



County of San Diego
HEALTH AND HUMAN SERVICES AGENCY
 HOUSING AND COMMUNITY DEVELOPMENT SERVICES
 3989 RUFFIN ROAD, SAN DIEGO, CA 92123
 (858) 694-4801 • FAX (858) 467-9713

APPLICATION FOR EXTENSION OF HOUSING CHOICE VOUCHER
Record of Search for Housing

Your Housing Choice Voucher has an expiration date.

If you do not find housing before that date, and you want an extension, you **MUST** complete and submit this form to the Housing Authority of the County of San Diego **BEFORE** the expiration date. If your Voucher expires and was not extended by the Housing Authority, or it expires after an extension, you will be denied assistance.

I request an extension of the original HCV term because of the following reasons:

or

I certify that I have looked for housing at the following addresses and rent prices:

DATE	UNIT ADDRESS	OWNER/LANDLORD'S NAME & TELEPHONE #	RENT	EXPLANATION OF WHAT HAPPENED
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	

(Continue on reverse side if additional space is needed.)

NAME: _____ PHONE: _____
 Please print

PRESENT ADDRESS: _____

SIGNATURE: _____ DATE _____

Please Return this form to: _____ Program Manager Approval _____