



GO Virginia Contract Completion Date Extension Form

Please complete the information below requesting a completion date extension for a GO Virginia contract. Your request will be reviewed by the Department of Housing and Community Development, and if approved, the agency will sign the request and send it through Docusign for the appropriate parties. A copy will also be sent to you via email.

Contract Number	
GRANTEE Organization:	
GRANTEE Contact	
Project name:	
SUBGRANTEE	
SUBGRANTEE Contact:	

Please explain the reasons for needing an extension.

What is the requested amended completion date?

Please provide an updated set of quarterly milestones between now and the requested amended completion date:

By what date do you anticipate requesting your next remittance? (If applicable).



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Please acknowledge your agreement to this amendment by signing below. This amendment to extend the contract will be attached to the original contract. The effective date of this amendment is

_____ (SUBGRANTEE)

BY: _____ DATE: _____

Name: _____

Title: _____

_____ (GRANTEE)

BY: _____ DATE: _____

Name: _____

Title: _____

_____ (REGIONAL COUNCIL)

BY: _____ DATE: _____

Name: _____

Title: _____

_____ (VIRGINIA DEPARTMENT OF HOUSING AND
COMMUNITY DEVELOPMENT)

BY: _____ DATE: _____

Name: _____

Title: _____