

**Family Maintenance Enforcement Program
Default Fee
Request for Review Form**

If you believe we need to update our records, please complete this form and send it to the office handling your case:

Lower Mainland Client Office
Box 80449
Burnaby BC V5H 3X9
Fax 604 678-5679

Northern & Interior Client Office
Box 830
Kamloops BC V2C 5N1
Fax 250 434-6033

Victoria Client Office
Box 9216
Victoria BC V8W 9J1
Fax 250 220-4050

- I made the payment of \$ _____ on (date) _____. I sent it to the FMEP the Recipient . (Please attach cancelled cheque, receipt or other proof of payment.)
- My court order or agreement ended on (date) _____.
- My court order or agreement was changed to a different amount. Please attach a copy of your new court order or written agreement, if you have it, or give the date the new order was made and which court made it: (date) _____;
(court) _____.
- I did not make the payment because I began receiving income assistance on (date) _____, before the maintenance payment was due. (Please include a letter from your Financial Assistance Worker.)

Name: _____

FMEP Case Number: _____

Address: _____

Home Phone: _____

Work Phone: _____

Cell/Message: _____

Signature: _____

Date: _____

Notice of Intention Certificate