



The Housing Authority of the City of Alexander City

2110 County Road, Alexander City, AL 35010
Telephone: (256) 329-2201 Fax: (256)329-6519

Requesting for Extensions for the Term of HCV/Section 8 Voucher

Applicant Name: _____

Current Address: _____

Phone Number: _____

I, _____, am requesting a 30-day extension on my current HCV/Section 8 Voucher term. I hereby acknowledge I will continue to actively look for housing within the Tallapoosa County area for which my HCV/Section 8 Voucher can be utilized.

Date HCV/Section 8 Voucher Extension Expires : _____

Applicant Signature

Date

HCV Manager

Date

Per ACHA HCV Administrative Policy

Voucher Term: The term of the voucher is 60 days from the date of issuance.

Requesting for Extensions of the Term: A family may request an extension of the Voucher time-period. All requests for extensions should be received prior to the expiration date of the Voucher. Extensions are permissible at the discretion of the HA primarily for the following reasons:

- a. Extenuating circumstances such as hospitalization or a family emergency for an extended period of time which has affected the family's ability to find a unit within the initial 60-day time period. The HA representative will verify the extenuating circumstances prior to granting an extension.
- b. The family has evidence that they have made a consistent effort to locate a unit and request support services from the HA, throughout the initial 60-day period with regard to their inability to locate a unit.
- c. The family has turned in a Request for Lease Approval prior to the expiration of the 60-day time period, but the unit has not passed HQS.