|  |  |  |
| --- | --- | --- |
|  |  | |
| Name |  | |
|  |  | |
| Address |  | |
|  |  | |
| City, State, Zip |  | |
|  | **If you do not respond to this document within applicable time limits, judgment could be entered against you as requested.** | |
| Phone |  | |
|  | **Check your email.** You will receive information and documents at this email address. | |
| Email |  | |
| I am [ ] Petitioner [ ] Respondent  [ ] Petitioner’s Attorney [ ] Respondent’s Attorney (Utah Bar #:\_\_\_\_\_\_\_\_\_\_)  [ ] Petitioner’s Licensed Paralegal Practitioner  [ ] Respondent’s Licensed Paralegal Practitioner (Utah Bar #:\_\_\_\_\_\_\_\_\_\_) | | | |
| In the District Court of Utah  \_\_\_\_\_\_\_\_\_\_ Judicial District \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County  Court Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| In the Matter of (select one)  [ ] the Marriage of (for a divorce with or without children, annulment, separate maintenance, or temporary separation case)  [ ] the Children of (to establish custody, parent-time or child support)  [ ] the Parentage of the Children of (for a paternity case)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of Petitioner)  and  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of Respondent)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other parties (if any) | | **Petition to Modify Child Support**  (Utah Rule of Civil Procedure 106)  **[ ] and Stipulation**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Case Number  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Judge  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Commissioner | |

I ask the court to modify the child support orders as follows.

1. **Controlling order**

The order controlling child support is:

|  |  |  |  |
| --- | --- | --- | --- |
| Title of order: |  | | |
| Name of Court: |  | State |  |
| Address of Clerk of Court: |  | Phone Number of Clerk of Court: |  |
| Case Number: |  | Case Name |  |
| Date Signed: |  | Signed by Judge: |  |

2. **Controlling support order**

(Required.)

[ ] I have attached a copy of the current order.

3. **Jurisdiction** (Authority to Modify Order)

(Note: an order could be registered in another state, but that does not always mean the other state has jurisdiction to modify or change the order.)

The children reside:

|  |  |  |
| --- | --- | --- |
| Child’s name | Where child resides (state or country) | Lived there more than 6 months? |
|  |  | [ ] Yes  [ ] No |
|  |  | [ ] Yes  [ ] No |
|  |  | [ ] Yes  [ ] No |
|  |  | [ ] Yes  [ ] No |
|  |  | [ ] Yes  [ ] No |

The petitioner resides in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (state or country).

The respondent resides in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (state or country).

The controlling order was issued by (Choose one.):

[ ] a Utah court, and

(Choose all that apply.)

[ ] jurisdiction **has never** been transferred to another state.

That court has always maintained the case

No other court has ever expressed a willingness to change the order

Jurisdiction has always remained with this court.

[ ] jurisdiction **has** been transferred to another state.

Name of court: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date transferred: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] other (Describe what has happened with the order): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OR**

[ ] a non-Utah court, and

(Choose all that apply.)

[ ] jurisdiction **has never** been transferred to Utah.

[ ] jurisdiction **has** been transferred to Utah. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[ ] the order **has** been registered in Utah for enforcement purposes only.

[ ] there is substantial evidence in Utah about the children's care, protection, training, and personal relationships.

[ ] other courts have made a decision about jurisdiction and a copy of that order is attached to this petition.

[ ] other (Describe what has happened with the order): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. **Relationship to children**

I am the (Choose all that apply.):

[ ] person who pays child support.

[ ] person who receives child support.

I am (Choose one.):

[ ] the mother of

[ ] the father of

[ ] the legal guardian or legal custodian of

[ ] a person who has been acting as a parent (Utah Code 30-5a-103) to

the children listed below.

5. **Minor children**

There are \_\_\_\_\_\_\_\_ (number) minor children included in the controlling order.

|  |  |  |
| --- | --- | --- |
| Child’s name  (first, middle and last) | Child’s gender | Month and year of birth |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

6. **Current living arrangement**

The children are currently living (Choose one.):

[ ] as stated in the controlling order.

[ ] as described below:

|  |  |  |  |
| --- | --- | --- | --- |
| Child’s name | Address (street, city, state, ZIP) | Name(s) of person(s) who live with child at this address | Relation-ship(s) to child |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

7. **Other cases** (Utah Rule of Civil Procedure 100)

[ ] There are no other cases that involve(d) the children or this case.

[ ] The following cases involve(d) the children or this case:

(Include pending or closed, civil or criminal, in this court or in any other court, in this state or in any other state. Each party has a continuing duty to notify the court of any case (past, current, or future) that could affect this case.)

|  |  |  |  |
| --- | --- | --- | --- |
| Court  (Name, address, and phone number) |  | | |
| Case number |  | | |
| Type of case  (Choose all that apply.) | [ ] adoption  [ ] custody  [ ] delinquency  [ ] divorce  [ ] enforcement of an order | [ ] grandparent visitation  [ ] guardianship  [ ] modification of an order  [ ] parentage | [ ] protective order  [ ] support  [ ] termination of parental rights  [ ] other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |
| --- | --- | --- | --- |
| Court  (Name, address, and phone number) |  | | |
| Case number |  | | |
| Type of case  (Choose all that apply.) | [ ] adoption  [ ] custody  [ ] delinquency  [ ] divorce  [ ] enforcement of an order | [ ] grandparent visitation  [ ] guardianship  [ ] modification of an order  [ ] parentage | [ ] protective order  [ ] support  [ ] termination of parental rights  [ ] other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |
| --- | --- | --- | --- |
| Court  (Name, address, and phone number) |  | | |
| Case number |  | | |
| Type of case  (Choose all that apply.) | [ ] adoption  [ ] custody  [ ] delinquency  [ ] divorce  [ ] enforcement of an order | [ ] grandparent visitation  [ ] guardianship  [ ] modification of an order  [ ] parentage | [ ] protective order  [ ] support  [ ] termination of parental rights  [ ] other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

8. **Child support – reasons to modify**

I ask that child support be modified because (Choose all that apply.):

[ ] The order has not been modified within the last three years, and

* there is a difference of 10% or more between the support amount as ordered and the support amount as required under the guidelines; and
* the difference is not temporary.

[ ] There are one or more material changes that affect the child support calculation. I used the child support worksheet and there is a difference of 15% or more from the current support order. The difference is not temporary. There is a change (Choose all that apply.):

[ ] in custody.

[ ] in the relative wealth or assets of the parties.

[ ] of 30% or more in the income of a parent.

[ ] in the employment potential and ability of a parent to earn.

[ ] in the medical needs of the child.

[ ] in the legal responsibilities of a parent for the support of others.

(Utah Code 81-6-212(3)-(4))

[ ] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (child’s name) is emancipated.

[ ] there has been a change:

(At least one must apply, but choose all that do apply.)

[ ] in the availability, coverage, or reasonableness of cost of health care insurance of the [ ] payor [ ] payee;

[ ] in work-related or education-related child care expenses of the  
[ ] payor [ ] payee.

9. **Current child support order**

The controlling order directs [ ] petitioner [ ] respondent to pay $\_\_\_\_\_\_\_\_\_\_\_\_\_ each month for child support.

10. **Proposed child support**

I ask the court to modify child support based on the parties' incomes or estimated income based on ability or work history.

a. **Petitioner’s Income**

Petitioner’s total countable gross monthly income for child support purposes is $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Utah Code 81-6-203).

This income is from these sources:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[ ] The court should consider petitioner's income to be $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ based on (Choose one.):

[ ] minimum wage.

[ ] historical earnings.

[ ] Petitioner does receive or has received public assistance.

b. **Respondent’s income**

Respondent’s total countable gross monthly income for child support purposes is $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Utah Code 81-6-203).

This income is from these sources:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[ ] The court should consider respondent's income to be $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ based on (Choose one.):

[ ] minimum wage.

[ ] historical earnings.

[ ] Respondent does receive or has received public assistance.

c. **Child support worksheets**

Order [ ] petitioner [ ] respondent to pay $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month for child support. The following child support worksheet is filed or attached (Choose one.):

[ ] sole physical custody worksheet

[ ] joint physical custody worksheet

[ ] split custody worksheet

d. **Statement of compliance with child support guidelines**

(Choose one.)

[ ] This amount is based on the Uniform Child Support Guidelines (Utah Code Title 81, Chapter 6).

[ ] This amount is **not** based on the Uniform Child Support Guidelines and I am asking for a different amount because (Choose one.):

[ ] the guidelines are unjust.

[ ] the guidelines are inappropriate.

[ ] the guidelines amount is not in the best interest of the child/ren.

(Utah Code Title 81, Chapter 6, Part 2 and 81-6-102)

Explain your choice:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

e. **Effective Date**

Child support should be effective (Choose one.):

[ ] the first day of the month following entry of the Order on Petition to Modify.

[ ] as of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date).

f. **Method of payment**

Child support should be paid as follows (Choose one.):

[ ] Mandatory income withholding by the Office of Recovery Services (ORS). Unless ORS gives notice that payments should be sent elsewhere, all child support payments should be made to:

Office of Recovery Services

PO Box 45011

Salt Lake City, UT 84145

[ ] Direct payments to the parent receiving child support by (Choose one.):

[ ] Check

[ ] Deposit in bank account

[ ] Cashier’s check or money order

[ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I ask for direct payment because (Utah Code 26B-9-304):

|  |
| --- |
|  |
|  |

g. **Payment schedule**

Child support payments must be paid by the following due date (Choose one.):

[ ] One half by the 5th day of each month, and the other half by the 20th day of each month.

[ ] Other:

|  |
| --- |
|  |
|  |

h. **Delinquent payments**

Child support not paid by the due date is delinquent the next day.

i. **Past-due child support**

The issue of past-due child support may be decided by further judicial or administrative process.

If support is past due, the State of Utah may take federal or state tax refunds or rebates and apply the amounts to the child support owed.

11. [ ] **Child care expenses** (Utah Code 81-6-209)

(Check this box and complete this section only if you are asking to change payment of child care costs.)

I ask the court to order:

* Both parties share equally all reasonable child care expenses related to the custodial parent's work or occupational training.
* The parent who pays child care expenses must **immediately** provide to the other parent written verification of the cost of the child care expenses and the identity of the child care provider when hired, within 30 calendar days after a change in the provider or the expense, and anytime upon the request of the other parent.
* If the parent who pays child care expenses does not provide written verification of child care, that parent may be denied the right to recover or receive credit for the other parent's one-half share of the child care expense.
* The other parent must begin paying one-half the child care amount on a monthly basis **immediately** after receiving proof from the parent that pays the child care expense.

[ ] Other request for child care payment:

|  |
| --- |
|  |
|  |

**Other Support**

12.[ ] **Health insurance, medical and dental expenses** (Utah Code 81-6-208)

(Check this box and complete this section only if you are asking for a change in health insurance coverage.)

Our minor children currently have health insurance coverage through:

[ ] Petitioner’s insurance

[ ] Respondent’s insurance

[ ] Medicaid

[ ] CHIP

[ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Not covered by insurance

[ ]I ask the court to order [ ] petitioner [ ] respondent to maintain health insurance for our minor children. Both parties must share equally:

* the cost of the premium paid by a parent for the children's portion of the insurance. The children's portion of the premium should be calculated by dividing the premium amount by the number of people covered by the policy and multiplying the result by the number of minor children of the parties; and
* all reasonable and necessary uninsured medical and dental expenses incurred for the children and paid by a parent, including deductibles and co-payments.

The parent ordered to maintain insurance must provide written verification of coverage to the other parent or the Office of Recovery Services when the children are first enrolled, on or before January 2nd of each calendar year and upon any change of insurance carrier, premium, or benefits within 30 calendar days after the date that parent knew or should have known of the change.

If the parent ordered to maintain insurance fails to provide written verification of coverage to the other parent or to the Office of Recovery Services, or if the parent incurring medical expenses fails to provide written verification of the cost and payment of the expenses to the other parent **within 30 days of payment**, that parent may be denied the right to receive credit for the expenses or to recover the other parent's share of the expenses.

The parent receiving written verification will reimburse the parent who incurred the medical or dental expenses one-half of the amount **within 30 days after receiving the written verification.**

[ ] I ask for this order because (Choose all that apply.):

[ ]the insurance is available to [ ]petitioner [ ]respondent;

[ ]the cost of the insurance is reasonable

[ ]the custodial parent prefers this arrangement.

[ ] Other reasons:

|  |
| --- |
|  |
|  |

[ ] I ask for these additional orders regarding health insurance and medical and dental expenses:

|  |
| --- |
|  |
|  |

13. [ ] **Claiming children as dependents/exemptions for tax purposes** (Utah Code 81-6-210)

(Choose one.)

[ ] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name) will claim the children as dependents/exemptions for tax purposes.

[ ] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name) will claim the children as dependents/exemptions for tax purposes in **even years**, and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name) will claim the children as dependents/exemptions for tax purposes in **odd years**.

[ ] claiming children as dependents/exemptions for tax purposes will be divided as follows:

|  |  |  |
| --- | --- | --- |
| Child’s name | Month and year of birth | Parent who will claim child as dependent / exemption |
|  |  | [ ] Petitioner  [ ] Respondent |
|  |  | [ ] Petitioner  [ ] Respondent |
|  |  | [ ] Petitioner  [ ] Respondent |
|  |  | [ ] Petitioner  [ ] Respondent |
|  |  | [ ] Petitioner  [ ] Respondent |

[ ] Other:

|  |
| --- |
|  |
|  |

14.[ ] **Attorney fees and costs**

I ask the court to order the other party pay my attorney fees and costs.

15. [ ] **Other**

I ask the court for these additional orders:

|  |
| --- |
|  |
|  |

I ask for these additional orders because:

|  |
| --- |
|  |
|  |

16. **Remainder of order unchanged**

The remainder of the order should remain unchanged.

17. **Declaration about child support services** (Utah Code 81-6-106(3)(b))

(Child support services include establishing, modifying or enforcing child support, or establishing paternity.)

The Office of Recovery Services (Choose one.):

[ ] has never provided child support services for any child listed in paragraph 5.

[ ] has or is providing child support services for any child listed in paragraph 5. I will serve on the Attorney General:

* a copy of this petition, and
* the Stipulation to the petition, if any, and
* Notice to Child Support Division of the Office of the Attorney General and Request to Join

18. **Documents**

I am filing the following documents along with this Petition to Modify Child Support:

(Check all that apply. Forms can be found at www.utcourts.gov.)

[ ] Cover Sheet

[ ] Summons

[ ] Non-public Information – Parent Information and Location

[ ] Non-public Information – Minors

[ ] Non-public Information – Safeguarded Address (if applicable)

[ ] Notice of Disclosure Requirements in Domestic Relations Cases

[ ] Notice to Child Support Division of the Office of the Attorney General and Request to Join (if applicable; also serve on the Attorney General)

[ ] Child Support Obligation Worksheet

**Petitioner or Respondent**

|  |  |  |  |
| --- | --- | --- | --- |
| I declare under criminal penalty under the law of Utah that everything stated in this document is true.  Signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (city, and state or country). | | | |
|  | | Signature ► |  |
| Date | Printed Name | |  |
| **Attorney or Licensed Paralegal Practitioner of record** (if applicable) | | | |
|  | | Signature ► |  |
| Date | Printed Name | |  |

**Stipulation** (optional)

I am the [ ] petitioner [ ] respondent and the party responding to this Petition to Modify Child Support.

1. I have received and read the petition and its supporting documents.

2. I understand what the petition requests.

3. I understand I have the right to contest the petition by filing an answer, and have the court decide the issues.

4. I waive service of the Summons.

5. I agree this court has the authority to decide this matter and I enter my appearance for that purpose.

6. I agree to the requests in the petition.

7. I agree the court may enter an order of modification consistent with the petition at any time and without further notice.

**Petitioner or Respondent**

|  |  |  |  |
| --- | --- | --- | --- |
| I declare under criminal penalty under the law of Utah that everything stated in this document is true.  Signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (city, and state or country). | | | |
|  | | Signature ► |  |
| Date | Printed Name | |  |
| **Attorney or Licensed Paralegal Practitioner of record** (if applicable) | | | |
|  | | Signature ► |  |
| Date | Printed Name | |  |