



Child Support Service

CSS FORM M

2nd Floor – 379 Broadway, Winnipeg, MB R3C 0T9

T 204-945-2293 or 1-800-282-8069 toll free

Fax 204-948-2423 or Email: csrs@gov.mb.ca

CSS FILE NO _____

APPLICATION FOR RECALCULATION OF CHILD SUPPORT

(Application under section 19 of the Child Support Guidelines Regulation)

1.0 Person making this application (the Applicant):

Contact information for the Applicant (the parent applying for the child support decision):

(First Name) (Middle Name(s)) (Last Name)

(Street address) (City/Town) (Province) (Postal Code)

(Mailing Address if different from Street Address)

(Daytime Telephone No.) (Work Telephone No.) (Cellular Telephone No.)

(Fax Number) (Email Address)

2.0 I am applying to the Child Support Service to have the amount of child support currently payable in a child support order/decision, child support agreement, or family arbitration award recalculated. The details of the child support that I pay or that I receive are:

2.1 Where and when was the order, agreement, or arbitration decision made:

Court Centre _____ (Province/Territory) _____

Court File No _____ Date: _____ (mm/dd/yyyy)

2.2 Provide copies of all the child support orders/decisions, child support agreements, or arbitration awards where child support was changed with a description (ie, Final Order) and in chronological order (oldest first to most recent):

2.2.1 _____ (mm/dd/yyyy)

2.2.2 _____ (mm/dd/yyyy)

2.2.3 _____ (mm/dd/yyyy)

2.2.4 _____ (mm/dd/yyyy)

3.0 My request is based on the following reason (Please check ☒ one of the following options):

- ☐ The child support order currently in effect does not have a recalculation authorization order in it to automatically recalculate child support or at the time the child support order was made, I did not opt in to the Child Support Service by signing a recalculation and enforcement information Form 70W.
- ☐ The child support agreement contains a provision in it permitting child support to be recalculated by the Child Support Service upon the request of one or both of the parents.
- ☐ The family arbitration decision contains a provision in it permitting child support to be recalculated by the Child Support Service upon the request of one or both of the parents.
- ☐ I was previously enrolled with the Child Support Service but opted out. I request to re-enrolled in the service under the provisions of *The Child Support Service Act*.

4.0 The child support that is to be recalculated is:

- ☐ Table amount (only);
- ☐ Section 7(1) special or extraordinary expenses;
- ☐ Both the table amount and section 7(1) special or extraordinary expenses.

5.0 Person responding to this application (the Respondent):

(First Name)	(Middle Name(s))	(Last Name)	
(Street address)	(City/Town)	(Province)	(Postal Code)
(Mailing Address if different from Street Address)			
(Home Telephone No.)	(Work Telephone No.)	(Cellular Telephone No.)	
(Employer Name and Address)			(Employer Telephone No.)
(Email Address)			

6.0 Please check ☒ the following authorizations, if appropriate for your circumstances:

- ☐ I authorize the Child Support Service to email Notices, correspondence, requests for financial information, child support decisions and other documents to me whenever possible to my designated email address. I may revoke this authorization in writing at any time.
- ☐ There is a history of domestic violence as between myself and the Respondent. I request that my personal contact information and that of the child(ren) subject to this application not be disclosed to the Respondent unless required by Provincial Legislation.
- ☐ I am attaching copies of the child support orders/decisions, child support agreements and family arbitration awards listed in section 2.2.

7.0 I am consenting to the collection, use and disclosure of relevant personal information including financial documents, if required, for the purpose of my application for a Child Support Calculation Decision. The data collected during the calculation process will be retained by the CSS in accordance with *The Freedom of Information and Privacy Protection Act (FIPPA)*, but is subject to the requirement to disclose relevant information and documents obtained during the calculation process to the court, the Maintenance Enforcement Program, an order assignee, the other parent or other party, as provided by provincial legislation under the provisions of *The Family Maintenance Act* and *The Child Support Service Act*. The Support Determination Officer may edit or remove personal identifying information from a document where it is required to be disclosed to the other parent or a third party.

8.0 Declaration of Applicant:

I, _____ (Name of Applicant) have read and understand this Application. The statements contained in this application and in the attached forms that I have direct personal knowledge of are true, and those that I do not have direct personal knowledge of I believe to be true.

Date: _____ (mm/dd/yyyy) _____

Applicant's signature

☐ check ☒ where application is made electronically for authorized signature