

2. Income Support/Jobseeker's Allowance/Pension Credit/Employment and Support Allowance details

Do you currently receive – *Please tick the relevant box*

- Income Support Go to section 3.
 Income-based Jobseeker's Allowance Go to section 3.
 Pension Credit Go to section 3.
 Employment and Support Allowance Go to section 3.
 None of these Go to section 3.

If you have a partner, do they currently receive – *Please tick the relevant box*

- Income Support Please give details below.
 Income-based Jobseeker's Allowance Please give details below.
 Pension Credit Please give details below.
 Employment and Support Allowance Please give details below.
 None of these Go to section 3.

We use partner to mean a person you are married to, a civil partner of, or living with as if you are married to them or a civil partner of them.

Only complete the following if your partner receives Income Support, income-based Jobseeker's Allowance, Employment and Support Allowance or Pension Credit. Otherwise go to section 3.

Your partner's name
 Title Forenames Surname

Is your partner known by any other name?

Your National Insurance number *if known*
 Letters Numbers Letter

If you are unsure which type of Jobseeker's Allowance you receive, please refer to the letter that tells you about your award, or contact your local Jobcentre Plus (benefits) office.

3. Student details

Are you a student on a Full-time course? Yes No

Please tick the relevant boxes

Part-time course? Yes No

If you have ticked Yes, please give details of your course below.

Name of school, college or university

 Postcode

Course name

Type of course

e.g. NVQ, Degree, HND, A-levels

Please send us verification that you are studying for this course.

4. Details of all the children you are applying to pay maintenance for – child 1

Child's full name Forenames Surname Date of birth / /

National Insurance number *if over 16 years old* Letters Numbers Letter Sex Male Female *Please tick the relevant box*

Mother's full name Title Forenames Surname

Father's full name

Guardian's full name *if applicable*

Who is getting Child Benefit for this child? Title Forenames Surname

Is there a maintenance arrangement in place for this child? *Please tick the relevant box* Yes No *If Yes, please send it to us.*

Does this child stay overnight in Local Authority care? *Please tick the relevant box* Yes No

Child 2

Child's full name Forenames Surname Date of birth / /

National Insurance number *if over 16 years old* Letters Numbers Letter Sex Male Female *Please tick the relevant box*

Mother's full name Title Forenames Surname

Father's full name

Guardian's full name *if applicable*

Who is getting Child Benefit for this child? Title Forenames Surname

Is there a maintenance arrangement in place for this child? *Please tick the relevant box* Yes No *If Yes, please send it to us.*

Does this child stay overnight in Local Authority care? *Please tick the relevant box* Yes No

Child 3

Child's full name Forenames Surname Date of birth / /

National Insurance number *if over 16 years old* Letters Numbers Letter Sex Male Female *Please tick the relevant box*

Mother's full name Title Forenames Surname

Father's full name

Guardian's full name *if applicable*

Who is getting Child Benefit for this child? Title Forenames Surname

Is there a maintenance arrangement in place for this child? *Please tick the relevant box* Yes No *If Yes, please send it to us.*

Does this child stay overnight in Local Authority care? *Please tick the relevant box* Yes No

Child 4

Child's full name Forenames Surname Date of birth / /

National Insurance number *if over 16 years old* Letters Numbers Letter Sex Male Female *Please tick the relevant box*

Mother's full name Title Forenames Surname

Father's full name

Guardian's full name *if applicable*

Who is getting Child Benefit for this child? Title Forenames Surname

Is there a maintenance arrangement in place for this child? *Please tick the relevant box* Yes No *If Yes, please send it to us.*

Does this child stay overnight in Local Authority care? *Please tick the relevant box* Yes No

If you are applying to pay maintenance for any other children, please give details in section 16 – Further information, or continue on a separate sheet.

5. Shared care details

Shared care means the times when the children you are applying to pay maintenance for, stay overnight with you.

How many nights each week on average, does each child stay overnight with you?

Child's name	Never or less than once a week	1 night a week	2 nights a week	3 nights a week	4 or more nights a week

Please give details of any other periods not included above e.g. school holidays, occasional stays etc. *or exact details if you have ticked Never or less than once a week above.*

Please provide any evidence you may have to support this e.g. a diary, calendar or written agreement.

Child 3

Child's full name Forenames Surname Date of birth / /

National Insurance number *if over 16 years old* Letters Numbers Letter Sex Male Female *Please tick the relevant box*

Who is getting Child Benefit for this child? You Your partner Neither *Please tick the relevant box*

If Child Benefit is paid to your partner, please give their full name below.

Partner's name Title Forenames Surname

Is there a maintenance arrangement in place for this child? *Please tick the relevant box* Yes No If Yes, please send it to us.

Child 4

Child's full name Forenames Surname Date of birth / /

National Insurance number *if over 16 years old* Letters Numbers Letter Sex Male Female *Please tick the relevant box*

Who is getting Child Benefit for this child? You Your partner Neither *Please tick the relevant box*

If Child Benefit is paid to your partner, please give their full name below.

Partner's name Title Forenames Surname

Is there a maintenance arrangement in place for this child? *Please tick the relevant box* Yes No If Yes, please send it to us.

If you need to give details of any other children, please go to section 16 – Further information, or continue on a separate sheet.

Partner's name Title Forenames Surname

7a. Person with care's details

This is the parent or person who is the main day-to-day carer of the children you are applying to pay maintenance for.

Full name	Title	Forenames	Surname
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Any other name they have used	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Insurance number <i>if known</i>	Letters	Numbers	Letter
Last known address	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Postcode		
Date they last lived at this address	<input type="text"/> / <input type="text"/> / <input type="text"/> <i>If not known, please give an approximate date.</i>		
Home phone number <i>including STD code</i>	<input type="text"/>		
Mobile phone number	<input type="text"/>		
Is this person the	mother <input type="checkbox"/> the father <input type="checkbox"/> guardian <input type="checkbox"/> of the children you are applying to pay maintenance for? <i>Please tick the relevant box or relative</i>		

7b. Person with care's details

Full name	Title	Forenames	Surname
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Any other name they have used	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Insurance number <i>if known</i>	Letters	Numbers	Letter
Last known address	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Postcode		
Date they last lived at this address	<input type="text"/> / <input type="text"/> / <input type="text"/> <i>If not known, please give an approximate date.</i>		
Home phone number <i>including STD code</i>	<input type="text"/> <input type="text"/>		
Mobile phone number	<input type="text"/>		
Is this person the	mother <input type="checkbox"/>	the father <input type="checkbox"/>	guardian <input type="checkbox"/> of the children you are applying to pay maintenance for? <i>Please tick the relevant box or relative</i>

8. Your work details

Are you

Please tick the relevant box

employed

self-employed

both employed and self-employed

unemployed

Fill in this section.

Go to section 10.

Fill in this section.

Go to section 11.

If you have more than one employer, please fill in section 8b with details of your second job.

Job title *for your main employment*

Date you started this employment

 / /

Date this employment ends *if temporary*

 / /

Employer's name

The address you work at

 Postcode

You must tell us the address of your Personnel/Payroll section if it is different to the address you work at.

Personnel/Payroll address *if different from above*

 Postcode

Employer's phone number *including STD code*

Staff number *if known*

8. Your work details – continued

Please give details of your second job if you have one. If not, go to section 9.

Job title

Date you started this employment

Date this employment ends *if temporary*

Employer's name

The address you work at

You must tell us the address of your Personnel/Payroll section if it is different to the address you work at.

Personnel/Payroll address *if different from above*

Employer's phone number *including STD code*

Staff number *if known*

If you have any more employment details to give us, please continue at section 16 – Further information, or on a separate sheet.

9. Your income details

How often are you paid? *Please tick the relevant box*

- Weekly Please send us your last 5 pay-slips. Fortnightly Please send us your last 3 pay-slips.
4 weekly Please send us your last 2 pay-slips. Calendar monthly Please send us your last 2 pay-slips.
Other Please send us your pay-slips covering the last 8 weeks.

How much is your gross pay? £

Your gross pay is the amount you get before any deduction such as National Insurance contributions, Income Tax etc. are taken off

If the gross amount on your pay-slips is different from your normal gross pay, please send us more pay-slips.

Have you received any bonus, commission or profit related pay in the last 52 weeks? Yes No *Please tick the relevant box*

When was this paid? / / How much did you get? £

Is this included in the pay-slips you are sending us? Yes No *Please tick the relevant box*

If No, please send us confirmation of the amount you got e.g. letter from your employer, contract of employment.

Do you get any expenses? Yes No *Please tick the relevant box*

What are these expenses for? *e.g. for travel to work*

Are they included on the pay-slips you are sending us? Yes No *Please tick the relevant box*

If No, please send us confirmation of the amount you got e.g. letter from your employer, contract of employment.

Are these expenses subject to Income Tax? Yes No Don't know *Please tick the relevant box*

If you have more than one job, please give details of the income from your other jobs at section 16 – Further information, or on a separate sheet.
Remember to send us pay-slips from all your jobs.

11. Tax Credit details

Do you or your partner receive either of the following Tax Credits? *Please tick the relevant box*

Working Tax Credit – including Childcare element Yes No

Child Tax Credit Yes No

12. Your other income

Please give us details of all other income you receive e.g. from a pension or benefit. If none, go to section 13.

Type of income	Amount of income	Income Tax	How often is it paid?	Currency <i>e.g. Sterling or Euro</i>	Who is it paid for?

Please send us confirmation of any other income you have received from a personal or occupational pension scheme in the last 6 months.

13. Other costs

Please give details of any payments you make towards a personal or private pension and send us confirmation of these. If none, go to section 14.

Amount	How often do you pay this?	Currency <i>e.g. Sterling or Euro</i>

14. Collection details

Do you want to pay your child maintenance weekly fortnightly 4 weekly Calendar monthly *Please tick your preference*

Other *please specify*

What day/date do you want to pay your maintenance?
Please state either the day of the week or the date of the month

Paying your maintenance by direct debit has many advantages and is the way we recommend.

Bank/building society name

Address

Postcode

Account name

Sort code

Account number

Roll number *if applicable*

Reasons why you should pay by direct debit

- You don't need to buy stamps, use envelopes or stand in queues, making direct debit the cheapest way to pay
- You don't have to remember to make your monthly payments because your bank/building society does all the work for you.
- You remain in total control of your money because you can cancel your direct debit at any time.
- You are given at least 10 working days notice of the amount which will be debited from your account, giving you plenty of time to query the amount or cancel the direct debit if you wish.
- Only direct debit payers have the opportunity to choose their preferred payment date.

Paying direct from your earnings

If you work for an employer, we can instruct your employer to take your child maintenance payments directly out of your wages. This is called a deduction from earnings order (DEO). Your employer is allowed to charge you up to £1 as an administration fee for each payment. We will not refund this charge. If you are not able to use either of these payment methods, please contact us immediately on 08457 133 133.

Employer's name

Your payroll cut-off day / /

Please note that in certain circumstances we may have to decide which method of payment is to be used.

16. Further information

Please use this part of the form to give us any further information you think might be useful. Otherwise go to Section 17.

A large, empty rectangular box with a thin black border, intended for the user to provide additional information. The box is currently blank.

17. Checklist

Please tick the relevant box to show which documents you are sending with this form. You should send the original documents. We will return them.

- | | | | |
|--|--------------------------|---|--------------------------|
| Court order or written maintenance agreement, | <input type="checkbox"/> | Confirmation of any other income
<i>i.e. from a personal or occupational pension within the last 6 months</i> | <input type="checkbox"/> |
| Representative's authority to act on your behalf
<i>e.g. Power of Attorney document</i> | <input type="checkbox"/> | Confirmation of the number of nights each of the children you are apply to pay maintenance for stay overnight with you <i>e.g. diary or written agreement</i> | <input type="checkbox"/> |
| All the pay-slips we asked for in section 9 | <input type="checkbox"/> | Your personal pension details | <input type="checkbox"/> |
| If self-employed, a copy of your last tax calculation notice (SA302) from HMRC | <input type="checkbox"/> | Confirmation of the course you are studying | <input type="checkbox"/> |

Please write your name and National Insurance number on any documents you send us.

18. Declaration

This request for information is made under child support law. Under child support law it is a criminal offence if a person fails to provide information when required to do so or knowingly provides false information. Failure to provide this information may result in criminal proceedings being taken against you.

The information I have given on this form is correct and complete.

Important

We are asking for information under child support law. Under child support law it is a criminal offence if anyone required to provide information:

- without reasonable excuse, fails to provide such information when requested to do so; or
- provides information, or knowingly causes or allows information to be provided that they know to be false.

If a court finds them guilty of the criminal offence outlined above, they can be fined up to £1,000.

It is also a criminal offence for anyone who is liable to pay child maintenance to fail to tell us about a change of address. For this reason, if the address details we have for you are not correct, or if you move to a different address in the future, you must let us know by calling the number at the top of this letter.

As someone who is liable to pay child maintenance, if you change your address and don't tell us within seven days, you may be subject to criminal proceedings and a fine of up to £1,000.

Your signature

Date

19. What to do now

- Send us this form and anything else we have asked for. Use the envelope we sent you, it does not need a stamp.
- Remember to write your National Insurance number/reference number on all the forms and documents you are sending to us. You will find this number on the letter that came with this form.

