

Trial Court Administrator

Probation Services Division

Vicinage Chief Probation Officer

Vicinage Assistant Chief Probation Officer  
Child Support Enforcement

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## Injured Spouse Waiver Form

Case Caption: \_\_\_\_\_

Case Number: CS \_\_\_\_\_

I, \_\_\_\_\_, understand that a joint tax refund for tax year 20\_\_\_\_, is being held. I have not and will not file an IRS Injured Spouse Allocation Form (No. 8379) for tax year 20\_\_\_\_. Accordingly, it is requested that the 6 month hold period applied to joint returns be waived and the tax monies refunded or released to the case.

I certify that the above statements are true and correct to the best of my knowledge. I understand that if any of the forgoing statements are willfully false, I am subject to punishment.

Date: \_\_\_\_\_

\_\_\_\_\_  
Injured Spouse Signature

\_\_\_\_\_  
Print Name