



CHILD MAINTENANCE AND ACCESS ACT, 2017
Application for Variation, Suspension etc.

VIRGIN ISLANDS
In the Magistrate's Court,

Case number

BETWEEN

.....

Applicant

and

.....

Respondent

I..... of hereby apply for an
(Name of Applicant) *(Address)*

Order that the Order made on day of20.....

that

.....

.....

(Terms of the Order)

be
(Varied/Suspended etc.)

The Applicant is the of the above mentioned child and
the Respondent is the of the child.

.....
(Name of Applicant)

.....
(Signature of Applicant)

.....
(Date)

TAKE NOTICE:

This application will be heard by the Magistrate sitting at the Magistrate's Court located at _____ on the _____ day of _____ at, ----- a.m./p.m.

IF YOU DO NOT ATTEND THIS HEARING AN ORDER MAY BE MADE IN YOUR ABSENCE.

The court office is located at 2nd Floor of the Sakal Building, Road Town, B.V.I. We can be contacted on telephone numbers **468-4360** or email address **magistracy.delinquency@gov.vg**

The court office is open between the hours of **8:30 a.m. to 4:30 p.m.** except public holidays.

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Application for Variation
