

**FAMILY COURT SERVICES**  
**76347 Veterans Way, Yulee, FL 32097**  
**(904) 548-4908**

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**CHECKLIST FOR:**  
**MOTION TO VACATE JUDGMENT/CERTIFICATE OF DELINQUENCY**  
**AND CONTEST NOTICE OF DELINQUENCY**

Use this form if you were notified by the Domestic Relations Depository or Child Support Enforcement that there will be a judgment on the delinquency of support payments that are unpaid.

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**INSTRUCTIONS:**

1. Go to [www.flcourts.org](http://www.flcourts.org) - **(select)** – Self Help, Family Law Forms for the forms.
2. **Fully complete** the forms below.
3. File your **original documents** with the **Civil Department Clerk of Courts – 1<sup>st</sup> Floor**. \*\*Filing fee of **\$25.00** may be required when filing your documents and may be paid by cash, credit/debit, cashier's check, or money order. \*

**COPIES:**

- (1) COPY - YOU KEEP FOR YOURSELF
- (1) COPY – OTHER PARTY \*Send a copy
- (1) COPY – \***Instructions on next page**
  - CERTIFIED MAIL WITH A RETURN RECEIPT to:  
**DEPARTMENT OF REVENUE/CHILD SUPPORT ENFORCEMENT UNIT**  
**ATTN: Service Center Manager**  
Bldg. A – Room 150  
921 N. Davis Street  
Jacksonville, FL 32209

**ALL FORMS MUST BE COMPLETED TO START YOUR CASE**

- Local Form (attached)
  - Motion to Vacate Judgment/Certificate of Delinquency and Contest Delinquency
    - Include any records and/or written information that may support your claims in your motion on payments
- Form 12.900(h) (Must be Filed)
  - Notice of Related Cases
- PRINTOUT of your '**Pay History**' from the Child Support Clerk – Civil Department.

## HOW TO NOTIFY BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Make sure you obtain the following with your form and follow instructions:

- (1) Envelope
- (1) 'Green Card' for certified mail
- (1) 'White Receipt' for return receipt requested
- Local Form
  - \*Notice of Service to Department of Revenue/Child Support Enforcement (DOR/CSE)**

### INSTRUCTIONS:

1. Go to the nearest U.S. Post Office with your envelope with attached green card and receipt.
2. After the copy of your motion has been delivered to DOR/CSE, the Post Office will send you back the 'Green Card' to inform you that it was received.
3. Attach this green card along with the local form and file it with the Clerk of the Courts, Civil Department.

IN THE CIRCUIT COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR NASSAU COUNTY, FLORIDA

CASE NO.: \_\_\_\_\_

DIVISION: \_\_\_\_\_

\_\_\_\_\_ ,

Petitioner,

And

\_\_\_\_\_ ,

Respondent,

**MOTION TO VACATE JUDGMENT/CERTIFICATE OF DELINQUENCY**  
**AND CONTEST NOTICE OF DELINQUENCY**

COMES NOW \_\_\_\_\_ and moves to contest the delinquency referred to by the Domestic Relations Depository in its **Notice of Delinquency**, dated \_\_\_\_\_ on the grounds of the following mistake of fact:

**1. A delinquency does not exist because:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. The amount of the delinquency is incorrect because:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. The identity of the obligor on the Notice is incorrect because:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that a copy of this document was ( ) mailed ( ) faxed and mailed ( ) e-mailed ( ) hand-delivered to the person(s) listed below on *{date}* \_\_\_\_\_.

Other party or his/her attorney:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

**I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this answer and that the punishment for knowingly making a false statement includes fines and/or imprisonment.**

Date: \_\_\_\_\_

\_\_\_\_\_

Signature of Party

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Tel. No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**IN THE CIRCUIT COURT OF THE FOURTH JUDICIAL CIRCUIT  
IN AND FOR NASSAU COUNTY FLORIDA**

CASE NO.: \_\_\_\_\_ **-DR-** \_\_\_\_\_

DIVISION: \_\_\_\_\_

\_\_\_\_\_  
Petitioner

And

\_\_\_\_\_  
Respondent

**NOTICE OF SERVICE TO  
DEPARTMENT OF REVENUE/CHILD SUPPORT ENFORCEMENT (DOR/CSE)  
BY CERTIFIED MAIL RETURN RECEIPT REQUESTED**

I **HERE BY CERTIFY** that the Dept. of Revenue/Child Support Enforcement Unit was served with a copy of:

\_\_\_\_\_ Motion \_\_\_\_\_  
*(full name of pleading)*

\_\_\_\_\_ Other Documents/Forms \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By Certified Mail, Return Receipt Requested, Receipt No \_\_\_\_\_,  
at Department of Revenue/Child Support Enforcement, Attn: Service Center Manager, Bldg. A – Room 150, 921 N.  
Davis Street, Jacksonville, FL 32209, on *(month and day)* \_\_\_\_\_, 20\_\_\_\_ as shown by the  
signed certified mail card (attached to this notice).

\_\_\_\_\_  
Signature

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

**ATTACH CERTIFIED MAIL CARD HERE**