# **USING THIS FORM**

- 1. Copies
  - a. Original to serving officer for use in providing proof of service, then to court.
  - b. First copy to respondent. See <u>Using This Form</u>, 4(b).
  - c. Second copy to <u>payee</u> (if initiated on the court's own motion and both parties are not in court). See <u>Using This Form</u>, 4(c).
- 2. Motion prepared by requesting party (see <u>Using This Form</u>, 4(c)). Notice prepared by clerk.
- 3. Attachments
  - a. CC-1426, Addendum for Protected Identifying Information Confidential, may be used to list social security numbers.
  - b. DC-645, Payroll Deduction Order for Support, if issued.
- 4. Preparation details
  - a. This form must be used unless the parties are before the judge when a payroll deduction order is requested by a party or on the judge's motion.
  - b. The respondent has only ten (10) calendar days to file a written notice of contest to have a hearing on the motion; otherwise, an order must be entered as requested (Va. Code § 20-79.1(B)(2)). Also, if a notice of contest is filed, the hearing must be conducted within 10 days from the filing of the request. Because of timeliness of service of process problems,

a copy should be mailed to the party to be served unless the serving officer can get service within the ten (10) day period.

c. If the request is initiated by someone other than the payee, the status of the signer should be shown below the signature line in Data Element No. 19; the payee's name (if different from the petitioner) and residential address for service of process should be inserted only on the payee's copy and the original copy. If served by different serving officers, an extra copy should be provided for return of service of process.

# **USING THIS FORM**

(Continued)

- d. The maximum percentage deductible from disposable earnings is determined by Va. Code § 34-29(b1) based on:
  - whether any other dependents not covered by the order in the case are being supported by the respondent, and
  - whether total support payments are more than 12 weeks in arrears.

The percentages are:

- 50% other dependents, no arrearages over 12 weeks
- 55% other dependents, arrearages over 12 weeks
- 60% no other dependents, no arrearages over 12 weeks
- 65% no other dependents, arrearages over 12 weeks
- e. Page two of the form is informational except Return of Service area at bottom of page, which is used by serving officer to document service of process.

## CC-1450 - MOTION AND NOTICE OF PROPOSED PAYROLL DEDUCTION ORDER FOR SUPPORT

  	NCOME DEDUCTION ORDER FOR SUPPO	RT					
((						2	
((	•	3					
(0		3	•••••			•••••	Circuit Co
(0		4				•••••	
(0	-	ADDRES	S			7	
(0		. v.					
(0	PETITIONER					RESPONDEN <sup>®</sup>	Т
IĽ	OCIAL SECURITY NUMBER LISTED ON ATTACHED ADDENDUM CIRCUIT COURT FORM CC-1426, ADDENDUM FOR PROTECTED MENTIFYING INFORMATION – CONFIDENTIAL, MAY BE USED)					ADDRESS	
N	IOTION:						
I	request the court to enter an income deduction order w ontains the following terms:	hich 8	(C	CIRCUIT		1426, Addendum	TACHED ADDENDUM For Protected Identifyin
1	. Proposed Income Deduction Terms:						
	Pay interval: <b>10</b> ] weekly	_					
	] bi-weekly ] semi-monthly			regul	ar pay dates		
[] monthly							
[	]						
	OTHER PAY INTERVAL AND REGULAR PAY DATES			СТ	ATUS (abaalt app	liashla hav)	
	Health care coverage for NAME		ent	STATUS (check applicable box)       nt     Current   Former			
	11	12 Child			Spouse	Spouse	Payment Price
	1						13
	2						[] Support
	3						[] Health
	4						cover
	5						
	6						
2	. Proposed amount to be deducted each pay period						
	\$ <b>14</b> or	15			% of disposal	ole income, w	whichever is less ba
	on court-ordered payments of \$ <b>16</b>	er 17	7	wi	th.\$ 18	ť	total unnaid navme
3	. Reason for proposed support income deduction or				ui		total anpula paying
<b>9</b>		[]	C	Court h	as found that the	e is an arreara	ige of an amount
					o one month's sup	port obligation	n
	[] facts relevant in determining the likelihood of	[]		-	of the obligor		
	payments in accordance with the support order	[]	C	Jther:	•••••	•••••	
4	•	20					
	E	MPLOYER'S	NAM	ИE			
•	20						
	EMPLOYER'S ADDRESS 22						
•	 DATE				PETITIONER		
p	<b>OTICE TO THE RESPONDENT/OBLIGOR:</b> Read th ursuant to Virginia Code § 20-79.1. If you wish to contest en) days from the date of issuance of this Notice.				nt and reverse) c		
(I	23				24		
•	<b></b>			[]0	ERK [] DEPUTY (		

- 1. Court case number.
- 2. Division of Child Support Enforcement case I.D. number.
- 3. Court name.
- 4. Court street address.
- 5. Petitioner's name.
- 6. List petitioner's social security number on a separate addendum page. See <u>Using This</u> Form, 3 (a).
- 7. Respondent's name and residential address.
- 8. List petitioner's social security number on a separate addendum page. See Using This Form (Attachments) No. 3 (a).
- 9. Check the box that corresponds to the respondent's payroll interval. If none of the preprinted alternatives apply, check the last box and insert the respondent's payroll interval.
- 10. Insert description of respondent's normal pay date (such as "every Friday," "1st and 16th of each month," etc.).
- 11. Enter name of person(s) for whom health care coverage is proposed.
- 12. Check applicable box to identify status of person(s) for whom health care coverage is proposed
- 13. Check applicable box for priority of payment.
- 14. Maximum amount proposed to be deducted during each pay period.

- 15. Maximum percentage which may be deducted per pay period from disposable earnings. See <u>Using This Form</u>, 4(d).
- 16. Total court-ordered periodic support payments for current support and arrearages.
- 17. Court-ordered payment interval on support payments.
- 18. Total support arrearages. If none, insert "0.00."
- 19. Check appropriate box(es) and, if appropriate, insert additional information.
- 20. Insert employer's name and address where the employer can be served with process.
- 21. Date of signing of motion.
- 22. Signature of petitioner. See <u>Using This</u> <u>Form</u>, 4(c), if signed by someone other than the petitioner.
- 23. Date of signing of notice.
- 24. Signature of clerk or deputy clerk. Check appropriate box below the line.

#### TO THE RESPONDENT/OBLIGOR:

This notice is to advise you that this Court has been requested for the reason stated in the Motion and Notice to enter an order requiring all of your present and future employers to deduct support payments as described above from your income. This deduction will begin with the next regular pay period for your income after your employers are served with an order.

You have ten (10) days from the date of issuance of this Notice to file in the clerk's office of this court a written notice of contest of such proposed order. If no written notice of contest is filed, the court will enter such an order at the end of the ten (10) day filing period. If you file a written notice of contest,

- a hearing will be held and a decision made regarding the issuance of the Order and its contents within ten (10) days from the date that the Court receives your written notice of contest, unless good cause is shown for additional time, but not to exceed forty-five (45) days from your receipt of this notice, and
- only disputes as to mistakes of fact (error in the identity of the payor or the amount of current support or arrearage) will be heard. Alleged inability to pay is not a grounds for contest.
- payment of overdue support upon receipt of the notice shall not be the sole basis for not implementing withholding.

The order will state that the deduction will start with the regular pay period for your income after your employer is served with an order. Your employer will be told the names of the petitioner, the court file number, the DCSE ID number (if any), your name, address and social security number, and the terms of the periodic support payment, and where to send payments. The employer will also be told:

- the maximum amount which can be withheld from your income,
- that the order is binding on the employer until further notice sent by the court is received by the employer,
- that the order requires income deductions for support to be paid before any other liens created under state law except that, when judicial or administrative income deduction orders for support have been previously served on the employer, the employer must prorate the amount withheld from your check among all income deduction orders of support based upon the current amounts due, with any remaining income prorated among the orders for accrued arrearages, if any,
- that deductions are to be made on your regular pay date and sent that date to the Department of Child Support Enforcement of the Virginia Department of Social Services and how to send such payments, which, in some cases, must be remitted by electronic funds transfer within 4 days of the pay date,
- of his liability for failing to honor the order or for taking retaliatory action against you because of such order,
- that the employer and respondent must notify the Division of Child Support Enforcement, Virginia Department of Social Services, when your employment terminates, and give your home address and the name and address of your new employer,
- that the employer may deduct an additional fee of \$5.00 for each time that the employer deducts money or answers in writing that the employer was legally unable to make such deductions,
- how the employer should respond if the order contains erroneous information, and
- the statutory authorization for such order.

### **RETURN OF SERVICE**

FORM CC-1450 (MASTER, PAGE TWO OF TWO) 7/07