IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT
IN AND FOR ___INDIAN RIVER___ COUNTY, FLORIDA

_____, CASE NO. _____
Petitioner,
v.

_____,
Respondent.
_____/

PETITION TO CONTEST NOTICE OF DELINQUENCY AND INTENT TO SUSPEND DRIVER'S LICENSE AND/OR VEHICLE REGISTRATION

Comes now the obligor _____ *(name)* and hereby contests the notice of delinquency and intent to suspend driver's license and/or vehicle registration, and as grounds states:

Section 1. A notice of delinquency and intent to suspend driver's license and/or vehicle registration was mailed to me on _____ *(date)*. **I have attached a copy of the notice to this petition**.

Section 2. I contest the notice of delinquency and intent to suspend driver's license and/or vehicle registration because: **(Check all that apply.)**

- ☐ There is a mistake, and I am not delinquent.
- ☐ There is a mistake, and the amount of delinquency is more than I owe.
- ☐ There is a mistake, and I am not the person who owes support.
- ☐ I agree that I am delinquent in the amount stated in the Notice, but I cannot afford to pay the whole amount of the delinquency at one time.

Wherefore, I request that the court decline to suspend my driver's license and/or vehicle registration, correct the mistake, and/or allow me to make payments until the delinquency is paid in full.

_____
Dated

_____
Signature of Petitioner

_____
Printed Name

_____
Email Address

_____
Mailing Address

( )
_____
Telephone Number

CERTIFICATE OF SERVICE

Section 3. I HEREBY CERTIFY that a copy of this petition along with the attachment was ***(*check only one of the following*)*** ☐ mailed; ☐ e m a i l and mailed; ☐ hand delivered to the persons or entity listed below on this ___ day of _____, 20__.

Florida Department of Revenue Child Enforcement

_____
Other Party Name

_____
Email Address

_____
Mailing Address

_____
City/State/Zip

_____
Mailing Address

_____
City/State/Zip

_____
Dated

_____
Signature of Petitioner

_____
Printed Name

_____
Email Address

_____
Mailing Address

_____
City/State/Zip

( )
_____
Telephone Number

Section 4. If someone who is a nonlawyer helped you to complete this petition, he/she **must** provide the information below:

I, _____(*full legal name or trade name of nonlawyer who helped complete this form*), located at _____ (street) in _____ (City), _____(State and Zip) and having the telephone number of (____) - _____, helped _____ (name of obligor) who is the obligor, complete this form.