

Identification Form

Maintenance Enforcement Program Telephone: 204-945-7133
 100-352 Donald St Winnipeg, MB R3B 2H8 Facsimile : 204-945-5449
 ManitobaMEPinquiries@gov.mb.ca Toll free in Canada: 1-866-479-2717

Maintenance Enforcement File No. _____

CREDITOR/RECIPIENT (Person who receives support):

Your Legal Name: _____

Do you have or have you had any other file(s) registered with Manitoba MEP? If yes, please provide the name you were registered under and the file number (if known): _____

Physical Address

Address: _____ City /Town: _____

Province: _____ Postal Code: _____

Mailing address (if different from above): _____

Your Contact Information:

Cell Phone: _____ Email address: _____

Work Phone: _____ Home Phone: _____

Veillez cocher ici si vous souhaitez recevoir du service en français./ Please check here if you would like to receive service in French.

If you have safety concerns, what is the safest time to contact you: _____

Personal Information

Treaty No.: _____ Social Insurance No: _____

Date of birth (Day, Month, Year): _____

Names and dates of birth of children:

Contacts (name/relationship/phone number) _____

THIS PORTION OF THE FORM MUST BE COMPLETED AS FULLY AS POSSIBLE, AS EACH ITEM ASSISTS IN THE COLLECTION OF YOUR SUPPORT PAYMENTS

DEBTOR/PAYOR (Person who pays support):

Debtor's Legal Name: _____

Please provide any other names the debtor may use together with any information on other file(s) the debtor may have registered with Manitoba MEP (file number, other party name named in the file): _____

Physical Address: Street and number: _____ Apt. # _____ Postal Code: _____

City: _____ Province/State: _____ Country: _____

Mailing address (if different from above): _____

Contact Information:

Phone: _____ Email address: _____

Work phone: _____ Cell phone: _____

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DEBTOR/PAYOR (continued):

Personal Information

Treaty No.: _____ Social Insurance No: _____

Date of birth (Day, Month, Year): _____

Mother's Maiden Name: _____

Driver's Licence: Yes _____ No _____ If yes, from which province: _____

Driver's Licence No. (if known): _____

Military Service: Country _____ Branch _____

Service number _____ Pensions _____

Police record: Yes _____ No _____

If yes, explain: _____

Description

Male _____ Female _____ Height _____ Weight _____ Glasses _____

Eye colour _____ Hair colour _____ Complexion _____

Build _____ Clean Shaven / Moustache / Beard _____

Clothing habits and tastes _____

Visible distinguishing marks, scars, etc. _____

Other _____

Employment

Occupation: _____

Current employer (and address): _____

Previous employers (and address): _____

Other

Vehicles: *(automobiles, vans, motorhomes, boats, snowmobiles, motorcycles, machinery, etc.)*

Make, model, year, colour, license number

1. _____

2. _____

Friends/relatives/contacts - names, addresses and phone numbers:

1. _____

2. _____

3. _____

Insurance Policies - company, agent, type of coverage, policy number:

1. _____

2. _____

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Bank accounts (chequing, savings, investments, RSPs, etc.) - name and address of institute:

1. _____
 2. _____

Monies owed to debtor from other sources:

Pensions: (name of companies/pension administrator) _____

Other Income/assets (rent, property, etc): _____

Provide any additional information that may be helpful in locating the debtor and collecting support:

If you receive a payment directly from the debtor, report the payment to the MEP as soon as possible so that your file balance can be updated. You can report a direct payment through:

- The MEPline at 204-945-7133 or 1-866-479-2717
- By email to ManitobaMEPinquiries@gov.mb.ca
- By letter to 100-352 Donald St, Winnipeg MB R3B 3H8
- By fax to 204-945-5449

Please visit our website at: www.manitoba.ca/justice/courts/mep/index.html for more information.

_____ Date

_____ Signature

Please send this completed form to:

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 Winnipeg, Mb R3B 2H8
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 Phone (204) 945-7133 in Winnipeg or outside Canada, or
 1-866-479-2717 toll-free in Canada
 Email: ManitobaMEPinquiries@gov.mb.ca