



Child Support Program

Notice of Levy

<<Financial Institution BP Name>>
<<Address\_Line\_1>>
<<Address\_Line\_2>>
<<City>> <<State>> <<Zipcode>>

<<Date>>
Name: <<NCPName>>
Social Security Number: <<NCP SSN >>
Activity Number: <<ZBL activity #>>

On <<Date of EF122>>, the Department notified the person named above of our intent to collect up to \$<<Past Due Amount on CS-EF122>> in past-due support they owe by taking personal property, including wages, that belongs to them and may be in your possession.

The person has not paid the past-due support owed. The person has not contested the action, did not contest timely, or was unsuccessful in contesting this action.

WHAT YOU NEED TO DO

- 1. You are now required by Florida law to turn over the person's personal property in your possession, up to the amount of \$<<Levy Amount>>. <<Option 1>> Personal property includes financial assets, bank account balances, fair market value of securities, wages, and other forms of income, settlement proceeds, cash, credits, bonuses, severance pay and any other form of personal property subject to legal process.
2. Return this form to the address below:
<<Central Intercept Address>>
3. Make checks payable to the Child Support Program. Write the name of the person on the check and the activity number shown at the upper right.

This notice and the Department's actions are authorized by section 409.25656, Florida Statutes. Under Florida law, you are expressly discharged from any obligation or liability to the person who owes support with respect to any property of theirs affected by your compliance with this notice. The Department is authorized to file a civil action in circuit court to enforce compliance with this notice.

XXXX
XXXX
XXXX
XXXX
XXXX
XXXX
XXXX
XXXX
XXXX
XXXX
XXXX
XXXX

If you have questions or need help:
Call: <<LevyPhoneNumber>>
Fax: <<LevyFaxNumber>>
Chat with us or learn more at: floridarevenue.com/childsupport

T

Upon executing this levy, the freeze is released in full from the remaining assets owned by the obligor which are in your possession or control. This notice serves as the Department's consent to transfer or dispose of such assets. For questions regarding this matter, please contact the Department at the telephone number below.

If you have questions, please call <<LevyPhoneNumber>>.

Signed,

<<Compliance Process Manager>>  
Executive Director's Designee  
Issued on: <<Date>>

This document has been signed electronically as authorized by section 668.004, Florida Statutes.

**Notice of Right to Garnish Federal Benefits**

The attached garnishment order was issued by Florida Department of Revenue, Child Support Program, pursuant to authority to attach or seize assets of parents owing child support in financial institutions in the State of Florida and any other state or Territory, 42 U.S.C. § 666.

Accordingly, the garnishee is hereby notified that the procedures established under 31 CFR Part 212 for identifying and protecting Federal benefits deposited to accounts at financial institutions do not apply to this garnishment order. The garnishee should comply with the terms of this order, including instructions for withholding and retaining any funds deposited to any account(s) covered by this order, pending further order of Florida Department of Revenue, Child Support Program.

XXXX  
XXXX  
XXXX  
XXXX  
XXXX  
XXXX  
XXXX  
XXXX  
XXXX  
XXXX  
XXXX  
XXXX

T

## **FORM PROCESSING RULES**

### **Option 1: When activity reason equals 'Securities' insert:**

Unless otherwise instructed by the account owner, please liquidate the frozen securities in the order of greater value to lesser value in an amount sufficient to cover the obligation and transfer the resulting liquid assets.