

ATTACHMENT D
NOTICE OF DELINQUENT PARENT FEES
FOR CHILD CARE BENEFITS

NOTICE DATE: _____

CASE NUMBER: _____

CASE NAME: _____

ADDRESS: _____

WORKER: _____

This notice is to tell you that you are delinquent in making payment of your parent fee of \$_____ per _____. The total amount overdue is \$_____. If the total amount overdue has not been paid, or if a satisfactory arrangement to make payment of the amount overdue has not been made, by _____, this agency will take action to discontinue your _____ Child Care benefits.

The Law(s) and/or Regulation(s) which allow us to do this is:

18 NYCRR Section 404.6(a) and 404.6(b)

Your overdue fees should be paid to:

If you wish to make arrangements for a payment plan contact:

YOU MUST PAY THE TOTAL AMOUNT OVERDUE OR MAKE A SATISFACTORY ARRANGEMENT FOR PAYMENT OF THE OVERDUE AMOUNT NO LATER THAN _____ TO AVOID FURTHER ACTION BY THIS AGENCY.