

Iowa Department of Human Services

CERTIFICATE OF NONCOMPLIANCE

Case Number: Worker ID: Child Support Recovery Un
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This certifies that the above-named payor is not in compliance with a support order being enforced by the Child Support Recovery Unit (Unit).

According to Iowa Code section 252J.7, as a licensing agency, you are required to:

- Begin steps to suspend, revoke, or refuse to issue or renew the licenses and motor vehicle registrations of the above-named payor.
- Provide notice to the payor of your intent to suspend, revoke, or refuse to issue or renew licenses and motor vehicle registrations of the above-named payor. Your notice must include the date your action becomes effective. Your action shall be effective no sooner than 30 days from the date you provide this notice to the payor.

If you have any questions, contact the Unit listed above. A copy of this certificate has been sent to the payor.

Payor's Rights and Responsibilities

To the payor:

The licensing agency will begin sanctioning your licenses and motor vehicle registrations. This process cannot be stopped until you pay all past-due support, provide your employer information, or qualify for an exemption. If you do not have an existing License Sanction Payment Agreement, you may be allowed to enter into a payment agreement.

You must pay any fees or fines due to the suspension or revocation of your licenses and motor vehicle registrations.

To challenge the license sanction, you may <u>ask for a conference</u> with the Unit or <u>apply for a</u> district court hearing in the county where your support order is filed.

<u>To ask for a conference</u>, complete the License Sanction Request for Conference section on page 3 and send it to the Unit's address listed at the bottom of page 3. The Unit will send you a notice with the date and time of the conference, and what documents you need to provide for the conference. **NOTE:** If you have already had a license sanction conference and have an existing License Sanction Payment Agreement, you will not be given another license sanction conference. You must make up all missed payments from your License Sanction Payment Agreement, pay all past-due support, or apply for a district court hearing.

<u>To apply for a district court hearing</u>, you must file a written application for a court hearing <u>within</u> <u>30 days</u> from the date on the licensing agency's notice. File the written application with the clerk of court in the county where your support order is filed and send a copy to the Unit's address listed on the top of page 1. **NOTE:** A review by the court is limited to a mistake of fact. Visitation, custody, or other issues not related to the amount of child support owed are not grounds for a hearing to challenge a license sanction.

If you have questions, you may call the Unit listed at the top of page 1 or consult a private attorney at your own expense.

The undersigned certifies that the Certificate of Noncompliance was sent to the named licensing agency on _____ and a copy of this document was sent to the named payor at the last address known by the Unit, by placing a copy in the U.S. mail, postage prepaid on _____. Policy Regarding Discrimination, Harassment, Affirmative Action and Equal Employment Opportunity

The lowa Department of Human Services (DHS) policy on non-discrimination, harassment, affirmative action, and equal

employment can be viewed on the DHS website at the bottom of the page at: dhs.iowa.gov.

(This is **not** used to request a district court hearing.)

Worker ID:	 Name:		
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My employer's nan	ne, address, and phone r	number:	
of the conference. worker's availability NOTE: If you have Sanction Payment must make up all mast-due support, or the conference.	The conference day and . The Unit's office hours already had a license sa Agreement, you will not be	I time depend on the Us are 8:00 AM to 4:30 anction conference and be given another licentur License Sanction Pet hearing.	Perence with the date and time Unit's office hours and the PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and time PM, Monday through Friday. In the date and through Friday. In the date and time PM, Monday through Friday. In the date and the da
	Waiver of	Rights: (Optional)	
By signing below, I	requires the Unit to wait t	ten days before holdir n-day waiting period ar	ng the conference. nd agree to an earlier date,
Signature (Optional)		Date	_
Send this form to:	Child Support Recovery «CSRUADDR1» «CSRUADDR2» «CSRUCITYSTZIP»	y Unit	