



Contract Extension Request Form

Instructions: Please complete the following information to request a contract extension for the GO Virginia contract - once a support organization submits a request, Department of Housing and Community Development staff will review. If the request is approved, DHCD will process the request through DocuSign, requesting signatures from the appropriate parties. Once executed, the request will be uploaded to the project in CAMS.

FOR DHCD USE ONLY

Date (today's date): _____

Effective Date of Amendment: _____

Contract Number: _____

Project Name: _____

SUBGRANTEE (in existing contract): _____

SUBGRANTEE Signatory: _____

SUBGRANTEE Signatory Contact (Email): _____

Original contract end date: _____

Requested (new) contract end date: _____

Please explain the reasons for needing an extension.

OUTCOMES TO DATE: Please note outcomes achieved to date. Reference the committed outcomes report in CAMS for contracted, core GO Virginia outcomes that are required for performance closeout.



VIRGINIA INITIATIVE FOR
**GROWTH &
OPPORTUNITY**
IN EACH REGION

UPDATED MILESTONES: *Please provide a bulleted list of updated quarterly milestones between today's date and the requested completion date.*

A large, empty rectangular box with a black border, intended for the user to provide a bulleted list of updated quarterly milestones.



VIRGINIA INITIATIVE FOR
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OPPORTUNITY**
IN EACH REGION

FOR DHCD USE ONLY

Please acknowledge your agreement to this amendment by signing below. This amendment to extend the contract will be filed with the original contract.

REGIONAL COUNCIL

BY: _____ DATE: _____

NAME: _____ TITLE: _____

ORGANIZATION: _____

GRANTEE

BY: _____ DATE: _____

NAME: _____ TITLE: _____

ORGANIZATION: _____

SUBGRANTEE

BY: _____ DATE: _____

NAME: _____ TITLE: _____

ORGANIZATION: _____

COMMONWEALTH OF VIRGINIA

BY: _____ DATE: _____

NAME: _____ TITLE: _____

ORGANIZATION: Department of Housing and Community Development