



Central Office
 2393 Main Street
 Buffalo, NY 14214
 716-884-7791
 Fax: 716-884-8026

Niagara County Office
 33 Spruce Street
 North Tonawanda, NY 14120
 716-213-2784
 Fax: 716-213-2787



Housing Quality Standards Extension Request Form

Please be advised that extensions will be determined on a case-by-case basis and must be reasonable in nature. Additionally, extensions may not exceed 90 days. Any items that have been determined to be life-threatening must be completed within 24 hours of the initial failed inspection; extensions cannot be granted on life-threatening items.

Please be advised that extensions may be denied based on unit quality and/or delinquent inspection history

Property Owner Name: _____

Property Owner Phone: _____

Unit Address: _____

Inspection Date: _____

I, owner/manager of the above referenced property, am requesting an extension of the repair due date for:

30 days
 60 days
 90 days

Reason: Please provide a brief statement as well as supporting documentation such as work orders, signed contracts, receipts, etc. that showcase the need for an extension. Please be advised that no extension will be granted if the requesting party cannot provide documentation of the need for an extension.

Landlord Signature: _____

Today's Date: _____

Please return form to Belmont Housing Resources for WNY, 2393 Main St, Buffalo, NY 14214
 Email: mwlodarczyk@belmonthousingwny.org Fax: 716-312-8075

FOR OFFICE USE ONLY

Approved?: Y / N

Name: _____

Reason: _____

Date: _____