

Application for Establishment of a Decision
(including where necessary the establishment of parentage)
(Article 10(1) c) Article 10(1) d))

CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE

Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.

An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.

A determination of non-disclosure has been made by a Central Authority in accordance with Article 40. If this box is ticked, information under sections 2 d, e, f and g and 5 should only be provided in the Restricted Information on the Applicant page of this form.

1. Requesting Central Authority file reference number: _____

2. Particulars of the applicant

- a. Family name(s): _____
- b. Given name(s): _____
- c. Date of birth: _____ (dd/mm/yyyy)
- d. Address: _____

- e. Telephone numbers: _____

- f. Fax number: _____
- g. E-mail: _____

3. Particulars of the person(s) for whom maintenance is sought or payable

3.1 Maintenance is sought or payable for the applicant named above

Parentage is established or presumed

Maintenance basis:

- parentage *in loco parentis* or equivalent relationship
- marriage analogous relationship to marriage
- affinity (please identify): _____
- grandparent sibling grandchild
- other: _____

- 3.2 Maintenance is sought or payable for the following child(ren)
- a. Family name(s): _____
Given name(s): _____
Date of birth: _____ (dd/mm/yyyy)
- Parentage is established or presumed
- Maintenance basis:
 parentage *in loco parentis* or equivalent relationship
- b. Family name(s): _____
Given name(s): _____
Date of birth: _____ (dd/mm/yyyy)
- Parentage is established or presumed
- Maintenance basis:
 parentage *in loco parentis* or equivalent relationship
- c. Family name(s): _____
Given name(s): _____
Date of birth: _____ (dd/mm/yyyy)
- Parentage is established or presumed
- Maintenance basis:
 parentage *in loco parentis* or equivalent relationship
- 3.3 Maintenance is sought or payable for the following person
- Family name(s): _____
Given name(s): _____
Date of birth: _____ (dd/mm/yyyy)
- Maintenance basis:
 marriage analogous relationship to marriage
 affinity (please identify): _____
 grandparent sibling grandchild
 other: _____
- 3.4 Maintenance is sought or payable for additional children or persons, additional particulars are attached
4. Particulars (if known) of the debtor (respondent)
- a. Family name(s): _____
- b. Given name(s): _____
- c. Date of birth: _____ (dd/mm/yyyy)
- d. Personal identification number: _____
(include name of country or territorial unit that issued the number)
- e. Residential address: _____

- f. Postal address: _____

g. Any other information that may assist with the location of the debtor

5. Payments

a. Details for electronic transfer of payments (if applicable)

Name of the bank: _____
NBIC: ¹ _____
SWIFT-address: _____
IBAN: ² _____
Account number: _____
Name of account holder: _____
Reference: ³ _____

b. Details for payments by cheques (if applicable)

Cheque payable to: _____
Cheque to be sent to: _____
(address) _____
Reference: ³ _____

6. This application is for the establishment of a decision in the requested State where:

- a. there is no existing decision (Article 10(1) c)
b. recognition and enforcement of a decision is not possible or is refused because of the lack of a basis for recognition and enforcement under Article 20 or on the grounds specified in Article 22 b) or e) (Article 10(1) d))

7. Support / maintenance sought by the applicant⁴ (specify currency⁵ for each amount)

Support / maintenance
Please specify the amount: _____
Frequency of payments
 week two weeks month 3 months 6 months
 year other (specify): _____

Retroactive support / maintenance
Please specify date from which retroactive maintenance is sought:
_____ (dd/mm/yyyy)
Please specify the amount: _____
Frequency of payments
 week two weeks month 3 months 6 months
 year single payment other (specify): _____

¹ National Bank Identification Code.

² International Bank Account Number.

³ Where needed to affect payment.

⁴ Complete this section only if required by the requested State.

⁵ Currency should be specified using the ISO code.

