none, write 0.
- If a certain item is not applicable, write NA.
- If the information is unknown or not known to the party filling out the form, write UK.
- “mm/dd/yy” means “month/day/year”.

SPECIAL INSTRUCTIONS FOR PARTICULAR ITEMS:

- G. Use gross income figures from the last complete calendar year. Include maintenance received from a party spouse as income and deduct maintenance paid to a party spouse from income, but do not include child support.
- H. If the child support award is calculated weekly, multiply it by 52 for the annual amount; if biweekly, multiply it by 26, if semi-monthly, multiply it by 24, if monthly, multiply it by 12.
- M. If the maintenance award is calculated weekly, multiply it by 52 for the annual amount; if biweekly, multiply it by 26; if semi-monthly, multiply it by 24, if monthly, multiply it by 12. If the maintenance award calls for decreasing or increasing amounts (for example, a certain amount for five years and half that amount for another three years), then provide the average of the awards (total amount for all years divided by the number of years).

NOTE: THIS INFORMATION IS CONFIDENTIAL AND WILL BE USED FOR STATISTICAL PURPOSES ONLY.
IT WILL NOT BE RETAINED IN THE CASE FILE.

**SUPPLEMENTAL
APPENDIX
OF
FORMS**

Important Notice

If you are issuing a Non-IV-D Income Withholding Order for child support or combined child and spousal support, you must serve the completed **LDSS-5037** as follows:

- **Part A:** serve only upon the NYS Child Support Processing Center (SDU), PO Box 15363, Albany, NY 12212-5363.
- **Part B:** serve upon all of the following:
 1. employer/income withholder;
 2. employee/obligor;
 3. custodial party/obligee; and
 4. NYS Child Support Processing Center (SDU)
PO Box 15363, Albany, NY 12212-5363.

Note: **DO NOT** fill out this IWO if a party is already receiving child support services or wishes to apply at this time.

Court Information

<input type="checkbox"/> Family Court: _____ County	Order ID (Index/Docket Number)
<input type="checkbox"/> Supreme Court: _____ County	

Employee/Obligor Information

Name (Last, First, Middle)		
Mailing Address		
Social Security Number - -	Date of Birth (MM/DD/YYYY) / /	

Custodial Party/Obligee Information

Name (Last, First, Middle)		
Mailing Address		
Social Security Number - -	Date of Birth (MM/DD/YYYY) / /	

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INCOME WITHHOLDING FOR SUPPORT

- ☐ INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)
☐ AMENDED IWO
☐ ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT
☐ TERMINATION OF IWO

Date: _____

☐ Child Support Enforcement (CSE) Agency ☐ Court ☐ Attorney ☐ Private Individual/Entity (Check One)

NOTE: This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions www.acf.hhs.gov/css/resource/income-withholding-for-support-instructions). If you receive this document from someone other than a state or tribal CSE agency or a court, a copy of the underlying order must be attached.

State/Tribe/Territory _____ Remittance ID (include w/payment) _____
 City/County/Dist./Tribe _____ Order ID _____
 Private Individual/Entity _____ Case ID _____

_____ RE: _____	
Employer/Income Withholder's Name _____	Employee/Obligor's Name (Last, First, Middle) _____
Employer/Income Withholder's Address _____	Employee/Obligor's Social Security Number _____
_____	Employee/Obligor's Date of Birth _____
_____	Custodial Party/Obligee's Name (Last, First, Middle) _____
Employer/Income Withholder's FEIN _____	
Child(ren)'s Name(s) (Last, First, Middle) _____	Child(ren)'s Birth Date(s) _____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

ORDER INFORMATION: This document is based on the support order from New York State. You are required by law to deduct these amounts from the employee/obligor's income until further notice.

\$ _____ Per _____ current child support
 \$ _____ Per _____ past-due child support - **Arrears greater than 12 weeks?** ☐ Yes ☐ No
 \$ _____ Per _____ current cash medical support
 \$ _____ Per _____ past-due cash medical support
 \$ _____ Per _____ current spousal support
 \$ _____ Per _____ past-due spousal support
 \$ _____ Per _____ other (must specify) _____
 for a **Total Amount to Withhold** of \$ _____ per _____.

AMOUNTS TO WITHHOLD: You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$ _____ per weekly pay period \$ _____ per semimonthly pay period (twice a month)
 \$ _____ per biweekly pay period (every two weeks) \$ _____ per monthly pay period
 \$ _____ **Lump Sum Payment:** Do not stop any existing IWO unless you receive a termination order.

Document Tracking ID _____

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
Case Identifier: _____ Order Identifier: _____

REMITTANCE INFORMATION: If the employee/obligor's principal place of employment is New York State, you must begin withholding no later than the first pay period that occurs 14 days after the date of service of this notice. Send payment within 7 business days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold ____% of disposable income for all orders. If the obligor is a non-employee, obtain withholding limits from Supplemental Information. If the employee/obligor's principal place of employment is not New York State, obtain withholding limitations, time requirements, and any allowable employer fees from the jurisdiction of the employee/obligor's principal place of employment. State-specific withholding limit information is available at www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements. For tribe-specific contacts, payment addresses, and withholding limitations, please contact the tribe at www.acf.hhs.gov/sites/default/files/programs/css/tribal_agency_contacts_printable_pdf.pdf or https://www.bia.gov/tribalmap/DataDotGovSamples/tld_map.html.

For electronic payment requirements and centralized payment collection and disbursement facility information [State Disbursement Unit (SDU)], see www.acf.hhs.gov/css/employers/employer-responsibilities/payments.

Include the Remittance ID with the payment and if necessary this locator code: _____.

Remit payment to NYS Child Support Processing Center (SDU)
at PO Box 15363, Albany, NY 12212-5363

☐ **Return to Sender [Completed by Employer/Income Withholder].** Payment must be directed to an SDU in accordance with sections 466(b)(5) and (6) of the Social Security Act or Tribal Payee (see Payments to SDU below). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you *must* check this box and return the IWO to the sender.

If Required by State or Tribal Law:
Signature of Judge/Issuing Official: _____
Print Name of Judge/Issuing Official: _____
Title of Judge/Issuing Official: _____
Date of Signature: _____

If the employee/obligor works in a state or for a tribe that is different from the state or tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

☐ If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at: www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements.

Employers/income withholders may use OCSE's Child Support Portal (<https://ocsp.acf.hhs.gov/csp/>) to provide information about employees who are eligible to receive a lump sum payment, have terminated employment, and to provide contacts, addresses, and other information about their company.

Priority: Withholding for support has priority over any other legal process under State law against the same income (section 466(b)(7) of the Social Security Act). If a federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment.

Payments To SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a court, attorney, or private individual/entity and the initial order was entered before January 1, 1994 or the order was issued by a tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
Case Identifier: _____ Order Identifier: _____

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the state (or tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to federal, state, or tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the state or tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

Lump Sum Payments: You may be required to notify a state or tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by state or tribal law/procedure, together with interest and reasonable attorney's fees. If you comply with this IWO you will not be subject to civil liability to any individual or agency for conduct in compliance with this IWO. In New York State, pursuant to Civil Practice Law and Rules (CPLR) §5241, upon a finding by the Family Court that you failed to withhold or remit withholdings as directed in this IWO, the Court shall issue an order directing your compliance and may direct the payment of a civil penalty not to exceed \$500 for the first instance and \$1,000 per instance for the second and subsequent instances of noncompliance.

Anti-discrimination: You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO. In New York State, pursuant to CPLR §5252, the court may direct a civil penalty not to exceed \$500 for the first instance and \$1,000 per instance for the second and subsequent instances of such discrimination, including laying off or refusing to promote an employee/obligor. Such discrimination may also be punishable as a contempt of court by fine or imprisonment or both.

Withholding Limits: You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) [15 USC §1673(b)]; or 2) the amounts allowed by the law of the state of the employee/obligor's principal place of employment, if the place of employment is in a state; or the tribal law of the employee/obligor's principal place of employment if the place of employment is under tribal jurisdiction. Disposable income is the net income after mandatory deductions such as: state, federal, local taxes; Social Security taxes; statutory pension contributions; and Medicare taxes. The federal limit is 50% of the disposable income if the obligor is supporting another family and 60% of the disposable income if the obligor is not supporting another family. However, those limits increase 5% - - to 55% and 65% - - if the arrears are greater than 12 weeks. If permitted by the state or tribe, you may deduct a fee for administrative costs. The combined support amount and fee may not exceed the limit indicated in this section.

Depending upon applicable state or tribal law, you may need to consider amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

Arrears Greater Than 12 weeks? If the **Order Information** section does not indicate that the arrears are greater than 12 weeks, then the employer should calculate the CCPA limit using the lower percentage.

Supplemental Information: (1) **PART A** of this form contains sensitive information and must be served **only** upon the NYS Child Support Processing Center (SDU); **PART B**, which consists of 4 pages, must be served upon the SDU, employer/income withholder, employee/obligor, and custodial party/obligee. (2) Priority of withholding pursuant to CPLR §5241(h) is current support, followed by health insurance premiums, and then arrears payments. (3) If there are multiple IWOs against this employee/obligor, withhold the maximum amount permitted (see *Remittance Information*, above) and pay to each creditor the proportion thereof which such creditor's claim bears to the combined total. (4) Where the income of the employee or non-employee is compensation that is not paid or payable to the obligor for personal services, there is no limit to the amount you must withhold. Otherwise the noted limit applies. (5) If the employee/obligor is reinstated or reemployed within 90 days after termination, this IWO is still in effect.

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
Case Identifier: _____ Order Identifier: _____

NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS: If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, you must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the contact information below:

☐ This person has never worked for this employer nor received periodic income.

☐ This person no longer works for this employer nor receives periodic income.

Please provide the following information for the employee/obligor:

Termination date: _____ Last known telephone number: _____

Last known address: _____

Final payment date to SDU/Tribal Payee: _____ Final payment amount: _____

New employer's name: _____

New employer's address: _____

CONTACT INFORMATION:

To Employer/Income Withholder: If you have questions, contact _____ (issuer name)

by telephone: _____, by fax: _____, by e-mail or
website: _____.

Send termination/income status notice and other correspondence to: _____

_____ (issuer address).

To Employee/Obligor: If the employee/obligor has questions, contact _____ (issuer name)

by telephone: _____, by fax: _____, by e-mail or website:
_____.

IMPORTANT: The person completing this form is advised that the information may be shared with the employee/obligor.

Encryption Requirements:

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to emails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

The Paperwork Reduction Act of 1995

This information collection and associated responses are conducted in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. This form is designed to provide uniformity and standardization. Public reporting for this collection of information is estimated to average two to five minutes per response. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Important Notice

If you are issuing a Spousal Support Only Income Withholding Order, you must serve the completed **LDSS-5038** as follows:

- **Part A:** serve **only** upon the employer/income withholder.
- **Part B:** serve upon **all** of the following:
 1. employer/income withholder;
 2. employee/obligor; and
 3. obligee.

Court Information

<input type="checkbox"/> Family Court: _____ County	Order ID (Index/Docket Number)
<input type="checkbox"/> Supreme Court: _____ County	

Employee/Obligor Information

Name (Last, First, Middle)	
Social Security Number - -	Date of Birth (MM/DD/YYYY) / /

Obligee Information

Name (Last, First, Middle)
Mailing Address

Page intentionally left blank.

NOTE- Grayed out areas of this form are NOT applicable to spousal support only cases

**Part
B**

INCOME WITHHOLDING FOR SUPPORT

- ☐ **INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)**
☐ **AMENDED IWO**
☐ **ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT**
☐ **TERMINATION OF IWO**

Date: _____

☐ Child Support Enforcement (CSE) Agency
 ☐ Court
 ☐ Attorney
 ☐ Private Individual/Entity (Check One)

NOTE: This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions www.acf.hhs.gov/css/resource/income-withholding-for-support-instructions). If you receive this document from someone other than a state or tribal CSE agency or a court, a copy of the underlying order must be attached.

State/Tribe/Territory _____ Remittance ID (include w/payment) _____
 City/County/Dist./Tribe _____ Order ID _____
 Private Individual/Entity _____ Case ID _____

_____ RE: _____
 Employer/Income Withholder's Name _____ Employee/Obligor's Name (Last, First, Middle) _____
 Employer/Income Withholder's Address _____ Employee/Obligor's Social Security Number _____
 _____ Employee/Obligor's Date of Birth _____
 _____ Custodial Party/Obligee's Name (Last, First, Middle) _____
 Employer/Income Withholder's FEIN _____

Child(ren)'s Name(s) (Last, First, Middle) Child(ren)'s Birth Date(s)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

ORDER INFORMATION: This document is based on the support order from New York State. You are required by law to deduct these amounts from the employee/obligor's income until further notice.

\$ _____	Per _____	current child support	Arrears greater than 12 weeks? <input type="checkbox"/> Yes <input type="checkbox"/> No
\$ _____	Per _____	past-due child support	
\$ _____	Per _____	current cash medical support	
\$ _____	Per _____	past-due cash medical support	
\$ _____	Per _____	current spousal support	
\$ _____	Per _____	past-due spousal support	
\$ _____	Per _____	other (must specify) _____	

for a **Total Amount to Withhold** of \$ _____ per _____.

AMOUNTS TO WITHHOLD: You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$ _____ per weekly pay period \$ _____ per semimonthly pay period (twice a month)
 \$ _____ per biweekly pay period (every two weeks) \$ _____ per monthly pay period
Lump Sum Payment: Do not stop any existing IWO unless you receive a termination order.

Document Tracking ID _____

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
Case Identifier: _____ Order Identifier: _____

REMITTANCE INFORMATION: If the employee/obligor's principal place of employment is New York State, you must begin withholding no later than the first pay period that occurs 14 days after the date of service of this notice. Send payment within 7 business days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold ____% of disposable income for all orders. If the obligor is a non-employee, obtain withholding limits from Supplemental Information. If the employee/obligor's principal place of employment is not New York State, obtain withholding limitations, time requirements, and any allowable employer fees from the jurisdiction of the employee/obligor's principal place of employment. State-specific withholding limit information is available at www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements. For tribe-specific contacts, payment addresses, and withholding limitations, please contact the tribe at www.acf.hhs.gov/sites/default/files/programs/css/tribal_agency_contacts_printable_pdf.pdf or https://www.bia.gov/tribalmap/DataDotGovSamples/tld_map.html.

For electronic payment requirements and centralized payment collection and disbursement facility information [State Disbursement Unit (SDU)], see www.acf.hhs.gov/css/employers/employer-responsibilities/payments.

Include the Remittance ID, pay date and employee/obligor's name on the payment.

Make payments payable in the name of the obligee identified on PART A.

Remit payment to obligee's address identified on PART A.

☐ Return to Sender [Completed by Employer/Income Withholder]. Payment must be directed to an SDU in accordance with sections 466(b)(5) and (6) of the Social Security Act or Tribal Payee (see Payments to SDU below). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you *must* check this box and return the IWO to the sender.

If Required by State or Tribal Law:

Signature of Judge/Issuing Official: _____

Print Name of Judge/Issuing Official: _____

Title of Judge/Issuing Official: _____

Date of Signature: _____

If the employee/obligor works in a state or for a tribe that is different from the state or tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

☐ If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at: www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements

Employers/income withholders may use OCSE's Child Support Portal (<https://ocsp.acf.hhs.gov/csp/>) to provide information about employees who are eligible to receive a lump sum payment, have terminated employment, and to provide contacts, addresses, and other information about their company.

Priority: Withholding for support has priority over any other legal process under State law against the same income (section 466(b)(7) of the Social Security Act. If a federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment.

Payments To SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a court, attorney, or private individual/entity and the initial order was entered before January 1, 1994 or the order was issued by a tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
Case Identifier: _____ Order Identifier: _____

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the state (or tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to federal, state, or tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the state or tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

Lump Sum Payments: You may be required to notify a state or tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by state or tribal law/procedure, together with interest and reasonable attorney's fees. If you comply with this IWO you will not be subject to civil liability to any individual or agency for conduct in compliance with this IWO. In New York State, pursuant to Civil Practice Law and Rules (CPLR) §5241, upon a finding by the Family Court that you failed to withhold or remit withholdings as directed in this IWO, the Court shall issue an order directing your compliance and may direct the payment of a civil penalty not to exceed \$500 for the first instance and \$1,000 per instance for the second and subsequent instances of noncompliance.

Anti-discrimination: You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO. In New York State, pursuant to CPLR §5252, the court may direct a civil penalty not to exceed \$500 for the first instance and \$1,000 per instance for the second and subsequent instances of such discrimination, including laying off or refusing to promote an employee/obligor. Such discrimination may also be punishable as a contempt of court by fine or imprisonment or both.

Withholding Limits: You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) [15 USC §1673(b)]; or 2) the amounts allowed by the law of the state of the employee/obligor's principal place of employment if the place of employment is in a state; or the tribal law of the employee/obligor's principal place of employment if the place of employment is under tribal jurisdiction. Disposable income is the net income after mandatory deductions such as: state, federal, local taxes; Social Security taxes; statutory pension contributions; and Medicare taxes. The federal limit is 50% of the disposable income if the obligor is supporting another family and 60% of the disposable income if the obligor is not supporting another family. However, those limits increase 5% - - to 55% and 65% - - if the arrears are greater than 12 weeks. If permitted by the state or tribe, you may deduct a fee for administrative costs. The combined support amount and fee may not exceed the limit indicated in this section.

Depending upon applicable state or tribal law, you may need to consider amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

Arrears Greater Than 12 Weeks? If the **Order Information** section does not indicate that the arrears are greater than 12 weeks, then the employer should calculate the CCPA limit using the lower percentage.

Supplemental Information: (1) **PART A** of this form contains sensitive information and must be served **only** upon the employer/income withholder for purposes of processing the income withholding; **PART B**, which consists of 4 pages, must be served upon the employer/income withholder, employee/obligor, and obligee. (2) Priority of withholding pursuant to CPLR §5241(h) is current support, followed by health insurance premiums, and then arrears payments. (3) If there are multiple IWOs against this employee/obligor, withhold the maximum amount permitted (see *Remittance Information*, above) and pay to each creditor the proportion thereof which such creditor's claim bears to the combined total. (4) Where the income of the employee or non-employee is compensation that is not paid or payable to the obligor for personal services, there is no limit to the amount you must withhold. Otherwise the noted limit applies. (5) If the employee/obligor is reinstated or reemployed within 90 days after termination, this IWO is still in effect.

Employer's Name: _____ Employer FEIN: _____
Employee/Obligor's Name: _____ SSN: _____
Case Identifier: _____ Order Identifier: _____

NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS: If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, you must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the contact information below:

☐ This person has never worked for this employer nor received periodic income.

☐ This person no longer works for this employer nor receives periodic income.

Please provide the following information for the employee/obligor:

Termination date: _____ Last known telephone number: _____

Last known address: _____

Final payment date to Obligor / Tribal Payee: _____ Final payment amount: _____

New employer's name: _____

New employer's address: _____

CONTACT INFORMATION:

To Employer/Income Withholder: If you have questions, contact _____ (issuer name)

by telephone: _____, by fax: _____, by e-mail or website: _____.

Send termination/income status notice and other correspondence to: _____

_____ (issuer address).

To Employee/Obligor: If the employee/obligor has questions, contact _____ (issuer name)

by telephone: _____, by fax: _____, by e-mail or website: _____.

Encryption Requirements:

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to emails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

The Paperwork Reduction Act of 1995

This information collection and associated responses are conducted in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. This form is designed to provide uniformity and standardization. Public reporting for this collection of information is estimated to average two to five minutes per response. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

New York State Case Registry Filing Form *

For Use With Child Support Orders and Combined Child and Spousal Support Orders Payable To Other Than A Child Support Collection Unit*

*Domestic Relations Law § 240(5) and Family Court Act § 440(5) direct that such orders be promptly provided to the State Case Registry. The Office of Temporary and Disability Assistance has indicated that the information sought on this form satisfies the requirement to maintain a record of the order pursuant to Social Services Law § 111-b(4-a)(2) and no order is to be filed unless specifically requested.

Note: Full Social Security Numbers are required on this form. Redaction is not allowed.

Name of Court: _____

County Name: _____

Index Number: _____

Child Support Payor: _____

(first) (last) (middle initial)

Social Security #: _____

(Payor)

Date of Birth: _____

(Payor)

Child Support Payee: _____

(first) (last) (middle initial)

Social Security #: _____

(Payee)

Date of Birth: _____

(Payee)

Child #1 Name: _____

(first) (last) (middle initial)

Social Security #: _____

(Child #1)

Date of Birth: _____

(Child #1)

Child #2 Name: _____

(first) (last) (middle initial)

Social Security #: _____

(Child #2)

Date of Birth: _____

(Child #2)

Child #3 Name: _____

(first) (last) (middle initial)

Social Security #: _____

(Child #3)

Date of Birth: _____

(Child #3)

(If more children, please use additional form.)

The order expires on: ☐ the youngest child's 21st birthday, OR _____ / _____ / _____ (MM/DD/YYYY)

FAMILY VIOLENCE INQUIRY

Has a Temporary or Final Order of Protection been granted on behalf of either party?

If yes, which party: ☐ Payor ☐ Payee

☐ Yes ☐ No ☐ Do not know

Has a request for confidentiality of address been granted on behalf of either party?

If yes, which party: ☐ Payor ☐ Payee

☐ Yes ☐ No

INSTRUCTIONS FOR COMPLETING THE NEW YORK STATE CASE REGISTRY FILING FORM

Field	Instruction
Name of Court	Enter either "Supreme Court" or "Family Court."
County Name	Enter the name of the County entering the support order.
Index/Docket Number	Enter the Index Number (Supreme Court) or Docket Number (Family Court).
Child Support Payor	Enter, at a minimum, the first and last name of the child support payor. If there is more than one child support payor, please use a separate form to record the information for the additional child support payor.
Social Security Number (Payor)	Enter the full Social Security number of the child support payor. Enter "None" if the court record indicates that the individual has not been issued a Social Security number. Enter "Not on Record" if the Social Security number is not in the court record. Redaction is not allowed. An entry of "N/A," "not available," or "not applicable" is not allowed.
Date of Birth (Payor)	Enter the date of birth of the child support payor in the format MM/DD/YYYY.
Child Support Payee	Enter, at a minimum, the first and last name of the child support payee. An entry of "guardian" or other title is not allowed. If there is more than one child support payee, please use a separate form to record the information for the additional child support payee.
Social Security Number (Payee)	Enter the full Social Security number of the child support payee. Enter "None" if the court record indicates that the individual has not been issued a Social Security number. Enter "Not on Record" if the Social Security number is not in the court record. Redaction is not allowed. An entry of "N/A," "not available," or "not applicable" is not allowed.
Date of Birth (Payee)	Enter the date of birth of the child support payee in the format MM/DD/YYYY.
Child Name	Enter, at a minimum, the first and last name of each child covered by the order. If more than three (3) children are covered by the order, please use a separate form to record the information for the additional children.
Social Security Number (Child)	Enter the full Social Security number of each child covered by the order. Enter "None" if the court record indicates that the individual has not been issued a Social Security number. Enter "Not on Record" if the Social Security number is not in the court record. Redaction is not allowed. An entry of "N/A," "not available," or "not applicable" is not allowed.
Date of Birth (Child)	Enter the date of birth of each child covered by the order in the format MM/DD/YYYY.
Order Expiration	Provide the expiration date for the child support order. You may either check the first box to indicate that the order expires on the youngest child's 21 st birthday, or you may check the second box and provide any alternative date provided for under the terms of the support order. Provide the expiration date in the format MM/DD/YYYY.
Family Violence Inquiry	Check the appropriate box to indicate whether a Temporary or Final Order of Protection has been granted on behalf of either party to the order. If "yes" is selected, check the appropriate box to indicate which party has been granted the Order of Protection.
	Check the appropriate box to indicate whether a request for confidentiality of address has been granted on behalf of either party. If "yes" is selected, check the appropriate box to indicate the party on whose behalf the confidentiality authorization was made.

1

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

2

3

Plaintiff,

Index No. _____

-against-

4

**NOTICE OF
SETTLEMENT**

Defendant.

5

PLEASE TAKE NOTICE that the annexed ☐ *Proposed Judgment of Divorce*,
OR ☐ *Qualified Medical Child Support Order*, **OR** ☐ *Order*: _____

6

of which the within is a true copy, will be presented for signature to the Supreme Court
Clerk's Office, at _____, on
_____.

7

Dated: _____

Yours, etc.

8

☐ *Plaintiff*; ☐ *Attorney(s) for Plaintiff*
☐ *Defendant*; ☐ *Attorney(s) for Defendant*
Address: _____

Tel No. _____

9

TO: _____
☐ *Plaintiff*; ☐ *Attorney(s) for Plaintiff*
☐ *Defendant*; ☐ *Attorney(s) for Defendant*
Address: _____

Tel No. _____

At the Supreme Court of the State of
New York, held in and for the County
of _____ at the County
Courthouse at _____, New
York, on the ____ day of _____

PRESENT: HON. _____
Justice of the Supreme Court

In the Matter of the Application of

Index No.: _____

_____,
Plaintiff,
For Permission to Prosecute an Action as a Poor Person
-against-

POOR PERSON ORDER

_____,
Defendant.
-----X

Upon the annexed affidavit of _____,

And it being alleged that said Plaintiff _____ has a good cause of
action or claim based upon **DRL § 170 subd. ____ - _____, and that
he/she is unable to pay the costs, fees and expenses to prosecute this action, and that there is no other
person beneficially interested in the action, thereof

NOW on motion of _____, Plaintiff, it is hereby

ORDERED that _____ is permitted to prosecute this action as a poor
person against _____ and it is further

ORDERED that any recovery by Judgment or Settlement in favor of Plaintiff shall be paid to
the Clerk of the Court to await distribution pursuant to court order, and it is further

ORDERED that the Clerk of this Court is directed to make no charge for costs or fees in
connection with the prosecution of this action, including one (1) certified copy of the judgment.

ENTER:

J.S.C.

**Insert the grounds for the divorce:

DRL §170(1) - cruel and inhuman treatment
DRL §170(2) - abandonment
DRL §170(3) - confinement in prison

DRL §170(4) - adultery
DRL §170(5) - living apart one year after separation decree or judgment of separation
DRL §170(6) - living apart one year after execution of a separation agreement
DRL §170(7) - irretrievable breakdown in relationship

SUPREME COURT OF THE STATE OF NEW YORK

COUNTY OF _____

-----X

In the Matter of the Application of

_____,

Plaintiff.

For Permission to Prosecute as a Poor Person

- against -

_____,

Defendant.

-----X

STATE OF NEW YORK }

ss:

COUNTY OF _____ }

_____, being duly sworn, says:

1. I reside at _____ in the City, Town or Village of _____, County of _____, State of New York, and I have resided in the State of New York for the past _____ years.

2. I am about to commence a lawsuit for divorce. This lawsuit is based upon **DRL §170 _____ - _____.

3. My sole source of income is: _____

I earn \$_____ per _____.

4. My property and its value are as follows:

5. I make this application pursuant to Section 1101 of the Civil Practice Law and Rules upon the ground that I am unable to pay costs, fees and expenses necessary to pursue my case and am unable to obtain the funds to do so, and unless an order is entered relieving me from the obligation to pay, I will be unable to prosecute my case.

Index No.: _____

**AFFIDAVIT IN SUPPORT OF
APPLICATION TO PROCEED
AS A POOR PERSON**

- 12 6. No other person is beneficially interested in the recovery sought herein.
- 13 7. No previous application for the same or similar relief has been made by me in this case except: _____
- _____ .

WHEREFORE, I respectfully ask for an order permitting me to prosecute an action as a poor person.

The foregoing statements have been carefully read by the undersigned who states that they are true and correct.

14 _____
Plaintiff

Subscribed and sworn to
before me on

NOTARY PUBLIC

**Insert the grounds for the divorce:

DRL §170(1) - cruel and inhuman treatment
DRL §170(2) - abandonment
DRL §170(3) - confinement in prison

DRL §170(4) - adultery
DRL §170(5) - living apart one year after separation decree or judgment of separation
DRL §170(6) - living apart one year after execution of a separation agreement
DRL §170(7) - irretrievable breakdown in relationship

STATE OF NEW YORK SUPREME COURT
COUNTY OF _____

Plaintiff,
- against -

Defendant.

STATE OF NEW YORK)

COUNTY OF _____)

SS.:

_____, residing at _____, being sworn,
says, I am not a party to the action, and am over 18 years of age.

On _____, I served a copy of the ☐ Summons with Notice or the ☐ Summons and Verified Complaint, and the Affidavit In Support Of Application To Proceed as a Poor Person , income verification and proposed Poor Person Order upon Defendant at the address designated by Defendant and upon:

(check which box applies):

☐ The (insert name of County) _____ County Attorney

OR

☐ The Corporation Counsel of the City of New York

by depositing a true copy thereof enclosed in a post-paid wrapper, in an official depository under the exclusive care and custody of the U.S. Postal Service within New York State, addressed to :

Server's

Dated: _____

Signature: _____

Print Name: _____

SWORN to before me on this

_____ day of _____, 20_____.

NOTARY PUBLIC

Eff. 1/25/16

Index No.

RJI No.:

,
**AFFIDAVIT OF SERVICE OF
PROPOSED POOR PERSON'S
ORDER**

**ADDENDUM TO STIPULATION OF SETTLEMENT/AGREEMENT
RE: COMPLIANCE WITH DOMESTIC RELATIONS LAW 255(2)**

_____ Vs _____ Index #: _____

Each party is aware that he or she will no longer be covered by the other party's health insurance plan and that each party shall be responsible for his or her own health insurance coverage, and may be entitled to purchase health insurance on his or her own through a COBRA option, if available.

Dated: _____, 20____

Plaintiff's Signature

Print Name

SS: STATE OF _____, COUNTY OF _____

On this _____ day of _____ 20____, before me; the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

NOTARY PUBLIC

Dated: _____, 20____

Defendant's Signature

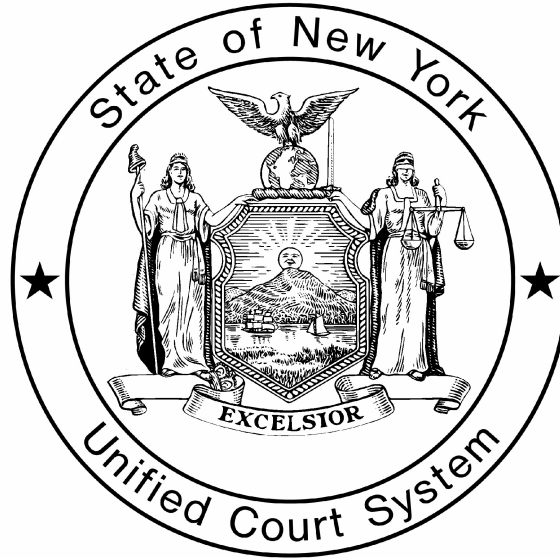
Print Name

SS: STATE OF _____, COUNTY OF _____

On this _____ day of _____ 20____, before me; the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

NOTARY PUBLIC

***NEW YORK STATE
UNIFIED COURT SYSTEM***



***UNIFORM
UNCONTESTED DIVORCE PACKET
FILING INSTRUCTIONS
& GLOSSARY***

REVISED 9/30/18

INTRODUCTION TO UNCONTESTED DIVORCE INSTRUCTIONS (Rev. 9/30/18)

WHAT YOU NEED TO KNOW BEFORE STARTING YOUR DIVORCE ACTION

Important Note Before you Begin

If you want to stay out of court and you have parenting or economic issues to work out with your spouse, in appropriate cases where there is no domestic violence or abuse, you may want to consider divorce mediation or collaborative law. These processes can improve communication and reduce the cost, stress, and trauma of divorce.

Visit www.nycourts.gov/adr for more information.

This section will outline:

- The “basics”: the important things you will need to know before starting your divorce action. (See pages 1-5)
- The schedule of filing fees for an uncontested divorce. (See page 5)
- The documents and papers needed to obtain an uncontested divorce. (See page 6)
- The instructions for starting the action. (See pages 7-11)
- The instructions for filing the action with the court and placing the case on the court’s calendar. (See pages 10-12)

THE BASICS

There are two requirements that must be met before you can file for a divorce in New York State:

1. You must satisfy the residency requirements as set forth in Domestic Relations Law Section 230. The Domestic Relations Law is the law that governs divorces in New York State.

AND

2. You must satisfy one of the grounds for divorce set forth in Domestic Relations Law Section 170. Note that New York State law was amended effective October 12, 2010 to add a seventh ground for divorce commonly known as “no-fault divorce.” See Grounds For Divorce on the next page.

RESIDENCY

To file for a divorce in New York you must satisfy **one** of the following residency requirements:

1. You or your spouse must have been living in New York State for a continuous period of at least two years immediately before the date you start your divorce action; **OR**
2. You or your spouse must have been living in New York State on the date you start your divorce action and for a continuous period of at least one year immediately before the date you start the divorce action, **and at least one of the following must also be true:**
 - a) Your marriage ceremony was performed in New York State; **OR**
 - b) You lived in New York State with your spouse as married persons; **OR**
3. You or your spouse must have been living in New York State for a continuous period of at least one year immediately before the date you start your divorce action and your grounds for divorce must have happened in New York State. (“Grounds” means a legal reason for the divorce); **OR**
4. You and your spouse must be residents of New York State (no matter how long) on the date you start your divorce action, and your grounds for divorce must have happened in New York State. (“Grounds” means a legal reason for the divorce).

DEFINITION OF PLAINTIFF AND DEFENDANT

Where you are the person seeking the divorce, you are the Plaintiff and your spouse is called the Defendant.

GROUND FOR DIVORCE

In order to file for a divorce in New York State you must have a ground (a legally acceptable reason) for the granting of a divorce by the New York courts. The seven legally acceptable reasons, or grounds for divorce, in New York are described in Domestic Relations Law §170. Listed with the most recently enacted no-fault divorce ground first and then following the order listed in the Domestic Relations Law, they are:

DRL §170 (7) irretrievable breakdown in relationship for a period at least six months (commonly known as “no-fault divorce”);

DRL §170 (1) cruel and inhuman treatment;

DRL §170 (2) abandonment;

DRL §170 (3) imprisonment;

DRL §170 (4) adultery;

DRL §170 (5) living separate and apart pursuant to a separation judgment or decree;

DRL §170 (6) living separate and apart pursuant to a separation agreement

**THE NEWEST GROUND: COMMONLY CALLED “NO-FAULT DIVORCE”
IRRETRIEVABLE BREAKDOWN IN RELATIONSHIP DRL §170 (7)**

- To get a divorce on this ground, your relationship with the Defendant must have broken down irretrievably (so that it is impossible to repair or reconcile) for a period of at least six months.
- **This type of divorce is not automatic even though it is commonly called “no-fault divorce.” The court will not grant you a divorce based on this ground unless and until:**
 - a) one of the parties has sworn under oath that the relationship has broken down irretrievably for a period of at least six months; **AND**
 - b) you and your spouse have either resolved all the economic issues of distribution of property, maintenance, child support, and counsel and/or experts fees and expenses, and the custody and visitation with the minor children of the marriage **OR** these issues have been decided by the court and incorporated into the final judgment of divorce.

THE OTHER GROUNDS LISTED IN THE DOMESTIC RELATIONS LAW

CRUEL AND INHUMAN TREATMENT DRL §170 (1)

- The treatment of the Plaintiff by the Defendant must rise to the level that the physical or mental well being of the Plaintiff is endangered and making it unsafe or improper for the Plaintiff to continue living with the Defendant.
- You cannot obtain a divorce on this ground simply because you have arguments or because of an isolated act in an otherwise long and peaceful marriage.
- If all or some of the acts occurred more than five years ago and your spouse opposes the divorce, your case may be dismissed.
- In describing the specific acts of cruelty, you must be clear and to the point. You must supply the court with details like dates and places. If you do not remember the exact date, use the words "on or about".
- After describing the acts of cruelty you should conclude with the following language: "The conduct of the Defendant was cruel and inhuman and so endangered the physical or mental well being of the Plaintiff as to render it unsafe or improper for the Plaintiff to cohabit with the Defendant.

ABANDONMENT DRL §170 (2)

- An action for divorce may be maintained where the Defendant abandons the Plaintiff for a period of one year or longer prior to commencing the action and continuing to the present.
- Abandonment may take the form of your spouse physically departing your marital home without any intention of returning for a period of one year or longer prior to commencing the action, and continuing to the present, without any good reason for doing so and without your consent.
- Another form of abandonment is called constructive abandonment, which involves one spouse's refusal to engage in sexual relations with the other spouse continuously for one year or longer prior to commencing the action, and continuing to the present, without consent, good cause or justification and despite your repeated requests.
- Another form of abandonment is called a lock out, which involves one spouse's refusal to allow the other spouse into the home continuously for more than one year prior to commencing the action and continuing to the present.

IMPRISONMENT DRL §170 (3)

- An action for divorce may be maintained by Plaintiff only where the Defendant is imprisoned for a period of at least three consecutive years. The imprisonment must have commenced after the date of the marriage. If your spouse was released more than five years ago and your spouse opposes the divorce, your case may be dismissed.

ADULTERY DRL §170 (4)

- An action for divorce may be maintained based on adultery, which is an act of sexual or deviate sexual intercourse voluntarily performed by the Defendant with a person other than his or her spouse during the course of the marriage.
- The ground of adultery can be difficult and expensive to prove because the testimony of the Plaintiff is not enough and other evidentiary requirements must be satisfied (the Defendant's admission is not enough). A corroborating affidavit of a 3rd party witness or other proof should be attached to the papers you submit to the court. You should keep in mind that acts of adultery may qualify as acts of cruelty and entitle you to maintain a divorce action on the grounds of cruel and inhuman treatment.
- Note: if you found out about the adultery more than five years ago and your spouse opposes the divorce, your case may be dismissed.
-

CONVERSION OF A JUDGMENT OF SEPARATION DRL §170 (5)

- This ground is not used often. It involves a judgment of separation of the Supreme Court.
- To maintain a divorce action the parties are required to live separate and apart. They must satisfy the terms of the judgment of separation for more than one year after the judgment was granted.

CONVERSION OF A WRITTEN SEPARATION AGREEMENT DRL §170 (6)

- A separation agreement is an agreement between the spouses that sets forth the terms and conditions by which the parties will live apart. The agreement must be signed by the parties before a notary and filed with the County Clerk in the county where one of the parties resides.
- If you and your spouse have lived apart for more than one year according to the terms and conditions of a properly executed separation agreement, you may maintain an action for divorce. It may be advisable to consult an attorney regarding this ground for divorce.

After you have determined that you have met the requirements for residency and grounds for divorce, you may use the forms in this packet to file for a divorce. The instructions in this packet will help you in completing these forms, starting your action and satisfying the other requirements for obtaining a divorce.

SCHEDULE OF FILING FEES

- Index Number - \$ 210.
- Note of Issue - \$ 125 or \$ 30.
- Request for Judicial Intervention - \$ 95 or no fee.
- **Note: \$125 is the total fee for the Note of Issue plus the Request for Judicial Intervention. Please check with your county.**
- Certificate of Dissolution - Check with your local County Clerk's Office
- Certified Copy of Judgment - Approx. \$ 4. - \$ 10.

Check with the County Clerk's Office regarding acceptable forms of payment.

POOR PERSON STATUS

Where an individual lacks the financial resources to pay the costs associated with a divorce action, an application may be made to have these fees waived or forgiven by the court. The Supplemental Appendix of Forms in this booklet (beginning at page 35) contains instructions on how to complete the forms that are required to apply to have the fees waived.

THE PAPERS NEEDED TO OBTAIN AN UNCONTESTED DIVORCE IN NEW YORK STATE:

Notice of Automatic Orders

Notice of Guideline Maintenance for actions commenced on or after 1/25/16

Notice Concerning Continuation of Health Care Coverage

1) Summons With Notice (Form UD-1) OR 1a) Summons (to be served with Verified Complaint) (Form UD-1a)

2) Verified Complaint (Form UD-2)

3) Affidavit of Service (Form UD-3)

4) Sworn Statement of Removal of Barriers to Remarriage (Form UD-4) and Affidavit of Service (Form UD-4a)

5) Affirmation (Affidavit) of Regularity (Form UD-5)

6) Affidavit of Plaintiff (Form UD-6)

7) Affidavit of Defendant (Form UD-7)

8(1) Annual Income Worksheet (Form UD-8(1))

8(2) Maintenance Guidelines Worksheet (Form UD-8(2)) for divorces commenced on or after 1/25/16

8(3)) Child Support Worksheet (Form UD-8-(3))

8a) Support Collection Unit Information Sheet (Form UD-8a)

8b) Qualified Medical Child Support Order ("QMCSO") (Form UD-8b)

9) Note of Issue (Form UD-9)

10) Findings of Fact/Conclusions of Law (Form UD-10)

11) Judgment of Divorce (Form UD-11)

12) Part 130 Certification (Form UD-12)

13) Request for Judicial Intervention ("RJI") (Form UD-13) and Addendum (Form 840M)

14) Notice of Entry (Form UD-14)

15) Affidavit of Service of Judgment of Divorce

Certificate of Dissolution of Marriage

Self-Addressed and Stamped Postcard

UCS-111 (UCS Divorce and Child Support Summary Form)

SUPPLEMENTAL APPENDIX OF FORMS

A. Income Withholding Order and Applying for Child Support Services

A-1 Application for Child Support Services*

A-2 Income Withholding Order form for Child Support and Combined Child and Spousal Support - LDSS-5037 (Non-IV-D IWO)

A-2A Income Withholding Order Form for Spousal Support only - LDSS-5038 (Spousal Support Only IWO)

(Important Note: LDSS-5037 and LDSS-5038 are the actual Forms)

A-2B Income Withholding for Support: General Information and Instructions for Issuing - LDSS-5039*

(Important Note: Do not complete this form. Use it as a guide when filling out the actual Forms.)

B. New York State Case Registry Filing Form with Instructions attached

C. Notice of Settlement

D. Poor Person Order

E. Affidavit in Support of Application to Proceed as a Poor Person

F. Affidavit of Service of Proposed Poor Person's Order

G. DRL 255 Addendum

***available at http://www.nycourts.gov/divorce/divorce_withchildrenunder21.shtml**

The instructions for completing each individual form begin at page 14 and go through the end of this Packet

A COPY OF EACH COMPLETED FORM SHOULD BE RETAINED FOR YOUR RECORDS.

STARTING THE DIVORCE ACTION:

1. This packet should be filled out either by typing or printing the information. Printing should be legible and in BLACK ink only.
2. If you need additional space on any form, you may use an addendum sheet. Be sure to note on the particular form that an additional sheet is being attached to that form.
3. Attach to your papers any court orders regarding this marriage and child support/custody/visitation. *All unemancipated children of the marriage* are entitled to receive child support. The court must decide custody and visitation of all *minor children of the marriage*. Whenever these instructions and forms refer to:
 - (i) “*children of the marriage*,” they include all children under the age of twenty one born to or adopted by the parties before or during the marriage.
 - (ii) “*unemancipated children*,” they include *all children of the marriage under the age of twenty one* born to or adopted by the parties before or during the marriage and entitled to child support. Upon sufficient proof, a court might consider a child under the age of twenty one “*emancipated*” and therefore not entitled to support if the child marries, enters the military, or is at least eighteen years old and is self-supporting. It is up to the court to decide whether the child is emancipated.
 - (iii) “*minor children of the marriage*,” they include all children under the age of eighteen born to or adopted by the parties before or during the marriage.
4. Please refer to the attached **glossary**, which defines many of the other terms and phrases used in this packet.

IF YOU ARE CONCERNED ABOUT DOMESTIC VIOLENCE AND WISH TO KEEP YOUR ADDRESS CONFIDENTIAL, PLEASE CHECK WITH THE SUPREME COURT CLERK’S OFFICE FOR INSTRUCTIONS ON HOW TO OBTAIN CONFIDENTIALITY. IF CONFIDENTIALITY IS GRANTED BY THE COURT, YOU SHOULD NOT FILL OUT YOUR ADDRESS OR OTHER PRIVATE INFORMATION ON ANY OF THESE FORMS.

FOLLOW STEPS 1-7 TO START THE DIVORCE ACTION

- STEP 1:** Prepare an **original** and **two copies** of the **Summons With Notice (Form UD-1)** or the **Summons and Verified Complaint (Form UD-1a and Form UD-2)**.
- STEP 2:** Purchase an **index number** at the County Clerk's Office and file the original of the Summons With Notice or the original of the Summons and Verified Complaint with the County Clerk. Unless you are granted a poor person's waiver, you will be required to pay \$210 for the index number. Check with the County Clerk regarding acceptable forms of payment. Many County Clerks also will require that you fill out an Index Number Application Form at the time of filing, so be sure to bring with you the names, addresses and telephone numbers of all of the attorneys or, if unrepresented, of the parties themselves.
- STEP 3:** Put the **index number** and the **date of the filing** on the two copies of the Summons With Notice (or the Summons and Verified Complaint) if this is not done by a clerk upon filing the papers.
- STEP 4:** Where the Defendant agrees to the divorce, he or she will need to sign the **Affidavit of Defendant (Form UD-7)**. This may be done by submitting the form to the Defendant together with the Summons With Notice or Summons and Verified Complaint and Notice of Automatic Orders and Notice of Guideline Maintenance, if the divorce was commenced on or after 1/25/16. The Plaintiff should send the form to the Defendant with a copy of the instructions on how to fill it out. The Defendant must send the completed form back to the Plaintiff prior to having the case placed on the calendar so that the form can be filed with the other forms. If the Defendant does not return the signed form to Plaintiff, follow STEP 5 below.
- STEP 5:** Have the Defendant served with one copy of the Summons With Notice or Summons and Verified Complaint, and the Notice of Automatic Orders, the Notice of Guideline Maintenance,, if the divorce was commenced on or after 1/25/16, and the Notice Concerning Continuation of Health Care Coverage, by being **personally handed the papers**. **NOTE:** The Maintenance Guidelines apply only to divorces commenced on or after 1/25/16, and therefore you should not serve the Notice of Guideline Maintenance with the Summons if your divorce was commenced before 1/25/16. **“Maintenance” means support paid by one party to the marriage (“spouse”) for the support of the other party pursuant to a final Judgment of Divorce.**
- **If your spouse lives in New York State:** The server must be a resident of New York State, over eighteen years of age, and cannot be a party to the action (this means you may not serve your spouse with the Summons).

- **If your spouse is presently residing outside of New York State:** You must still ensure that he or she is personally served with the summons. If you use a non-New York State resident to serve your spouse outside of New York State, the server must be a person authorized to make service pursuant to the laws of that jurisdiction or a duly qualified attorney in that jurisdiction, and you must submit a copy of the authorization that allows that person to serve the summons. You are encouraged to check with the local sheriff and, if necessary, with a country's Consulate or Embassy as to any local requirements for service.

Service upon the Defendant of the Summons With Notice or Summons and Verified Complaint and Notice of Automatic Orders must be made within 120 days of their filing with the County Clerk's Office. If you do not know where the Defendant is located, you may wish to delay filing the Summons With Notice or Summons and Verified Complaint until he or she is located, so that the 120-day period does not begin running while you search for your spouse.

IMPORTANT: The Notice of Guideline Maintenance must also be served with the Summons With Notice or Summons and Verified Complaint *BUT ONLY* if Your Action Was Commenced on or after January 25, 2016.

IMPORTANT: If there are children of the marriage under the age of 21 (see the definition on page 7), you must also serve a copy of the Child Support Standards Chart on the Defendant. The Chart is available at:

https://newyorkchildsupport.com/quick_links.html

STEP 6: If you had to follow STEP 5 above because the Defendant *would not agree* to complete and return the Affidavit of Defendant, the person that served the Defendant must prepare an "**Affidavit of Service**" (**Form UD-3**), which attests to the service of the Summons With Notice or Summons and Verified Complaint, Notice of Automatic Orders, Notice of Guideline Maintenance if the divorce was commenced on or after 1/25/16, and any other documents served. This affidavit must be submitted along with the full set of divorce papers when you place your case on the court's calendar. There is a 40-day waiting period from date of service to place the matter on the court's calendar. If the Defendant does not sign Form UD-7 to waive the 40 day period, you must wait the full 40 days.

STEP 7: If the parties were married in a civil ceremony or if the Defendant signs the Affidavit of Defendant (Form UD-7), SKIP THIS STEP. If the parties were married in a religious ceremony, the Defendant must be served with a copy of the **Sworn Statement of Removal of Barriers to Remarriage (Form UD-4)**. The Plaintiff must fill out the original and make a copy of the form. The copy then must be served on the Defendant either by personal service along with the Summons With Notice or the Summons and Verified Complaint, or by mail. If you serve the form by mail, it must be done prior to your placing your action on the court's calendar, because you will need to file the original form with the other required forms. Service by mail must be done by someone other than the Plaintiff who is over the age of 18 and not a party to the action. When you file this form, you must attach to the form the **Affidavit of Service (Form UD-4a)**.

If the Defendant appears and does not consent to this action:

* Then your matter **is no longer an uncontested matrimonial** and you will be unable to obtain an uncontested divorce. You may want to consult an attorney at that point.

STEPS FOR PLACING YOUR DIVORCE CASE ON THE COURT CALENDAR

After you have completed Steps 1-7, you are ready to place your case on the court's calendar. If the Defendant consents to the action by signing the Affidavit of Defendant (Form UD-7), you may place your case on the court's calendar immediately. Otherwise, you will have to wait until 40 days after the date of the service of the summons.

You must complete the following steps to place your case on the calendar:

STEP 8: You must complete **Forms UD-3 through UD-12** (include UD-7 only if signed by the Defendant). Form UD-3 (Affidavit of Service) and Form UD-4 (Sworn Statement of Removal of Barriers to Remarriage) need not be completed, or filed, if the Defendant has signed Form UD-7 (Affidavit of Defendant) and checked Box 6b on the form, Form UD-8(3) Child Support Worksheet, Form UD-8a (Support Collection Unit Information Sheet) and Form UD-8b (Qualified Medical Child Support Order) need not be completed, or filed, if there are no unemancipated children of the marriage (see the definition on page 7). Form UD-8(2) (Maintenance Guidelines Worksheet) need not be completed or filed if neither party seeks maintenance as payee under the Maintenance Guidelines Law. Form UD-8(1) (Annual Income Worksheet) is not required if neither party seeks maintenance or child support.

STEP 9: You also must complete the **Request for Judicial Intervention (Form UD-13)** and, if there are children under the age of 18 who are subject to the matrimonial action, the **Addendum Form 840M**.

STEP 10: You also must complete the **Certificate of Dissolution of Marriage**, the **postcard**, and, where applicable, the **UCS 111 (Divorce and Child Support Summary Form)**. If a party is requesting child support payable to a person or entity other than a child support collection unit, the party must complete, as well, the New York State Case Registry Form.

STEP 11: You must file the completed forms, including a copy of the Summons With Notice or the Summons and Verified Complaint, with the County Clerk's Office. Include three (3) copies of the **Note of Issue (Form UD-9)**.

STEP 12: Unless you are granted a poor person's waiver, you must pay a filing fee for filing the Note of Issue (Form UD-9) and the Request for Judicial Intervention (Form UD-13). See page 5 for the schedule of filing fees.

All of the papers filed with the County Clerk's Office will be submitted to the judge. If the papers are approved, the judge will sign the Judgment of Divorce (Form UD-11).

If you are asking for maintenance, custody, visitation, or distribution of property, the court may require a hearing, even if there is a prior court order or a prior agreement between you and your spouse. If there is no prior court order or agreement, you and your spouse can try to settle these issues by signing a written agreement, but any agreement with your spouse is subject to judicial approval prior to the court issuing a Judgment or an order incorporating the parties' agreement. Prior to making a decision about approval of the agreement, the court may also require a hearing. The court will notify you and your spouse to appear, if a hearing is required.

SUPPLEMENTAL FORMS

This packet contains additional forms that you may be required to file depending upon the special requirements in the county where you are bringing the action.

a. Income Withholding Order / Child Support Services

When *MUST* the Court Issue an Income Withholding Order

When the Court issues an order of support, the Court ***must in every case issue an immediate income withholding order unless:***

- i) child support services are being applied for, or provided through, the child support enforcement program (often referred to as the “IV-D” program) from a local district Support Collection Unit; or
- ii) the Court finds and sets forth in writing (1) the reasons why there is good cause not to require immediate income withholding, or (2) an agreement providing for an alternative arrangement has been reached between the parties. See Domestic Relations Law § 240(2)(b)(2), Family Court Act § 440(1)(b)(2), and CPLR § 5242©

Where an income withholding order is required, the Court shall direct that the support be paid by automatically deducting moneys from the paying spouse’s income through the use of an Income Withholding Order.

The child support program (often referred to as the “IV-D” program) is a state-supervised, county-run program. Each local social services district has a Support Collection Unit that assists litigants in obtaining the child support (or enforcing child and spousal support combined) that has been ordered by the court.

To learn about and apply for child support services, use Form LDSS - 4882. You may download a copy of this form from the Divorce Resources website of the New York State Unified Court System under Child Support Resources at <http://www.nycourts.gov/divorce/>. The application form has two sections. The first section provides a detailed description of the child support services provided and other important information you need to know. A child support brochure (Pub.1950) is also available that provides a brief description of the program which may also be found at the court website.

As an alternative to using Form LDSS 4882, you may also apply for child support services by using the Plaintiff’s Affidavit (Form UD-6). See instructions at Field 20.

If you wish to apply for child support services at this time, or you are already receiving such services, DO NOT fill out this Income Withholding Order; an Income Withholding Order will be prepared and sent by the Support Collection Unit on your behalf

If you do not wish to apply for child support services at this time, you may choose to apply for such services through your local Support Collection Unit in the future.

If you do not apply for child support services at this time, and are not already receiving them, the Court may nonetheless decide after consideration of relevant factors that an Income Withholding Order is required by law.

If the Court notifies you that an Income Withholding Order is required, or you decide to ask the Court to issue one, follow the procedure for completing and serving the Income Withholding Order set forth in the *Supplemental Appendix of Forms Instructions*, and submit the order to the Supreme Court Clerk's Office.

b. Notice of Settlement

In some instances, the court will not sign the Judgment of Divorce until the Defendant is served with a copy of the unsigned Judgment and any other proposed orders and is permitted an opportunity to object to or comment on them. In that situation, the court will notify you that the Judgment and the proposed orders are to be served upon the Defendant with a Notice of Settlement (see Supplemental Appendix of Forms at page 34). Follow the procedure set forth in the Supplemental Appendix of Forms for completing and serving a Notice of Settlement.

AFTER THE JUDGMENT HAS BEEN SIGNED BY THE COURT

The **Judgment of Divorce (Form UD-11)** needs to be filed and entered in the County Clerk's Office. The manner in which this occurs depends upon the procedure of the county in which you brought the action. Consult the Supreme Court Clerk's Office for information regarding your obligations for the retrieval and/or entry of the signed judgment and supporting papers. Should you receive notice that the papers have been filed on your behalf by the court, or if you file the papers, you may go to the County Clerk's Office to obtain a certified copy of the judgment. You must bring identification with you, because matrimonial files are confidential and information will be released only to a party or his or her attorney. The certified copy will cost between \$4.00 and \$10.00, but the fee will be waived if you obtained a poor person waiver. A copy of the judgment of divorce must be served on the Defendant. To do this, you must have served on the Defendant a copy of the signed and entered **Judgment of Divorce (Form UD-11)**, together with the completed **Notice of Entry (Form UD-14)**. Service by mail is sufficient. You should ask the person who serves the Judgment of Divorce with Notice of Entry to sign the **Affidavit of Service of Judgment of Divorce (Form UD-15)** before a Notary Public. A copy of the Judgment of Divorce and Notice of Entry must be attached to the signed and notarized Affidavit of Service. Keep the Affidavit with your important papers.

TURN TO PAGES 14 - END FOR INSTRUCTIONS ON HOW TO COMPLETE THE FORMS

TRANSFER OF MARITAL HOME, CO-OP OR CONDO

Real property, including a house or a condominium apartment, or a cooperative apartment, is not legally transferred just because a stipulation of settlement has been signed or the court has determined that title shall be transferred. In order to transfer such property certain forms, such as a deed and transfer tax forms and other required forms, must be obtained and must be filled out with the required information. If a cooperative apartment is being transferred, the stock certificate and proprietary lease must be assigned to the transferee and approval of the Cooperative Board may be required. The transferor must then sign the deed or assignment and other required forms in front of a Notary Public. The transfer will be complete when the signed, notarized deed or assignment, and other required forms are filed in the County where the property is located, either in the office of the City Register in Kings, Queens, New York or Bronx Counties, or in the local County Clerk's office in all other New York State Counties. If there is a mortgage on the marital residence it is important that you speak with an attorney as well as the bank before the transfer is made. You may need the bank or lender's written consent before making any transfer. Be aware that when you transfer real property out of your name by signing and filing a deed or assignment and other required forms, this does not relieve or excuse you from your obligations on any mortgage which you may have placed on the property.

FORMS INSTRUCTIONS

If you have unemancipated children of the marriage under the age of twenty one (see the definition on page 7), please see the Annual Income Worksheet (Form UD-8(1) Instructions and the Child Support Worksheet (Form UD-8(3)) Instructions before you prepare the summons, so you can give the Defendant notice of the amount of child support demanded.

1. SUMMONS WITH NOTICE (Form UD-1):

This form is used when commencing an action for divorce without a Verified Complaint. **The Notice of Automatic Orders, Notice of Guideline Maintenance if the divorce was commenced on or after 1/25/16, and Child Support Standards Chart if applicable *must*, and the Notice Concerning Continuation of Health Care Coverage *should*, be served with the Summons with Notice. Note: if your action was commenced before January 25, 2016, the Maintenance Guidelines Law will not apply.**

Field 1: Put the index number in the space provided.

Field 2: Print the county in which you are bringing this action.

Field 3: Print the date the summons was filed.

Field 4: The same as field 2.

Field 5: Print the Plaintiff's name.

Field 6: You must state the basis of venue, that is, why this case may be heard in the county you select. You have several options: Plaintiff's residence (Plaintiff lives in the county), Defendant's residence (Defendant lives in the county), or CPLR §509 (any other county so long as the Defendant does not object and the court accepts the case). If you choose a county where neither party resides, you must write in CPLR §509. The court must accept the case if it is brought in the county where either the Plaintiff or the Defendant resides. If you choose CPLR §509 and the other side does not challenge the basis for venue, then the action may go forward in that county, but you should be aware that the court may reject your case based on specific venue rules in the county where you are filing.

Field 7: Provide where either the Plaintiff or the Defendant resides depending on which party's residence was chosen as the basis of venue. For example, if the Plaintiff's residence is listed as the basis for venue, place the Plaintiff's address in this space. If Defendant's residence is chosen, list the Defendant's address in this space. If CPLR §509 is chosen, list the Plaintiff's address in this space.

Field 8: Print Defendant's name.

Field 9: Check the appropriate box.

Field 10: Print the date you prepared the summons.

Field 11: Check the appropriate box.

Field 12: List your attorney's address and telephone number. If you do not have an attorney, list your name, address and telephone number.

Field 13: Fill in the appropriate subdivision number and the grounds for divorce as indicated at the bottom of the form (see pages 3-5 in this booklet). Check with your local clerk's office if you need additional information on where to learn about the grounds for divorce.

Field 14: **“Ancillary” or Other Relief:** If you are asking for *other relief in addition to your request for a divorce*, this other relief must be listed in this section as “ancillary relief.” Examples include but are not limited to custody, visitation, child support, equitable distribution of specific property from the marriage, maintenance, counsel and/or experts fees, orders of protection, pension benefits, use of a former last name, exclusive occupancy of the marital residence, and a request for transfer of title to the marital residence (whether a house, cooperative apartment or condominium apartment). If there are unemancipated children of the marriage (see the definition on page 7), child support must be listed in this section. You should also list any presently existing court orders (including the docket /case/index number) that you wish to be continued. (Note: when minor children of the marriage reside in New York State, custody must be determined). You should also list any stipulations or agreements that you have made in writing with the Defendant that you wish to become a part of the judgment. If you are waiving the distribution of marital property or if marital property is being distributed pursuant to an agreement/stipulation, check the appropriate box. If you are not seeking maintenance as described in the **Notice of Guideline Maintenance** *other than what was already agreed to in a written agreement/stipulation*, or if you seek maintenance as described in the **Notice of Guideline Maintenance**, check the appropriate box. If you would be the party with greater income, you should leave both boxes blank. **Note: do not check these boxes if your action was commenced before January 25, 2016 because the Maintenance Guidelines Law will not apply.** If your action was commenced before that date, and if you seek maintenance, instead include your request on the Lines for **“Ancillary” or Other Relief at Field 14** together with your reasons. The court will decide your request in its discretion after considering certain factors. If you are not requesting **“Ancillary” or Other Relief**, check the appropriate box.

Important Note: *If you do not ask for a type of “Ancillary” or Other Relief in this section, you may be giving up your rights to things you may be entitled to.*

1a. SUMMONS (Form UD-1a): This form must be filed and served simultaneously with the Verified Complaint(Form UD-2). The Notice of Automatic Orders, the Notice of Guideline Maintenance if the divorce was commenced on or after 1/25/16, and Child Support Standards Chart if applicable, must, and the Notice Concerning Continuation of Health Care Coverage should, be served with the Summons.

Note: if your action was commenced before January 25, 2016 , the Maintenance Guidelines Law will not apply.

Field 1: Put the index number in the space provided.

Field 2: Print the county in which you are bringing this action.

Field 3: Print the date the summons was filed.

Field 4: The same as field 2.

Field 5: Print the Plaintiff's name.

Field 6: You must state the basis of venue, that is, why this case may be heard in the county you select. You have several options: Plaintiff's residence (Plaintiff lives in the county), Defendant's residence (Defendant lives in the county), or CPLR §509 (any other county so long as the Defendant does not object and the court accepts the case). If you choose a county where neither party resides, you must write in CPLR §509. The court must accept the case if it is brought in the county where either the Plaintiff or the Defendant resides. If you choose CPLR §509 and the other side does not challenge the basis for venue, then the action may go forward in that county, but you should be aware that the court may reject your case based on specific venue rules in the county where you file.

Field 7: Provide where either the Plaintiff or the Defendant resides depending on which party's residence was chosen as the basis of venue. For example, if the Plaintiff's residence is listed as the basis for venue, place the Plaintiff's address in this space. If Defendant's residence is chosen, list the Defendant's address in this space. If CPLR §509 is chosen, list the Plaintiff's address in this space.

- Field 8: Print the Defendant's name.
- Field 9: Check the appropriate box.
- Field 10: Print the date you prepared the summons.
- Field 11: Check the appropriate box.
- Field 12: List your attorney's address and telephone number. If you do not have an attorney, list your name, address and telephone number.

2. VERIFIED COMPLAINT (Form UD-2):

- Field 1: Fill in the county in which the action is brought. Be consistent with other forms.
- Field 2: Print the Plaintiff's name.
- Field 3: Write in the index number assigned to this matter.
- Field 4: Print the Defendant's name.
- Field 5: Write the name of Plaintiff's attorney in the blank space or, if Plaintiff is representing himself or herself, strike the word "by" and leave the space blank.
- Field 6: This section informs the court of whether it has the jurisdiction (authority) to hear your case. Check the appropriate box or boxes.
- Field 7: Insert the date that you and your spouse were married as listed on a marriage license and the city, town or village; and the state or country of the marriage.
- Field 8: Check the appropriate box. If you had a religious ceremony, you must strike the word "not" in the first line and you must check one of the three options below as to your removing barriers to remarriage. If you had a civil ceremony, leave the word "not" in place and do not check any of the three options below. A Barriers to Remarriage Affidavit (Forms UD-4 and UD-4a) must be filed with proof of service unless the Defendant waives the filing of the Affidavit.
- Field 9: Check the appropriate box. List the number of children of the marriage (see the definition on page 7). List the names, dates of birth and addresses for each.
- Field 10: List the Plaintiff's and Defendant's addresses.
- Field 11: Fill in the required information about Plaintiff's and Defendant's insurance coverage. Make sure to include the type of coverage. Examples include, but are not limited to, medical, dental and optical coverage. If either party has more than one insurance plan, you must list the additional coverage. Strike this section if child support is not an issue.
- Field 12: You must state and describe the grounds for divorce. In addition to selecting the section (be specific as possible) of the Domestic Relations Law that applies, you should fill in the date where appropriate and also give a brief description as to how you meet New York State's grounds requirements. (Refer to **Grounds for Divorce** on pages 2 through 5 of these instructions).
- Field 13: This section requires no response on your part. If a judgment of divorce was already entered in this state or another state between you and your spouse and/or there is another action for divorce pending between you and your spouse, you may not be permitted to maintain this action. You should seek legal assistance as noted in the Foreword.

Field 14: **“Ancillary” or Other Relief:** If you are asking for *other relief in addition to your request for a divorce*, this other relief must be listed in this section as “ancillary relief.” Examples include but are not limited to custody, visitation, child support, equitable distribution of specific property from the marriage, maintenance, counsel and/or experts fees, orders of protection, pension benefits, use of a former last name, exclusive occupancy of the marital residence, and a request for transfer of title to the marital residence (whether a house, cooperative apartment or condominium apartment). If there are unemancipated children of the marriage (see the definition on page 7), child support must be listed in this section. You should also list any presently existing court orders (including the docket /case/index number) that you wish to be continued. (Note: when minor children of the marriage reside in New York State, custody must be determined). You should also list any stipulations or agreements that you have made in writing with the Defendant that you wish to become a part of the judgment. If you are waiving the distribution of marital property or if marital property is being distributed pursuant to an agreement/stipulation, check the appropriate box. If you are not seeking maintenance as described in the **Notice of Guideline Maintenance** *other than what was already agreed to in a written agreement/stipulation*, or if you seek maintenance as described in the **Notice of Guideline Maintenance**, check the appropriate box. If you would be the party with greater income, you should leave both boxes blank.

Note: do not check these boxes if your action was commenced before January 25, 2016 because the Maintenance Guidelines Law will not apply. If your action was commenced before that date, and if you seek maintenance, instead include your request on the Lines for **“Ancillary” or Other Relief at Field 14** together with your reasons. The court will decide **your request in its discretion after considering certain factors.** If you are not requesting **“Ancillary” or Other Relief**, check the appropriate box.

Important Note: *If you do not ask for a type of “Ancillary” or Other Relief in this section, you may be giving up your rights to things you may be entitled to.*

Field 15: Insert the date that you prepared the document.

Field 16: Check the appropriate box. The attorney for the Plaintiff must sign this line and print his or her name, address and telephone number. If the Plaintiff does not have an attorney, the Plaintiff must sign at that line and put in his or her address and telephone number.

Field 17: The Plaintiff must sign this section in the presence of a notary public, who then must notarize the document. That individual will fill in the remaining information.

3. AFFIDAVIT OF SERVICE (Form UD-3):

This affidavit must be filled out by the person that serves the summons with notice or the summons and verified complaint on your spouse (the Defendant). You need not file this form if Defendant executes the **Affidavit of Defendant (Form UD-7)**, which satisfies the proof of service requirement.

Field 1: Insert the county in which the action is brought as on prior forms.

Field 2: Print the Plaintiff's name.

Field 3: Insert the index number.

Field 4: Print the Defendant's name.

Field 5: Insert the state and county where the process server signed this document before a notary public.

Fields 6,7: The process server must fill in his or her name and address.

Field 8: The process server must fill in the details of when and where the Defendant was served, and must check the appropriate boxes as to the documents that were served which must include the **Notice of Automatic Orders** and the **Notice of Guideline Maintenance if the divorce was commenced on or after 1/25/16. Note: if your action was commenced before January 25, 2016 , the Maintenance Guidelines Law will not apply.** If there are children of the marriage under the age of 21 (see the definition on page 7), the Child Support Standards Chart must also be served on the Defendant. The chart is available at:

https://newyorkchilddsupport.com/quick_links.html.

Field 9: The process server must check the option that specifies how he or she identified the Defendant and check all the applicable identifying characteristics of the Defendant. If the first option is checked, the process server must describe how he or she became acquainted with the Defendant. If you provided the process server with the Defendant's picture, or pointed out the Defendant to the process server, you must address this in the Affidavit of Plaintiff (Form UD-6).

Field 10: The process server must ask the Defendant whether he or she is a member of the military of this state or any other state or this nation. The process server should check box 6a if the Defendant states that he/she is not in the military. The process server should check box 6b if the Defendant says he/she is in the military and also complete the information as to the type of service in box 6b. If the Defendant does not answer the question as to military service, then the process server should check box 6c.

Field 11: The process server must sign the document when completed before a notary public

4. **SWORN STATEMENT OF REMOVAL OF BARRIERS TO REMARRIAGE (Form UD-4):**

Field 1: Insert the county where you are bringing the action.

Field 2: Print the Plaintiff's name.

Field 3: Print the index number assigned to the case.

Field 4: Print the Defendant's name.

Field 5: Insert the state and county in which Plaintiff signed the statement.

Field 6: You must select either of the italicized statements by placing a check mark in the appropriate box. If you select the second box, attach a copy of Defendant's waiver. If you checked the box in the Verified Complaint or Affidavit of Plaintiff that you "will" be taking these steps, you must have completed the steps before you file your papers.

Field 7: The Plaintiff must sign the form, which must be sworn to before a notary public.

4a. AFFIDAVIT OF SERVICE (Form UD-4a): This form must be attached to and filed with the Sworn Statement of Removal of Barriers to Remarriage (Form UD-4)

- Field 1: Insert the county where you are bringing the action.
Field 2: List the name and address of the individual serving the form on the Defendant.
Filed 3: Insert the date that the form was served. Fill in either the location where the party was personally served or the address to which the form was mailed.
Field 4: The server must sign before a notary public.
Field 5: If service of Sworn Statement of Removal of Barriers to Remarriage is acknowledged by your spouse, he or she must sign the Affidavit of Service.

5. AFFIRMATION (AFFIDAVIT) OF REGULARITY (Form UD-5):

- Field 1: Insert the county where you are bringing the action.
Field 2: Print the Plaintiff's name.
Field 3: Insert the index number assigned to the case.
Field 4: Print the Defendant's name.
Field 5: List the state and county where either the Plaintiff or the attorney for the Plaintiff signed this document.
Field 6: Check the appropriate boxes.
Field 7: Check the appropriate box.
Field 8: Insert the date that the document was completed if signed by an attorney. If the Plaintiff is self-represented, the document must be signed and notarized before a notary public.

6. AFFIDAVIT OF PLAINTIFF (Form UD-6):

- Field 1: Insert the county in which you are bringing the action.
Field 2: Print the Plaintiff's name.
Field 3: Insert the index number for the action.
Field 4: Print the Defendant's name.
Field 5: Insert the state and county where Plaintiff signed this document.
Field 6: Insert the Plaintiff's name.
Field 7: Print where the Plaintiff resides, the Defendant resides and their social security numbers.
Field 8: Address the residency requirements as explained on page two of this instruction booklet by checking the appropriate box or boxes.
Field 9: Insert the date the parties were married and the city, town or village; the county; and the state where they were married. Strike the italicized word "not" in the following sentence if the parties were married by a clergyman, minister or by a leader of the Society for Ethical Culture.
Field 10: If the word "not" is deleted, you must check one of the three options.

[Do not complete Fields 11-13 if there are no children of the marriage (see page 7)]

- Field 11: List the number and names (if any) of the children of the marriage, their social security numbers, their dates of birth and the present address of each child as well as any other addresses they may have had for the previous five (5) year time period. You must also list the name and present address of the person that each child has lived with for the past five (5) years.

- Field 12: Check the boxes as appropriate. If you check "yes", you must attach a statement explaining the circumstances, and if a Family Court order was issued, you must provide the court with a copy.
- Field 13: Fill in the required information about Plaintiff's and Defendant's insurance coverage. Make sure to include the type of coverage, such as medical, dental or optical coverage. If either party has more than one insurance plan, you must list the additional coverage. Check the not applicable box if child support is not an issue or if there is no health insurance available to either party for the benefit of the child(ren) of the marriage.
- Field 14: List the grounds for divorce, filling in any relevant facts to prove the grounds alleged. Refer to Grounds for Divorce on pages 2 through 5 of these instructions. See the bottom of the Summons With Notice (Form UD-1), which lists the different grounds for divorce, or if you filed a Summons and Verified Complaint, refer to paragraph 12 of the Complaint.
- Field 15: At Section 6a, list any additional relief that you are requesting as **"Ancillary" or Other Relief**. Refer back to p. 15 of these Instructions for the Summons with Notice and p.17 of these Instructions for the Verified Complaint forms. If you are waiving the distribution of marital property or if marital property is being distributed pursuant to an agreement/stipulation, check the appropriate box. If you are not seeking maintenance as described in the **Notice of Guideline Maintenance** *other than what was already agreed to in a written agreement/stipulation*, or if you seek maintenance as described in the **Notice of Guideline Maintenance**, check the appropriate box. If you would be the party with greater income, you should leave both boxes blank. **Note: do not check these boxes if your action was commenced before January 25, 2016 because the Maintenance Guidelines Law will not apply.** If your action was commenced before that date, and if you seek maintenance, instead include your request on the Lines for **"Ancillary" or Other Relief at Field 15** together with your reasons. The court will decide your request in its discretion after considering certain factors. If you are not requesting **"Ancillary" or Other Relief**, check the appropriate box. You should also list any existing court orders (with the case/index/docket number) that you want to be continued or any stipulations or agreements that you have made in writing with the Defendant that you wish to become a part of the judgment. **Note:** If DRL §170(7), is the ground alleged, you **must** check box A, B, C or D to affirm the statement required by Section 6b.
- Field 16: Check the appropriate box as to the Defendant's status in the military. Strike the language that does not apply within the section that you choose.
- Field 17: Strike the word "not" where appropriate.
- Field 18: This section remains unchanged if there are no other matrimonial actions pending and you are still married. If there are other matrimonial actions pending, then you should seek legal assistance as noted in the Foreword.
- Field 19: Leave this section unchanged if you have supplied a photograph of the Defendant to the process server. Strike or delete it if you have not.
- Field 20: Check the appropriate box or boxes. If you are not the custodial parent, check Section 11A. If you are the custodial parent, check Section 11B and one of the following four statements [boxes (1),(2),(3), or (4)]. One of the four statements must be selected. If (1),(2) or (3) is selected in this Affidavit or in the Affidavit of Defendant, then you must check "Applicable" on the opening sentence (Field 8) of Form UD-11 (Judgment of Divorce).

Field 21: Insert the Plaintiff's and/or the Defendant's surname before the marriage if different from the current surname.

Complete the rest of this section (D.R.L. §240 1 (a-1) Records Checking Requirements) only if there are minor children of the marriage (see the definition on page 7). Check the appropriate boxes and list any required information.

Field 22: Check the box to acknowledge notice from the Court of the **Notice of Guideline Maintenance** if your divorce action was commenced on or after 1/25/16.

Field 23: Check the box to acknowledge Notice Concerning Continuation of Health Care Coverage.

Field 24: The Plaintiff must sign the form before a notary public.

7. **AFFIDAVIT OF DEFENDANT (Form UD-7): To be Filled out by Defendant**

Field 1: Insert the county in which the action is brought.

Field 2: Print the Plaintiff's name.

Field 3: Insert the index number assigned to the action.

Field 4: Print the Defendant's name.

Field 5: Insert the state and county in which the Defendant signed this affidavit.

Field 6: Print the Defendant's name.

Field 7: Print the Defendant's address.

Field 8: Defendant must check the appropriate box(es). The date of service and the grounds for divorce listed on the Summons With Notice or in the Verified Complaint also must be inserted.

Field 9: This section remains unchanged.

Field 10: Check the appropriate box.

Field 11: Check Section 4A if the Defendant waives service of all further papers in the action except for the final Judgment of Divorce. Check Section 4B if the Defendant wants to be served with all papers required to be served. The Defendant may strike any individual documents that the Defendant does not wish to be served with.

Field 12: In 5a, Strike the italicized words if you are not seeking equitable distribution. In 5b, if you are not seeking maintenance as described in the **Notice of Guideline Maintenance** *other than what was already agreed to in a written agreement/stipulation*, or if you seek maintenance as described in the **Notice of Guideline Maintenance**, check the appropriate box. If you would be the party with greater income, you should leave both boxes blank. **Note: do not check these boxes if your action was commenced before January 25, 2016 because the Maintenance Guidelines Law will not apply.** If you checked the box to indicate that you seek maintenance as payee pursuant to the Maintenance Guidelines Law, you must fill out Forms UD-8(1) and (UD-8(2) and submit them to the Court.

Field 13: Strike section 6a in totality except where Plaintiff requests a divorce by the conversion of a separation agreement and the marriage was performed by a clergyman, minister or by a leader of the Society for Ethical Culture. Check box 6b if you waive the Plaintiff's requirement to file the Sworn Statement of Removal of Barriers to Remarriage (Form UD-4).

Field 14: If Defendant is not the custodial parent, check Section 7A. If Defendant is the custodial parent, check Section 7B and check one of the statements in [boxes (1),(2),(3), or (4)], that applies to your individual situation. One of the four statements must be selected. If (1), (2) or (3) is selected in this Affidavit or in the Affidavit of Plaintiff, then you must check "Applicable" on the opening sentence (Field 8) of Form UD-11 (Judgment of Divorce).

Complete the rest of this section (D.R.L. §240 1(a-1)Records Checking Requirements) only if there are minor children of the marriage (see the definition on page 7) . Check the appropriate boxes and list any required information.

- Field 15: If DRL §170(7), is the ground alleged, and if you agree to the divorce and all the relief requested and are not seeking additional relief, check box A, B, C or D.
- Field 16: Check the box to acknowledge receipt of the **Notice of Guideline Maintenance**, if your divorce action was commenced before January 25, 2016.
- Field 17: Check the box to acknowledge Notice Concerning Continuation of Health Care Coverage.
- Field 18: Defendant must sign the document and have it notarized before a notary public.

- 8(1) ANNUAL INCOME WORKSHEET**
- 8(2) MAINTENANCE GUIDELINES WORKSHEET**
- 8(3) CHILD SUPPORT WORKSHEET**

If the divorce was commenced on or after January 25, 2016 and if either party is seeking maintenance, Form (UD-8-(1)and Form UD-8((2) are required forms. If there are children of the marriage, Form UD-8(3) is also required. If the Defendant seeks maintenance or child support, the Defendant must fill out the applicable forms.

To help you make the calculations on these forms, you may Use the Court’s Maintenance and Child Support Calculators available online on the Court’s Divorce Resources Website at <http://www.nycourts.gov/divorce/MaintenanceChildSupportTools.shtml> (the “Calculators”). They are provided for your convenience as a tool. They have been tested with many scenarios to assure accuracy with appropriate entry of data. You may wish to make the calculations yourself on the applicable Appendices to these Worksheets. Neither these Worksheets nor the Calculators are meant to predict what the court will order as to maintenance or child support in your case.

IMPORTANT NOTES ABOUT USING THE CALCULATORS:

If you use the Calculators to make the calculations on the Worksheets, you must copy the figures onto the applicable Appendices to the Worksheets so that the Court will have the figures available when reviewing your divorce papers. Work cannot be saved on the Online Calculator so it is a good idea to print out the work from the Calculators for your records.

Make sure you read the Instructions on the above Website at <http://www.nycourts.gov/divorce/MaintenanceChildSupportTools.shtml> before using the Calculators.

8(1) ANNUAL INCOME WORKSHEET

- Field 1: Insert the county in which you are bringing the action.
- Field 2: Print the Plaintiff’s name.
- Field 3: Print the Defendant’s name.
- Field 4: Insert the index number assigned to the action.
- Field 5: In some cases the Defendant prepares this form; Check the appropriate box to show whether Plaintiff or Defendant prepared this form. This must be the same as shown in Field 7.

Field 6: Complete Income Computations for Plaintiff and Defendant by either of the following methods:

- Use the Calculators

OR

- **Make the calculations yourself on Appendix A to the Worksheet**

Check the applicable box on the Worksheet that indicates which method you chose to make the calculations. If you use the Calculators, copy the figures onto Appendix A.

Enter the result of your calculations from **Line 18 of Part A of the Calculator** or **Line 18 of Appendix A on Lines 1A and 1B on page 1 of the Worksheet.**

Field 7: Plaintiff must sign this document on page 2 of the Worksheet. If the Defendant prepared this document, then the Defendant signs it. Check the appropriate box. This form must be signed and sworn to before a notary public. Attach the latest income tax returns, W-2's, 1099's, pay stubs -- or whatever documentation you have -- to confirm the amounts you state in this form

Special Instructions for Appendix A.

Appendix A is divided into three Parts:

Appendix A Section I - Gross Annual Income: You *must* fill out all the items of Income

for both Plaintiff and Defendant on Appendix A Section I, *if you know of them*. You may use a tax return, pay stub, W-2 or any financial document that will assist you in completing the form. You may also use other information that you have to assist you. For example, if the Defendant was earning \$20,000 per year at the time you separated or if you know someone with the same job making \$20,000, you should list that amount and state the source of your information on Appendix A. If you do not know the Defendant's income at present, write the number "0" in all relevant sections with the word "unknown" next to that amount. You may return to this Court or the Family Court should you learn Defendant's income at a later date.

Appendix A Section II - Annual Deductions: Fill out all the Deductions for both Plaintiff and The deductions used most often are: New York City or Yonkers income tax and Social Security taxes.

Appendix A Section III - Subtract the total Deductions of Plaintiff from the total Income of Plaintiff to get Plaintiff's Net Annual Income and insert that amount in Section 1A of the Worksheet on page 1. Subtract the total Deductions of Defendant from the total Income of Defendant to get Defendant's Net Annual Income and insert that amount in Section 1B of the Worksheet on page 1. Although Appendix A looks complicated, a careful, step-by-step approach should help you complete it properly and without too much trouble.

*** Example: The Plaintiff is a teacher and earns \$30,000 per year but also receives a \$10,000 pension from a prior profession. The total income is \$40,000. FICA, Medicare and NYC Tax Withholding reduce Plaintiff's income to \$36,800.**

8 (2) MAINTENANCE GUIDELINES WORKSHEET

If your divorce case was commenced on or after January 25, 2016, which is the date the Maintenance Guidelines Law (Ch. 269, Laws of 2015) became effective, and if either party seeks Maintenance, the Plaintiff must submit this Worksheet to assist the Court in determining if maintenance is required to be paid under the Maintenance Guidelines Law by the party with the higher income to the party with the lower income. You should complete this form before you prepare the summons, so that you can give the Defendant the required notice as to the amount of maintenance demanded or offered, as the case may be.

- Field 1: Insert the county in which you are bringing the action.
- Field 2: Print the Plaintiff's name.
- Field 3: Print the Defendant's name.
- Field 4: Insert the index number assigned to the action.
- Field 5: In some cases the Defendant prepares this form; Check the appropriate box to show whether Plaintiff or Defendant prepared this form. This must be the same as shown in the signature line.
- Field 6: **In SECTION 1**, Enter Income of Parties by copying the amounts from the Annual Income Worksheet, Line 1A and Line B (Form UD 8(1)).
- Field 7: **In SECTION 2**, Determine whether Plaintiff or Defendant has greater income; that spouse will be called the "maintenance payor" and the other spouse will be called the "maintenance payee." Enter amounts on Lines 2A and 2B of section 2 of the Worksheet.
- Field 8: **In SECTION 3**, Calculate the guideline amount of maintenance on income up to and including \$184,000, and any low income adjustment, by either of the following methods:
- **Use the Calculators**
OR
 - **Make the calculations yourself on Appendix B to the Worksheet**
- Check the applicable box on the Worksheet that indicates which method you chose to make the calculations. If you use the Calculators, copy the figures onto Appendix B.
- Enter the result of your calculations from **Line 19 of the Calculator** or from **Line 19 of Appendix B on Line 3B of the Worksheet**. This is the guideline award of maintenance on income up to and including \$184,000 after adjustment for low income, if any.
- Field 9: After reviewing the **15 post-divorce maintenance factors** in **Appendix D and the Advisory Duration Schedule in Appendix E of the Worksheet**, enter the information requested in **Paragraphs 4a and 4b** to help the Court decide how long maintenance should last.
- Field 10: After reviewing the **15 post-divorce maintenance factors**, whichever applies, check the applicable box or boxes to ask the Court to adjust the award of maintenance or order maintenance on income of the Payor in excess of \$184,000 per year. Then list the factors you would like the Court to consider in making such decision.
- Note: Your Divorce may become contested.**

Field 11 Plaintiff must sign this document on page 2 of the Worksheet. If the Defendant prepared this document, then the Defendant signs it. This form must be signed and sworn to before a notary public.

8(3) CHILD SUPPORT WORKSHEET (Form UD-8(3)): Note: this form replaces prior Form UD-8 effective January 25, 2016.

Like the **Maintenance Guidelines Worksheet (Form UD-8(1))**, the Child Support Worksheet (Form UD-8(3)) requires financial information about the net annual income of the parties that you already entered on the **Annual Income Worksheet (Form UD-8(1))**.

Although this document looks complicated, a careful, step-by-step approach should help you complete it properly and without too much trouble. When things become complicated, examples will be given. You should complete this form before you prepare the summons, so that you can give the Defendant the required notice as to the amount of child support demanded or offered, as the case may be. It may help to read through the form before you begin.

Field 1: Insert the county in which you are bringing the action.

Field 2: Print the Plaintiff's name.

Field 3: Print the Defendant's name.

Field 4: Insert the index number assigned to the action.

Field 5: In some cases the Defendant prepares this form; Check the appropriate box to show whether Plaintiff or Defendant prepared this form. This must be the same as shown in the signature line.

Field 6: Check the boxes in sections 2 and 3 if you have entered into a written agreement with your spouse about Child Support and have submitted it with this Worksheet. Check the box in section 4 if you are not represented by an attorney to acknowledge you have received a copy of the Child Support Standards Chart.

Note: You may enter into a written agreement with your spouse for more or less child support than the guidelines would allow, but only if certain requirements are met in the agreement to show that the parties knew about the provisions of the Child Support Standards Act (CSSA), received a copy of the CSSA Chart if unrepresented, knew the amount they would have been entitled to under the CSSA, explained the reasons for providing a different amount if a different amount was provided. The agreement must be submitted to the court for its approval and to make sure the requirements of the CSSA are met.

Field 7: Section 5: Calculate the amount of child support that must be paid to the custodial parent by the non-custodial parent by either of the methods shown below. Then check the applicable box on the Worksheet that indicates which method you chose to make the calculations. Enter the result of your calculations in **Line 5 B from Part C - IV, Line 1 of the Calculator** or from **Section IV Line 1 of Appendix G**.

Note:: If the Non-Custodial Parent's Income after deducting his/her Percentage Share of Combined Child Support is less than the Self Support Reserve but greater than the poverty level, the Court has discretion whether or not to award the Mandatory Add- On Expenses and the total you entered in Line 5B may turn out to be lower.

- **Use the Calculators**

OR

- **Make the calculations yourself on Appendix G to the Worksheet**

Check the applicable box on the Worksheet that indicates which method you chose to make the calculations. If you use the Calculators, copy the figures onto Appendix G.

NOTE: See Special Instructions for Appendix G below. Then complete the Worksheet.
Special Instructions for Appendix G

I. ADJUSTMENT FOR MAINTENANCE AND CALCULATION OF ANNUAL BASIC CHILD SUPPORT OBLIGATION

In Line 1, enter the amount of the guideline award of maintenance on Income of the Maintenance Payor from **Line 3B on page 2 of the Maintenance Worksheet (Form UD-8(2))**, but if you and your spouse have a written agreement as to maintenance, enter the agreed amount instead and check the applicable box and submit the agreement to the Court to prove the correct amount. **Note: if neither party seeks maintenance, enter zero instead.** Then adjust for maintenance to be paid or received, if any, by adding or subtracting the amount from Line 1 to the income amounts of the party with the lower annual income you enter in Line 2 and the party with the higher annual income you enter in Line 3 as instructed on Lines 2 and 3. Take the annual income amounts from Line 1A and 1B of Annual Income Worksheet (Form UD-8(1)) that you have already filled out.

In Line 4, Add Lines 2 and 3 to get the Combined Parental Income.

In Line 5, enter the Income of the Non-Custodial Parent (the NCP). The NCP is the parent who does not have the child. To do this, copy the Net Annual Income from Section 2 of the Maintenance Guidelines Worksheet. Copy the income of the Maintenance Payor or the Maintenance Payee, depending on which parent does not have the child. The parent that has the child will be the Custodial Parent (CP).

In Line 5a, Compute the NCP's Percentage Share of Combined Income

In Line 5b, Compute the CP's Percentage Share of Combined Income by following the directions on the form. This requires simple division. *

*** For Example: Suppose the Plaintiff is the NCP; his adjusted income is**

\$30,000, and the Defendant's income is \$20,000. The combined income is

\$50,000. You divide \$30,000 [NCP income] by \$50,000 [Combined income].

$\$30,000 / \$50,000 = .60$ or 60%. To get the CP's Percentage you divide \$20,000 by \$50,000 [Combined Income]. $\$20,000 / \$50,000 = .40$ or 40%.

These percentages are important, because they will be used later to determine obligations of the parents for child support.

On Line 6, fill in the percentage that applies. The Child Support laws require certain percentages based on the number of children. Suppose you have one Child. The percentage would be 17%.

On Line 7, multiply the combined income up to \$148,000 by the percentage you entered in
 6. If the combined income is over \$148,000, then disregard the amount exceeding \$148,000 for now and multiply the appropriate percentage by \$148,000.

Line

*** For Example: If the Plaintiff's adjusted income is \$30,000 and the Defendant's adjusted income is \$20,000, then their combined income is \$50,000. Suppose there is one child. You entered 17% on Line 6 for 1 child. You multiply $\$50,000 \times 17\% = \$8,500$. You now have the combined child support of \$8,500;**

On Line 8, multiply the combined child support from Line 7 by the NCP percentage in Line 5a to get the NCP's Percentage Share of Child Support on Income Up to \$148,000. *

*** For Example: Using the figures in the last two examples, $\$8,500 \times 60\% = \$5,100$.**

On lines 9 -9c, compute the amount of child support on Combined Parental Income over \$148,000, if any, that you are asking the court to award. Some people decide to simply use the same formula that was used in Line 7 and hope the court goes along with that, but the court might decide instead to consider the **10 child support adjustment factors in Appendix D**. Line 9c computes what that amount would be if the court uses the percentages. List the factors you would like the court to consider on Section 2 of the Child Support Worksheet (see Field 8 above).

II. Appendix G II. Determine Whether Low Income Exemption Applies

In lines 1-3, follow the instructions by subtracting the NCP's Annual Basic Child Support from the NCP's Annual Income. Enter the Result in Line 3. Treat any negative number as zero.

There are three possibilities to see whether the Low Income Exemption Applies.

First -- If the figure you get in Line 3 of Section II falls between the **Poverty Level and the Self-Support Reserve,*** proceed to Line 4a to compute the difference between NCP Income and the Self Support Reserve, and enter the greater of \$600 or the difference on Line 4b of Section II. Then Proceed to Section III to compute Add-on Expenses. Note the Court has discretion whether to award the Add-on Expenses.

Second -- If the figure you get in Line 3 of Section II is equal to or larger than the Self-support Reserve, then there will no low income adjustment. Go on to Section III.

Third -- If the figure you get in Line 3b of Section II is less than the poverty level, enter \$300 in Line 4b of Section II. This will result in a child support of \$300 per year unless the Court decides this amount is "unjust or inappropriate" based on the **10 child support adjustment factors** in Appendix F to the Worksheet. Skip Section III and go on to Section IV.

***Note: Every March 1st, the Poverty Level and Self-Support Reserve changes.** You may obtain the most Current figures from the Child Support Standards Chart available by April 1st at https://childsupport.ny.gov/dcse/child_support_standards.html

III. Appendix G- III. Child Support Add-On Expenses (Skip this Section if the Basic Child Support Obligation with Low Income Exemption is \$300).

There are two types of Child Support Add-on Expenses: "Mandatory" (or Required) Expenses (Sections A and B) and Discretionary Expenses. A pro rata share of Unreimbursed Health Insurance Expenses and Health Insurance Premiums for the children are mandatory expenses, as are child care expenses leading to employment or while the custodial parent is working. The Court has authority to award or apportion additional reasonable expenses for child care and other education and extraordinary expenses that do not qualify as Mandatory Add-On Expenses. **However, If Line 3 of Section II is less than the Self Support Reserve but greater than the poverty level, the Court has discretion whether or not to award the Mandatory Add- On Expenses. (See DRL 240-(1-b)(d).**

In Line A (1) , enter the cost of child care for child care expenses leading to employment or while the custodial parent is working. If you pay for any of those items, enter the total annual expense.

In Line A(2) enter NCP's Percentage Share from **Line 5a of Section I**.

In Line A(3) multiply the total child care expense (**Line A(1)**) by the non-custodial parent's Percentage Share from **Line A(2)**, and put the number in **Line A(3)**.

*** For Example: If NCP's Percentage Share is 60% and Line A(1) is \$1,000 then**

Line A(3) would be $\$1,000 \times 60\% = \600 .

In Lines B(4a) and B(4b) enter the Non- Custodial Parent (NCP)'s and the Custodial Parent (CP)'s Percentage Shares of both health insurance premiums and future unreimbursed health expenses. To do this, copy the NCP Percentage Share from **Line 5a of Section 1** and CP's Percentage Share from **Line 5b of Section 1**. **Note: this should be a percentage, not a dollar figure.**

In Line 5, enter the annual cost of health insurance for the children.

In Line 6, enter yes or no to the question whether the NCP provides the health insurance for the children.

In Lines 6a and 6b follow the instructions to add or deduct the Percentage Share of health insurance for the children. If the NCP does not provide the insurance, multiply Line 4a by Line 5 and enter the result. If the NCP does provide the insurance, multiply Line 4b by Line 5 and enter the result as a negative number.

In Line 7, enter the health insurance adjustment from Line 6a or 6b whichever applies.

In Line 8, total lines 3 and 7 to equal the total Add-On Expenses.

In Line 9, enter the total **Discretionary Expenses** for Child Care and education and extraordinary expenses you are asking the Court to award, if any. These amounts are up to the court's discretion and will not be added to the totals.

IV. Appendix G IV. Basic Annual Child Support Obligation

Line 1: Add Line 4b of Section II and Line 8 (consisting of the total of Lines 3 and 7) of Section III. To do this, add Line 4b of Section II, and Line 3 of Section III, and Line 7 of Section III. Complete the total and enter this amount on Line 5B of the Worksheet. *However, if Line 3 of Section II is less than the Self Support Reserve but greater than the poverty level, the total may be less after the Court decides whether to award the add-on expenses. In that case, do not copy the amounts from Lines 3 and 7 of Section III but leave them blank for the court to fill in and to complete the total to be entered on Line 5B of the Worksheet.* Now complete the rest of the Worksheet starting with Section 2 at Field 8.

Field 8: Section 2. If you believe the Annual Basic Child Support Obligation is unjust and should be changed, check the applicable box and list the factor or factors on Appendix F that contain your reasons. **Note: your Divorce May Become Contested.**

Field 9: If you would like the Court to award Child Support on Combined Income above \$148,000 list the factor or factors on Appendix F that contain your reasons.

Field 10: Plaintiff must sign this document, If the Defendant prepared it, then the Defendant signs it. Check the appropriate box. This form must be signed and sworn to before a Notary Public.

8a. SUPPORT COLLECTION UNIT INFORMATION SHEET (Form UD-8a):

The Plaintiff must submit this document where the services of the Support Collection Unit are requested. The Support Collection Unit is a state agency that assists litigants in obtaining the child support that has been ordered by the court. You may utilize the service or decline the service. If you decline the service you may apply to the Support Collection Unit in the future to assist you in obtaining the child support that the court has ordered to be paid.

- Field 1: Fill in the county in which the action is brought.
- Field 2: Print the Plaintiff's name.
- Field 3: Write in the index number assigned to this case.
- Field 4: Print the Defendant's name.
- Field 5: Fill in the Plaintiff's name, address, date of birth and social security number.
- Field 6: Fill in the Defendant's name, address, date of birth and social security number.
- Field 7: Fill in the date and the place of marriage.
- Field 8: Check the appropriate box.
- Field 9: Indicate the name(s) and date(s) of birth of the unemancipated child(ren). List the amount of support for each child and check the appropriate box for either per week or per month.
- Field 10: Indicate who will be receiving the support payments by checking the appropriate box.
- Field 11: Fill in the name and address of the third-party person if this person is receiving the support payments.
- Field 12: Fill in the non-custodial parent's employer's name and address.
- Field 13: Fill in the date the form is completed.

8b. QUALIFIED MEDICAL CHILD SUPPORT ORDER (Q.M.C.S.O.) (Form UD-8b):

A certified copy of this signed order must be served on the employer of the person legally responsible to provide health insurance.

- Fields 1-4: The court will fill in these sections.
- Field 5: Print the Plaintiff's name.
- Field 6: Insert the index number.
- Field 7: Print the Defendant's name.
- Field 8: Insert the name, date of birth, social security number and mailing address of each unemancipated child of the marriage.
- Field 9: Insert the name of the party who must enroll the child(ren) in the health insurance plan available through his or her employment.
- Field 10: Insert the name of the party that has custody of or is the legal guardian of the child(ren).
- Field 11: Insert the name, address and identification number (if any) of the health plan.
- Field 12: Insert the name and address of the administrator of the plan (if any).
- Field 13: Describe the type of coverage provided by the plan. Give a detailed description.
- Field 14: Leave this section unchanged.
- Field 15: Insert the date the parties agree that coverage is to be effective. If not filled in, the court will enter the date the order is signed.
- Field 16: The court will fill in this section.

9. NOTE OF ISSUE (Form UD-9):

- Field 1: Insert the county where you are bringing the action.
- Field 2: Print the Plaintiff's name.
- Field 3: Insert the index number that you will receive from the clerk's office in this space. Leave the space for calendar number empty; the clerk's office will fill in that section.
- Field 4: Print the Defendant's name.
- Field 5: The words "no trial" appear here. You do not need to write anything here.
- Field 6: This section must indicate who is placing this matter on the calendar. Check the appropriate box. Only one (1) box should be checked.
- Field 7: Insert the date that the summons was filed with the County Clerk.
- Field 8: Insert the date that the summons was served on your spouse.
- Field 9: Because this an uncontested divorce, the term "NOT JOINED" appears. You must indicate whether this case is going forward due to a default (your spouse fails to appear in the action), due to a waiver (your spouse is agreeing to proceed to divorce by completing an Affidavit of Defendant), or due to a stipulation (both parties agree by written document). Check the appropriate box.
- Field 10: The divorce is not being contested. You do not need to write anything in this space.
- Field 11: You are asking for an absolute divorce. You do not need to write anything in this space.
- Field 12: Check the appropriate box. Fill in the name, address, telephone number and fax number of the attorney for the Plaintiff here. If the Plaintiff does not have an attorney, put the Plaintiff's name, address, telephone number and fax number in this space.
- Field 13: Check the appropriate box. Fill in the name, address, telephone number and fax number of the attorney for the Defendant. If the Defendant does not have an attorney, put the Defendant's name, address, telephone number and fax number in this space.

10. FINDINGS OF FACT AND CONCLUSIONS OF LAW (Form UD-10):

- Fields 1-4: Do not fill in these sections. The court will fill in these fields.
- Field 5: Print the Plaintiff's name.
- Field 6: Print the index number assigned to the case. Do not fill in the calendar number.
- Field 7: Print the Defendant's name.
- Field 8: If you are submitting the papers to obtain a divorce based solely on signed affidavits, check the appropriate box or boxes. If you had an inquest/hearing before a judge, check that box. If you do not know whether the court will sign your divorce (you may want to inquire at the clerk's office as to the procedure in the county where you are filing), do not strike either provision or insert the Part where the documents will be signed. The Part will be filled in by court employees. You must, however, insert the name of the county where you are filing for divorce and the date of the inquest/hearing if you had one. Otherwise leave the date section blank so that the court can fill in the information.
- Field 9: This section remains unchanged. If either the Plaintiff or the Defendant was under the age of 18 when this action was commenced, then a divorce action may not be filed and the Plaintiff should consult with an attorney as noted earlier.
- Field 10: This section establishes residency for purposes of obtaining a divorce. The beginning of this filing instruction packet explains the requirements for residency. Check the appropriate box or boxes. This section should be consistent with the earlier instructions given as to residency and any other form where you addressed residency.
- Field 11: Fill in the date and place that the parties were married, and indicate the type of ceremony by checking the appropriate box.
- Field 12: Do not fill anything in this section unless there is another action pending elsewhere. If so, consult an attorney as noted in the Foreword.
- Field 13: Check the appropriate box as to the papers served on Defendant to start the action. Indicate how defendant was served by placing a check mark in the appropriate box. If service was made pursuant to court order, fill in the date of such order. Indicate whether defendant appeared in the action by placing a check in the appropriate box.
- Field 14: Check the appropriate box. If defendant is a member of the military indicate the branch of service. If defendant is in the military and does not consent, it is suggested you retain counsel.
- Field 15: Check the appropriate box. Insert the total number of children of the marriage (see the definition on page 7). List their names, social security numbers, dates of birth and addresses.
- Field 16: Indicate the grounds upon which the divorce is to be granted by checking the appropriate box. Where a date is required, fill in the appropriate date. When using Cruel and Inhuman Treatment (DRL §170(1)) as grounds for divorce, make sure the specific allegations listed demonstrate Cruel and Inhuman Treatment as defined on the form. Repeat the same facts as set forth in the Verified Complaint and in the Plaintiff's Affidavit.
- Field 17: Check the appropriate box.

Field 18:

A) If you have asked for maintenance payments from your spouse in your divorce papers and you and your spouse have come to a written agreement on the amount and timing of the payments, complete the box in paragraph “A”).

B) If no maintenance was awarded, check Paragraph “B”) and then check the appropriate box as to the reason.

C) If your divorce action was commenced before January 25, 2016, and if there is no agreement for maintenance and you asked the court in the papers that you served on your spouse to award maintenance, check the box for Paragraph “C”. *Note: you may be required to attend a court hearing to provide proof and it is possible your divorce may become contested. In that case, Check the box for Paragraph “C”) but leave Paragraph “C”) blank. You will receive further instructions from the court.*

D) If your divorce action was commenced on or after January 25, 2016, and if there is no agreement for maintenance, and if you asked the court in the papers you served on your spouse to award maintenance, check the box for Paragraph “D”). Then fill in the information and check the applicable boxes in paragraphs 1 and 2 by copying the information from the **Maintenance Guidelines Worksheet (Form UD-8(2))** that you have already filled out. **Your answers must be the same as on the UD-8(2), Leave Paragraph 3 blank for the court to fill out. Note: if you are asking the court to adjust the award of maintenance because it is unjust or inappropriate or to award maintenance on income in excess of \$184,000 per year, the Court will review the reasons you gave on your Maintenance Guidelines Worksheet, and you may be required to attend a court hearing to provide proof and it is possible your divorce may become contested. You will receive further instructions from the court.**

Field 19: This section addresses the children of the marriage (see the definition on page 7). Check the appropriate box so that the court can see which party the children reside with and which party, if any, is entitled to visitation with the children away from the custodial residence (the place where the children reside). If the children live with a third party, fill in the name. Leave the paragraph regarding domestic violence for the court to complete.

Field 20: If there are other issues (i.e., support, custody, marital home, etc.) being settled or decided by the court, place a check mark in the appropriate box.

Field 21: Check the appropriate box: **Paragraph (A):** You must fill out this paragraph if there are children of the marriage (see the definition on page 7). List the names and the dates of birth of the unemancipated children of the marriage. **Paragraph (B):** You must fill in either subparagraph 1, 2 or 3 to show how the amount of child support was determined.

IMPORTANT NOTE: Much of this information can be taken from the Child Support Worksheet (Form UD-8(3)).

* **Instructions for subparagraph (1):** Fill in subparagraph (1) if there is already in existence a court order that has set the amount of child support and such order is to be continued by the Judgment of Divorce.

* **Instructions for subparagraph (2):** Fill in subparagraph (2) if you are requesting an order of the court for child support. Fill in the adjusted gross income (after adjusting for maintenance paid to or received by a party spouse. You can take the amounts from Appendix G to Form UD 8(3). Circle the applicable child support percentage. The percentages are 17% for one child, 25% for two children, 29% for three children, 31% for four children and 35% for five or more children. Multiply the child support percentage by the combined income to \$148,000 and do the same for combined income over \$148,000, if any. Fill in the amounts. Divide each party's income by the total income to obtain each party's pro rata share percentage of the combined income. Fill in the percentage. Multiply the basic child support obligation on income to \$148,000 by the non-custodial parent's pro rata percentage share and do the same for income over \$148,000. Fill in the amounts. Fill in the non-custodial parent's pro rata share of health care expenses not covered by insurance, reasonable child care expenses, or educational or extraordinary expenses. Fill in the cost of health insurance premiums for the children. Check the applicable box as to which spouse maintains the health insurance for the children. Check box a) or box b) to indicate how the health insurance adjustment should be made. **NOTE:** If the Non-Custodial Parent's Income after deducting his/her Percentage Share of Combined Child Support (Line 3 of Section II of Appendix G to Form UD-8(3)) is less than the Self Support Reserve but greater than the poverty level, the Court has discretion whether or not to award the Add- On Expenses.

* **Instructions for subparagraph (3):** Fill in subparagraph (3) if the parties entered into a stipulation/agreement as to child support, or if the court rendered its decision in open court on the record. Fill in the date the parties entered into the stipulation/agreement and the amount of child support agreed to be paid. Check the appropriate boxes as to who will pay and who will receive child support. Check the appropriate box as to whether the parties are applying or waiving the application of the Child Support Standards Act (Guidelines) to the total combined income over \$148,000 a year. If issues regarding health care, child care, educational expenses or extraordinary expenses were agreed to, fill in the dollar amount to be paid or the percentage of said expenses agreed to be paid. Fill in the presumptive amount of child support attributable to the non-custodial parent pursuant to the Child Support Standards Act (Guidelines). Refer to the Child Support Standards Chart or **Line 5B of the Child Support Worksheet (Form UD-8(3))** for this presumptive amount. Check the appropriate box that indicates whether the agreed-upon amount of support conforms with or deviates from the non-custodial parent's basic child support obligation. If there is a deviation, whether it be higher or lower, give specific reasons why the parties approved, and why the court should approve of such deviation. The reasons for deviations must be in the stipulation/agreement.

Field 22: List the Plaintiff's and Defendant's addresses and social security numbers.

Field 23: If there are no unemancipated children of the marriage or if child support is not an issue or if the parties do not have health coverage provided by their employer, check the appropriate box. If either party's employer offers health insurance, check that box and fill in the required information about Plaintiff's and Defendant's insurance coverage. Make sure to include the type of coverage. Examples include but are not limited to medical, dental and optical coverage. If either party has more than one insurance plan, you must list the additional coverage on a separate sheet of paper.

* Check the appropriate box as to whether both parties have agreed or stipulated as to which party will cover the unemancipated children on their health insurance policy. If there is no agreement, check the box indicating that the court has determined the party who will cover the children and indicate whether Plaintiff or the Defendant will cover the children under a group health plan. Strike out any inapplicable language.

- Field 24: List any court orders, by the index number or docket number and the date entered, that the parties wish to be continued.
- Field 25: Check the appropriate box.
- Field 26: Check box A) if the parties entered into a Stipulation of Settlement/Agreement and fill in the date of the agreement. Check appropriate box 1 or 2.
Check box B) if there is no Stipulation of Settlement/Agreement. Leave box 1 or 2 to be completed by the court.
- Field 27: Check the appropriate box.. If DRL §170(7) is the ground alleged, you must check one of the boxes.
- Field 28: You must check the applicable boxes to explain the court's reasons if an income deduction order or income execution is not being required.
- Field 29: Check the appropriate box and insert the Domestic Relations Law subdivision for the grounds for divorce. Be consistent with prior forms.
- Field 30: This section will be filled in by the court.

11. JUDGMENT OF DIVORCE (Form UD-11):

Fields 1-4: Do not fill in these sections. The court will fill in these fields.

- Field 5: Print the Plaintiff's name.
- Field 6: Print the index number assigned to the case. Do not fill in the Calendar Number. Fill in the Social Security Number of the person who will be obligated to pay child support (if any).
- Field 7: Print the Defendant's name.
- Field 8: Check the appropriate box. If you are receiving child support and want payments to be made to the Support Collection Unit, check the "Applicable" box. If there are no unemancipated children of the marriage, check the "Not Applicable" box.
- Field 9: If you had an inquest/hearing before the court, check that box and fill in the date of the inquest. If you did not have an inquest, then the court will fill in the date.
- Field 10: Check the appropriate box as to the method of service and whether service was made in New York State or outside of New York State.
- Field 11: Check the appropriate box.
- Field 12: Check the appropriate box and fill in the date of the stipulation, if any.
- Field 13: Check the appropriate box.
- Field 14: List the Plaintiff's and Defendant's addresses and social security numbers in the spaces provided.
- Field 15: Fill in the name of the person submitting the judgment and check the appropriate box identifying this person.
- Field 16: Leave this section unchanged.
- Field 17: Insert the names of the parties and check the box(es) of the section(s) of the Domestic Relations Law pertaining to your grounds for divorce. You may obtain the information pertaining to the grounds of divorce from the Affidavit of Plaintiff (Form UD-6) or Verified Complaint (Form UD-2).
- Field 18: Check the appropriate box as to who shall have custody of the minor children of the marriage (see the definition on page 7) and print the name of the person in the space provided. If there are no minor children of the marriage, check that box in Field 19.
- Field 19: List the names and dates of birth and Social Security numbers for the children of the marriage. If there are no minor children of the marriage, check that box. (See the definitions on page 7).
- Field 20: Check the appropriate box. If visitation is to be ordered after a hearing or by decision, set forth the schedule. If visitation is not applicable, check that box.

- Field 21: If there are existing orders from any other court that are to be continued by this court, other than child support orders, list the County and Index Numbers or Docket Numbers of the order(s), and check the appropriate boxes. A copy of any order to be continued must be submitted to this court. If there are no other court orders, check that box.
- Field 22: Fill in this section if there is to be continued an award of child support by a court order issued by a court other than this court. Check all appropriate boxes. If there is to be no award of child support by continuing another court's order, check that box.
- Field 23: If you have a written Settlement Agreement for maintenance, check Box A and then check the box next to the words "agreement of the parties." Immediately to the right of this, and on the next line, check the appropriate box ("Plaintiff" or "Defendant") depending on whether you are going to receive maintenance or pay it. On the line next to the words "the sum of __," write the amount of maintenance you will receive or pay in each payment period and check the box next to the payment period. Since these payments are from a Settlement Agreement, check the box next to the words "payments to be made as set forth...." Check the box that tells whether you want the maintenance payments to be made directly or by an Income Deduction Order. (If you check the box for an Income Deduction Order, you will have to obtain and complete an Income Deduction Order, which is available on the court's web site and/or from the Supreme Court Clerk's Office.) Check Box B if there is to be no award of maintenance or none was requested or if the guideline award of maintenance under the Maintenance Guidelines Law (L.2015, c. 269) was zero. If your divorce was commenced before January 25, 2016 and you have requested maintenance in the divorce papers you served on your spouse, check Box C and leave the rest blank for the court to fill out. If your divorce was commenced on or after January 25, 2016, and you have requested maintenance in the divorce papers you served on your spouse, check Box D and leave the rest blank for the court to fill out.
- Field 24: Check the appropriate box and insert all requested information or check the "Not applicable" box if payment of child support is not to be made by these means. This section applies where child support is to be paid directly by one spouse to the other or through the NYS Child Support Processing Center.
- Note: In Fields 24 - 27, the amounts you enter should conform with Appendix G of the Child Support Worksheet (Form UD-8(3)). If Line 3 of Section II of Appendix G is less than the Self Support Reserve but greater than the poverty level, leave Fields 25-27 for the Court to fill out.**
- Field 25: Fill in this section, and check the appropriate boxes if reasonable child care expenses are to be paid. If not, check the "Not applicable" box.
- Field 26: In section 1, fill in this section, and check the appropriate boxes if health care expenses not covered by insurance, reasonable child care expenses, educational expenses or other extraordinary expenses are to be paid. If not, check the "Not applicable" box. In Section 2, fill in the amount of the adjustment for the health insurance premiums paid for the children. Fill in Section 3 if applicable.
- Field 27: Fill in this section and check the appropriate boxes if the applicable expenses are to be paid. If not, check the "Not applicable"
- Field 28: If an award of exclusive occupancy of the marital residence is to be ordered, insert the appropriate terms, including the address of the marital residence and any other provisions regarding exclusive occupancy. If there is no issue of exclusive occupancy, check the "Not applicable" box. **Note:** A hearing may be held for the court to determine exclusive occupancy unless you and your spouse agree that one of you will remain exclusively in the marital residence.
- Field 29: If there is an agreement or stipulation between the parties, Box A must be checked and you must fill in the date the agreement or stipulation was entered. If you have other wishes regarding the survival of this agreement, please notify the court. If there is no agreement or stipulation between the parties, you must check Box B. **Note the requirements about where post-judgment applications, if any, must be brought.**

- Field 30: Fill in this section and check the appropriate boxes if there is an agreement or stipulation or decision of the court requiring that title to the marital residence is to be transferred to Plaintiff or Defendant.
- Field 31: A Qualified Medical Child Support Order (Q.M.C.S.O.) must be issued where child support is an issue. The Q.M.C.S.O. is included in the forms booklet as Form UD-8b. Check the box if not applicable.
- Field 32: Complete if you have a separation agreement or a decision of the court requiring a Qualified Domestic Relations Order. If not, check the "Not applicable" box.
- Field 33: You must complete this paragraph.
- Field 34: Leave this provision unchanged.
- Field 35: Insert Plaintiff's and/or Defendant's surname before the marriage if different from the current surname.
- Field 36: Fill in this section, and check the appropriate boxes if an award of counsel and/or expert fees is to be made. If not, check the "Not applicable" box.
- Field 37: The court will fill in this section.
- Field 38: The court will fill in this section.

12. PART 130 CERTIFICATION (Form UD-12):

Part 130 of the Rules of the Chief Administrator of the Courts [22 NYCRR] requires that you, or your attorney if you have one, must certify, by signing the form, that every document relating to the divorce action which is served, filed or submitted to the court, is not frivolous as defined in subsection (c) of section 130-1.1. Be sure to type or print your name beneath your signature.

13. REQUEST FOR JUDICIAL INTERVENTION (Form UD-13):

A Request for Judicial Intervention (RJI) form must be completed and submitted with the balance of the divorce papers being filed with the County Clerk's office (see **STEP 9** on page 10). This form requests selected information and is used to assign your case to a judge for review and disposition. When there are children under the age of 18 who are subject to the matrimonial action, you must also complete and submit the Request for Judicial Intervention Addendum Form 840M. Fill out as indicated on the form(s).

14. NOTICE OF ENTRY (Form UD-14):

- Field 1: Insert the county where you brought the action.
- Field 2: Print the index number assigned to the case.
- Field 3: Print the Plaintiff's name.
- Field 4: Print the Defendant's name.
- Field 5: Insert the county where you brought the action.
- Field 6: Print the date the judgment of divorce was entered. You can find this date by looking at the entry stamp on the judgment. If there is no stamp on the document, you must bring it to the County Clerk's Office and have it entered.
- Field 7: List the date you prepared this document.
- Field 8: List your name.
- Field 9: Write in your address.
- Field 10: Write in Defendant's name and address, or, if Defendant has an attorney, the attorney's name and address. Check the appropriate box. You will be sending this Notice of Entry with the Judgment of Divorce to the Defendant as noted on page 12 of this booklet under the heading "After the Judgment of Divorce has been signed."

15. **AFFIDAVIT OF SERVICE OF JUDGMENT OF DIVORCE (Form UD-15):** This form may be used by the person who serves the Judgment of Divorce (Form UD-11) and Notice of Entry (Form UD-14) on the Defendant to prove that service was made on the Defendant. See page 12 under the heading "After the Papers are Approved." Ask the person serving the Judgment of Divorce with Notice of Entry (a person over the age of 18 other than you) to fill it out and sign it before a notary public and return it to you **TO KEEP WITH YOUR IMPORTANT PAPERS.** The Judgment of Divorce with Notice of Entry must be attached.

CERTIFICATE OF DISSOLUTION OF MARRIAGE:

This form is required by the Department of Health. You must fill out the form, although you need not complete the section entitled "Confidential," and submit it to the County Clerk's Office with the filed papers.

POSTCARD:

The forms packet contains a postcard that must be submitted with the filed papers. That postcard must contain the Plaintiff's name, address and the proper postage. It also must contain the name of the case and the index number. The court will use this postcard to notify you of the status of the case, including whether there are any problems with the papers filed.

UCS 111 (DIVORCE & CHILD SUPPORT SUMMARY FORM):

The Unified Court System is required by law to collect various data concerning divorce proceedings involving child support. This form must be completed by the Plaintiff and submitted to the Supreme Court Clerk's Office upon submission of the filed papers. The information reported on the form is confidential and will be used for statistical purposes only. It will not be retained in the permanent case file.

SUPPLEMENTAL APPENDIX OF FORMS INSTRUCTIONS

A. Income Withholding Order and Applying for Child Support Services

A-1 Application for Child Support Services available at:

http://www.nycourts.gov/divorce/divorce_withchildrenunder21.shtml**A-2 Income Withholding Order form for Child Support and Combined Child and Spousal Support - LDSS-5037 (Non-IV-D IWO)**

.(Important Note: This is the actual Form - Use the LDSS-5039 as a Guide when filling it out.

If you or your spouse is to receive child support only or combined child support and maintenance (spousal support), and if no child support services are already being provided through a local district Support Collection Unit (see Instructions on page 11 about whether and how to apply for such services), you or your spouse may ask the Court to issue an Income Withholding Order or the Court may decide to issue such an order on its own. In either case, the Income Withholding Order/Notice form is the form promulgated by the NYS Office of Temporary and Disability Assistance pursuant to CPLR §§5241 and 5242 and **must be used**. No other form of Income Withholding Order can be used. If you are the person making the payment, you are the employee/obligor (or debtor). If you are the person receiving the payment, you are the custodial party/obligee (or creditor). ***Follow the instructions in LDSS 5039, including the numbered instructions for IWO Form LDSS-5037.***

A-2A Income Withholding Order for Spousal Support only- LDSS-5038 (Spousal Support Only IWO)

(Important Note: This is the actual Form - Use the LDSS-5039 as a Guide when filling it out.

If you or your spouse is to receive maintenance (spousal support) *only*, and if no child support enforcement services are already being provided through a local district Support Collection Unit (see Instructions on page 11 about whether and how to apply for such services), you or your spouse may ask the Court to issue an Income Withholding Order or the Court may decide to issue such an order on its own. In either case, the Income Withholding Order form is the form promulgated by the NYS Office of Temporary and Disability Assistance pursuant to CPLR §§5241 and 5242. While not required, this form is recommended for use in New York State for Spousal Support Only IWO's. On IWO Form LDSS-5038 (for Spousal Support Only IWOs) areas not applicable to Spousal Support Only have been grayed out. In addition to graying out fields not applicable to the Spousal Support Only IWO, the other difference from LDSS-5037 is that Spousal Support Only IWOs are payable to the "obligee," not the New York State Child Support Processing Center (SDU). If you are the person making the payment, you are the employee/obligor (or debtor). If you are the person receiving the payment, you are the obligee (or creditor). ***Follow the instructions in IWO Form LDSS -5039, including the numbered instructions for IWO Form 5038.***

A-2B Income Withholding for Support: General Information and Instructions for Issuing-LDSS-5039

(Important Note: Do not complete this form. Use it as a guide when filling out the actual Form LDSS-5037 or LDSS-5038.)

Now that you have finished completing the Income Withholding Order, you should submit it to the Supreme Court Clerk for signature by the Judge. ***After it is signed by the Judge, you must serve a certified copy of the Income Withholding Order on the parties listed in Part A of LDSS-5037 or LDSS-5038. You may use regular mail, but it is suggested that you file an Affidavit of Service of the IWO order with the Clerk of the Court. Spousal Support Only IWO orders (LDSS- 5038) should NOT be served on the New York State Child Support Processing Center (SDU).***

B. NEW YORK STATE CASE REGISTRY FILING FORM:

Information about child support orders must be filed with the State Case Registry by filing a New York State Registry Filing Form. If a party to the order is receiving child support services from the support collection unit (known as a IV-D case), the support collection unit will report the information. A case is receiving support collection services if: 1) the County Department of Social Services (or, in New York City, HRA) is a party to the order because a child is receiving public assistance benefits, Medicaid or is in foster care; or 2) a party has applied for services including collection and enforcement of the support order. If you are unsure whether the case is receiving child support services, contact the court clerk.

You MUST complete and submit the State Case Registry form:

- a) if your case involves child support or combined spousal and child support and the Court issues an Income Withholding Order that requires the employer to remit payments to the NYS Child Support Processing Center (SDU); or
- b) if the court determines that immediate income withholding is not required by statute and payments are made directly to the custodial party/obligee.

Note: If your support order is generated (or prepared) by Family Court, the court will take care of filing the form, but if your support order is from Supreme Court, you must complete and use the form posted on the Divorce Resources website at: http://www.nycourts.gov/divorce/forms_instructions/case-reg.pdf . The instructions are attached to the form.

You should NOT complete and submit the State Case Registry form:

- a) if your case involves spousal support only; or
- b) if a party to the order is applying for, or receiving, support services from, a local Support Collection Unit pursuant to the child support program.

If you are required to complete and submit the State Case Registry Form, follow the instructions attached

to the form posted at http://www.nycourts.gov/divorce/forms_instructions/case-reg.pdf

C. NOTICE OF SETTLEMENT:

If required by the court, or requested by the Defendant, fill out this form and serve it on the Defendant together with a copy of the orders and/or judgment being settled.

- Field 1: Insert the county in which you are bringing the action.
- Field 2: Insert the index number.
- Field 3: Print the Plaintiff's name.
- Field 4: Print the Defendant's name.
- Field 5: Check the appropriate box or boxes as to the documents that are being noticed for settlement. Specify any other order(s) being submitted.
- Field 6: Insert the address of the court in which the action is pending. Select a date that the Proposed Judgment of Divorce, Qualified Medical Child Support Order or any other order will be presented to the court, and insert that date. Note: the date that is selected must be at least 5 days after you serve the other party personally with a copy of the Proposed Judgment of Divorce, Qualified Medical Child Support Order or any other order; or at least 10 days after the day you serve the other party by mail with a copy of the Proposed Judgment of Divorce, Qualified Medical Child Support Order or any other order.
- Field 7: Insert the date the form is being prepared.
- Field 8: Check the appropriate box as to who prepared the form and fill in the name, address and telephone number of that person.
- Field 9: Check the appropriate box as to the person whom the Notice of Settlement is being served upon and fill in the name, address and telephone number of that person.

POOR PERSON STATUS / WAIVER OF FILING FEES:

The State of New York recognizes that some individuals may lack the financial resources needed to pay the filing fees and court costs associated with filing for an uncontested divorce. The law permits an application for poor person status, thus relieving the person of the obligation to pay those fees, costs and expenses required. You will not be allowed an exemption from the obligation to pay merely because your circumstances are difficult. Rather, you must fill out an affidavit that indicates you are unable to pay the fees and costs associated with the lawsuit and as such will not be able to proceed in the absence of an order granting an exemption.

To request poor person status, you must fill out the Affidavit in Support of Application to Proceed as a Poor Person (with proof of income attached such as your W-2 or benefit statement), and the Poor Person Order and file these papers with the County Clerk's Office when you file the summons with notice or summons and verified complaint. Before you file the papers, check with the County Clerk's Office or Supreme Court clerk's office for further instructions and to see if any additional papers are needed to obtain poor person status. Be sure to make and retain copies of the papers. You may be required to serve a copy of each set of papers upon the County Attorney (outside of New York City) or Corporation Counsel (within the City of New York) and your spouse or his/her attorney. You are allowed to have these papers served by mail. **Service by mail must be done by someone other than the Plaintiff who is over the age of 18 and not a party to the action.** The server may use the Affidavit of Service of Proposed Poor Person's Order included in this packet. The Affidavit in Support of Application to Proceed as a Poor Person with proof of income attached and the Poor Person Order must be attached to it. **Ask the person serving it to fill it out and sign it before a notary public and return it to you.**

NOTE: If you are incarcerated, you cannot submit the poor person's waiver forms included in this packet. You will need to submit an application pursuant to C.P.L.R. 1101(f).

D. POOR PERSON ORDER:

- Field 1: Insert the county in which you are bringing this action.
- Field 2: Fill in the address of the courthouse where you are submitting the papers.
- Field 3: Leave this section blank. The court will fill in.
- Field 4: Leave this section blank. The court will fill in.
- Field 5: Insert the index number.
- Field 6: Print the Plaintiff's name.
- Field 7: Print the Defendant's name.
- Field 8: Insert the Plaintiff's name.
- Field 9: Insert the Plaintiff's name.
- Field 10: Fill in the appropriate subdivision number and the ground for divorce.
- Field 11: Insert the Plaintiff's name.
- Field 12: Insert the Plaintiff's name.
- Field 13: Insert the Defendant's name.
- Field 14: Leave this section blank. The Judge will sign here.

E. AFFIDAVIT IN SUPPORT OF APPLICATION TO PROCEED AS A POOR PERSON:

- Field 1: Insert the county in which this action is brought.
- Field 2: Print the Plaintiff's name.
- Field 3: Insert the index number.
- Field 4: Print the Defendant's name.
- Field 5: Insert the county in which the Plaintiff signed this document.
- Field 6: Insert the Plaintiff's name.
- Field 7: Fill in the address of Plaintiff, the village where the Plaintiff resides and the county where the Plaintiff resides. In addition, indicate the number of years that the Plaintiff resided in New York State.
- Field 8: Fill in the appropriate subdivision number and the grounds for divorce as indicated at the end of the form.
- Field 9: Plaintiff must list all sources of income including any amounts earned on a weekly, monthly or yearly basis and submit proof. For example, Plaintiff may attach a pay stub, W-2 form or social services identification.
- Field 10: Plaintiff must list any property that he or she has and the value of this property. This must include bank accounts and the amounts in those bank accounts.
- Field 11: Leave this section unchanged.
- Field 12: Leave this section unchanged.
- Field 13: Indicate whether prior requests were made for similar relief.
- Field 14: Plaintiff must sign this document before a notary public.

F. AFFIDAVIT OF SERVICE OF POOR PERSON'S ORDER

See instructions above under POOR PERSON STATUS / WAIVER OF FILING FEES.

F. DRL 255 ADDENDUM

This form may be used as an addendum to a stipulation of settlement/agreement in compliance with domestic relations law 255(2).

**NEW YORK STATE
UNIFIED COURT SYSTEM**

UNIFORM UNCONTESTED DIVORCE PACKET GLOSSARY

Abandonment:

A ground for divorce. Abandonment occurs when the Defendant has left the Plaintiff continuously, for a period of one year or more, without the Plaintiff's consent.

Addendum:

An attachment.

Adultery:

A ground for divorce. Adultery is any sexual act or deviate sexual act with a partner other than your spouse.

Affidavit of Service:

This document is completed by the person who has served either: **(a)** the *Summons (Form UD-1a)* and *Verified Complaint (Form UD-2)*; or **(b)** the *Summons with Notice (Form UD-1)* for divorce on your spouse. It contains an oath that the papers were properly served. Once completed, the document is submitted with these papers.

Ancillary Relief:

Additional or supplemental relief such as custody, child support, etc.

Calendar Number:

This number is assigned by the court to an action upon the filing of the papers for divorce with the court.

Cohabit:

To live together as husband and wife.

**Constructive
Abandonment:**

A ground for divorce. Constructive Abandonment occurs when the Defendant has refused to engage in sexual relations with the Plaintiff, continuously for one year or more, without the Plaintiff's consent.

Contested Divorce:

A divorce action which is defended.

Corroborate:

To support a statement, argument, etc. with confirming facts or evidence.

**NEW YORK STATE
UNIFIED COURT SYSTEM**

UNIFORM UNCONTESTED DIVORCE PACKET GLOSSARY

<u>Counterclaim:</u>	The Defendant's response to the Verified Complaint, contained in the Verified Answer, which asserts as well the Defendant's allegations of his or her own grounds for divorce against the Plaintiff.
<u>County Clerk's Office:</u>	The place where the index number is purchased or obtained and also where the papers in the divorce actions are filed. In many areas, this office is located in the Supreme Court.
<u>Cruel and Inhuman Treatment:</u>	A ground for divorce. Cruel and Inhuman Treatment consists of cruelty, whether physical, verbal, sexual or emotional, committed by the Defendant, against the Plaintiff, that endangers the Plaintiff's well-being and makes living together either unsafe or improper.
<u>Default Judgment:</u>	A divorce judgment which is obtained against the Defendant when the Defendant fails to respond to the (a) the Summons (form UD-1a) and <i>Verified Complaint (Form UD-2)</i> ; or (b) the Summons with Notice Form UD-1 for the divorce within the time allowed by law.
<u>Defendant:</u>	The person whom the divorce is initiated against.
<u>Domestic Relations Law:</u>	The "DRL" is the body of the New York State law that states the law to be followed for divorce and other matrimonial actions.
<u>Emancipation:</u>	Under New York law, child support must be paid to the age of 21. If a child marries, enters the military or becomes self supporting, the court may consider the child emancipated and the child support may be terminated.
<u>Equitable Distribution:</u>	The manner in which marital property is required to be divided by law in a divorce action in New York State.

***NEW YORK STATE
UNIFIED COURT SYSTEM***

UNIFORM UNCONTESTED DIVORCE PACKET GLOSSARY

Family Court:

The Family Court in New York has the jurisdiction to decide cases involving child support, custody, visitation, spousal support and family offices (Orders of Protection). A divorce action cannot be commenced in this court.

Index Number:

The number assigned to every action or proceeding commenced within the New York State Supreme Court. The number is used to identify a case throughout the court system in that particular county. The number is either: (a) purchased; or (b) obtained after a Proof Person Application is filed and approved by the court.

Judgment of Divorce:

A document signed by the court granting the divorce (**Form UD-11**).

Maintenance:

Support paid by one party to the marriage for the support of the other party to the marriage pursuant to a final Judgment of Divorce (sometimes also referred to as “post-divorce maintenance” or “spousal support”)

Marital Assets:

Any property, regardless of which person is named as owner, that is acquired by the Plaintiff or Defendant from the date of the marriage to the commencement of the divorce action. A house, car, IRA, joint bank account, pension or annuity are all examples of marital property.

Notice of Entry:

Provides proof to the court that a true copy of the divorce judgment was served on the Defendant. (**Form UD-12**)

Order of Protection:

An order issued by a court that directs one individual to stop certain conduct, such as harassment, against another individual and that may order the individual to be excluded from the residence and to stay away from the other individual, his or her home, school, place of employment and his or her children.

Plaintiff:

The person who starts the action.

**NEW YORK STATE
UNIFIED COURT SYSTEM**

UNIFORM UNCONTESTED DIVORCE PACKET GLOSSARY

Poor Person Application:

An application made to the court, by either the Plaintiff or Defendant, stating that because of insufficient income he or she is unable to pay the court fees normally required for divorce actions. If the application is granted by the court, the usual court costs for the divorce action are waived.

Removal of Barriers to Remarriage:

This form is necessary when the marriage was solemnized in a religious ceremony by a clergyman, minister of any religion, or a leader of The Society for Ethical Culture in the City of New York. It refers to the removal of religious barriers to remarriage.

Summons with Notice:

This document (**Form UD-1**) provides notice to the Defendant that the Plaintiff commenced a divorce action. It also states the relief the Plaintiff has requested. Some of the different types of relief are child support, custody, visitation, spousal maintenance and equitable distribution.

Supreme Court:

Divorce actions are started in this court in New York State.

Supreme Court Clerks Office:

An office separate from the County Clerk's Office, which provides clerical support to the Supreme Court.

Third Party:

A party to a court action who is not the Plaintiff or Defendant.

Unemancipated Children:
(See "Emancipation")

Children under the age of 21 who are supported by a parent or guardian

Uncontested Divorce:

A divorce action in which the Defendant does not respond to the Summons or otherwise agrees not to oppose the divorce.

Venue:

The proper or a possible place for the trial of a lawsuit.

***NEW YORK STATE
UNIFIED COURT SYSTEM***

UNIFORM UNCONTESTED DIVORCE PACKET GLOSSARY

Verified Answer:

The Defendant's response to the Verified Complaint. The principal difference between a Verified Answer and a counterclaim in a divorce action is that a Verified Answer responds only to the allegations of the Verified Complaint, whereby a counterclaim is added to the Verified Answer to additionally allege that the Defendant seeks a divorce from the Plaintiff.

Verified Complaint:

The document containing the Plaintiff's allegations of his or her grounds for divorce (**Form UD-2**).