

Telephone: (817) 531-7640

TDD/TTY: (817) 531-7686 housing.tarrantcounty.com

Fax:

(817) 850-2907

 I,_______, request an inspection extension for my rental unit.

 Print Name of Landlord

 Located at _______

 Address

 City

 Zip code

Tenant's Name

Extensions **WILL NOT** be granted for any 24-hour (life-threatening) issues.

Extensions will be granted in cases where TCHAO has determined that the owner has made an attempt to correct the deficiency(ies) and is unable to for reasons beyond the owner's control.

The owner must submit a written request for an extension. The request must state the reason(s) for the delay in completing the deficiency, provide proof for the delay (i.e. insurance, parts, weather, etc.) and give an approximate date of completion. Extensions will be approved on a case by case basis.

0	wner/Agent Signature:	Date
Da	ate unit will be ready for a re-inspection:	
RI	ETURN FORM TO: MIKE MONCADA, INSPECTIONS SUPERVISOR	
	E-MAIL: MikeMoncada@TarrantCounty.com	
MAIL: 2100 Circle Drive, Ste. 200, Fort Worth, TX 76119 PLEASE DO NOT FAX!		
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	Tarrant County Housing Assistance Office use	ONLY
	Extension Approved:	ONLY
		ONLY

Wayne Pollard Director