

ONTARIO COUNTY PETITION INFORMATION SHEET

03/2020

Please complete the following by filling in all blank spaces. If you do not know the information you may leave it blank. Social security number and date of birth for the parties and children should be provided. SS# must be provided in support cases. **If you are requesting your address be kept confidential, an application for confidential address must be completed and submitted. Please request this additional form from the clerk. FAMILY COURT CLERKS CANNOT FILL OUT FORMS FOR YOU.** If you need assistance you may contact an attorney (you are not required to have an attorney).

ALL COURT FORMS MUST BE COMPLETED IN BLACK INK.

PETITIONER (Person Filing)

Name: _____
Maiden Name: _____
Date of Birth: _____
Place of Birth: _____
Social Security #: _____
Home: () _____
Cell: () _____
Email : _____
Address: _____
_____ Zip Code _____
Interpreter needed? ____ Yes ____ No
If yes, what language _____
Employer: _____

RESPONDENT (Other Party)

Name: _____
Maiden Name: _____
Date of Birth: _____
Place of Birth: _____
Social Security #: _____
Home: () _____
Cell: () _____
Email : _____
Address: _____
_____ Zip Code _____
Interpreter needed: ____ Yes ____ No
If yes, what language _____
Employer: _____

Physical Description of Respondent: Sex ____ Race ____ Ethnic Origin ____ Height ____ Weight ____
Eye color ____ Hair color ____ Driver's license# ____ License plate ____

Children of Parties: NAME	DATE OF BIRTH	PLACE OF BIRTH	SOCIAL SECURITY #	M/F
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Your signature(s) on the petition(s) must be witnessed, **except for support petitions**. Therefore, do not sign unless you are in front of a Notary/Commissioner of Deeds. This may be done at a bank or other location or by a Family Court Clerk. You must have **photo** identification.

In some cases, personal service is required. If you are required to personally serve the other party, instructions will be included when the petition and summons are returned to you.

Please return all completed forms to:
Ontario County Family Court
27 North Main Street
Canandaigua, NY 14424.

DATE: _____

**FAMILY COURT OF THE STATE OF NEW YORK
COUNTY OF ONTARIO**

REV. 4/2021

Seventh Judicial District Family Court information: <http://www.nycourts.gov/courts/7jd/courts/family>

In the Matter of

FILE #: _____

_____, **PETITIONER**

DOCKET#: _____

FIRST M.I. LAST (DOB) (PERSON FILING)

PETITION FOR

ADDRESS:** _____

☐ **CUSTODY** ☐ **VISITATION**

☐ **MODIFY FAMILY COURT ORDER**

☐ **MODIFY ORDER OF ANOTHER COURT**

-AGAINST-

RESPONDENT 1 (PERSON FILED AGAINST)

RESPONDENT 2 (PERSON FILED AGAINST)

FIRST M.I. LAST (DOB)

FIRST M.I. LAST (DOB)

ADDRESS:** _____

ADDRESS:** _____

** Or indicate if address ordered to be confidential pursuant to Family Court Act §154-b(2) or Domestic Relations Law § 254. If requesting a confidential address, you must file a confidential address application (Form GF- 21).

THE PETITIONER STATES THE FOLLOWING:

1. The Relationship between the Petitioner and the Respondent is:

- ☐ Spouse (date of marriage _____)
- ☐ Former Spouse (date of divorce _____) Attach copy of Divorce Decree
- ☐ Have child in common - never married
- ☐ Petitioner is the Parent of (specify) _____
- ☐ Other (specify) _____

2. The children who are the subjects of this proceeding are:

NAME	DOB	SEX	LIVES WITH
_____	____/____/____	M F	PET <input type="checkbox"/> RESP 1 <input type="checkbox"/> RESP 2 <input type="checkbox"/>
_____	____/____/____	M F	PET <input type="checkbox"/> RESP 1 <input type="checkbox"/> RESP 2 <input type="checkbox"/>
_____	____/____/____	M F	PET <input type="checkbox"/> RESP 1 <input type="checkbox"/> RESP 2 <input type="checkbox"/>
_____	____/____/____	M F	PET <input type="checkbox"/> RESP 1 <input type="checkbox"/> RESP 2 <input type="checkbox"/>

3. The relationship of each party to the children named above is: (If you are a relative, state whether related to mother or father).

	Mother	Father	Other
Petitioner	<input type="checkbox"/>	<input type="checkbox"/>	_____
Respondent 1	<input type="checkbox"/>	<input type="checkbox"/>	_____
Respondent 2	<input type="checkbox"/>	<input type="checkbox"/>	_____

Note: If a custody or visitation proceeding is pending or an order of custody or visitation has been issued by a court outside of the State of New York, including a Native American Tribunal, or if the Respondents live outside the State of New York, the custody/visitation petition for proceedings under the *Uniform Child Custody Jurisdiction and Enforcement Act* (Form UCCJEA-1) should be used instead of this form.

4. ☐ Petitioner ☐ Respondent ☐ is currently on ☐ has returned from active duty, deployment or temporary assignment to military service? ☐ No ☐ Yes (If Yes - name military branch or National Guard unit, dates and location of duty and how such duty is likely to affect ability to exercise custody, if at all):
- _____
- _____

5. List where the child/children has/have lived in the past 2 years:

CHILD'S NAME	COUNTY/STATE	DURATION (from/to)
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_____	_____	_____
_____	_____	_____
_____	_____	_____

6. List the name(s) of the person(s) with whom each child has lived during the past 2 years:

NAME	COUNTY/STATE	DURATION (from/to)
------	--------------	--------------------

_____	_____	_____
_____	_____	_____
_____	_____	_____

IF THERE HAS NOT BEEN A CUSTODY OR VISITATION ORDER ISSUED IN ANY COURT, COMPLETE NUMBERS 7 AND 8, THEN SKIP TO THE INSTRUCTIONS ABOVE NUMBER 12.

7. The father of the child(ren) in this proceeding is (name) _____
The mother of the child(ren) in this proceeding is (name) _____
Paternity of the children was established as follows:
- ☐ Mother and Father were married at the time of conception or birth
- ☐ An Acknowledgment of Parentage signed on _____, _____, for _____ (attach copy)
- ☐ Court Order of Filiation: Docket No. _____ (attach copy of Order if not from this Court)
- ☐ **PATERNITY HAS NOT BEEN LEGALLY ESTABLISHED**
(If the category selected does not apply to all children, explain)
- _____
- _____

8. State why it would be in the best interest of the child(ren) for you to have custody or visitation:
(IF YOU NEED ADDITIONAL SPACE, PLEASE ASK FOR A CONTINUATION SHEET.)

**IF THERE HAS BEEN A CUSTODY OR VISITATION ORDER ISSUED IN ANY COURT,
COMPLETE NUMBERS 9 THROUGH 11.**

9. By an Order of ☐ This Family Court ☐ Another Family Court [specify] _____
☐ Supreme Court [specify] _____ Order Date _____.

(You must attach a copy of the Order if it is not from this Court)

The ☐ Petitioner ☐ Respondent was given ☐ Custody ☐ Visitation as follows:

(state what the Order is now)

10. Since the entry of that Order, there has been a change in circumstances as follows: **(state what has changed since the last Order was made)**

11. Because of this change in circumstances, the Order should be modified (changed) as follows: **(state how you want the Order changed)**

Answer Question 12 only if you are NOT a parent to the child(ren) named in this Petition.

12. Do you know of any Child Protective (Neglect or Abuse), Destitute Child, Voluntary Placement, or Permanency Proceedings involving the Child(ren) on this petition?

☐ Yes ☐ No If Yes, please ask for and fill out the

Child Protective/Destitute Child/Voluntary Placement Addendum

13. Are you involved in any other proceeding in any other court? ☐ Yes ☐ No If Yes, explain:

A Final or Temporary **Order of Protection** has been issued ☐ against Respondent ☐ against me
in the following proceeding(s) [specify criminal, matrimonial or Family Court, date of Order, next court
date and status of case if available]

<u>COURT</u>	<u>ORDER DATE</u>	<u>AGAINST</u>	<u>ORDER EXPIRES</u>	<u>NEXT COURT DATE</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

14. The Petitioner requests a Temporary Order of Protection [FCA 655] because:

15. [Applicable where one or more parties are not parents of the child(ren);

The subject child(ren) ☐ is(are) ☐ is(are) not Native-American child(ren) subject to the Indian Child
Welfare Act (25 U.S.C. §§ 1901-1963). If so, the following have been notified (check applicable box):

- ☐ parent/guardian (specify name and give notification date):
- ☐ tribe/nation (specify name and give notification date):
- ☐ United States Secretary of the Interior (give notification date):

I ASK THE COURT TO ISSUE AN ORDER OF ☐ CUSTODY AND/OR ☐ VISITATION AND FOR
ANY OTHER APPROPRIATE RELIEF.

DATED: _____

PETITIONER-signature

STATE OF NEW YORK:

VERIFICATION

PRINT NAME

COUNTY OF ONTARIO:

Petitioner, being duly sworn, states: I have read this petition and its contents are true to my own
knowledge, except to matters alleged to be on information and belief and, as to those matters, I
believe them to be true.

Sworn to before me on

PETITIONER-signature

_____, 20____

(Deputy) Clerk of the Court,
Notary or Comm. Of Deeds