



EXTENSION REQUEST FORM

If you or a member of your household is a person with a disability, you may be eligible for an additional extension of the voucher upon request. In order to request an extension of your Housing Choice Voucher, you must sign and complete this form and return it to your caseworker by dropping it off at the office, emailing or faxing it.

HOH Name		Log Number	
Voucher Issue Date		Voucher Expiration Date	Voucher Size

Date of Extension Request	
Reason for Extension Request (Please detail why you were not able to successfully find and secure an affordable unit before the voucher expiration date.)	

The following is a list of potential units that I have seen:

#	Unit Addresses
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	

I hereby certify that I have in good faith searched for a suitable unit and have not been successful in finding and securing an affordable unit OR that I have had extenuating circumstances preventing me from finding a unit as I explained above.

HOH Signature		Date	
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