

Allowance for Tenant-Furnished Utilities and Other Services

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0169
(exp 9/30/2017)

Locality		2016: Duplex/Townhouse					Unit TypeA	Effective
							Duplex / Townhouse	01/01/2016
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas							
	b. Electric							
	c. Bottle Gas							
	d. Oil							
Cooking	a. Natural Gas	20	23	26	29	33	36	
	b. Electric	12	14	18	22	26	30	
	c. Bottle Gas							
Other Electricity		57	65	86	107	129	150	
Air Conditioning								
Water Heating	a. Natural Gas	27	32	45	56	65	71	
	b. Electric	23	28	41	52	60	65	
	c. Bottle Gas							
	d. Oil							
Water		30	32	39	46	53	61	
Sewer		92	94	101	108	115	112	
Trash Collection								
Range/Microwave		25	25	25	25	25	25	
Refrigerator		25	25	25	25	25	25	
Other -- specify								

Actual Family Allowances To be used by the family to compute allowance.
Complete below for actual unit rented.

Name of Family

Address of Unit

Number of Bedrooms

Utility or Service per month cost

Heating

Cooking

Other Electric

Air Conditioning

Water Heating

Water

Sewer

Trash Collection

Range/Microwave

Refrigerator

Other

Total \$

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Locality		2016: Highrise					Unit Type	Effective
							Highrise	01/01/2016
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas							
	b. Electric							
	c. Bottle Gas							
	d. Oil							
Cooking	a. Natural Gas	20	23	26	29	33	36	
	b. Electric	12	14	18	22	26	30	
	c. Bottle Gas							
Other Electricity		50	58	73	88	104	120	
Air Conditioning								
Water Heating	a. Natural Gas	27	32	45	56	65	71	
	b. Electric	23	27	41	52	60	65	
	c. Bottle Gas							
	d. Oil							
Water		30	32	39	46	54	63	
Sewer		92	94	101	108	115	122	
Trash Collection								
Range/Microwave		25	25	25	25	25	25	
Refrigerator		25	25	25	25	25	25	
Other -- specify								

Actual Family Allowances To be used by the family to compute allowance.
Complete below for actual unit rented.

Name of Family

Address of Unit

Number of Bedrooms

Utility or Service per month cost

Heating

Cooking

Other Electric

Air Conditioning

Water Heating

Water

Sewer

Trash Collection

Range/Microwave

Refrigerator

Other

Total \$

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Locality		2016: Lowrise					Unit Type	Effective
							Lowrise	01/01/2016
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas							
	b. Electric							
	c. Bottle Gas							
	d. Oil							
Cooking	a. Natural Gas	20	23	26	29	33	36	
	b. Electric	12	14	18	22	26	30	
	c. Bottle Gas							
Other Electricity		51	58	79	100	122	144	
Air Conditioning								
Water Heating	a. Natural Gas	27	32	45	56	65	71	
	b. Electric	23	27	41	52	60	65	
	c. Bottle Gas							
	d. Oil							
Water		30	32	39	46	54	63	
Sewer		92	94	101	108	115	122	
Trash Collection								
Range/Microwave		25	25	25	25	25	25	
Refrigerator		25	25	25	25	25	25	
Other -- specify								

Actual Family Allowances To be used by the family to compute allowance.
Complete below for actual unit rented.

Name of Family _____

Address of Unit _____

Number of Bedrooms _____

Utility or Service	per month cost
Heating	_____
Cooking	_____
Other Electric	_____
Air Conditioning	_____
Water Heating	_____
Water	_____
Sewer	_____
Trash Collection	_____
Range/Microwave	_____
Refrigerator	_____
Other	_____
Total	\$ _____

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Locality		2016: SF					Unit Type	Effective
							Single Family	01/01/2016
Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas							
	b. Electric							
	c. Bottle Gas							
	d. Oil							
Cooking	a. Natural Gas	20	23	26	29	33	36	
	b. Electric	12	14	19	22	26	30	
	c. Bottle Gas							
Other Electricity		68	79	100	122	145	167	
Air Conditioning								
Water Heating	a. Natural Gas	27	32	45	56	65	71	
	b. Electric	23	28	41	52	60	67	
	c. Bottle Gas							
	d. Oil							
Water		30	32	39	46	53	61	
Sewer		92	94	101	108	115	122	
Trash Collection								
Range/Microwave		25	25	25	25	25	25	
Refrigerator		25	25	25	25	25	25	
Other -- specify								

Actual Family Allowances To be used by the family to compute allowance.
Complete below for actual unit rented.

Name of Family

Address of Unit

Number of Bedrooms

Utility or Service per month cost

Heating

Cooking

Other Electric

Air Conditioning

Water Heating

Water

Sewer

Trash Collection

Range/Microwave

Refrigerator

Other

Total \$