

Application for an administrative review



Completing this form and the Child support review - statement of financial position - IR178 will help the review officer to consider all your circumstances.



We will give a copy of this application and any supporting information to the other party or parties if they ask for it.



If you need help to complete this form, call us on 0800 221 221 or +64 9 984 2531 from overseas.

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The circumstances are:	pplication are number(s) (see pages 11-20 of our guide Helping you upport reviews - IR175 and print the numbers in the boxes) c (describe how your situation matches the ground(s) indicated). If you use extra pager and attach the extra pages to this form.	paper, please include
	Imstances that are not taken into account by the formula assessment. ction 96B of the Child Support Act 1991 for an administrative review of the assess	ssment for these year(s).
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5	Your IRD number	(8 digit numbers start in the second box. 1 2 3 4 5 6 7 8)				
6	Your postal address	Street address or PO Box				
		Suburb, town or city Postcode				
	Your contact details	Country				
9		Day Evening Mobile				
	Email					
8	Your requirements for the hearing (tick as appropriate)					
		in Takapuna, Manukau, Hamilton, Wellington or Christchurch? Yes No of the hearing to be done by phone or on the information you have Phone Writing				
		rson to the hearing? If "yes", please give their name and occupation Yes No				
	Support persons name					
		First name(s)				
		Surname				
	Support persons occupation					
	Support persons phone numbers	Day Evening () () Mobile				
	Do you want to have a representative See page 32 of our guide Helping	ive attend the hearing? you to understand child support reviews - IR175. Yes No				
9	Information about the other p	party or parties to the formula assessment for the child or children				
	Name of other party	Mr Mrs Miss Ms (Tick one)				
		First name(s)				
		Surname				
	Postal address	Street address or PO Box				
		Street address of PO box				
		Suburb, town or city Postcode				
		Country				
	Contact details					
		Day Evening Mobile				
		Email				

Name of other party (if any)	Mr Mrs	Miss Ms (Tick one)	
	First name(s)		
	Surname		
Postal address			
	Street address or PO Box		
	Suburb, town or city		Postcode
	Country		
Contact details	()		
	Day	Evening	Mobile
	Email		

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Declaration

I understand that:

- This review is not limited to the reasons/grounds in this application and the result may be different to the change requested. (See page 22 of our guide **Helping you to understand child support reviews IR175**).
- · All parties to the child support assessment will be invited to take part in the review.

To the best of my knowledge the information given is true and correct.

Signature / / /
Date

Please send this completed form to: Child Support, PO Box 39010, Wellington Mail Centre, Lower Hutt 5045

Privacy

Meeting your tax obligations means giving us accurate information so we can assess your tax and entitlements under the Acts we administer. We may charge penalties if you do not.

We may also exchange information about you with:

- some government agencies
- another country, if we have an information supply agreement with them, and
- Statistics New Zealand (for statistical purposes only).

You can ask for the personal information we hold about you. We'll give the information to you and correct any errors, unless we have a lawful reason not to. Find our full privacy policy at **ird.govt.nz/privacy**