

FORM 9

NOTICE OF SUSPENSION OF PAYMENT ORDER
(*Support Enforcement Act*, S.N.B. 2005, c.S-15.5, s. 17(6)(b))

Court File No. _____

FSOS Case No. _____

TO:

TAKE NOTICE THAT:

The payment order dated _____, which directs you to deduct support payments from monies due and owing to the payer _____ and forward the amount deducted to the Director of Support Enforcement, has been suspended as of this date.

The suspension remains in effect until:

- money again becomes due and owing from you to the payer _____, at which time you must resume periodic deductions and remittances to the Director of Support Enforcement in accordance with the terms of the payment order;
- you receive an amended payment order, at which time you will resume making periodic deductions and remittances to the Director of Support Enforcement in accordance with the terms of the amended payment order; or
- you receive a Notice of Revocation of Payment Order.

If there is any change to the payer's employment status you must immediately advise the Director in writing at:

Dated this _____ day of _____, 20__.

Director of Support Enforcement