

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. 2577-0189

See Public Reporting Statement and Instructions on back.

Locality Darke County Metropolitan Housing Authority		Unit Type Older Multi Family (Low Rise)*				Date (mm/dd/yyyy) Effective 06/01/2023 Expires 05/31/2024
Utility or Service		Monthly Dollar Allowances				
		1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	63	74	75	101	111
	b. Electric	55	67	80	99	118
	c. Bottle Gas	107	135	166	210	254
	d. Oil	123	156	192	243	294
Cooking	a. Natural Gas	7	8	10	13	16
	b. Electric	16	19	20	22	22
	c. Bottle Gas	19	22	28	34	44
Other Electric		27	34	37	48	60
Air Conditioning						
Water Heating	a. Natural Gas	9	11	14	18	21
	b. Electric	24	29	31	36	41
	c. Bottle Gas	11	14	17	22	25
	d. Oil	9	36	44	58	65
Water		29	29	29	41	46
Sewer		37	37	37	52	59
Trash Collection		17	17	17	17	17
Range/Microwave		5	5	5	5	5
Refrigerator		8	8	8	8	8
Other--specify						
Actual Family Allowances To be used by the family to compute allowance. Complete below for the actual unit rented.					Utility or Service	per month cost
Name of Family					Heating	
					Cooking	
Address of Unit					Other Electric	
					Air Conditioning	
					Water Heating	
					Water	
					Sewer	
					Trash Collection	
					Range/Microwave	
					Refrigerator	
Number of Bedrooms _____					Other	
					Total	\$ -

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Locality Darke County Metropolitan Housing Authority		Unit Type Mobile Home (Manufactured Home)*				Date (mm/dd/yyyy) Effective 06/01/2023 Expires 05/31/2024
Utility or Service		Monthly Dollar Allowances				
		1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	63	74	75	101	
	b. Electric	55	67	80	99	
	c. Bottle Gas	107	135	166	210	
	d. Oil	76	96	118	149	
Cooking	a. Natural Gas	7	8	10	13	
	b. Electric	16	19	20	22	
	c. Bottle Gas	19	22	28	34	
Other Electric		27	34	37	48	
Air Conditioning						
Water Heating	a. Natural Gas	9	11	14	18	
	b. Electric	24	29	31	36	
	c. Bottle Gas	11	14	17	22	
	d. Oil	29	36	44	58	
Water		29	29	29	41	
Sewer		37	37	37	52	
Trash Collection		17	17	17	17	
Range/Microwave		5	5	5	5	
Refrigerator		8	8	8	8	
Other--specify						
Actual Family Allowances To be used by the family to compute allowance. Complete below for the actual unit rented.					Utility or Service	per month cost
Name of Family					Heating	
					Cooking	
Address of Unit					Other Electric	
					Air Conditioning	
					Water Heating	
					Water	
					Sewer	
					Trash Collection	
					Range/Microwave	
Number of Bedrooms _____					Refrigerator	
					Other	
					Total	\$ -

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Locality Darke County Metropolitan Housing Authority		Unit Type RowHouse / Garden Apartment (Rowhouse/Townhouse)*				Date (mm/dd/yyyy) Effective 06/01/2023 Expires 05/31/2024
Utility or Service		Monthly Dollar Allowances				
		1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	63	74	75	101	111
	b. Electric	55	67	80	99	118
	c. Bottle Gas	107	135	166	210	254
	d. Oil	123	156	192	243	294
Cooking	a. Natural Gas	7	8	10	13	16
	b. Electric	16	19	20	22	22
	c. Bottle Gas	19	22	28	34	44
Other Electric		27	34	37	48	60
Air Conditioning						
Water Heating	a. Natural Gas	9	11	14	18	21
	b. Electric	24	29	31	36	41
	c. Bottle Gas	11	14	17	22	25
	d. Oil	29	36	44	58	65
Water		29	29	29	41	46
Sewer		37	37	37	52	59
Trash Collection		17	17	17	17	17
Range/Microwave		5	5	5	5	5
Refrigerator		8	8	8	8	8
Other--specify						
Actual Family Allowances To be used by the family to compute allowance. Complete below for the actual unit rented.					Utility or Service	per month cost
Name of Family					Heating	
					Cooking	
Address of Unit					Other Electric	
					Air Conditioning	
					Water Heating	
					Water	
					Sewer	
					Trash Collection	
					Range/Microwave	
					Refrigerator	\$ -
Number of Bedrooms _____					Other	
					Total	\$ -

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Locality Darke County Metropolitan Housing Authority		Unit Type Duplex & Two/Three Family (Semi-detached)				Date (mm/dd/yyyy) Effective 06/01/2023 Expires 05/31/2024
Utility or Service		Monthly Dollar Allowances				
		1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	63	74	75	101	111
	b. Electric	55	67	80	99	118
	c. Bottle Gas	107	135	166	210	254
	d. Oil	123	156	192	243	294
Cooking	a. Natural Gas	7	8	10	13	16
	b. Electric	16	19	20	22	22
	c. Bottle Gas	19	22	28	34	44
Other Electric		27	34	37	48	50
Air Conditioning						
Water Heating	a. Natural Gas	9	11	14	18	21
	b. Electric	24	29	31	36	41
	c. Bottle Gas	11	14	17	22	25
	d. Oil	29	36	44	58	65
Water		29	29	29	41	46
Sewer		37	37	37	52	59
Trash Collection		17	17	17	17	17
Range/Microwave		5	5	5	5	5
Refrigerator		8	8	8	8	8
Other--specify						
Actual Family Allowances To be used by the family to compute allowance. Complete below for the actual unit rented.					Utility or Service	
Name of Family					Heating	
Address of Unit					Cooking	
					Other Electric	
Number of Bedrooms _____					Air Conditioning	
					Water Heating	
					Water	
					Sewer	
					Trash Collection	
					Range/Microwave	
					Refrigerator	
					Other	
					Total	\$ -

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Locality Darke County Metropolitan Housing Authority		Unit Type Single Family Detached				Date (mm/dd/yyyy) Effective 06/01/2023 Expires 05/31/2024
Utility or Service		Monthly Dollar Allowances				
		1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	63	74	75	101	111
	b. Electric	55	67	80	99	118
	c. Bottle Gas	104	132	162	246	248
	d. Oil	125	158	195	246	297
Cooking	a. Natural Gas	7	8	10	13	16
	b. Electric	16	19	20	22	22
	c. Bottle Gas	18	22	28	34	44
Other Electric		27	34	37	48	60
Air Conditioning						
Water Heating	a. Natural Gas	9	11	14	18	21
	b. Electric	24	29	31	36	41
	c. Bottle Gas	11	14	16	22	25
	d. Oil	29	37	44	59	65
Water		29	29	29	41	46
Sewer		37	37	37	52	59
Trash Collection		17	17	17	17	17
Range/Microwave		5	5	5	5	5
Refrigerator		8	8	8	8	8
Other--specify						
Actual Family Allowances To be used by the family to compute allowance. Complete below for the actual unit rented.					Utility or Service	
Name of Family					Heating	
					Cooking	
Address of Unit					Other Electric	
					Air Conditioning	
					Water Heating	
					Water	
					Sewer	
					Trash Collection	
					Range/Microwave	
					Refrigerator	
Number of Bedrooms _____					Other	
					Total	\$ -