

**Lease Extension Request Form**

**ATTENTION TENANTS: Below are the guidelines for properly submitting a lease extension request:**

- This form must be completed in its entirety and signed by the original leaseholder(s)
- Your rental account must be in good standing at the time of your extension request
- This lease extension request must be received at least 30 days prior to your lease expiration date
- Extension requests may be granted from a minimum of one (1) month to a maximum of (6) six months only
- A \$200.00 lease extension processing fee must accompany this request, and made payable to the property you reside in

Date: \_\_\_\_\_

Tenant Name(s): \_\_\_\_\_

Property Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_

Apartment Account Code # \_\_\_\_\_

Dear Management:

My/our current lease is set to expire and I/we would like to request a lease extension. I/we have completed the Lease Extension Schedule below which details the timeframe of my/our lease extension request.

Lease Extension Schedule	
Current Lease Expiration Date	_____
Requested Lease Expiration Date	_____
Length (# of months) of Requested Extension	_____

It is my/our understanding that lease extensions are not guaranteed, and are subject to management approval. In addition, I/we understand that if this lease extension request is approved, all terms and conditions of my/our original lease shall remain in full force and effect during my/our lease extension period except for any rental discounts. The other exception is that during the Lease extension, the rent shall be the rent stated in the Renewal Notice. No rent discounts or other promotions will be applicable during the Lease extension period. Enclosed with this form is a \$200.00 check made payable to the < ***name of property I reside in*** > to cover the lease extension processing fee. I/we understand that this fee is refunded if my extension is denied.

Signed/Date: \_\_\_\_\_ Signed/Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Mail completed request form to:  
**Middlesex Management – Lease Extension Dept., P.O. Box 457, Woodbridge, NJ 07095**