

Request for Voucher Extension

If you CURRENTLY HAVE A VOUCHER and need more time to locate a place, please complete and submit this form. You may be eligible for a one-time extension. Further extensions will be reviewed on a case-by-case basis.

First Name _____ Last Name _____

Last 4 digits of Social Security Number _____

Address Line 1 _____

Address Line 2 _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Please indicate reason(s) the extension is needed:

_____ Units do not fit in allowable limits.

_____ Unable to meet landlord rental criteria.

_____ Other _____

Housing Choice Voucher

Issued Date: _____ Expiration Date: _____

Date Extended to: _____

Applicant Signature

Date

Albert Lea Housing & Redevelopment
507-377-4375

Date