NOTICE REGARDING YOUR LEGAL RIGHTS AND THE CONSEQUENCES OF SIGNING AN ACKNOWLEDGMENT OF PATERNITY

This notice is to help you decide whether or not you wish to sign an Acknowledgment of Paternity. An Acknowledgment provides you with a way to legally establish paternity for your child. New York Law says that you must receive oral and written notice of your legal rights and the consequences of signing an Acknowledgment of Paternity. Before signing an Acknowledgment of Paternity, PLEASE READ the following information.

WHAT YOU SHOULD CONSIDER BEFORE SIGNING AN ACKNOWLEDGMENT OF PATERNITY:

YOU MAY NOT SIGN AN ACKNOWLEDGMENT OF PATERNITY IF:

- The mother was married at any time during the pregnancy or when the child was born because her husband (or former husband) is considered the legal father of the child unless a court determines otherwise; or
- The mother is unmarried and more than one man could be the father of the child; or
- The child is not yet born. You may only sign an Acknowledgment of Paternity after the birth of the child.

You may wish to speak to a lawyer before signing an Acknowledgment of Paternity. You have a right to seek legal representation and supportive services including counseling. Hospital staff are prepared to speak to you about questions you may have regarding establishing paternity. Hospital staff will also provide you with the telephone number of the support collection unit to answer questions you may have regarding the Acknowledgment of Paternity or establishing paternity.

WHAT IT MEANS IF YOU SIGN AN ACKNOWLEDGMENT OF PATERNITY:

An Acknowledgment of Paternity signed by both the mother and the father will legally establish who the child's father is. An Acknowledgment of Paternity will have the same force and effect as a court order establishing paternity for the child. It will eliminate the need to have a family court hearing to decide who the child's father is and will establish the duty of both parents to provide support for the child which may be retroactive to the birth of the child.

When a man signs an Acknowledgment of Paternity, he waives his right to a court hearing to determine if he is the father of the child.

Signing an Acknowledgment of Paternity may be the basis for the father to establish custody and visitation rights to the child, and may also be the basis for requiring his consent prior to an adoption proceeding.

When an Acknowledgment of Paternity is filed with the birth registrar in the district where the birth certificate is filed it will establish the child's right to inheritance from the father. Filing the Acknowledgment with the Putative Father Registry may establish the child's right to inheritance from the father. The Putative Father Registry is the state registry which maintains a record of the name and address of persons who acknowledge paternity or who have been determined by a court to be the father of a child born out of wedlock. The Putative Father Registry may only release the name and address of such persons upon request to a court or authorized agency or to another person but only by order of a court.

The child may have the last name of either parent, a combination of last names, or any other last name the parents agree on. The choice of name will not affect the legal status of the child. Please indicate on the Acknowledgment of Paternity the child's full name as it appears on the birth certificate. If the birth certificate was already filed and you wish to change the child's name enter both the name as it appears on the birth certificate and the new name.

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Either parent has a right to ask the court to cancel the Acknowledgment of Paternity by filing a petition with the family court. The request must be made within the earlier of 60 days from the date of signing an Acknowledgment of Paternity or the date of an administrative or judicial proceeding (including a proceeding to establish a support order) relating to the child in which either parent is a party. The "date of an administrative or judicial proceeding" is the date by which the party is required to answer the petition. When more than 60 days have passed since the signing of an Acknowledgment of Paternity, either parent may only challenge the Acknowledgment of Paternity in court on the basis of fraud, duress, or material mistake of fact, with the burden of proof on the party challenging an Acknowledgment of Paternity.

WHAT IT MEANS IF YOU DO NOT SIGN AN ACKNOWLEDGMENT OF PATERNITY:

If an Acknowledgment of Paternity is not signed by both parents, the man will not have a duty to support the child unless an order is made after a hearing in family court establishing him as the father of the child. If the court declares the man to be the father of the child, the court may make an order of support which may be retroactive to the birth of the child.

If you are named as the father of a child in a court hearing to establish paternity, you have a right to free legal representation if the court determines you are unable to pay for legal representation. You also have a right to genetic marker tests or to DNA tests, which will help the court determine if you are the child's father.

If you refuse to sign an Acknowledgment of Paternity, your refusal cannot be considered to be a failure to cooperate in establishing paternity for the child if you apply for or receive public assistance for the child.

The father's name cannot appear on the child's birth certificate unless both parents sign an Acknowledgment of Paternity or unless a court determines paternity.

WHAT NEEDS TO BE DONE WITH THE ACKNOWLEDGMENT OF PATERNITY AFTER YOU SIGN IT:

If you sign an Acknowledgment of Paternity at a hospital or a social services agency, the original will be filed for you with the registrar of the district in which the birth occurred and in which the birth certificate has been filed. The Acknowledgment of Paternity also will be filed with the Putative Father Registry.

If you are signing an Acknowledgment of Paternity without assistance from the hospital or social services agency, you must file the original with the registrar of the district in which the birth certificate has been filed. The registrar will file a copy with the Putative Father Registry.

IMPORTANT:

- By signing the Acknowledgment of Paternity before two witnesses who are not related to you, you are stating that you have received oral and written notice regarding your legal rights and the consequences that result from signing an Acknowledgment of Paternity, and that a copy of this notice has been provided to you.
- If you have any doubts about the child's paternity, after reading this notice and having received oral notice, **do not** sign an Acknowledgment of Paternity.
- If you wish to sign an Acknowledgment of Paternity, after reading this notice and having received oral notice, please complete the Acknowledgment of Paternity on Page 4 of this form.

If you have questions regarding the Acknowledgment of Paternity or establishing paternity for your child, you may contact the Support Collection Unit located within your county Department of Social Services.

Questions regarding this form as it relates to the birth certificate process should be directed to the local birth registrar where the Acknowledgment of Paternity has been or will be filed.

If you wish to sign the Acknowledgment of Paternity, please complete the Acknowledgment of Paternity on page 4.

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NEW YORK STATE DEPARTMENT OF HEALTH NEW YORK STATE OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE Pursuant to Section 4135-b of Public Health Law

(For Official Use Only)	
Hospital Code:	_ (4 DIGIT PFI No.)
Local district birth number:	
Local register number:	

ACKNOWLEDGMENT OF PATERNITY	Local register number:		
(Please Type or Print with black lnk)			
INDICATE, BY CHECKING THE APPROPRIATE BOX, WHERE THE ACKNOWLEDGE			
☐ HOSPITAL ☐ CHILD SUPPORT OFFICE	☐ BIRTH REGISTRAR ☐ OTHER		
INFORMATION ABOUT THE CHILD FOR WHOM THE ACKNOWLEDGME	IT OF PATERNITY IS SIGNED:		
PRINT CHILD'S FULL NAME AS IT NOW APPEARS ON THE BIRTH CERTIFICATE: (First) (Middle.) (Last)	PRINT CHILD'S NAME AS IT WILL APPEAR ON NEW BIRTH CERTIFICATE: (First) (Middle.) (Last)		
PLACE OF BIRTH: (Name and Address of Hospital where child was born):	DATE OF BIRTH SEX MONTH DAY YEAR FEMA		
ACKNOWLEDGMENT OF PATERNITY BY FATHER:			
	, residing at		
	House/Apt. Number and Street		
In the City of	, State of, Zip Code	_	
my place of birth, (City, State, Or Foreign Country)	, my date of birth/	_ ,	
Social Security Number:, hereby acknow	Month Day Year		
I UNDERSTAND THAT SIGNING THIS ACKNOWLEDGMENT WILL ESTABLISH THE PATERNITY OF THE CHILD AND HAVE THE SAME FORCE AND EFFECT AS AN ORDER OF FILIATION ENTERED AFTER A COURT HEARING INCLUDING AN OBLIGATION TO PROVIDE SUPPORT FOR THE CHILD. EXCEPT THAT ONLY IF THIS ACKNOWLEDGMENT IS FILED WITH THE REGISTRAR WHERE THE BIRTH CERTIFICATE IS FILED WILL THE ACKNOWLEDGMENT HAVE SUCH FORCE AND EFFECT WITH RESPECT TO INHERITANCE RIGHTS. I HAVE RECEIVED WRITTEN AND ORAL NOTICE OF MY LEGAL RIGHTS AND THE CONSEQUENCES OF SIGNING THE ACKNOWLEDGMENT OF PATERNITY, AND I UNDERSTAND WHAT THE NOTICE STATES. A COPY OF THE WRITTEN NOTICE HAS BEEN PROVIDED TO ME. I CERTIFY THAT THE ABOVE INFORMATION IS TRUE.			
SIGNATURE:	Date/		
The above named, signed and affirmed befo herein is true.	Month Day Year e us this day of , , that the information contained	d	
First Witness	Second Witness		
	Second witness		
(Witnessed by two people n	t related to the mother or father.)		
(Witnessed by two people n ACKNOWLEDGMENT OF PATERNITY BY MOTHER:	t related to the mother or father.)		
(Witnessed by two people n ACKNOWLEDGMENT OF PATERNITY BY MOTHER:	t related to the mother or father.)		
(Witnessed by two people in ACKNOWLEDGMENT OF PATERNITY BY MOTHER: I, First Middle Last Name	t related to the mother or father.), residing at House/Apt. Number and Street		
(Witnessed by two people in ACKNOWLEDGMENT OF PATERNITY BY MOTHER: I,	t related to the mother or father.), residing at House/Apt. Number and Street, State of, Zip Code		
(Witnessed by two people in ACKNOWLEDGMENT OF PATERNITY BY MOTHER: I, First Middle Last Name In the City of my place of birth, (City, State, Or Foreign Country)	, residing at	_,	
(Witnessed by two people in ACKNOWLEDGMENT OF PATERNITY BY MOTHER: I,	t related to the mother or father.), residing at House/Apt. Number and Street, State of, Zip Code	and	
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(Witnessed by two people in ACKNOWLEDGMENT OF PATERNITY BY MOTHER: I,		and of the have	

(For Official Use Only) The above ACKNOWLEDGMENT OF PATERNITY is hereby filed with the registrar of _

(Date).

Registrar:_

on