

IN THE CIRCUIT COURT OF THE FOURTH JUDICIAL CIRCUIT,
IN AND FOR CLAY COUNTY, FLORIDA

_____,
Petitioner,

and

_____,
Respondent.

CASE NO.:

DIVISION:

**PETITION TO ESTABLISH PARENTAL RESPONSIBILITY
AND A PARENTING/TIME-SHARING PLAN**

Petitioner, {full legal name} _____, being sworn, certifies that
the following statements are true:

This is an action to establish parental responsibility and a Parenting Plan with a time-sharing schedule.

SECTION I.

1. Petitioner is the Mother Father of the following child(ren):

NAME OF CHILD(REN)	BIRTH DATE	AGE	GENDER
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_____	_____	_____	_____
_____	_____	_____	_____

2. Petitioner's current address is {Street Address, City, State, and Zip Code}

3. Respondent's current address is {Street Address, City, State, and Zip Code}

4. Petitioner is over the age of 18 years old and has has not been within a 30 day period immediately prior to this date, a person in the military services of the United States as defined by Section 521 of the Service Members Civil Relief Act.

5. Respondent is over the age of 18 years and has has not been, within a 30 day period immediately prior to this date, a person in the military services of the United States as defined by Section 521 of the Service Members Civil Relief Act.

6. A completed Uniform Child Custody Jurisdiction and Enforcement Act Affidavit (UCCJEA), Florida Supreme Court Approved Family Law Form 12.902(d), is filed with this Petition.

7. A completed Notice of Social Security Number, Florida Supreme Court Approved Family Law Form 12.902(j), is filed with this Petition.

8. A copy of the Child Support Order, Case Number _____, dated _____ signed by the Court in {City} _____, _____ County, {State} _____, establishing child support for the minor child(ren) common to the Parties, is attached to this Petition.

SECTION II.

1. The minor child(ren) currently reside(s) with Mother Father Other
(explain): _____
2. **Parental Responsibility.** It is in the best interest of the child(ren) that parental responsibility be:
[SELECT ONE ONLY]
_____ Shared by both Father and Mother
_____ Awarded solely to Mother Father
Shared parental responsibility would be detrimental to the child(ren) because: _____
3. **Parenting Plan.** It is in the best interest of the child(ren) that the parties be ordered to comply with a Parenting Plan that includes does not include parental time-sharing with the child(ren). The Petitioner states that it is in the best interests of the child(ren) that:
- a. _____ The proposed Parenting Plan filed with this Petition should be adopted by the Court. The Petitioner {select one only} has has not agreed to the Parenting Plan. The Respondent {select one only} has has not agreed to the Parenting Plan.
- b. _____ The Court should establish the Parenting Plan as detailed in the Florida Supreme Court Approved Family Law Form {select appropriate version}
- 12.995(a) Parenting Plan; or
 12.995(b) Supervised Safety-Focused Parenting Plan; or
 12.995(c) Relocation/Long Distance Parenting Plan
4. **Time Sharing**
- a. _____ The Court should establish a Parenting Plan with the following provisions:
- No time sharing for the Father Mother
 Limited time sharing with the Father Mother
 Supervised time sharing for the Father Mother
 Supervised or third party exchange of the children
 Time sharing schedule as follows: _____

- b. _____ The proposed Parenting Plan and Time Sharing schedule are in the best interests of the child(ren) because: _____

SECTION III.

5. Child Support

- a. The Child Support Order referenced above, establishing child support for the child(ren) common to the parties, **is attached to this Petition.**
- b. I certify that a copy of this Petition will be provided by certified mail, return receipt requested, to the **Florida Department of Revenue, Child Support Enforcement, 1845 Town Center Blvd., Ste. 215 Fleming Island, Florida 32003.**

PETITIONER'S REQUEST

- A. _____ Petitioner requests the Court to enter an Order that establishes a Parenting Plan containing provisions for parental responsibility and time-sharing for the minor or dependent child(ren).
- B. _____ Other relief the Court deems appropriate _____

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this Petition, and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature (Petitioner)
Print Name: _____
Address: _____

Telephone: _____

State of Florida
County of _____

Sworn to or affirmed and signed before me on _____ day of _____, 20____.

By: _____
DEPUTY CLERK

NOTARY PUBLIC [Print, type, or stamp commissioned name of notary clerk]

_____ Personally Known

_____ Produced Identification
Type of identification produced _____

Copy by Personal Service on
Respondent
Name: _____
Address: _____

(By Sheriff's Office/Private Process Service)

Send copy by certified mail, return receipt requested to:
Florida Department of Revenue
Child Support Enforcement
1845 Town Center Blvd.
Suite 215
Orange Park, Florida 32003