

AUTHORIZATION TO ACT

Part One

To:	APPLICANT'S NAME	CASE NUMBER
Re:	RESPONDENT/PAYOR/OTHER PARENT	

NOTWITHSTANDING YOUR ASSIGNMENT OF MAINTENANCE, you ARE HEREBY AUTHORIZED to take the action(s) indicated below (only the action(s) marked with an "x" applies to your case):

- To make an application under an enactment of British Columbia for a maintenance order.
- To enter into a maintenance agreement.
- To make or defend an application for variation of a maintenance agreement or maintenance order.
- To receive payment under:
 - i) a maintenance agreement, or
 - ii) a maintenance order made under the *Divorce Act* (Canada) or otherwise.
- To enforce a maintenance agreement or maintenance order.
- To file a maintenance agreement with a court in British Columbia (to give it the force of an order).
- To file an extra-provincial maintenance order with a court in British Columbia.
- To file or withdraw a maintenance order under the *Family Maintenance Enforcement Act*.
- To make payment arrangements with the debtor for recovery of arrears.

This authorization does not cancel your assignment of maintenance rights and may be revoked at any time, with written notice. This authorization is limited to the action indicated and subject to the following conditions:

1. Any agreement or consent negotiated by you or your lawyer in the matter(s) authorized above must be approved by your Family Maintenance Worker before the agreement or consent is finalized.
2. On the request of the Family Maintenance Worker you must provide all information related to the status of the maintenance case.
3. You must promptly provide a copy of any order or agreement obtained.
4. Any agreement obtained must be in a form that can be filed in the Family Maintenance Enforcement Program.
5. You must immediately advise the police, your lawyer and your Family Maintenance Worker of any safety concerns (i.e. behaviors that may lead to physical harm or that cause or have caused physical harm to one or more of the parties) that arise in relation to the action(s) authorized above.

FAMILY MAINTENANCE WORKER NAME (PRINT NAME)	DATE (YYYY MMM DD)	TELEPHONE
FAMILY MAINTENANCE WORKER (SIGNATURE)	OFFICE ADDRESS STAMP	

Part Two

The personal information requested on this form is collected under the authority of and will be used for the purpose of administering the *Employment and Assistance Act* and the *Employment and Assistance for Persons with Disabilities Act*. The collection, use and disclosure of personal information is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. Any questions about this information should be directed to your Family Maintenance Worker.

APPLICANT'S NAME

CASE NUMBER

RESPONDENT/PAYOR/OTHER PARENT

You have asked for maintenance action to proceed; however, the ministry does not wish to take maintenance action in your case due to a determination of high risk. Please read and initial each of the following statements to indicate you've discussed the identified points with your Family Maintenance Worker:

CLIENT
INITIAL

1. I have been advised the ministry will not pursue maintenance at this time because concerns have been identified about my safety: _____
2. I understand the ministry's concerns about my safety and have discussed them with my Family Maintenance Worker: _____
3. The ministry has advised me not to pursue maintenance because of the safety concerns: _____
4. Regardless of this advice, I wish to obtain an Authorization to Act so that I can pursue maintenance at this time: _____
5. The ministry has advised me to report any new or additional safety issues to the Ministry if and when they occur: _____
6. My children's safety will not be at risk if I pursue maintenance at this time: _____

The ministry has decided not to pursue maintenance action due to identified serious safety concerns, however regardless of this fact and regardless of the ministry's decision not to proceed, you have requested the return of your assigned rights so that you can pursue maintenance action on your own, against the advice of the ministry. Notwithstanding your assignment of maintenance rights, and because you have indicated that any dependent children in your care are not at risk, you are hereby authorized to take maintenance action on your own. You are given back your assigned rights under the provisions noted below on this form.

This authorization does not cancel your assignment of maintenance rights and may be revoked at any time, with written notice. This authorization is subject to the following conditions:

1. Any agreement or consent negotiated by you or your lawyer in the matter(s) authorized above must be approved by your Family Maintenance Worker before the agreement or consent is finalized.
2. On the request of the Family Maintenance Worker you must provide all information related to the status of the maintenance case.
3. You must promptly provide a copy of any order or agreement obtained.
4. Any agreement obtained must be in a form that can be filed in the Family Maintenance Enforcement Program.
5. You must immediately advise the police, your lawyer and your Family Maintenance Worker of any safety concerns (i.e. behaviors that may lead to physical harm or that cause or have caused physical harm to one or more of the parties) that arise in relation to the action(s) authorized above.

FAMILY MAINTENANCE WORKER NAME (PRINT NAME)

DATE (YYYY MMM DD)

TELEPHONE

FAMILY MAINTENANCE WORKER (SIGNATURE)