



Housing Choice Voucher Program

**Allowances for
Tenant-Furnished Utilities
and Other Services**

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

Locality San Bernardino County	Age mixed	Unit Type Apartment	Date (mm/dd/yyyy) 10/1/2019
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Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Heating	a. Natural Gas	9	11	12	14	16	18	19
	b. Bottle Gas	22	27	29	34	39	44	46
	c. Electric	20	25	31	38	44	50	56
Cooking	a. Natural Gas	9	10	11	12	13	14	15
	b. Bottle Gas	22	24	27	29	31	34	36
	c. Electric	10	12	15	21	26	30	35
Other Electric		36	42	55	69	84	99	112
Air Conditioning		12	14	27	38	48	58	77
Water Heating	a. Natural Gas	10	12	17	22	26	28	30
	b. Bottle Gas	24	29	41	53	63	68	73
	c. Electric	21	27	44	57	68	76	87
Water		36	38	42	46	51	55	62
Sewer		36	36	36	36	36	36	36
Trash Collection		23	23	23	23	23	23	23
Range/Microwave		4	4	4	4	4	4	4
Refrigerator		4	4	4	4	4	4	4
Other - specify		0	0	0	0	0	0	0

Actual Family Allowances to be used by the family to compute allowance. Complete below for the actual unit rented.	Utility or Service	Monthly Cost
Name of Family	Heating	
	Cooking	
	Other Electric	
Address of Use	Air Conditioning	
	Water Heating	
	Water	
	Sewer	
	Trash Collection	
	Range/Microwave	
Number of Bedrooms	Refrigerator	
	Other	
	Total	\$

Previous editions are obsolete

Spreadsheet (ver10) based on form HUD-52667 (12/97).
ref. Handbook 7420.8

Any individual, company, corporation, government agency or organization using these utility allowances shall indemnify, defend, and hold harmless the Housing Authority of the County of San Bernardino, its officers, officials, employees, and volunteers from and against any and all liability, claims, damage, cost, expenses, awards, fines, judgments, and attorney fees (including, without limitation, costs, attorney fees, expert witness fees, and other expenses of litigation) of every nature arising out of or in connection with the use of these utility allowances under any circumstances.



Housing Choice Voucher Program

**Allowances for
Tenant-Furnished Utilities
and Other Services**

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

Locality San Bernardino County	Age mixed	Unit Type Detached Houses	Date (mm/dd/yyyy) 10/1/2019
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Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Heating	a. Natural Gas	23	27	31	36	40	44	47
	b. Bottle Gas	56	65	75	87	97	106	115
	c. Electric	43	51	59	66	73	81	92
Cooking	a. Natural Gas	9	10	11	12	13	14	15
	b. Bottle Gas	22	24	27	29	31	34	36
	c. Electric	10	12	19	22	28	32	37
Other Electric		51	60	80	102	124	148	168
Air Conditioning		19	24	40	54	69	84	93
Water Heating	a. Natural Gas	10	12	17	22	26	28	30
	b. Bottle Gas	24	29	41	53	63	68	73
	c. Electric	24	31	46	60	69	76	86
Water		36	38	42	51	59	65	75
Sewer		36	36	36	36	36	36	36
Trash Collection		23	23	23	23	23	23	23
Range/Microwave		4	4	4	4	4	4	4
Refrigerator		4	4	4	4	4	4	4
Other - specify		0	0	0	0	0	0	0

Actual Family Allowances to be used by the family to compute allowance. Complete below for the actual unit rented.	Utility or Service	Monthly Cost
Name of Family	Heating	
	Cooking	
	Other Electric	
Address of Use	Air Conditioning	
	Water Heating	
	Water	
	Sewer	
	Trash Collection	
	Range/Microwave	
Number of Bedrooms	Refrigerator	
	Other	
	Total	\$

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Locality San Bernardino County	Age mixed	Unit Type Manufactured homes	Date (mm/dd/yyyy) 10/1/2019
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Utility or Service		Monthly Dollar Allowances						
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	6 BR
Heating	a. Natural Gas	19	23	26	30	34	37	40
	b. Bottle Gas	46	56	63	73	82	90	97
	c. Electric	47	55	57	59	60	62	69
Cooking	a. Natural Gas	9	10	11	12	13	14	15
	b. Bottle Gas	21	24	27	29	31	34	36
	c. Electric	10	12	19	23	28	32	33
Other Electric		46	54	77	105	133	163	190
Air Conditioning		15	20	34	47	59	72	91
Water Heating	a. Natural Gas	10	12	17	22	26	28	30
	b. Bottle Gas	24	29	41	53	63	68	73
	c. Electric	23	29	46	60	69	76	84
Water		36	38	42	46	51	55	62
Sewer		36	36	36	36	36	36	36
Trash Collection		23	23	23	23	23	23	23
Range/Microwave		4	4	4	4	4	4	4
Refrigerator		4	4	4	4	4	4	4
Other - specify		0	0	0	0	0	0	0

Actual Family Allowances to be used by the family to compute allowance. Complete below for the actual unit rented.	Utility or Service	Monthly Cost
Name of Family	Heating	
	Cooking	
	Other Electric	
Address of Use	Air Conditioning	
	Water Heating	
	Water	
	Sewer	
	Trash Collection	
	Range/Microwave	
Number of Bedrooms	Refrigerator	
	Other	
	Total	\$

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