



HARRISONBURG
 REDEVELOPMENT AND
 HOUSING AUTHORITY
 P.O. BOX 1071 + HARRISONBURG, VA 22803
 Phone/VTDD 540-434-7386 + Fax 540-432-1113

EXTENSION REQUEST
 HOUSING CHOICE VOUCHER PROGRAM

SUBMIT TO REQUEST ADDITIONAL TIME TO SEARCH FOR A UNIT

Include a copy of your Family Contact List with this request

| | | |
|--------------------------------|------------------|-------------------------|
| Head of Household Name | Last 4 of SSN | Voucher Expiration Date |
| Home Address | | |
| Mailing Address (if different) | | |
| Home Phone | Cell/Other Phone | Email Address |
| Head of Household Signature | Date | |

Indicate the reason(s) you have been unable to locate a suitable unit during the term of the voucher:

Unable to find unit that is: Affordable Accepting Section 8 The right size Inspection-ready The right location

Other: Lack money for deposit, etc. Failed credit screening Health issues Transportation to view units Other

Details: _____

Under the Housing Choice Voucher (HCV) program, you have **60 days** to find a suitable unit when you are first issued a voucher, or when you have moved out of assisted unit. If you are unable to locate a suitable unit within this timeframe, you may request an extension of up to 60 days from the Harrisonburg Redevelopment and Housing Authority (HRHA). If you wish to receive an extension, you must submit a request in writing to your HCV Specialist. **Extension requests must be received at least seven (7) calendar days before your voucher expiration date or transfer deadline. If you do not request an extension by this due date, your participation in the HCV program will be terminated.**

Upon receiving this form, HRHA will evaluate your request. Extensions are not granted automatically. If your request is denied, and you have not submitted a Request for Tenancy Approval (RTA) to HRHA by your voucher expiration date or transfer deadline, your participation in the HCV program will be terminated.

If HRHA approves your extension request, you will receive up to 60 additional days to find suitable housing; you must submit an RTA on or before the last day of your extension period. **If you do not submit an RTA by the end of the voucher term, you will lose your housing assistance and be terminated from the program.** Therefore, we strongly urge you to find a unit and submit an RTA as soon as possible.

From the date you submit an RTA until HRHA notifies you that your request is approved or denied, the term of the voucher is suspended. If an RTA is denied, your voucher term will be extended for the period it was suspended.

| | | | | | |
|-----------------------------|-------------------|--------------------|-----------|--------------|-------------------|
| HRHA OFFICE USE ONLY | | | | Date: _____ | Initials: _____ |
| | | | 1 2 3 | | |
| Orig. Issue Date | Orig. Expire Date | Date Request Rcv'd | Request # | Approve/Deny | Reason, if Denied |

EQUAL HOUSING OPPORTUNITY PROVIDER

HRHA provides reasonable accommodations to persons with disabilities consistent with the Section 504 Final Rule (24 CFR §8) & the Fair Housing Amendments Act