

Professional or Recreational License Suspension/Revocation Warning Notice Claim Form

Directions: You may avoid suspension/revocation proceedings if you are receiving temporary assistance or supplemental security income (SSI); your annual income is below the self-support reserve of \$20,331 for 2024 or falls below the self-support reserve after paying your current support obligation; or information in the *Warning Notice* is incorrect.

- Complete Section 1 if you are claiming that you are in receipt of public assistance or supplemental security income (SSI), or your annual income falls below the self-support reserve.
- Complete Section 2 if you are claiming that information shown in the *Warning Notice* is incorrect and a mistake of fact has been made.
- Check all appropriate boxes and enter the specific information requested.
- Print your name, sign, and date this form. Return this form and any supporting documentation to the Support Collection Unit (SCU) at the SCU address provided at the top of the accompanying *Warning Notice* **within fifteen (15) days** from the date the notice was mailed to you.
- A written notice of the decision regarding your claim will be sent to you.

Use Black Ink Only

Section 1: Income Claim

I should not be subject to a professional or recreational license suspension/revocation action because (check each box that applies to you):

- I am receiving temporary assistance.
- I am receiving supplemental security income (SSI) benefits.
- My annual income falls below the self-support reserve (\$20,331 for 2024).
- My annual income falls below the self-support reserve (\$20,331 for 2024) after paying the current support obligation.

I am attaching the following documents to support my claim (examples: a benefit notice from the local Department of Social Services or a supplemental security income (SSI) award letter from the Social Security Administration, copies of my most recently filed State and federal income tax returns and a copy of the W-2 wage and tax statements submitted with the returns):

Section 2: Mistake of Fact Claim

I claim a mistake of fact as follows (check each box that applies to you):

- I am not the person identified as the noncustodial parent.
- The order of support does not exist.
- The support arrears/past-due support amount is not greater than the amount of support due for a period of four (4) months.
- The Support Collection Unit (SCU) made an error in the amount of child support debt that is owed.
- Other. Provide an explanation of your claim: _____

I attach the following documents to support my claim (examples: proof of identity, copies of orders terminating, vacating, or modifying the support award):

Completed and Submitted by:

Name (Print)

Signature

Date

New York Case Identifier: _____ SCU County Name: _____