

Iowa Department of Human Services
NOTICE OF STAY OF LICENSE SANCTION

Obligor name
Obligor address line 1
Obligor address line 2
Obligor city, state, and zip code

Date Notice Prepared: **MM/DD/CCYY**
Case Number #: **0000000**
Worker ID: **XXXX**
Child Support Recovery Unit
CSRU address line 1
CSRU address line 2
CSRU city, state, and zip code
Tel. **CSRU general telephone**

Obligor: **Obligor name**
SSN: **Obligor Social Security number**

This is to inform you that the proceedings to impose a license sanction against **Obligor name** are **stayed**. Please cease all action to sanction the licenses held by this obligor until you receive further notice from the Child Support Recovery Unit, or through an order of the court.

The above named child support obligor has **{Select one of the following three actions taken by the obligor:**

- 1. requested a conference.**
- 2. made an application for a hearing**
- 3. Other (if you choose this option, you must also select and enter the reason for the stay).}**

If you receive a notice of hearing from the district court in this case, please send the clerk of court in that county a certified copy of the notice you sent to the obligor of your intent to suspend, revoke, or deny issuance or renewal of a license. This notification to the clerk of court is pursuant to Iowa Code section 252J.9(1).

Child Support Recovery Unit