

CIT 1 CIT

HOUSING AUTHORITY of the County of Butte

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FAX (530) 894-8738
TDD/TTY (800) 735-2929
(800) 564-2999 Butte County Only
WEBSITE: www.butte-housing.com
2039 Forest Avenue • Chico, CA 95928

SECTION 8 HOUSING CHOICE VOUCHER EXTENSION REQUEST FORM

Under the Section 8 Housing Choice Voucher Program, voucher holders have 60 days to find a suitable unit. If you have not been able to locate a suitable unit within this timeframe, you may request an extension from the Housing Authority. If you wish to request an extension you must make the request in writing. Requests must be received prior to the expiration date as stated on your issued voucher.

Name of Head of House	nola:				
Physical Address:					
Mailing Address:					
Phone number:					
PLEASE STATE WHY	YOU HAVE NO	OT BEEN ABLE	ΓΟ LOCATE A SU	JITABLE U	UNIT:
IMPORTANT – Please	include a copy of	f your search log v	vith this request.		
Voucher extensions are request on case by case request is approved, the	basis and any ap	pprovals are at the	e sole discretion of	f the Housi	
Print Head of Household	l Name	Signature of H	Head of Household		Date



