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

OMB Approval No. 2577-0169 (exp. 9/30/2010)

Locality				Unit Type					Date (mm/dd/yyyy)
Utility or Service		0 BR	1 BR	Monthly Doll 2 BR	ar Allowance				5 BR
 Heating	a. Natural Gas	UBN	IDN	2 DN	3 DN	1	4 DN		3 BN
rieating									
	b. Bottle Gas								
	c. Oil / Electric								
	d. Coal / Other								
Cooking	a. Natural Gas								
	b. Bottle Gas								
	c. Oil / Electric								
	d. Coal / Other								
Other Electric									
Air Conditionin	ng								
Water Heating	a. Natural Gas								
	b. Bottle Gas								
	c. Oil / Electric								
	d. Coal / Other								
Water									
Sewer									
Trash Collection	on								
Range/Microw	ave								
Refrigerator									
Other specif	·y								
Actual Family	Allowances To b	be used by the fami	ly to compute allow	/ance.			or Service	<u> </u>	er month cost
Complete below	for the actual unit re	ented.				Heat		\$	
Name of Family						Cook	r Electric	 	
							onditioning		
Address of Unit					_		r Heating		
						Wate			
						Sewe	r Collection	<u> </u>	
							je/Microwave		
							gerator		
Number of Bedroo	ms					Othe			
						Tota	I	\$	

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