

Request for Housing Choice Voucher Extension

TO BE COMPLETED BY CLIENT

CLIENT NAME: _____ SOCIAL SECURITY NO: _____
STREET ADDRESS: _____ TELEPHONE NUMBER: _____
CITY, STATE, ZIPCODE: _____ ALTERNATE NUMBER: _____

This letters serves as a request for a 60-day extension on my Housing Choice Voucher. I am attaching my "Record of Search for Housing" form from the Nan McKay Family Handbook, provided to me at orientation. I understand that in order for my extension request to be considered, this form must be attached, demonstrating efforts that I've made to find suitable housing.

Client's Certification

Under penalty of perjury, I hereby certify that the statements I have provided regarding our household situation are true and accurate. I further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the denial and termination of your assistance.

Head of Household's Signature

Date

Head of Household's Name