



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 lease extension processing fee must accompany this request, made payable to the property you reside in

Tenant Name(s): _____

Property Name: _____

Apartment Address: _____

Home Telephone #: _____

Resident ID # _____

Reason for Lease Extension Request: _____

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. **I/We understand that it could take several business days to process our lease extension request, and I/We acknowledge that we will receive a letter detailing the decision of my/our lease extension request once it is processed:**

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

It is understood that lease extensions are not guaranteed to be approved, and are subject to management approval. In addition, I/we understand that if this lease extension request is approved, all terms and conditions of the original lease agreement shall remain in full force and effect during the lease extension period except for any rental discounts/credits or any promotions that may have been offered on the lease renewal agreement. The **FULL** monthly rental amount detailed in the lease renewal agreement is the rental amount that is to be paid during the lease extension period. **No rental discounts/credits or any 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. It is understood that this fee is refundable if my extension is denied. It is also understood that if the lease extension is approved, **I/we have 5 business days from the date of approval to alter or cancel the lease extension request, otherwise the original lease extension approval will remain in effect.**

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

Date: _____

Date: _____

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