## U.S Department of Housing and Urban Development

Office of Public and Indian Housing

OMB Approval No. 2577-0169 exp. 04/30/2026

The following allowances are used to determine the total cost of tenant-furnished utilities and appliances.

Locality/PHA Metro Area (Hickman Heights and North State St)			Unit Type	High Rise	e Apt	12-1-2	nm/dd/yyyy) 23
Utility or Service	Fuel Type	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	Natural Gas	5	6	8	10	13	15
	Bottled Gas	16	22	28	35	44	50
	Electric	15	21	27	33	42	48
	Electric – Heat Pump	5	8	10	12	15	17
	Fuel Oil		-				
	Other						
Cooking	Natural Gas	4	5	7	8	11	12
	Bottled Gas	13	19	24	30	38	43
	Electric	7	10	13	16	20	23
	Other						
Other Electric		26	36	46	56	72	82
Air Conditioning		7	10	13	16	21	24
Water Heating	Natural Gas	9	12	16	20	25	29
	Bottled Gas	31	44	57	69	88	100
	Electric	18	26	33	41	52	59
	Electric – Heat Pump						
	Fuel Oil						
Water		26	37	46	53	60	67
Sewer		36	51	64	74	84	94
Trash Collection		37	37	37	37	37	37
Other – specify							
Range/Microwave		3	3	3	3	3	3
Refrigerator		4	4	4	4	4	4
•	nces – May be used by the	family to co	mpute allowa	ance while		rice/Appliance	Allowance
searching for a unit.  Head of Household Name					Heating Cooking		
Ticad of Household Name					Other Electric		<del> </del>
					Air Condition		
Unit Address					Water Heating		
					Water		
					Sewer		
					Trash Colle	ction	ļ
Number of Bedrooms					Other Day of Adjaneses		<b>_</b>
					Range/Microwave Refrigerator		
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