

Pocahontas Housing Authority Inc. 1320 Dalton Street Pocahontas, AR 72455 Phone (870) 892-9278 Fax (870) 892-1241

## REQUEST FORM FOR EXTENSION OF RENT PAYMENT

Date of request,	
I,	, hereby request an extension on my rent at
	, which is due the first of the month.
I request to pay my rent on the fo	ollowing date,
month and then \$1 everyday afte 14 <sup>th</sup> to the 16 <sup>th</sup> of the month, I wi	I understand there will be a \$5 late fee assessed on the 6 <sup>th</sup> of the er that. I also understand that if my rent is not paid by between the ill receive a Notice of Eviction, and if it is not paid by the end of the ng month, I will receive an Eviction.
The total amount that will be due	e on the above listed date will be
Signature of Tenant,	
Signature of Office,	