

# **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. 4/30/2014)

See Public Reporting Statement and Instructions on back

Locality <b>Franklin County</b>	Unit Type <b>Multi Family</b>	Date (mm/dd/yyyy) <b>6/13/2011</b>
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Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	25	35	47	58	73	82
	b. Bottle Gas	69	90	124	158	203	237
	c. Oil / Electric	38	53	68	82	101	113
	d. Coal / Other	83	110	147	182	237	254
Cooking	a. Natural Gas	3	5	6	8	10	11
	b. Bottle Gas	9	13	17	21	28	33
	c. Oil / Electric	5	8	9	11	14	17
	d. Coal / Other	0	0	0	0	0	0
Other Electric		38	46	53	60	70	76
Air Conditioning		8	12	15	17	24	27
Water Heating	a. Natural Gas	24	28	33	37	43	48
	b. Bottle Gas	25	36	48	60	77	88
	c. Oil / Electric	16	23	30	35	45	51
	d. Coal / Other	0	0	0	0	0	0
Water		11	12	16	19	24	30
Sewer		32	32	32	32	32	32
Trash Collection		0	0	0	0	0	0
Range/Microwave		7	7	7	7	7	7
Refrigerator		6	6	6	6	6	6
Other – specify <b>Stormwater</b>		0	0	0	0	0	0

**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	
<b>Total</b>	\$

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Locality <b>Franklin County</b>	Unit Type <b>Single Family</b>	Date (mm/dd/yyyy) <b>6/13/2011</b>
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Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	29	40	51	62	77	87
	b. Bottle Gas	79	111	143	175	222	254
	c. Oil / Electric	41	57	73	88	112	128
	d. Coal / Other	87	122	157	192	244	279
Cooking	a. Natural Gas	4	6	7	9	11	12
	b. Bottle Gas	11	15	20	24	31	35
	c. Oil / Electric	6	8	10	12	16	18
	d. Coal / Other	0	0	0	0	0	0
Other Electric		38	46	53	60	70	76
Air Conditioning		10	14	17	20	26	29
Water Heating	a. Natural Gas	24	28	33	37	43	48
	b. Bottle Gas	29	40	52	64	81	93
	c. Oil / Electric	17	24	31	38	47	54
	d. Coal / Other	0	0	0	0	0	0
Water		14	14	18	22	29	36
Sewer		32	32	33	35	37	39
Trash Collection		0	0	0	0	0	0
Range/Microwave		7	7	7	7	7	7
Refrigerator		6	6	6	6	6	6
Other — specify <b>Stormwater</b>		0	0	0	0	0	0

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

Complete below for the actual unit rented.

Name of Family	Utility or Service	per month cost
Address of Unit	Heating	\$
	Cooking	
	Other Electric	
	Air Conditioning	
	Water Heating	
	Water	
	Sewer	
	Trash Collection	
	Range/Microwave	
	Refrigerator	
Number of Bedrooms	Other	
	<b>Total</b>	\$