

Allowances 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. 04/30/2018)

See Public Reporting Statement and Instructions on back

Locality		Unit Type				Date (mm/dd/yyyy)
Hamilton County		Multi Family				01/31/2017
Utility or Service		Monthly Dollar Allowances				
		6 BR	7 BR	8 BR	BR	BR
Heating	a. Natural Gas	88	95	106		
	b. Bottle Gas	211	235	270		
	c. Oil / Electric	116	129	148		
	d. Coal / Other	198	220	253		
Cooking	a. Natural Gas	11	12	14		
	b. Bottle Gas	28	31	36		
	c. Oil / Electric	17	18	20		
	d. Coal / Other	0	0	0		
Other Electric		75	80	87		
Air Conditioning		29	32	36		
Water Heating	a. Natural Gas	45	48	54		
	b. Bottle Gas	74	82	94		
	c. Oil / Electric	49	54	62		
	d. Coal / Other	0	0	0		
Water		47	53	59		
Sewer		43	46	51		
Trash Collection		13	13	13		
Range/Microwave		7	7	7		
Refrigerator		6	6	6		
Other -- specify						
Stormwater		4	4	4		

Actual Family Allowances To be used by the family to compute allowance.

Complete below for the 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		Unit Type				Date (mm/dd/yyyy)
Lake County		Multi Family				01/31/2017
Utility or Service		Monthly Dollar Allowances				
		6 BR	7 BR	8 BR	BR	BR
Heating	a. Natural Gas	60	67	76		
	b. Bottle Gas	228	253	291		
	c. Oil / Electric	182	202	232		
	d. Coal / Other	214	238	273		
Cooking	a. Natural Gas	7	8	9		
	b. Bottle Gas	28	31	36		
	c. Oil / Electric	23	25	29		
	d. Coal / Other	0	0	0		
Other Electric		86	94	106		
Air Conditioning		37	41	47		
Water Heating	a. Natural Gas	31	34	37		
	b. Bottle Gas	74	82	94		
	c. Oil / Electric	71	79	91		
	d. Coal / Other	0	0	0		
Water		43	48	54		
Sewer		30	33	37		
Trash Collection		13	13	13		
Range/Microwave		7	7	7		
Refrigerator		6	6	6		
Other -- specify						
Stormwater		5	5	5		

Actual Family Allowances To be used by the family to compute allowance.

Complete below for the 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	\$