Allowances for Tenant-Furnished Utilities and Other Services
Effective 1 12/1/2012

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

OMB Approval No. 25577-0169 exp.4/30/2001

Locality			**Unit Type**			**Date**	
Berkshire County			**Multi Family**			**12/01/2012**	
Utility/Service - Allowance per month							
		0BR	**1BR**	**2BR**	**3BR**	**4BR**	**5BR**
Heating	a. Natural Gas	27	38	48	60	77	87
	b. Oil	29	44	55	66	84	99
	c. Electric	8	11	14	17	21	24
Cooking	a. Natural Gas	5	8	9	11	14	15
	b. Electric	5	7	9	11	14	16
Gen. Electric (incl. Monthly chg)		33	41	48	52	56	56
Air Conditioning							
Water	a. Natural Gas	17	23	29	36	45	51
Heating	b. Oil	26	33	44	55	69	77
	c. Electric	12	17	21	26	33	38
Water/sewer		25	25	37	50	63	76
Trash Collection (*)		39	39	39	39	39	39
Range/Microwave		10	10	10	10	10	10
Refrigerator		10	10	13	13	13	13
Other --specify-gas min.charge		12	12	12	12	12	12

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

		Cost per month allowance
Heating		$
Cooking		
Other electric		
Air Conditioning		
Water Heating		
Water		
Sewer		
Trash Collection		
Range/Microwave		
Refrigerator		
Other:		
Total		$

form HUD-52667 (12/97) ref. Handbook 7420.8

Previous editions are obsolete

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Locality				**Unit Type**			**Date**	
Berkshire County				**Multi-Family, Over 4 stories**			**12/01/2012**	
Utility/Service - Allowance per month								
			6BR	**7BR**	**8BR**	**9BR**	**10BR**	**11BR**
Heating	a. Natural Gas		98	108	119	130	141	152
	b. Oil		112	124	136	149	161	174
	c. Electric		28	31	34	37	40	43
Cooking	a. Natural Gas		19	21	23	25	27	30
	b. Electric		18	20	22	24	27	29
Gen. Electric (incl. Monthly chg)			67	74	82	90	97	105
Air Conditioning								
Water	a. Natural Gas		60	66	73	80	86	93
Heating	b. Oil		85	95	104	114	123	133
	c. Electric		43	47	52	57	62	66
Water/sewer			25	25	37	50	63	76
Trash Collection (*)			39	39	39	39	39	39
Range/Microwave			10	10	10	10	10	10
Refrigerator			13	13	13	13	13	13
Other --specify-gas min.charge			12	12	12	12	12	12

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

		Cost per month allowance
Heating		$
Cooking		
Other electric		
Air Conditioning		
Water Heating		
Water		
Sewer		
Trash Collection		
Range/Microwave		
Refrigerator		
Other:		
	Total	$

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