The Republic of Trinidad & Tobago

**In the High Court of Justice**

**Family**

**CHRISTOPHER ROSS GIDLA**

**GIDLA & ASSOCIATES**

**99A Duke Street**

**PORT OF SPAIN**

**CEL: 350-6259**

**Petition/ Application NoFH 00532 0f 2013**

**Between**

**NEIL PRESTON GRANNUM**

Applicant

And

**LENOR JERYN O’CONNELL GRANNUM**

Respondent

The applicant NEIL PRESTON O’CONNELL GRANNUM of Baccatalle Road, Diego Martin applies to the Court for an order for the following financial provision for herself and the children named below.

1. That the section 47 applies to one child (1) Israelite Grannnum born on the 3rd of August, 1999
2. That the arrangements made for the said child are satisfactory and/or best that can be devised in the circumstances.
3. Any further and /or other order as the court sees fit

Christopher Ross Gidla NEIL PRESTON O.CONNELL GRANNUM

Attorney at Law for the Applicant Applicant

The Applicant’s address for service is as follows:

Christopher Ross Gidla

Gidla & Associates

99A Duke Street

Port of Spain

Tel: 350-6259

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###### NOTICE OF DIRECTIONS HEARING

Directions will be given relating to this application at the directions hearing on family court

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The **Court Office** is at Family Court, Cipriani Place, #4 Cipriani Boulevard, Port of Spain.The Telephone number 627-6391, Fax number 624-0557 The office is open between [8.00 am and 4.00 p.m. every days except Public Holidays and on such days as the Court Office is closed.

###### EVIDENCE OF APPLICANT

I, **NEIL PRESTON GRANNUM,** of LP no 53 Sea Trace Extension, Bagatelle Extension Diego Martin make oath and say as follows:

that the information set out below is correct to the best of my knowledge, information and belief:

(1) Date of Birth: 6th of September, 1957

(2) Date of marriage: 6th March, 1995

(3). Details of other proceedings relating to

the relationship: **court order made date**

(a) Divorce Decree Nisi Family court 12th day of June

(b) Maintenance Maintenance Order for Children 12th of day of July, 2012

(c) Children issues NIL NIL NIL

(d) Domestic Violence NIL NIL NIL

(d) Other NIL NIL NIL

(4) Full details of the children are set out in Form 2

Filed with this application

# Details of my income

(5). Details of employment

(a) type of main employment Supervisor

(b) name of employer North West Regional Health Authority (c) address of employer Port of Spain General Hospital

(d) gross pay/income per month $3154 per forthnite

(e) normal take home pay/income $2849.17

per fortnite

(f) what deductions are made for pension? NIL

(6). Other income:

(a) State benefits NIL

per [week][month][year]

(b) voluntary maintenance NIL

per [week][month][year]

(c) maintenance under court order NIL

per [week][month][year]

Copy order exhibited marked 'A'

(d) income from investments NIL

per [week][month][year]

(e) rents received

per [week][month][year] NIL

(f) income from other work than main employment

per [week][month][year] NIL

# Employment

(7) If not working:

(a) Are you looking for work? N/A

(b) Do you expect to look for work N/A

within the next two years?

(c) What sort of work could you do? N/A

(d) What qualifications have you? N/A

(e) When did you last work? N/A

(8) If working-

(a) how are any children cared for? I Pay $400 per fortnite to the Respondent and the Respondent works in Ministry of Works

(b) what is the cost of child care? $800 per month

(c) are you thinking about changing

your job within the next year? NO

(d) are you likely to get promotion within NO

next year?

# Health

(9) Do you suffer from any health problems? Glucoma in the eyes

If so give details and state if they affect

your employment or ability to get work. No

# Cohabitation

(10) Are you living with any person other

than the respondent and any children? NO

(11) If so give details of any financial support

you receive from that person. N/A

# Expenditure

(12) What do you spend on - per month

House -

Mortgage Repayments $1567.44

Life Insurance Premiums $250

Building Insurance Premiums NIL

Contents Insurance Premiums NIL

Rent NIL

Land & building taxes NIL

Water and sewerage charges $230 per 3months

Electricity $300 per 2months

Cooking Gas $22 per month

Telephone NIl

Repairs and Decoration NIL

Furniture/furnishing replacements NIL

**Personal Expenses**

Food $500 per month

Laundry/Cleaning $50 per month

Medical/Dental/Optical N/A

Clothing/Shoes $700 per year

Hairdressing $40 per month

General Housekeeping expenses NIL

Help in house NIL

Gardener/yard help NIL

Entertainment NIL

Holidays and Outings NIL

Presents NIL

Newspapers/Magazines NIL

Other NIL

Repayment of debts/loans NIL

**Cost of working**

Travel to work $400 Per month for gas

Pension contributions N/A

Union/Professional Body Subscriptions N/A

**Expenditure on Children**

Food $300

General Clothing NIL

School Uniform etc. N/A

School fees N/A

Lunch money N/A

School books N/A

General school supplies N/A

Extra tuition $ 85.00

Travel to School $75.00

Medical /Dental costs $300.00

Toys/Games/Sports N/A

Outings N/A

Holidays N/A

Hairdressing $40.00

Presents N/A

Pocket money N/A

Child Care N/A

Total cost $800.00

# Capital and other assets

(13) Is the house you live in -

(a) owned by you? yes

(b) owned jointly with...................(name) of

...................................................(address)? N/A

(c) owned under a statutory lease? NO

(d) rented? no

**If owned:**

(a) what do you think the house

is worth? $600,000

(b) Is the house mortgaged? No

(c) Who is the lender? N/a

(d) How much is owing on the mortgage? N/A

(e) Is there any other security (e.g. life insurance policy)? Guardian life of the Caribbean

If so, give details

(i) name of insurance company N/A

(ii) number of policy N/A

(iii) with or without profits N/A

(iv) when due to mature N/A

(iv) estimated value at maturity. N/A

(14). Do you own any other property? NO

If so -

(a) in your sole name N/A

(b) jointly with N/A

(c) what do you think the house

is worth? NA

(d) Is the house mortgaged N/A

(e) Who is the lender? N/A

(f) How much is owing on the mortgage? N/A

(g) Is there any other security (e.g. life insurance policy)? N/A

If so, give details

(i) name of insurance company N/A

(ii) number of policy N/A

(iii) with or without profits N/A

(iv) when due to mature N/A

(iv) estimated value at maturity. N/A

(15) Do you own any stocks or shares? NO

If so give details below or on a separate piece of paper:

details of stock/share N/A

date bought N/A

price paid NA

present estimated value. N/A

(16) Do you have any money invested in-

Bank Republic bank of Trnidad and Tobago

Building Society NO

Life Insurance Policy NO

Business NO

Unit Trusts NO

Credit Unions Yes

Other NO

(if so, give details)

# Bank Account

(17) Do you have a Bank Account? YES/

**(1) (2) (3) (4)**

If so -

name of bank Republic Bank

account number

type of account Savings

present balance NIL

# Other assets

(18) Do you own a car YES

if so give details

Outstanding loan.

(19) Do you have any other assets worth more than $2,500?

If so, give details

(a) Jewellery NO

(b) Antiques NO

(c) Paintings NO

(d) Works of Art. NO

(e) Boat NO

1. Computer NO
2. Other

# Debts

(20) (a) Are you behind with -

Mortgage repayments? NO

Rent? NO

How much?

(b) have any steps been taken to repossess your house? N//A

Do you owe

(c) debts to financial institution/bank/credit company/credit cards?

if so, give details of -

**(1) (2) (3) (4)**

amount of debt NO

when borrowed

for what

amount outstanding

repayments $

per[week][month][year]

are any repayments in arrear?

(d) personal debts

give details.

# Respondent

# So far as you know -

(21) Is the respondent to this application working? YES

If so

For whom? Ministry of Works

What is /her take home income $4000 and more I don’t know the exact income

per [month]?

Does he/she own/ have share in a business? NO

If so, give details

If not working, could the Respondent work? N/A

What do you say the Respondent could

(a) do?

(b) earn? N/A

Does the Respondent own a house? /NO

If so -

(a) address N/A

(b) solely? Or N/A

(c) jointly with \_\_\_\_\_\_\_\_\_\_\_N/A

(d) what is value N/A

(e) is it mortgaged N/A

(f) for how much N/A

Does the Respondent have

(a) other property

(b) investments

(c) life insurance policies

(d) bank account

(e) money in building society

(f) money invested elsewhere

(g) car

(h) other valuable assets

If so, give brief details

she owns a car, model AD WAGON NISSAN

(22) **Other matters including other liabilities not otherwise mentioned:**

**(set out BRIEFLY any other matters which you think may be relevant to your application for financial provision)**

# What orders do you seek?

(23) Set out as clearly as possible what orders you seek

A. S.47 applies to the child and the arrangements made for the child are satisfactory and/or the best that can be devised in the circumstances.

Sworn to at #99A Duke Street

Duke Street, this day }

of 2013. }

Before me,

The **Court Office** is at [ ], telephone number FAX number The office is open between [8.00 am and 4.00 p.m. every days except Public Holidays and such other days as the Court Office is closed.