

**IN THE CIRCUIT COURT OF THE NINTH JUDICIAL CIRCUIT  
IN AND FOR ORANGE COUNTY, FLORIDA  
FAMILY LAW DIVISION**

IN RE:

\_\_\_\_\_  
Petitioner,

and

Case No.: \_\_\_\_\_

Division No.: \_\_\_\_\_

\_\_\_\_\_  
Respondent.

**PETITION TO CONTEST NOTICE OF DELINQUENCY AND INTENT TO  
SUSPEND DRIVER'S LICENSE AND MOTOR VEHICLE REGISTRATION**

COMES NOW, the Obligor, \_\_\_\_\_ (name), and petitions the court to grant the relief sought herein in this Petition to Contest Notice of Delinquency and Intent to Suspend Driver's License and Motor Vehicle Registration. The grounds or basis for this relief is as follows: (Check one)

- A.  Mistake of fact regarding the existence of a delinquency.
- B.  Mistake of fact regarding the identity of the obligor.
- C.  The obligor has paid the delinquency in full.
- D.  The obligor and oblige in a non-IV-D case, or the obligor and the Title IV-Agency in a IV-D case, entered into a written agreement for payment of the Delinquency. Explanation:

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

- E.  In a IV-D case, the notice to suspend was filed in response to the obligor's failure to comply with a subpoena, order to appear, order to show cause, or a similar order, and the obligor has complied.

WHEREFORE, the undersigned obligor respectfully requests that this court:

Decline to suspend my driver's license and vehicle registration

Other: \_\_\_\_\_

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

I certify that a copy of this document was **(check one only)** mailed (\_\_\_), faxed and mailed (\_\_\_), or hand delivered to the person(s) listed below on \_\_\_\_\_ (\_\_\_).

Service Date

Orange County Clerk of Court  
Orange County Courthouse  
425 N. Orange Avenue  
Orlando, Florida 32801

Other party or his/her attorney:

Name \_\_\_\_\_

Address \_\_\_\_\_

City State, Zip Code \_\_\_\_\_

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

\_\_\_\_\_  
Signature of Party

DATED: \_\_\_\_\_

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

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

City, State and Zip Code: \_\_\_\_\_

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

STATE OF FLORIDA  
COUNTY OF ORANGE

Sworn to or affirmed and signed before me on \_\_\_\_\_ by \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC – STATE OF FLORIDA

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(Print, type or stamp commissioned name of notary)

\_\_\_ Personally known  
\_\_\_ Produced Identification (Type of identification produced) \_\_\_\_\_.