



REQUEST TO SUSPEND SUPPORT – COVER LETTER

Date: _____

Case Number: _____

Enclosed is form 470-3033, *Request to Suspend Support*. Because the Unit is not currently enforcing your order, you must also complete the enclosed form 470-0188, *Application for Non-Assistance Support Services*.

Please read the *Procedures for Suspending, Satisfying and Reinstating Child Support Obligations (Comm. 240)*. This document explains the requirements to suspend an obligation, gives you information you need to complete your request and tells you about being barred from future requests for suspension.

Return the completed request to the office listed below. We will use the information you give us to determine if we can suspend the support order. If you have any questions about the suspension process or how to fill out the forms, please contact your local office at the number listed below.

Child Support Recovery Unit

Worker Name: _____

Telephone: _____



REQUEST TO SUSPEND SUPPORT

Part 1. The Basis for Suspension

- Reconciliation:** one or more of the children live in the same household with both parents.
- Change in Residency:** one or more of the children live in the same household with the person ordered to pay child support.

✓ Select *only one* of the options above. You cannot select both, but must mark one.

Part 2. Necessary Party Information

Payor Information (person ordered to pay support):

▶ First Name	Middle	▶ Last	Telephone Number	
▶ Street Address		▶ City	▶ State	▶ Zip Code

Payee Information (person entitled to receive support):

▶ First Name	Middle	▶ Last	Telephone Number	
▶ Street Address		▶ City	▶ State	▶ Zip Code

List any other adult entitled to receive support for the child now, in the past, or in the future:

▶ First Name	Middle	▶ Last	Telephone Number	
▶ Street Address		▶ City	▶ State	▶ Zip Code

✓ If there are other adults entitled to receive support, list them on the back of this page. Use the same format as above.



Part 3. Court Order Information (List all orders for the same payor, payee, and children for whom you want support suspended.)

▶ Court Order Number	▶ Date Filed	▶ County	Includes Spousal Support (alimony)? <input type="checkbox"/> Yes <input type="checkbox"/> No
▶ Court Order Number	▶ Date Filed	▶ County	Includes Spousal Support (alimony)? <input type="checkbox"/> Yes <input type="checkbox"/> No

✓ If there are more orders, list them on the back of this page. Use the same format as above.
 ✓ The Unit can only suspend support for Iowa orders or out-of-state orders over which the state of Iowa has jurisdiction.
 ✓ **Note: All current support obligations that are for the same payor (person ordered to pay), payee (person entitled to receive support), and child must be suspended. List all of the orders to be suspended that involve the same parties.**

Part 4. Children Whose Support Should be Suspended

▶ Name (first, middle, last)	▶ Birthdate	▶ Child currently living with (Select <u>only one</u>) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/> Other _____
▶ Name (first, middle, last)	▶ Birthdate	▶ Child currently living with (Select <u>only one</u>) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/> Other _____
▶ Name (first, middle, last)	▶ Birthdate	▶ Child currently living with (Select <u>only one</u>) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/> Other _____

✓ If there are more children, list them on the back of this page. Use the same format as above.
 ✓ If you select 'Other' for the person with whom the child lives, state the person's name and relationship to the child.
 ✓ **NOTE: IF YOU WANT SUPPORT SUSPENDED FOR FEWER THAN ALL OF THE CHILDREN INCLUDED IN THE ORDER, THE ORDER MUST INCLUDE A STEP CHANGE. THIS IS LANGUAGE THAT SAYS HOW MUCH SUPPORT IS DUE AS THE NUMBER OF CHILDREN ENTITLED TO SUPPORT CHANGES.**



Part 5. Types of Support to be Suspended

By asking for a suspension of the orders listed in part 3, you are asking the court to end the ongoing support including:

- Child support
- Medical support (owed by either party)
- Spousal support (if there is spousal support in the order and the parents have reconciled).

NOTE: Asking for a suspension does not change the amount of past-due support. The Unit continues to enforce and collect on the unpaid balance by any means allowed by law.

Part 6. Satisfaction of Past-Due Support

If you are the person entitled to receive support, you have the right to satisfy unpaid support owed to you from an order that was suspended or is currently being suspended. Satisfying unpaid support owed to you means you give up your right to this money forever. If you are interested in satisfying support, enter an "X" in the box next to the "Yes."

- Yes, please send me more information about my right to satisfy unpaid child support due me.**
- No, I am not interested in satisfying unpaid child support at this time.**

- ✓ If a person requests satisfaction, the Unit may help satisfy some or all of any delinquent support owed to that person.
- ✓ The unit cannot help satisfy support due to the State of Iowa.
- ✓ Once the court approves a satisfaction, any past due support that is satisfied cannot be reinstated.



Part 7. Certification Signature

By signing this, I state that the child(ren) live in the same household as the person ordered to pay support and the reason for suspending the support obligation(s) is reasonably expected to continue for at least six months.

I listed all orders affecting the same payor, payee, and children for whom support should be suspended. I understand that if I do not tell the Unit about additional orders, support enforcement of those orders could continue.

I read the *Procedures for Suspending, Satisfying and Reinstating Child Support Obligations (Comm. 240)*. I understand unless I meet certain limited exceptions, I will be barred from future requests for suspension for two years (252B.20). I understand that if I have any questions about the process, I can call my local office, or consult an attorney. I understand the CSRU attorney does not represent me.

I read the information above and take full responsibility for the information I provided on this request form.

_____	_____
Signature of person making the request	Date
_____	_____
Relationship to the children	CSC case number

- ✓ **You must sign your name and date the form.**
- ✓ List your relationship to the children for whom you are requesting suspension.
- ✓ To ask for the suspension, you are required by law to declare that the child lives in the same household with the person ordered to pay support and is reasonably expected to continue to live in that household for no less than six months.