

Housing Authority of Myrtle Beach 605 10th Ave. North Post Office Box 2468 Myrtle Beach, South Carolina 29578-2468 www.mbbhaonline.org

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REQUEST FOR EXTENSION OF HOUSING CHOICE VOUCHER

Name	Telephone N	No
Email		(please print clearly)
Voucher because I have		30) days on my Housing Choice n affordable unit. I believe that I will because:
The apartment complex	xes and/or address whe	re are searched are:
I did not lease any of th	e units because:	
	aking it difficult to lease ation, owner, other) Ple	e a unit are: (such as security deposit, ease list :
Signature		Date
outside areas of poverty or mind for review. It will be used, if ned	ority concentration. The informa	vou have experienced difficulty in finding housing ation will be collected and stored as a date source acception rents in any part of the jurisdiction and we advance for your assistance.
_	_ Extension granted _	