

THE FAMILY COURT SELF-HELP PROGRAM

Packet Request Form via Mail

The Self-Help Program has the following packets of instructions and forms available **via MAIL**:
Payment Money Order only (No Cash/Check)

Please mark the appropriate boxes for the specific packet being requested via mail and complete the required information.

◆ **DISSOLUTION OF MARRIAGE:**

Please check one of the following boxes:

- Simple Divorce (no minor children, no property, no assets and no debts)
- Divorce with Property (with property, with debt and with assets)
- Divorce with Minor Children (minor children common to both parties)

Please check one of the following boxes:

- Agreement
- Summons (Sheriff/Process Server)
- Publication address unknown

Packet Fee: \$85.00 + \$10.00 mail processing fee

◆ **MODIFICATION or RELOCATION:**

Please check one of the following boxes:

- Modification of Final Judgment (Child Support)
- Modification of Final Judgment (Parenting Plan and/or, Time Sharing and/or. Parental Responsibility ,and/or Child Support)
- Relocation Petition (Parent Relocating)

Please check one of the following boxes:

- Agreement
- Summons (Sheriff/Process Server)

Packet Fee: \$85.00 + \$10.00 mail processing fee

◆ **PATERNITY:**

- To establish Paternity, Time Sharing, Parenting Plan and Child Support when the parents were never married.

Please check one of the following boxes:

- Agreement
- Summons (Sheriff/Process Server)

Packet Fee: \$85.00 + \$10.00 mail processing fee

◆ **Petition for Parenting Plan and Time Sharing Schedule:** (Paternity has been established)

- To establish Parental Responsibility, Time Sharing, Parenting Plan and Child Support when the parents were never married.

Please check one of the following boxes:

- Agreement
- Summons (Sheriff/Process Server)

Packet Fee: \$85.00 + \$10.00 mail processing fee

◆ **TEMPORARY CUSTODY:**

- To obtain temporary custody of a minor child if you are the child's brother, sister, grandparent, great grandparent, aunt, uncle, or cousin.

Please check one of the following boxes:

- Agreement
- Summons (Sheriff/Process Server)
- Publication address unknown

Packet Fee: \$85.00 + \$10.00 mail processing fee

◆ **DISESTABLISH PATERNITY PACKET: (filed by alleged father only)**

- To disestablish a man's paternity, remove the man's name from a child's birth certificate and/or terminate a man's child support obligation.

Please check one of the following boxes:

- Agreement Summons (Sheriff/Process Server)

Packet Fee: \$85.00 + \$10.00 mail processing fee

◆ **NAME CHANGE:**

Please check one of the following boxes:

- Name Change Adult Name Change Minor Name Change Family

Please check one of the following boxes:

- Agreement Summons (Sheriff/Process Server) Publication address unknown

Packet Fee: \$60.00 + \$10.00 mail processing fee

◆ **MOTIONS:**

- Motion Packet includes a blank Motion and a Motion for Indirect Civil Contempt.

Packet Fee: \$45.00 + \$10.00 mail processing fee

◆ **CHILD SUPPORT ENFORCEMENT:**

- CSE Packet includes Reinstate Driver's License/ Notice of Delinquency/Determine Arrears

Packet Fee: \$45.00 + \$10.00 processing fee

◆ **ADMINISTRATIVE SUPPORT PACKET:**

- When your child support has been established through the Department of Revenue, there are 2 options:
Appeal the Final Order or Request the Circuit Court adopt the order and enter a superseding order

Packet Fee: \$85.00 + \$10.00 mail processing fee

◆ **Answer / Answer and Counter Petition Packet:**

When you need to file a written response to a petition.

- Answer/Waiver (no filing fee) Answer and Counter Petition (filing fee \$295)

Packet Fee: \$45.00 + \$10.00 mail processing fee

Service Fee includes the following: Family-Court approved packet with instructions, paralegal review, notarization, Admin No Hearing Special Affidavit, copies, and postage. Service fee is provided for either in-person appointments or paralegal packet review via mail.

Please legibly complete section below:

Type of packet being requested: _____

Print Your Name: _____

D.O.B: _____

Mailing Address: _____

City, State and Zip Code: _____

Contact Phone Number: _____

Email Address: _____

Self-Help Number if available: _____

- **Money Order made out to Miami Dade County**
- **Money Order amount should include service fee and mail processing fee.**
- **Packet request via mail address Self-Help 175 NW 1st Ave Room 2441 Miami, FL 33128**