

## Housing Authority of the City of Reno

## **Section 8 Voucher Extension Request Form**

Name of He	ad of Household:		Client #:	
Address:				
Phone:		Email:		
I am reques	sting a 30-day extensio	n to my voucher. I need th	nis extension because:	
prior to the		oucher. Extensions are perm	for extensions must be received hissible at the discretion of RHA	
perio • RHA • The l	od of time) A is satisfied that the houhousehold was prevented	usehold has made a reasonal	disability accessibility requirements or a	l
obligations 1	regarding utilizing this v	voucher, and that the RHA i	on this form and stating I understand my s not required to extend my voucher n to my voucher is not grounds for a file	
E-Signature	:		Date:	
		PHA USE ONLY		
□ Appr	roved to	Denied	by:	
J 🗆	Updated on voucher?	□ Updated in Yardi?	□ Leasing Agent notified?	