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Supplement to
Directive # 08-11

To: **Assignment Judges**
Family Presiding Judges
Trial Court Administrators
Family Division Managers

From: **Glenn A. Grant, J.A.D.**

Subj: **Family – Non-Dissolution Matters (FD Docket) – Revised Procedures and Forms Regarding Applications to Modify a Court Order and Applications for Emergent Hearing**

Date: **November 18, 2011**

This Supplement to Directive # 08-11 (which was issued September 2, 2011) revises the procedure and form included in that Directive with regard to Applications to Modify a Court Order in non-dissolution matters (FD Docket). The revisions, made on the recommendation of the Conference of Family Presiding Judges, are as follows:

1. The "Application to Modify a Court Order" form has been revised so as to eliminate the "check box" option to request an emergent hearing (OTSC). This revised form, a copy of which is attached to this memo, remains the approved filing document for all FD post-dispositional applications.

2. Requests for an emergent hearing (OTSC) in an FD case will require the litigant to file a separate document making that request. (That form document is appended to Directive #08-11.) This modification to the revised FD practices does not limit the right of a party to request an emergency hearing. It is intended to avoid the misimpression by litigants that an emergent hearing is the same as a routine request to reopen a case for review of custody, parenting time, or child support.

3. Clear written instructions for requesting an emergent hearing will be provided to every litigant who requests this relief. The instructions, which are appended to Directive #08-11, apply both to initial complaints and to applications to modify an existing case. The instructions in plain language inform the filer (or the attorney representing the filer) that the appropriate forms must be presented at the Non-dissolution intake location in the Family Division and cannot be filed through the mail. The instructions also

encourage the filing party to use the "additional information form" to further explain why they consider their case to be an emergency.

This Supplement to Directive #08-11 will be published as a notice to the bar. Notice will be provided by the Family Practice Division concerning the availability in NJKiDS of the forms referenced herein. The forms and instructions will be posted on the Internet for easy access by the public (as well as posted on the InfoNet for staff access).

Questions or comments regarding this Supplement to Directive # 08-11 or the Non-Dissolution docket in general may be directed to Assistant Director Harry T. Cassidy or to Geraldine Washington, Chief, Family Practice Division, at 609-984-0066.

G.A.G.

Attachment (Application for Modification of Court Order (Non-Dissolution Docket))

c: Chief Justice Stuart Rabner
Jeanette Page Hawkins, Division of Family Development, Director
Alisha Griffin, Division of Family Development, Assistant Director
Steven D. Bonville, Chief of Staff
AOC Directors and Assistant Directors
Richard Narcini, Chief, Child Support Enforcement
Geraldine Washington, Chief, Family Practice
John P. McCarthy III, Chief, ATCSU
David Broselli, Assistant Chief, Family Practice
George Tucker, Assistant Chief, ATCSU
Michele Walsh, Program Manager, Family Practice
Gina G. Bellucci, Family Practice
Gurpreet M. Singh, Special Assistant

SUPERIOR COURT OF NEW JERSEY
CHANCERY DIVISION - FAMILY PART
COUNTY: _____

_____
Plaintiff

vs.

_____
Defendant

DOCKET NO.: FD - _____

CS NO: _____

CIVIL ACTION

Application for Modification of Court Order
(Non-Dissolution Docket)

I, _____ of full age, hereby certify the following in support of this Application/Cross Application to modify the court order of _____ .
date (if known)

I am the ☐ Plaintiff ☐ Defendant in the above-captioned matter.

Plaintiff resides at: Address: _____

City/Town _____

County _____ State _____ Zip Code _____

Defendant resides at: Address: _____

City/Town _____

County _____ State _____ Zip Code _____

Other interested parties' name(s) and address(es):

_____

_____

_____

_____

1. **Establish or Change to an Existing Child/Spousal Support Order (Note:** Continue only if you have an established FD Order.)

   The current Support Court Order contains the following provisions:
   $_____ per _____ for support of:
   (Weekly, bi-monthly, etc.)

   Obligee _____ DOB _____

   The current Support Court Order contains the following provisions:
   $_____ per _____ for support of:
   (Weekly, bi-monthly, etc.)

   Child _____ DOB _____
   Child _____ DOB _____
   Child _____ DOB _____
   Child _____ DOB _____

☐ I am seeking an increase or decrease in **child** support payments.
Pursuant to R. 5:5-3, you are required to complete a Financial Statement for Summary Support Actions to serve on the other party, and supply the court with either your most recent Federal income tax return, and your three most recent pay stubs at the hearing.

☐ I am seeking an increase or decrease in **spousal** support payments.
Pursuant to R. 5:5-2, you must complete, supply the court and other party, with a Case Information Statement ten (10) days before the hearing.

☐ I am requesting the Court terminate/not terminate child support for:

Name _____ DOB _____

☐ My child turned 18 years of age on _____.

☐ To the best of my knowledge, my child is not physically or mentally disabled.

☐ My child **is** disabled. Describe disability:

_____

_____

☐ My child is **not** attending high school or any other special education programs.

☐ My child is attending high school or special program. Provide the name of school and most recent date(s) attended:

_____

_____

☐ My child is not married.

☐ If married, date of marriage: _____.

☐ My child is **not** attending college or any other post-secondary education programs.

☐ My child is attending college or a post-secondary education program. Provide the name of the school and most recent date(s) attended:

_____

_____

☐ My child is not in the military.

☐ If in the military, date enrolled _____ and branch _____.

☐ I am requesting that child/spousal support be made payable through the Probation Division.

☐ I am requesting that child/spousal support be paid directly to me without court involvement.

2. Enforcement of the Current Support Order

☐ I am requesting enforcement of the current support court order of _____ (date (if known)). Attach a copy of the order you want enforced, if available.

3. Establish or Change of Existing Custody/Parenting Time Court Order

☐ I am requesting to change the custody/parenting time terms of the current court order. Explain the changes you are requesting.

_____

_____

_____

_____

4. Request To Relocate The Child(ren)/Opposition To Relocation

☐ I am applying to relocate the child(ren) listed above. I believe this move is in the best interest of the child(ren). I want to relocate the child(ren) by _____.
date

New location:

_____

Reason for relocation:

_____

_____

☐ Attached is the additional information form.

☐ I am opposed to the relocation of the children listed above. I believe this move is not in the best interest of the child(ren). Explain:

_____

_____

_____

_____

☐ Attached is the additional information form.

5. Request to have a Bench Warrant/Detainer lifted (Incarcerated Defendants Only)

☐ I am currently incarcerated making application to have a child support bench warrant/detainer lifted so that I may participate in a rehabilitation program. I understand that I must report to the court 30 days after my release.

Facility _____ Inmate #_____

6. The relief I am seeking is not listed above.

☐ I am seeking the following from the court:

_____

_____

_____

_____

7. What else does the court need to know pertaining to this Application or Cross Application to modify the court order of _____?
date (if known)

_____

_____

_____

_____

Court Appearance Information

PLEASE TAKE NOTICE a hearing will be held, in the Superior Court of New Jersey, Family Part, _____ **COUNTY**, based upon the attached Application and Certification, to modify an order previously issued by the court.

Your appearance is mandatory. You may bring an attorney, although an attorney is not required. If you require assistance in selecting an attorney, you may contact your County Bar Association. If you cannot afford an attorney, you may contact Legal Services of New Jersey at www.lsnj.org. You may file a written response by certification opposing this application/cross application. Any written response you send to the Court must be sent to the other party. Your written response must be filed with the court ten calendar days after being served this application/cross application. If you fail to appear, an Order granting the relief requested by the filing party may be granted although your written response, if filed, will be considered. A certification in support of an application shall not exceed **fifteen (15)** pages. A certification in opposition to a certification or in support of a cross-application or both shall not exceed **twenty-five (25)** pages. A reply certification to opposing pleadings shall not exceed **ten (10)** pages.

☐ To my knowledge, DYFS ☐ is ☐ is not actively involved with the child(ren).

☐ To my knowledge, the family ☐ is ☐ is not receiving public assistance.

☐ I am presently incarcerated and would like to appear; however, I understand that unless I have paid the costs in advance to the county or state for my transportation, my right to appear will be deemed waived, and this matter will be decided on the papers that I filed.

I/We certify that **all** the statements made above are true. I am aware that if **any** of the statements made by me/us are willfully false, I/we am subject to punishment.

Date	Signature ☐ Plaintiff ☐ Plaintiff / Cross Applicant	☐ Defendant ☐ Defendant / Cross Applicant
Date	Signature ☐ Co-Plaintiff ☐ Co-Plaintiff / Co-Cross Applicant	☐ Co-Defendant ☐ Co-Defendant / Co-Cross Applicant