

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)

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

Locality/PHA		Unit Type					Date (mm/dd/yyyy)
Region 10: Flathead, Lake, Lincoln and Sanders Counties		Semi-detached Older Home Converted (Semi Detached), Two/Three Family (Duplex)					01/01/2021
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	19	24	33	41	48	54
	b. Electric	38	48	65	80	96	108
	c. Bottle Gas	71	91	122	151	180	202
	d. Oil	99	126	169	210	250	281
	e. Heat Pump						
Cooking	a. Natural Gas	2	3	4	4	5	6
	b. Electric	6	7	10	12	15	17
	c. Bottle Gas	8	10	13	16	20	22
Other Electricity		20	26	35	43	53	57
Air Conditioning		4	5	7	8	10	11
Water Heating	a. Natural Gas	3	3	4	5	7	7
	b. Electric	7	9	12	15	19	20
	c. Bottle Gas	9	12	16	20	25	27
	d. Oil	13	16	22	27	34	36
Water		31	34	39	45	50	55
Sewer		36	41	46	52	56	62
Trash Collection		20	20	20	20	20	20
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	\$ _____

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Locality/PHA Region 10: Flathead, Lake, Lincoln and Sanders Counties	Unit Type Rowhouse/townhouse Row House/Garden Apt.	Date (mm/dd/yyyy) 01/01/2021
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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	16	22	30	37	45	52
	b. Electric	33	44	59	74	89	104
	c. Bottle Gas	61	82	111	139	168	195
	d. Oil	85	114	155	193	233	271
	e. Heat Pump						
Cooking	a. Natural Gas	2	3	4	4	5	6
	b. Electric	6	7	10	12	15	17
	c. Bottle Gas	8	10	13	16	20	22
Other Electricity	20	26	35	43	53	57	
Air Conditioning	4	5	7	8	10	11	
Water Heating	a. Natural Gas	3	3	4	5	7	7
	b. Electric	7	9	12	15	19	20
	c. Bottle Gas	9	12	16	20	25	27
	d. Oil	13	16	22	27	34	36
Water	31	34	39	45	50	55	
Sewer	36	41	46	52	56	62	
Trash Collection	20	20	20	20	20	20	
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	\$ _____

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Locality/PHA Region 10: Flathead, Lake, Lincoln and Sanders Counties	Unit Type Single family detached Single Family Detached (Single Family)	Date (mm/dd/yyyy) 01/01/2021
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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	22	30	35	45	50	59
	b. Electric	43	59	70	88	100	116
	c. Bottle Gas	81	110	132	166	188	218
	d. Oil	113	153	183	231	261	303
	e. Heat Pump						
Cooking	a. Natural Gas	2	3	4	4	5	6
	b. Electric	6	7	10	12	15	17
	c. Bottle Gas	8	10	13	16	20	22
Other Electricity	20	26	35	43	53	57	
Air Conditioning	7	9	12	15	17	19	
Water Heating	a. Natural Gas	3	3	4	5	7	7
	b. Electric	7	9	12	15	19	20
	c. Bottle Gas	9	12	16	20	25	27
	d. Oil	13	16	22	27	34	36
Water	31	34	39	45	50	55	
Sewer	36	41	46	52	56	62	
Trash Collection	20	20	20	20	20	20	
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	\$ _____

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

Locality/PHA Region 10: Flathead, Lake, Lincoln and Sanders Counties	Unit Type High rise with elevator High Rise	Date (mm/dd/yyyy) 01/01/2021
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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	17	19	23	28	31	39
	b. Electric	30	37	45	55	68	80
	c. Bottle Gas						
	d. Oil						
	e. Heat Pump						
Cooking	a. Natural Gas	2	3	4	4	5	6
	b. Electric	6	7	10	12	15	17
	c. Bottle Gas	8	10	13	16	20	22
Other Electricity	20	26	35	43	53	57	
Air Conditioning	4	5	6	8	9	10	
Water Heating	a. Natural Gas	3	3	4	5	7	7
	b. Electric	7	9	12	15	19	20
	c. Bottle Gas	9	12	16	20	25	27
	d. Oil	13	16	22	27	34	36
Water	31	34	39	45	50	55	
Sewer	36	41	46	52	56	62	
Trash Collection	20	20	20	20	20	20	
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	\$ _____

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Locality/PHA Region 10: Flathead, Lake, Lincoln and Sanders Counties	Unit Type Low-rise Older Multi-Family (Low Rise)	Date (mm/dd/yyyy) 01/01/2021
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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	18	23	31	39	46	53
	b. Electric	35	46	62	77	92	106
	c. Bottle Gas	67	87	116	144	173	199
	d. Oil	92	121	162	200	241	276
	e. Heat Pump						
Cooking	a. Natural Gas	2	3	4	4	5	6
	b. Electric	6	7	10	12	15	17
	c. Bottle Gas	8	10	13	16	20	22
Other Electricity	20	26	35	43	53	57	
Air Conditioning	4	5	6	8	9	10	
Water Heating	a. Natural Gas	3	3	4	5	7	7
	b. Electric	7	9	12	15	19	20
	c. Bottle Gas	9	12	16	20	25	27
	d. Oil	13	16	22	27	34	36
Water	31	34	39	45	50	55	
Sewer	36	41	46	52	56	62	
Trash Collection	20	20	20	20	20	20	
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	\$ _____

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Locality/PHA Region 10: Flathead, Lake, Lincoln and Sanders Counties	Unit Type Manufactured home Mobile Home	Date (mm/dd/yyyy) 01/01/2021
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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	17	20	26	33	42
	b. Electric	33	40	51	66	82
	c. Bottle Gas	62	75	97	124	155
	d. Oil	86	104	134	172	215
	e. Heat Pump					
Cooking	a. Natural Gas	2	3	4	4	5
	b. Electric	6	7	10	12	15
	c. Bottle Gas	8	10	13	16	20
Other Electricity	20	26	35	43	53	57
Air Conditioning	6	7	10	12	15	
Water Heating	a. Natural Gas	3	3	4	5	7
	b. Electric	7	9	12	15	19
	c. Bottle Gas	9	12	16	20	25
	d. Oil	13	16	22	27	34
Water	31	34	39	45	50	55
Sewer	36	41	46	52	56	62
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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.

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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	\$ _____