



Department of  
Social Services  
Human Resources Administration  
Department of Homeless Services

Office of Child  
Support Services

### Select a Borough Office Location:

### Change Of Payee In A Child Support Order

(From "Direct Payment" to "Payable through the Support Collection Unit")

Date:

Dear \_\_\_\_\_ :

The Office of Child Support Services can change your New York State child support order so that the Noncustodial Parent will make payments through the Support Collection Unit (SCU), rather than making them directly to you. *(If your order was not issued by a New York State court, this process is not available and you must go through the court to have a change made.)*

This change can be made without the need for you to return to court for another hearing, if the Noncustodial Parent does not dispute the action. *(If the Noncustodial Parent disputes the action, they must go to court and plead their case.)* If you are receiving or applying for Cash Assistance, it is required that child support payments be made to the Support Collection Unit. Failure to comply with this requirement may result in a twenty-five percent (25%) reduction in your cash benefits.

In order to make this change, we require a certified copy of your court order (*and any modifications thereto*), completed and notarized "Affidavit of Arrears" and "Payment History" forms and that you complete the following information:

I, \_\_\_\_\_ request that an administrative change of payee be  
(Your Full Name)

made to my child support order, \_\_\_\_\_ issued by  
(Docket/Index Number)

\_\_\_\_\_ against \_\_\_\_\_, so that  
(Location of Court) (Noncustodial Parent's Full Name)

payments will be made through the Support Collection Unit of the New York City Office of Child Support Services.

(Signed) \_\_\_\_\_

(Dated) \_\_\_\_\_

(Turn over)

You must return (by mail or in person) this form, the court order copy and (*if appropriate in your case*) the completed, notarized "Affidavit of Arrears" and "Payment History" forms to the office indicated at the top of this letter (*if in person, between the hours of 9:00 a.m. and 5:00 p.m., Monday through Friday*).

Best regards,

NYC Office of Child Support Services

**Do you have a medical or mental health condition or disability?** Does this condition make it hard for you to understand this notice or to do what this notice is asking? Does this condition make it hard for you to get other services at HRA? **We can help you.** Call us at **718-557-1399**. You can also ask for help when you visit an HRA office. You have a right to ask for this kind of help under the law.