

MOTION FOR MODIFICATION

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

COURT USE ONLY
MFMOD

JD-FM-174 Rev. 7-11
C.G.S. §§ 46b-84, 46b-86
P.B. §§ 25-26, 25-30, 25-57, 25-65, 25a-18, 25a-30



(Check one)

Before judgment After judgment (If the court has ordered you to attach a request for leave with a motion for modification of a final custody or visitation order, you must complete and attach a Request for Leave form (JD-FM-202) to this motion.)

Judicial District of At (Town) Docket Number

Plaintiff's Name (Last, first, middle initial) Plaintiff's Address (Number, street, city, state, zip code)

Defendant's Name (Last, first, middle initial) Defendant's Address (Number, street, city, state, zip code)

Type of Motion to Modify
Child Support Alimony Custody Visitation Other (Specify):

I (Name) the Plaintiff the Defendant a Support Enforcement Officer, respectfully represent that:

1. This Court issued an order dated directing, residing at to: (Number, street, city, state, zip code)

(Complete the boxes that apply to your motion)

Table with 4 columns: Pay current support in the amount of, Pay alimony in the amount of, Pay arrearages in the amount of, Have custody of the child/children. Includes rows for visitation, HUSKY/cash medical, child care, and health insurance coverage.

2. (Check appropriate box(es). You must explain briefly the facts that are the reasons why you are asking for this modification.)

- Since the date of the order, the circumstances concerning this case have changed substantially as follows:
The order for current child support is substantially different from the current child support and arrearage guidelines presumptive child support order as follows:

I ask the Court to modify the existing order(s) as follows:

(Check all that apply)

Child Support

(You must file a sworn to Financial Affidavit (JD-FM-6) at least 5 days before the hearing. You must also file an Affidavit Concerning Children (JD-FM-164), a completed Worksheet for the Connecticut Child Support and Arrearage Guidelines (CCSG-1), and an Advisement of Rights Re: Income Withholding (JD-FM-71) on your hearing date.)

- Order current support, Increase current support, Decrease current support, Find arrearage and order payment, Provide HUSKY/cash medical, Contribute to child care, Order immediate income withholding, Provide health insurance coverage, Other

Alimony

(You must file a sworn to Financial Affidavit (JD-FM-6) at least 5 days before the hearing. You must also file an Advisement of Rights Re: Income Withholding (JD-FM-71) on your hearing date.)

- Increase, Decrease the amount of alimony to be paid.

Custody

(You must file a sworn to Financial Affidavit (JD-FM-6) at least 5 days before the hearing. You must also file an Affidavit Concerning Children (JD-FM-164) and a completed Worksheet for the Connecticut Child Support and Arrearage Guidelines (CCSG-1) on your hearing date.)

- Modify custody as follows:

Visitation/Parenting Time

(You must file a sworn to Financial Affidavit (JD-FM-6) at least 5 days before the hearing. You must also file an Affidavit Concerning Children (JD-FM-164) and a completed Worksheet for the Connecticut Child Support and Arrearage Guidelines (CCSG-1) on your hearing date.)

- Modify visitation (parenting time) as follows:

Other

(Please be specific):

Signature Print Name Title (If applicable) Date Signed

Address (Number, street, city, state, zip code) Telephone (Area code first)

Plaintiff's Name (Last, first, middle initial)	Defendant's Name (Last, first, middle initial)	Docket Number
--	--	---------------

Note: You must answer the following question about state assistance and HUSKY health insurance. Are you or is any child that this motion is about now receiving or have you or any child ever received state assistance or HUSKY health insurance?

Yes No

If you answered "Yes," a copy of this motion must be sent to: The Office of the Attorney General, 55 Elm Street, Hartford, CT 06106. If you do not do that, your motion may take longer to be decided.

Certification

I certify that a copy of this document was mailed or delivered electronically or non-electronically to all attorneys and self-represented parties of record on (date) _____ and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery.

Name and address of each party and attorney that copy was mailed or delivered to*

*If necessary, attach additional sheet or sheets with name and address which the copy was mailed or delivered to.

Signed (Individual attorney, self-represented party or support enforcement officer (SEO))	Print or type name of person signing
Mailing address	Telephone number

Order For Hearing and Summons (To be completed by clerk or support enforcement officer, if applicable)

The Court orders that a hearing be held at the time and place shown below. The Court also orders the

Plaintiff Defendant Support Enforcement Officer to give notice to the opposing party of the Motion and of the time and place where the court will hear it, by having a true and attested copy of the Motion and this Order served on the opposing party by any proper officer at least **12 days** before the date of the hearing. Proof of service must be made to this Court at least **6 days** before the date of hearing.

Hearing to be held at →	Superior Court, Judicial District of		Date
	Court Address	Room Number	Time

To any proper officer:

By the Authority of the State of Connecticut, you must serve a true and attested copy of the above Motion and Order For Hearing on the below named person in one of the ways required by law at least **12 days** before the date of the hearing, and file proof of service with this Court at least **6 days** before the hearing.

Person to be Served	Address	
By the Court	Assistant Clerk/Support Enforcement Officer	Date Signed

Order

The court has heard this motion and orders it **Granted** **Denied** and **Further orders (if applicable):**

By the Court (Judge/F.S.M./ Assistant Clerk)	Date Ordered
--	--------------

For Court Use Only

Fee for Motion to Modify: Paid Waived