

NOTICE OF DECISION TO REINSTATE SUPPORT ORDER

Date: _____
Child Support Recovery Unit

Telephone: (_____) _____
Case Number: _____
Worker: _____

This notice is to let you know that we received your request to reinstate the suspended ongoing support obligations for the following orders:

<i>Court Order Number</i>	<i>Date Filed</i>	<i>County</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

We took the following action regarding your request:

- Request approved.** Your request for reinstatement has been approved because the reason for suspension no longer exists. The Child Support Recovery Unit will file an application with the court asking for the reinstatement of the following support obligations:
 - Ongoing child support for the children entitled to current support.
 - Ongoing medical support for the children entitled to current support.
 - Ongoing spousal support, including medical support, for a spouse or former spouse.

The Child Support Recovery Unit will send or provide notice of the Application for Reinstatement to all parties affected by the order(s) to be reinstated.

Any affected party, or the party's attorney, may object to the reinstatement by filing a written objection with the clerk of court indicated on the Application within ten days of receiving notice that the Application has been filed. If an objection is filed, all affected parties will be advised of the place and time of any scheduled court hearing regarding the Application for Reinstatement.

Note: The child support recovery attorney represents the state of Iowa in any hearing. Any affected parties can represent themselves or obtain the services of a private attorney.

If no timely objection is filed, the Child Support Recovery Unit will ask the court to enter an order to reinstate the suspended ongoing support obligations indicated. Ongoing support will be reinstated effective the earlier of:

The date the children begin receiving public assistance benefits when the obligor is not part of the public assistance household; or

The date the affected parties are provided notice of the application for reinstatement of support.

NOTICE OF DECISION TO REINSTATE SUPPORT ORDER (PAGE 2)

Ongoing support was not due during the period the obligation was suspended, unless it has been determined that an order was suspended due to fraud. In the event of fraud, any support that would have been due during the suspension is due and subject to collection.

- Request denied.** Your request for reinstatement has been denied because
 - the request was received more than six months since the date the order suspending support was filed.
 - the request was made by someone other than the obligor, the obligee, the assignee, redirection obligee, or their respective attorneys.
 - the request was not submitted in writing, or did not contain sufficient information to identify the order or necessary parties involved, or did not indicate the reason for the reinstatement, or was not properly signed.
 - the Child Support Recovery Unit is no longer providing enforcement services for the order to be reinstated.
 - the request is for partial reinstatement of the suspended order. The reason for suspension still applies to one or more children.
 - _____

This denial **does not** prohibit a party or a party's attorney from petitioning the court directly to reinstate a suspended support order.

If you have any questions regarding this notice or the reinstatement process, please contact the local office indicated on the first page of this notice.

POLICY ON NONDISCRIMINATION

This action was taken without regard to race, color, creed, sex, age, physical or mental disability, religion, national origin, or political belief. If you have reason to believe you have been discriminated against for any of the reasons stated above, you may file a complaint with the Iowa Department of Human Services (IDHS) by completing a Discrimination Complaint form. Any IDHS office, institution, or the IDHS Diversity Programs Unit can give you a form. You may also file a complaint with the Iowa Civil Rights Commission (if you feel you were treated differently **BECAUSE OF** your race, creed, color, national origin, sex, religion, or disability); or the United States Department of Health and Human Services, Office for Civil Rights.

Iowa Department of Human Services
Diversity Programs Unit 1st Fl
1305 E Walnut
Des Moines IA 50319-0114

IOWA CIVIL RIGHTS COMMISSION
211 E Maple St
Des Moines IA 50309-1858

US DEPARTMENT OF HEALTH AND HUMAN
SERVICES
Office for Civil Rights Region VII
Federal Bldg Rm 248
601 E 12th St
Kansas City MO 64106-2808

Sent to:

- Person who requested reinstatement
- Attorney for person who requested statement