

UNITED STATES BANKRUPTCY COURT  
District of Vermont

Thomas J. Hart  
Clerk of Court

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**TO:** Court Users  
**FROM:** Thomas J. Hart  
**DATE:**  
**RE:** Updated Vermont Local Bankruptcy Form Y-8 **Wage  
Withholding Authorization/Consent to Automatic  
Debits from Bank Account** Effective Immediately

**CLERK'S  
ANNOUNCEMENT  
11-01**

On September 28, 2010, this Court issued Standing Order 10-03 which amended Vt. LBR 3070-1 and Vt.LBR 1007-1 to require that chapter 13 plan payments be made through wage withholding, and required the debtor to file form Y-8 Wage Withholding Authorization with the Chapter 13 plan. Based on feedback from the Bar and Standing Chapter 13 Trustee, the Court has revised Form Y-8 to include a consent to Automatic Debits from Bank Accounts for debtors who are not able to authorize direct wage withholding because they do not have income from an employer. This change will eliminate the necessity of filing a motion to waive the wage withholding requirement when the debtor does not have income from an employer. The revised form is attached and may be used immediately.

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF VERMONT**

**In re:**

**Case # xx-xxxxx  
Chapter 13**

**Debtor(s).**

**Wage Withholding Authorization/Consent to Automatic Debits from Bank Account**

**Part A: Wage Withholding Authorization - Debtor**

Debtor's Name: \_\_\_\_\_ Income from Employment? \_\_\_\_ Yes \_\_\_\_ No

If no, proceed to Part B Automatic Debits from Bank Account

If yes, complete the following

Amount employer is to deduct per pay period: \$ \_\_\_\_\_

Debtor's Employer: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

I hereby consent to the Court's entry of an order instituting wage withholding from my/our employer(s) for the purpose of making Chapter 13 plan payments during the term of the plan confirmed in this case.

I authorize the Chapter 13 Trustee, Jan M. Sensenich, to contact the employer(s) who is/are withholding wages to modify the amount of the withholding to comport with any modification or amendment of the plan approved by the Court, without our further and separate authorization or Order, provided that the Trustee provides our attorney with notice at the same time as he communicates that request to the employer(s).

Debtor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Wage Withholding Authorization – Joint Debtor**

Joint Debtor's Name \_\_\_\_\_ Income from Employment? \_\_\_\_ Yes \_\_\_\_ No

If no, proceed to Part B Automatic Debits from Bank Account

If yes, complete the following

Amount employer is to deduct per pay period: \$ \_\_\_\_\_

Joint Debtor's Employer: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

**The Debtor(s) must file this form with the Chapter 13 plan. See Standing Order # 10-03.**

I hereby consent to the Court's entry of an order instituting wage withholding from my/our employer(s) for the purpose of making Chapter 13 plan payments during the term of the plan confirmed in this case.

I authorize the Chapter 13 Trustee, Jan M. Sensenich, to contact the employer(s) who is/are withholding wages to modify the amount of the withholding to comport with any modification or amendment of the plan approved by the Court, without our further and separate authorization or Order, provided that the Trustee provides our attorney with notice at the same time as he communicates that request to the employer(s).

Joint Debtor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Part B Automatic Debits from Bank Account**

I am /we are not able to authorize direct wage withholding because I/we do not have income from an employer.

I/we hereby agree to make plan payments in the amount of \$\_\_\_\_\_ per month by automatic debit from a bank account using ACH transfer or similar means, and understand that the Court will enter an order directing that plan payments be made by automatic debit from a bank account. I/we will contact the Chapter 13 Trustee for the pertinent bank routing information within one (1) week of the date of this form.

Debtor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Joint Debtor's signature: \_\_\_\_\_ Date: \_\_\_\_\_