

Summary Allowance for Tenant-Furnished Utilities and Other Services

Locality : Rockford Housing Authority - W666999		ComEd / Nicor Gas						Date : 12/01/2020	
6933 AHDD		Monthly Dollar Allowances							
Unit Type	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR	7 BR	
Mobile Home (Manufactured Home)*									
a. Natural Gas	19	22	29	37	47				
b. Electric	28	33	43	55	69				
c. Bottle Gas	52	62	81	103	129				
d. Oil	52	62	80	103	129				
High-Rise with Elevator									
a. Natural Gas	19	22	26	31	35	44	51	57	
b. Electric	25	31	37	46	57	67	77	87	
Row House/Garden Apt (Rowhouse/Townhouse)*									
a. Natural Gas	18	25	33	42	50	59	67	76	
b. Electric	27	37	49	62	75	87	100	113	
c. Bottle Gas	51	69	93	116	140	163	188	212	
d. Oil	51	68	93	115	140	163	187	211	
Two-Three Family/Duplex (Semi-Detached)*									
a. Natural Gas	22	29	38	47	56	63	73	82	
b. Electric	33	43	56	70	82	94	108	122	
c. Bottle Gas	62	80	106	132	155	176	202	228	
d. Oil	62	80	106	131	154	175	201	228	
Older Multi-Family (Low Rise)*									
a. Natural Gas	20	26	35	43	52	60	69	78	
b. Electric	30	39	52	64	77	88	102	115	
c. Bottle Gas	56	73	97	120	145	166	191	216	
d. Oil	55	73	97	120	144	166	190	215	
Older Home Converted (Semi Detached)*									
a. Natural Gas	21	27	37	45	54	61	70	79	
b. Electric	32	41	54	67	80	90	103	117	
c. Bottle Gas	59	76	102	126	151	169	194	220	
d. Oil	59	76	102	126	150	168	194	219	
Single Family Detached									
a. Natural Gas	24	33	40	50	56	66	75	85	
b. Electric	36	49	59	74	84	97	112	126	
c. Bottle Gas	68	92	110	139	157	182	210	237	
d. Oil	68	92	110	138	156	182	209	236	
All Unit Types-Cooking									
a. Natural Gas	3	3	5	6	7	8	9	10	
b. Electric	6	7	10	12	15	16	18	21	
c. Bottle Gas	7	9	13	16	19	21	24	27	
All Unit Types-Electricity	19	25	33	41	51	55	63	72	
All Unit Types-Water Heat									
a. Natural Gas	3	4	6	7	9	9	11	12	
b. Electric	7	9	12	15	18	20	23	26	
c. Bottle Gas	9	12	16	19	24	26	30	34	
d. Oil	9	11	15	19	23	25	29	33	
Range (Tenant Owned)	4	4	4	4	4	4	4	4	
Refrigerator (Tenant Owned)	4	4	5	5	5	7	7	7	
Water	31	41	50	62	69	79	88	96	
Sewer	27	36	45	56	63	72	80	89	

Summary - Air Conditioning Allowance for Tenant-Furnished Utilities and Other Services

Locality : Rockford Housing Authority - W666999		ComEd / Nicor Gas				Effective 12/01/2020
						Expires 11/30/2021
6933 AHDD		Monthly Dollar Allowances				
Unit Type	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Mobile Home (Manufactured Home)*	6	8	11	13	16	
High-Rise with Elevator	4	5	7	8	10	11
Row/House Garden Apt. (Rowhouse/Townhouse)*	4	6	7	9	11	12
Two-Three Family Duplex (Semi-Detached)*	4	6	7	9	11	12
Older Multi-Family (Low Rise)*	4	5	7	8	10	11
Older Home Converted (Semi-Detached)*	4	6	7	9	11	12
Single Family Detached	7	10	13	16	19	21

Utility Allowance Schedule

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

OMB Approval No. 2577-0169
(exp. 7/31/2022)

Locality		Unit Type					Effective
Rockford Housing Authority - W666999 ComEd / Nicor Gas		Mobile Home (Manufactured Home)*					12/01/2020
Utility or Service		Monthly Dollar Allowances					Expires
6933		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	19	22	29	37	47	
	b. Electric	28	33	43	55	69	
	c. Bottle Gas	52	62	81	103	129	
	d. Oil	52	62	80	103	129	
	e. Heat Pump						
Cooking	a. Natural Gas	3	3	5	6	7	
	b. Electric	6	7	10	12	15	
	c. Bottle Gas	7	9	13	16	19	
Other Electricity		19	25	33	41	51	
Air Conditioning		6	8	11	13	16	
Water Heating	a. Natural Gas	3	4	6	7	9	
	b. Electric	7	9	12	15	18	
	c. Bottle Gas	9	12	16	19	24	
	d. Oil	9	11	15	19	23	
Water		31	41	50	62	69	
Sewer		27	36	45	56	63	
Trash Collection		21	21	21	21	21	
Other -- specify							
Range/Microwave		4	4	4	4	4	
Refrigerator		4	4	5	5	5	
Actual Family Allowances - May be used by the family to compute allowance while searching for a unit.						Utility or Service	per month cost
Head of Household Name _____ Unit Address _____ Number of Bedrooms _____						Heating	\$
						Cooking	
						Other Electric	
						Air Conditioning	
						Water Heating	
						Water	
						Sewer	
						Trash Collection	
						Range/Microwave	
						Refrigerator	
						Other	
						Total	\$

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. 7/31/2022)

Locality		Unit Type					Effective
Rockford Housing Authority - W666999 ComEd / Nicor Gas		High Rise (High Rise with Elevator)*					12/01/2020
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	19	22	26	31	35	44
	b. Electric	25	31	37	46	57	67
	c. Bottle Gas						
	d. Oil						
	e. Heat Pump						
Cooking	a. Natural Gas	3	3	5	6	7	8
	b. Electric	6	7	10	12	15	16
	c. Bottle Gas						
Other Electricity	19	25	33	41	51	55	
Air Conditioning	4	5	7	8	10	11	
Water Heating	a. Natural Gas	3	4	6	7	9	9
	b. Electric	7	9	12	15	18	20
	c. Bottle Gas						
	d. Oil						
Water	31	41	50	62	69	79	
Sewer	27	36	45	56	63	72	
Trash Collection	21	21	21	21	21	21	
Other -- specify							
Range/Microwave	4	4	4	4	4	4	
Refrigerator	4	4	5	5	5	7	

Actual Family Allowances - May be used by the family to compute allowance while searching for a unit. Head of Household Name _____ Unit Address _____ 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	\$	

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. 7/31/2022)

Locality		Unit Type					Effective
Rockford Housing Authority - W666999 ComEd / Nicor Gas		Row House / Garden Apartment (Rowhouse/Townhouse)*					12/01/2020
							Expires 11/30/2021
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	18	25	33	42	50	59
	b. Electric	27	37	49	62	75	87
	c. Bottle Gas	51	69	93	116	140	163
	d. Oil	51	68	93	115	140	163
	e. Heat Pump						
Cooking	a. Natural Gas	3	3	5	6	7	8
	b. Electric	6	7	10	12	15	16
	c. Bottle Gas	7	9	13	16	19	21
Other Electricity		19	25	33	41	51	55
Air Conditioning		4	6	7	9	11	12
Water Heating	a. Natural Gas	3	4	6	7	9	9
	b. Electric	7	9	12	15	18	20
	c. Bottle Gas	9	12	16	19	24	26
	d. Oil	9	11	15	19	23	25
Water		31	41	50	62	69	79
Sewer		27	36	45	56	63	72
Trash Collection		21	21	21	21	21	21
Other -- specify							
Range/Microwave		4	4	4	4	4	4
Refrigerator		4	4	5	5	5	7
Actual Family Allowances - May be used by the family to compute allowance while searching for a unit.						Utility or Service	per month cost
Head of Household Name _____ Unit Address _____ Number of Bedrooms _____						Heating	\$
						Cooking	
						Other Electric	
						Air Conditioning	
						Water Heating	
						Water	
						Sewer	
						Trash Collection	
						Range/Microwave	
						Refrigerator	
						Other	
						Total	\$

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. 7/31/2022)

Locality		Unit Type					Effective
Rockford Housing Authority - W666999 ComEd / Nicor Gas		Older Multi Family (Low Rise)*					12/01/2020
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	20	26	35	43	52	60
	b. Electric	30	39	52	64	77	88
	c. Bottle Gas	56	73	97	120	145	166
	d. Oil	55	73	97	120	144	166
	e. Heat Pump						
Cooking	a. Natural Gas	3	3	5	6	7	8
	b. Electric	6	7	10	12	15	16
	c. Bottle Gas	7	9	13	16	19	21
Other Electricity		19	25	33	41	51	55
Air Conditioning		4	5	7	8	10	11
Water Heating	a. Natural Gas	3	4	6	7	9	9
	b. Electric	7	9	12	15	18	20
	c. Bottle Gas	9	12	16	19	24	26
	d. Oil	9	11	15	19	23	25
Water		31	41	50	62	69	79
Sewer		27	36	45	56	63	72
Trash Collection		21	21	21	21	21	21
Other -- specify							
Range/Microwave		4	4	4	4	4	4
Refrigerator		4	4	5	5	5	7

Actual Family Allowances - May be used by the family to compute allowance while searching for a unit. Head of Household Name _____ Unit Address _____ 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	\$	

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. 7/31/2022)

Locality		Unit Type					Effective
Rockford Housing Authority - W666999 ComEd / Nicor Gas		Older Home Converted (Semi-Detached)*					12/01/2020
Expires							11/30/2021
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	21	27	37	45	54	61
	b. Electric	32	41	54	67	80	90
	c. Bottle Gas	59	76	102	126	151	169
	d. Oil	59	76	102	126	150	168
	e. Heat Pump						
Cooking	a. Natural Gas	3	3	5	6	7	8
	b. Electric	6	7	10	12	15	16
	c. Bottle Gas	7	9	13	16	19	21
Other Electricity		19	25	33	41	51	55
Air Conditioning		4	6	7	9	11	12
Water Heating	a. Natural Gas	3	4	6	7	9	9
	b. Electric	7	9	12	15	18	20
	c. Bottle Gas	9	12	16	19	24	26
	d. Oil	9	11	15	19	23	25
Water		31	41	50	62	69	79
Sewer		27	36	45	56	63	72
Trash Collection		21	21	21	21	21	21
Other -- specify							
Range/Microwave		4	4	4	4	4	4
Refrigerator		4	4	5	5	5	7

Actual Family Allowances - May be used by the family to compute allowance while searching for a unit.		Utility or Service	per month cost
Head of Household Name _____ Unit Address _____ Number of Bedrooms _____		Heating	\$
		Cooking	
		Other Electric	
		Air Conditioning	
		Water Heating	
		Water	
		Sewer	
		Trash Collection	
		Range/Microwave	
		Refrigerator	
		Other	
		Total	\$

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. 7/31/2022)

Locality		Unit Type					Effective
Rockford Housing Authority - W666999 ComEd / Nicor Gas		Duplex & Two/Three Family (Semi Detached)*					12/01/2020
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	22	29	38	47	56	63
	b. Electric	33	43	56	70	82	94
	c. Bottle Gas	62	80	106	132	155	176
	d. Oil	62	80	106	131	154	175
	e. Heat Pump						
Cooking	a. Natural Gas	3	3	5	6	7	8
	b. Electric	6	7	10	12	15	16
	c. Bottle Gas	7	9	13	16	19	21
Other Electricity		19	25	33	41	51	55
Air Conditioning		4	6	7	9	11	12
Water Heating	a. Natural Gas	3	4	6	7	9	9
	b. Electric	7	9	12	15	18	20
	c. Bottle Gas	9	12	16	19	24	26
	d. Oil	9	11	15	19	23	25
Water		31	41	50	62	69	79
Sewer		27	36	45	56	63	72
Trash Collection		21	21	21	21	21	21
Other -- specify							
Range/Microwave		4	4	4	4	4	4
Refrigerator		4	4	5	5	5	7

Actual Family Allowances - May be used by the family to compute allowance while searching for a unit.		Utility or Service	per month cost
Head of Household Name _____ Unit Address _____ Number of Bedrooms _____		Heating	\$
		Cooking	
		Other Electric	
		Air Conditioning	
		Water Heating	
		Water	
		Sewer	
		Trash Collection	
		Range/Microwave	
		Refrigerator	
		Other	
		Total	\$

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. 7/31/2022)

Locality		Unit Type					Effective
Rockford Housing Authority - W666999 ComEd / Nicor Gas		Single Family Detached					12/01/2020
							Expires
							11/30/2021
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	24	33	40	50	56	66
	b. Electric	36	49	59	74	84	97
	c. Bottle Gas	68	92	110	139	157	182
	d. Oil	68	92	110	138	156	182
	e. Heat Pump						
Cooking	a. Natural Gas	3	3	5	6	7	8
	b. Electric	6	7	10	12	15	16
	c. Bottle Gas	7	9	13	16	19	21
Other Electricity		19	25	33	41	51	55
Air Conditioning		7	10	13	16	19	21
Water Heating	a. Natural Gas	3	4	6	7	9	9
	b. Electric	7	9	12	15	18	20
	c. Bottle Gas	9	12	16	19	24	26
	d. Oil	9	11	15	19	23	25
Water		31	41	50	62	69	79
Sewer		27	36	45	56	63	72
Trash Collection		21	21	21	21	21	21
Other -- specify							
Range/Microwave		4	4	4	4	4	4
Refrigerator		4	4	5	5	5	7
Actual Family Allowances - May be used by the family to compute allowance while searching for a unit.						Utility or Service	per month cost
Head of Household Name _____ Unit Address _____ Number of Bedrooms _____						Heating	\$
						Cooking	
						Other Electric	
						Air Conditioning	
						Water Heating	
						Water	
						Sewer	
						Trash Collection	
						Range/Microwave	
						Refrigerator	
						Other	
						Total	\$