



Child support review – response by other party

When to use this form

Use this form when you are responding to an administrative review application.

Read the guide Helping you to understand child support reviews – IR175 before completing this form.

	Your name	Mr	Mrs	Miss	Ms
	To help us, show the name you use for child support.	First name(s)			
		Surname			
2	Provide your comment o	n what the ap	plicant ha	s said in th	eir application



(8 digit numbers start in the second box. 1 2 3 4 5 6 7 8)										
Mr	Mrs	Miss	Ms							
First name(s)										
Surname										
Street address or	PO Box									
Suburb, town or ci	tv					Postcod	е			
Country										
()		()		()				
Day		Ever	ling		Mobile	•				
Email										
	Mr First name(s) Surname Street address or I Suburb, town or cir Country (()) Day	Mr Mrs First name(s) Surname Street address or PO Box Suburb, town or city Country (()) Day	Mr Mrs Miss First name(s)	MrMrsMissMsFirst name(s)SurnameStreet address or PO BoxSuburb, town or cityCountry()Day()Evening	MrMrsMissMsFirst name(s)SurnameStreet address or PO BoxSuburb, town or cityCountry(Mr Mrs Miss Ms First name(s) Surname Street address or PO Box Suburb, town or city Country (Mr Mrs Miss Ms First name(s) Surname Street address or PO Box Suburb, town or city Country () Day Evening	Mr Mrs Miss Ms First name(s) Surname Street address or PO Box Suburb, town or city Postcode Country (Mr Mrs Miss Ms First name(s) Surname Street address or PO Box Suburb, town or city Postcode Country () Day Evening	Mr Mrs Miss Ms First name(s) Surname Street address or PO Box Suburb, town or city Postcode Country (

Your requirements for the hearing (tick as appropriate)

Will you be present at the hearing?

If "no", would you prefer your part of the hearing to be done by phone or on the information	Phone	Writing
you have provided in writing?		Ũ

Support at the hearing

You can have a support person or representative at the hearing. See page 30 of our guide **Helping you to understand child support reviews - IR175** for more information and to see if your support person or representative meet the rules to be at the hearing.

Do you want to bring a support person to the		Yes	No	
Do you want to have a representative atten		Yes	No	
If yes to either, please give their name and				
First name(s)	Surname	Occupation		

Declaration

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

Signature	-	-	-		
Signature					
					/ /
					Date
					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**



Yes

No