



BRITISH
COLUMBIA

Ministry of Attorney General

**FAMILY MAINTENANCE
ENFORCEMENT PROGRAM**

**RECIPIENT
ENROLLMENT PACKAGE**

This Enrollment Package contains:

- **Recipient Enrollment Form**
- **Payment History Form**
- **List of Payments Form**
- **Direct Deposit Application Form**

These are your forms to enroll in the Family Maintenance Enforcement Program. Once your court order or agreement is enrolled, we will do our very best to see that you receive the money to which you are entitled.

Please fill out all these forms as completely as you can. If more than one person is required to pay you maintenance, you must fill out a separate enrollment package for each person.

If you are not sure if your order is eligible for enrollment in the Program, or if you need help filling out these forms, please call our Enrollment Office between 8:30 a.m. and 4:30 p.m. weekdays.

If you are receiving income assistance, your Employment Assistance Worker can arrange for a Family Maintenance Worker to help you enroll in the Program.

If you are a payor, the person required to pay maintenance, and wanting to enroll, please call the phone number below and ask for a Payor Enrollment Form.

**FMEP Enrollment Office
Box 5100, Victoria, BC V8R 6N3**

**Greater Victoria: (250) 220-4040
Other places in BC: 1-800-663-3455
www.fmep.gov.bc.ca**

GETTING STARTED

Please read these instructions carefully. Accurate and up to date information will speed up your enrollment. It is a good idea to have a copy of your order(s) or agreement in front of you when you fill out these forms.

TERMS YOU SHOULD KNOW

To complete the forms and send in the right documents, you may need to know the following terms:

- | | |
|---------------------------|--|
| Agreement | - A written agreement signed by you and the payor containing an agreement that maintenance will be paid for children and/or a spouse. It must be filed in a court. |
| Arrears | - The amount of money that has not been paid. |
| Recipient/Creditor | - The person who is to receive the maintenance payments. |
| Payor/Debtor | - The person who is to pay the maintenance. |
| Maintenance Order | - A court order which says that one person is to pay another person an amount of money to support a child and/or spouse. |
| Notice of Filing | - A letter we send to you telling that your order is now enrolled in the Family Maintenance Enforcement Program (FMEP). |
| List of Payments | - The form that shows all the payments you have received since the order was made, or since arrears were set by a court. It has a Declaration on the back, which must be signed. |

FILLING OUT THE ENROLLMENT PACKAGE

These forms give us the information we need about you (the recipient), the payor and the order(s)/ agreement. Please answer every question. If the question does not apply to you, write 'Not Applicable' or 'N/A'. If you do not have the information, write 'Don't Know'.

At the end of the Enrollment Form, there are conditions of enrollment – please read them carefully as these are the rules you agree to follow while you are enrolled in the Program.

A Guide to Completing the Enrollment Form

A) Recipient Information

- 1 – 5. Your personal information.
- 6 - 10. Your contact information. If your mailing address is different from where you live – please provide your mailing address. For phone numbers, please include the area code and if applicable, the extension or local number.
11. Your full name shown on your court order or agreement - if it is different from your current name. This will help the court locate your court order or agreement.
12. Name and phone number of someone who usually knows your whereabouts - in case we are unable to locate you - such as a parent or other relative.
13. The full name and date of birth of your present spouse or common-law spouse. We need this information in order to ensure that, if that person is enrolled in the program, we keep your cases separate.

B) Payor Information

- 1 – 5. Payor's personal information.
6. Payor's driver's licence number and the name of the province or state that issued it.
7. Other names the payor may use or has used in the past. If the payor is female, provide her maiden name or any other married name(s).
- 8 – 13. Payor's contact information. If the mailing address is different from where the payor lives – please provide both addresses. For phone numbers, please include the area code and if applicable, the extension or local number.
14. Payor's employment information:
 - full business or company name
 - address and phone number
 - payor's occupation
15. Other income sources or outstanding insurance claims - such as pension, rental income, ICBC, WCB claims or Employment Insurance.
16. Name of a union or any professional association the payor may belong to. This might assist us in locating the payor's employer.
17. Description of the payor - such as height, weight and hair colour. This information may be used if court documents need to be served on the payor.

A Guide to Completing the Enrollment Form

B) Payor Information cont'd

18. Payor's mother's maiden name (mother's surname when she was born).
19. Payor's treaty status card number. This may be needed, as there are different rules for collecting maintenance on behalf of, and from status Indians under the Indian Act.
20. If the payor has a passport, provide the name of the country that issued the passport.
21. The names of people who may currently live with the payor - such as a spouse or common-law spouse. We need this information in order to ensure that, if that person is enrolled in the program, we keep the cases separate.
22. Information about relatives or friends who may know the whereabouts of the payor, in case we cannot locate the payor.
23. Payor's financial information - such as where the payor may hold a bank account, loans or credit cards.
- 24 & 25. Assets the payor may have, such as motor vehicles, boats or real estate.
26. Other financial investments or assets the payor may have – such as company shares, stock, bonds, pensions, or RRSPs.

C) Court Order

- 27 & 28. For you to be enrolled in the program, you need to have a court order or filed agreement for maintenance which says that one person is to pay another person an amount of money to support a child and/or spouse or parent.
29. List your order(s) or agreement(s) and the court(s) where they are filed. We need this information so we can contact the court to get certified copies of your order or agreement.
30. If another maintenance enforcement program or court in another province, state or country is currently enforcing or has enforced your court order or agreement in the past - please provide details such as, the name and address of the office, your account or case number and last date of your involvement with them.

D) Children's Information

31. The name, sex and birthdate of each child named in the order or agreement. If the child is not living with you but you are still expecting maintenance, please tell us why. For example, if the child is not in your care because they are away in school, but you are still contributing financial support - please let us know.



Ministry of Attorney General

FMEP CASE NO.

FOR OFFICE USE ONLY

FAMILY MAINTENANCE ENFORCEMENT PROGRAM
RECIPIENT ENROLLMENT FORM

NEW ENROLLMENT RE-ENROLLMENT
PROVIDE PREVIOUS FMEP CASE NO. (if known)

A) RECIPIENT INFORMATION

1. LAST NAME (CURRENTLY USED) FIRST NAME MIDDLE NAME 2. SOCIAL INSURANCE NO.
3. BIRTHDATE DD MON YR 4. SEX M F 5. PERSONAL HEALTH NO. (FROM BC CARE CARD)
6. ADDRESS - STREET AND NUMBER CITY/TOWN 7. HOME PHONE NO.
PROVINCE COUNTRY POSTAL CODE 8. MESSAGE PHONE NO.
11. YOUR NAME ON COURT ORDER IF DIFFERENT FROM YOUR CURRENT NAME 9. WORK PHONE NO.
12. NAME OF INDIVIDUAL WHO WOULD BE ABLE TO CONTACT YOU IF OUR INFORMATION IS NO LONGER CURRENT 10. CELL PHONE NO.
RELATIONSHIP PHONE NO.
13. NAME OF THE PERSON YOU ARE LIVING WITH NOW (SPOUSE OR COMMON-LAW SPOUSE)
LAST NAME FIRST NAME BIRTHDATE DD MON YR

B) PAYOR INFORMATION

IF THE QUESTION DOES NOT APPLY, WRITE 'NOT APPLICABLE' OR 'N/A'. IF YOU DO NOT KNOW, WRITE 'DON'T KNOW'. PLEASE PROVIDE AS ACCURATE, COMPLETE AND UP TO DATE INFORMATION AS POSSIBLE. THIS INFORMATION IS USED TO LOCATE INFORMATION ABOUT THE PAYOR TO ENFORCE THE ORDER.

1. LAST NAME (CURRENTLY USED) FIRST NAME MIDDLE NAME			2. SOCIAL INSURANCE NO. or SOCIAL SECURITY NO.
3. BIRTHDATE DD MON YR	4. SEX <input type="checkbox"/> M <input type="checkbox"/> F	5. PERSONAL HEALTH CARE NO. (FROM BC CARE CARD)	6. DRIVER'S LICENCE NO. / PROV.
7. OTHER NAMES USED BY THE PAYOR (IF PAYOR IS FEMALE, PROVIDE MAIDEN NAME)			8. HOME PHONE NO.
12. ADDRESS - STREET AND NUMBER		CITY/TOWN	9. MESSAGE PHONE NO.
PROVINCE	COUNTRY	POSTAL CODE	10. WORK PHONE NO.
<input type="checkbox"/> CURRENT ADDRESS <input type="checkbox"/> LAST KNOWN ADDRESS INDICATE THE MOST RECENT DATE YOU KNEW THE PAYOR STILL LIVED THERE:			11. CELL PHONE NO.
13. IF YOU DO NOT KNOW THE PAYOR'S COMPLETE ADDRESS, WHERE DO YOU THINK THE PAYOR IS LIVING?			
14. PAYOR'S EMPLOYER (FULL NAME OF COMPANY OR BUSINESS)			
<input type="checkbox"/> CURRENT EMPLOYER <input type="checkbox"/> LAST KNOWN EMPLOYER IF LAST KNOWN, INDICATE THE MOST RECENT DATE YOU KNEW THE PAYOR WORKED THERE:			
EMPLOYER'S ADDRESS - STREET AND NUMBER		CITY/TOWN	EMPLOYER'S PHONE NO.
PROVINCE	COUNTRY	POSTAL CODE	PAYOR'S OCCUPATION
15. OTHER SOURCES OF INCOME/OUTSTANDING CLAIMS (WCB, ICBC)			16. TRADE UNION/PROFESSIONAL ASSOCIATION MEMBERSHIP
17. DESCRIPTION (THIS INFORMATION WILL HELP IDENTIFY THE PAYOR IF DOCUMENTS NEED TO BE SERVED)			
HEIGHT	WEIGHT	COLOUR OF EYES	COLOUR OF HAIR ETHNIC ORIGIN GLASSES

B) PAYOR INFORMATION cont'd

18. PAYOR'S MOTHER'S MAIDEN NAME (MOTHER'S SURNAME AT BIRTH)	19. TREATY STATUS CARD NO. (IF APPLICABLE)	20. PASSPORT <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ISSUED BY WHAT COUNTRY?	
21. PEOPLE WHO MAY BE LIVING WITH PAYOR (INCLUDE PRESENT SPOUSE/COMMON-LAW SPOUSE AND ANY CHILDREN)			
NAME	RELATIONSHIP TO PAYOR	BIRTHDATE OR AGE	
<hr/> <hr/> <hr/>			
22. RELATIVES OR FRIENDS WHO MAY KNOW THE WHEREABOUTS OF THE PAYOR			
NAME/RELATIONSHIP	ADDRESS	CITY/TOWN/ POSTAL CODE	PHONE NO.
<hr/> <hr/> <hr/>			
23. PAYOR'S BANK ACCOUNTS/CREDIT CARDS			
NAME AND ADDRESS OF FINANCIAL INSTITUTION	ACCOUNT NO. AND NAME ACCOUNT IS UNDER		
<hr/> <hr/> <hr/>			
24. MOTOR VEHICLES (INCLUDE CARS, TRUCKS, MOTORCYCLES, RECREATIONAL VEHICLES) OR BOATS			
MAKE	YEAR	COLOUR	LICENCE PLATE / IDENTIFICATION
<hr/> <hr/> <hr/>			
25. REAL ESTATE OWNED (INCLUDE HOMES, COTTAGES, INVESTMENT AND RENTAL PROPERTIES)			
STREET AND CITY/TOWN	LEGAL DESCRIPTION (IF KNOWN)		
<hr/> <hr/>			
26. OTHER FINANCIAL INVESTMENTS OR ASSETS (E.G., BUSINESSES OWNED, PENSIONS, RRSPS)			
<hr/> <hr/> <hr/>			

C) COURT ORDER

27. DO YOU HAVE A COURT ORDER FOR MAINTENANCE?
 YES NO

28. IF YOU DO NOT HAVE A COURT ORDER FOR MAINTENANCE,
DO YOU HAVE A SEPARATION AGREEMENT THAT HAS BEEN FILED IN A COURT?
 YES NO

IF YOU ANSWERED 'NO' TO BOTH QUESTIONS 27 AND 28, THE FMEP MAY NOT BE ABLE TO HELP YOU.
PLEASE CALL OUR OFFICE FOR FURTHER INFORMATION

29. PROVIDE THE COURT WHERE YOUR ORDER(S) / AGREEMENT(S) ARE CURRENTLY FILED,
STARTING WITH THE MOST RECENT

DD/MON/YY	LEVEL OF COURT	ORDER or AGREEMENT	COURT LOCATION	COURT FILE NO. (IMPORTANT)
	<input type="checkbox"/> PROVINCIAL <input type="checkbox"/> SUPREME	<input type="checkbox"/> AGREEMENT <input type="checkbox"/> ORDER		
	<input type="checkbox"/> PROVINCIAL <input type="checkbox"/> SUPREME	<input type="checkbox"/> AGREEMENT <input type="checkbox"/> ORDER		
	<input type="checkbox"/> PROVINCIAL <input type="checkbox"/> SUPREME	<input type="checkbox"/> AGREEMENT <input type="checkbox"/> ORDER		
	<input type="checkbox"/> PROVINCIAL <input type="checkbox"/> SUPREME	<input type="checkbox"/> AGREEMENT <input type="checkbox"/> ORDER		
	<input type="checkbox"/> PROVINCIAL <input type="checkbox"/> SUPREME	<input type="checkbox"/> AGREEMENT <input type="checkbox"/> ORDER		
	<input type="checkbox"/> PROVINCIAL <input type="checkbox"/> SUPREME	<input type="checkbox"/> AGREEMENT <input type="checkbox"/> ORDER		

30. IF A MAINTENANCE ENFORCEMENT PROGRAM OR COURT IN ANOTHER PROVINCE/STATE/COUNTRY IS ENFORCING OR
HAS ENFORCED YOUR MAINTENANCE ORDER/AGREEMENT, PLEASE PROVIDE ADDRESS OF OFFICE YOU WERE DEALING
WITH / YOUR ACCOUNT NO. WITH THEM / DATE OF LAST INVOLVEMENT

D) CHILDREN'S INFORMATION

31. NAME OF CHILD (ONLY THOSE NAMED IN THE ORDER/AGREEMENT)	SEX	BIRTHDATE DD/ MON/ YY	LIVING WITH YOU
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ARE YOU STILL EXPECTING MAINTENANCE FOR THE CHILD?
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ARE YOU STILL EXPECTING MAINTENANCE FOR THE CHILD?
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ARE YOU STILL EXPECTING MAINTENANCE FOR THE CHILD?
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ARE YOU STILL EXPECTING MAINTENANCE FOR THE CHILD?
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ARE YOU STILL EXPECTING MAINTENANCE FOR THE CHILD?

E) ADDITIONAL COMMENTS: (SUCH AS)

- a) ARE THERE ANY LEGAL ACTIONS TAKING PLACE NOW BETWEEN YOU AND THE PAYOR (E.G., DIVORCE)?
- b) ARE THERE PROBLEMS WITH CUSTODY OR ACCESS REGARDING THE CHILDREN?
- c) DO YOU ANTICIPATE ANY COMMUNICATION PROBLEMS WITH FMEP (E.G., IS A SIGHT OR HEARING IMPAIRED TRANSLATOR REQUIRED, IF SO – WHOM)?
- d) DO YOU HAVE ANY CONCERNS ABOUT YOUR SAFETY BECAUSE OF THE ENFORCEMENT OF YOUR MAINTENANCE ORDER?

F) CONDITIONS OF ENROLLMENT

ALL RECIPIENTS MUST SIGN THIS SECTION.
PLEASE READ CAREFULLY, SIGN AND DATE IT IF YOU WANT YOUR MAINTENANCE ORDER ENROLLED IN THE PROGRAM.

I hereby apply to file my maintenance order(s) or agreement with the Director of Maintenance Enforcement.

Once I receive notice that my order is enrolled I agree to the following conditions:

- a) I will not accept any payments directly from the Payor, without immediately advising the Family Maintenance Enforcement Program.
- b) I understand that if I provide false information or do not advise the Program of direct payments that enforcement of my order may be delayed or refused by the Program.
- c) I understand that payments received by the Program will be sent to me by direct deposit to my bank account.
- d) The Program will take whatever steps it considers reasonable to enforce the maintenance order or agreement on my behalf, and while the order is filed, **only** the Program may take steps to enforce. I will not start any enforcement proceedings myself.
- e) I will keep the Program informed of changes in my address, telephone number, dependents or other circumstances.
- f) I will give notice to the Program of any legal actions which may affect the order or agreement.
- g) Unless I have assigned my maintenance rights to the Province of British Columbia, I may withdraw my maintenance order from the Program at any time by filing a signed Notice of Withdrawal with the Program.
- h) I consent to the use of the information I provide to FMEP for the purposes of monitoring and enforcing the terms of my maintenance order under the *Family Maintenance Enforcement Act*. I understand that I may obtain information about privacy protection from the FMEP at 1-800-663-3455.

The information I have given on this Enrollment Form, the List of Payments and the Payment History Form are true and correct, to the best of my knowledge and belief.

SIGNATURE OF RECIPIENT

DATE

FAMILY MAINTENANCE ENFORCEMENT PROGRAM

INSTRUCTIONS – LIST OF PAYMENTS FORM

PLEASE READ THESE INSTRUCTIONS CAREFULLY BEFORE YOU BEGIN

To calculate how much, if any, money is owing to you, please list all money you have received for maintenance payments. This will let us calculate what maintenance is owed at the time your order or agreement is enrolled with the Program.

1. Begin with the first date a payment was made **OR** the first date a payment was made **after** any maintenance arrears were set by the court.

If you received your maintenance regularly, write the amount received for a whole year, if all payments were made in that year.
2. If you don't know the exact date a payment was made, put in the month and year.
3. **Include only maintenance payments**, not gifts or other goods, unless the items were accepted by you instead of maintenance. If so, put the value you accepted, and include a note in box # 3 on the Payment History Form.
4. **Please be neat and accurate. A copy of this List of Payments Form will be sent to the payor for review**, and it may be used in any enforcement and court action we may take.
5. When you have completed the List of Payments Form, please sign the List of Payments Declaration Form.
6. Using the information you provide we will calculate the arrears owing. We will send you a copy of our calculation along with a copy of your List of Payments Form.
7. If either you or the payor provide information at a later date, we may amend or add payments to the bottom section of the Declaration.
8. If you have questions about how to fill out the forms, call us:

In Greater Victoria: (250) 220-4040
Other places in BC: 1-800-663-3455

A COPY OF THIS FORM WILL BE PROVIDED TO THE PAYOR

FAMILY MAINTENANCE ENFORCEMENT PROGRAM

LIST OF PAYMENTS FORM

This List of Payments is prepared by the Recipient.

RECIPIENT (Name Used Now) LAST NAME	FIRST NAME	MIDDLE NAME(S)
PAYOR (Name Used Now) LAST NAME	FIRST NAME	MIDDLE NAME(S)

DATE PAID	AMOUNT PAID	DATE PAID	AMOUNT PAID	DATE PAID	AMOUNT PAID

- No payments have ever been made.
- No payments have been made since _____.
- No payments are currently owing.
- No payments are owing prior to _____.
- Payments are owing but I do not wish to claim them for the following time period:
from _____ to: _____

PLEASE SIGN THE LIST OF PAYMENTS DECLARATION (NEXT PAGE)

A COPY OF THIS FORM WILL BE PROVIDED TO THE PAYOR

FAMILY MAINTENANCE ENFORCEMENT PROGRAM

LIST OF PAYMENTS DECLARATION

1. I am the Recipient entitled to receive maintenance payments under a court order(s) or separation agreement.
2. This Form shows all payments I have received from the Payor since the order or agreement was made **or** since the date maintenance arrears were set by a court.
3. I understand the List of Payments will be provided to the Payor, and will be used in any enforcement or court action taken by the Family Maintenance Enforcement Program (FMEP).
4. I understand if this information is not accurate, enforcement of my maintenance order or agreement may be delayed, or refused.

(SIGN)

(DATE SIGNED)

(PRINT YOUR NAME)

FOR OFFICE USE ONLY

Additional payments or amendments to List of Payments by FMEP

DATE PAID	AMOUNT PAID	COMMENTS	CHANGE MADE BY	DATE

FMEP Direct Deposit Information

FMEP requires recipients to receive their maintenance payments by direct deposit into their bank accounts. We also encourage payors to pay by electronic banking so you can receive your payments faster.

We deposit all payments into the FMEP trust account when we receive them. If it is a payor's cheque, we will hold the payment until it has cleared the payor's bank and deposit the payment directly into your bank account. This may take 7 to 10 business days.

If we get a payment from a third party such as the Federal Government or receive a payment from the payor electronically or by certified cheque, it will be processed right away because we do not need to wait for the cheque to clear.

Direct deposit allows you to receive your funds quickly and avoid delays that can result from cheques being lost in the mail. It will also ensure you never experience an insufficient funds (NSF) situation with a payor's cheque, since we only send the direct deposit to you if the cheque has already cleared.

Please note:

- If you are receiving payments from more than one payor, all your payments will be direct deposited;
- If you change banks or accounts, you will need to re-apply for direct deposit and send us another "void" cheque;
- If you change your address, even if your bank and account remain the same, you will need to let us know in case we need to contact you.
- To find out when we have made a direct deposit to your bank account you can:
 - be notified by email – to sign up for email notification, go to our website at www.fmep.gov.bc.ca; or
 - use InfoLine, our automated telephone system.
- If you experience a problem with a direct deposit and you do not receive the payment, please notify us in writing right away.

FAMILY MAINTENANCE ENFORCEMENT PROGRAM

DIRECT DEPOSIT APPLICATION FORM

In order to deposit your maintenance payments to your bank account, we need some information from you. All information will be kept strictly confidential and be used only for the purposes of direct deposit.

Part A

Name: _____	
Address: _____ _____	
FMEP Case Number(s): _____ (if known)	FMEP Personal ID Number: _____ (if known) <i>If your payments are to be deposited into a non-chequing account, fill in your id number after the bank has completed Part B below.</i>
Signature: _____ (required)	Date: _____

Part B

Please select one of the following:

I want FMEP to deposit my maintenance payments into a chequing account.
Please attach a 'void' cheque to this form.

or:

I want FMEP to deposit my maintenance payments into a non-chequing account.
Please take this form to your bank and have a bank representative complete the following:

Type of Account: _____	Bank Name: _____
Bank Number: _____	Branch Address: _____
Transit Number: _____	_____
Account Number: _____	Bank Stamp: _____

**This form is required to complete enrollment in the FMEP.
We will send you a notice to confirm when the direct deposit arrangement is in place.**

SENDING IN THE ENROLLMENT PACKAGE

Please ensure you have completed and signed the following:

- Recipient Enrollment Form, pages 6 to 10
- Payment History Form, page 11
- List of Payments Form, page 13 and 14
- Direct Deposit Application Form, page 16

Mail your completed forms to:

**FMEP Enrollment Office
Box 5100
Victoria BC V8R 6N3**

WHAT HAPPENS NEXT?

We will review your completed forms and contact you if further information is needed. We will send you an acknowledgement letter, and give you your case number and a personal identification number. The numbers will enable you to get information about the enrollment of your case from our website or InfoLine, our automated telephone system.

We contact the BC court where your order or agreement is filed to get the documents we need. When we have all the orders, we will calculate any arrears owing to you and complete the enrollment process. We will then send you and the payor a Notice of Filing telling you your order or agreement has been enrolled.

After enrollment your file will be sent to a regional FMEP office and we will begin monitoring and enforcing your maintenance. The payor will be told to make all payments through the Program. Payments we receive will be sent to you by direct deposit.

Please be patient. It takes about 4 weeks to enroll an order including the time it takes to get the certified copies of your orders, and it can take longer if there are unusual circumstances or delays in getting the information or orders we need.