



**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 <b>San Bernardino County</b>	Age mixed	Unit Type <b>Apartment</b>	Date (mm/dd/yyyy) <b>11/1/2024</b>
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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	24	28	30	33	37	40	42
	b. Bottle Gas	58	68	73	80	90	97	102
	c. Electric	32	40	53	63	74	84	95
Cooking	a. Natural Gas	4	5	7	9	11	13	14
	b. Bottle Gas	10	12	17	22	27	31	34
	c. Electric	13	16	23	32	44	52	61
Other Electric		51	60	83	107	131	159	180
Air Conditioning		27	33	50	69	85	100	133
Water Heating	a. Natural Gas	9	10	15	21	26	32	34
	b. Bottle Gas	22	24	36	51	63	77	83
	c. Electric	31	36	52	67	82	98	112
Water		47	49	64	87	110	132	149
Sewer		40	40	40	40	40	40	40
Trash Collection		28	28	28	28	28	28	28
Range/Microwave		6	6	6	6	6	6	6
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
<b>Name of Family</b>	Heating	
	Cooking	
	Other Electric	
<b>Address of Use</b>	Air Conditioning	
	Water Heating	
	Water	
	Sewer	
	Trash Collection	
	Range/Microwave	
	Refrigerator	
<b>Number of Bedrooms</b>	Other	
	<b>Total</b>	\$

Spreadsheet based on form HUD-52667 (4/2023).

Previous editions are obsolete

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.**



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

Locality <b>San Bernardino County</b>	Age mixed	Unit Type <b>Detached Houses</b>	Date (mm/dd/yyyy) <b>11/1/2024</b>
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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	33	38	43	48	53	58	62
	b. Bottle Gas	80	92	104	116	128	140	151
	c. Electric	73	86	98	110	121	133	151
Cooking	a. Natural Gas	4	5	7	9	11	13	14
	b. Bottle Gas	10	12	17	22	27	31	34
	c. Electric	13	16	27	36	47	56	64
Other Electric		75	88	123	163	204	247	280
Air Conditioning		21	26	68	106	144	182	201
Water Heating	a. Natural Gas	11	13	20	26	33	40	43
	b. Bottle Gas	27	31	48	63	80	97	104
	c. Electric	39	50	69	89	106	122	137
Water		47	49	64	87	110	132	151
Sewer		40	40	40	40	40	40	40
Trash Collection		28	28	28	28	28	28	28
Range/Microwave		6	6	6	6	6	6	6
Refrigerator		4	4	4	4	4	4	4
Other - specify		0	0	0	0	0	0	0

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

Spreadsheet based on form HUD-52667 (4/2023).  
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**U.S. Department of Housing  
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Locality <b>San Bernardino County</b>	Age mixed	Unit Type <b>Manufactured homes</b>	Date (mm/dd/yyyy) <b>11/1/2024</b>
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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	29	33	37	41	45	50	55
	b. Bottle Gas	70	80	90	99	109	121	132
	c. Electric	80	93	96	98	101	103	115
Cooking	a. Natural Gas	4	5	7	9	11	13	14
	b. Bottle Gas	10	12	17	22	27	31	34
	c. Electric	13	16	27	36	47	56	58
Other Electric		75	88	123	163	204	247	288
Air Conditioning		26	33	63	89	115	142	180
Water Heating	a. Natural Gas	11	13	20	26	33	40	43
	b. Bottle Gas	27	31	48	63	80	97	104
	c. Electric	39	50	69	89	106	122	135
Water		47	49	64	87	110	132	149
Sewer		40	40	40	40	40	40	40
Trash Collection		28	28	28	28	28	28	28
Range/Microwave		6	6	6	6	6	6	6
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
<b>Name of Family</b>	Heating	
	Cooking	
	Other Electric	
<b>Address of Use</b>	Air Conditioning	
	Water Heating	
	Water	
	Sewer	
	Trash Collection	
	Range/Microwave	
<b>Number of Bedrooms</b>	Refrigerator	
	Other	
	<b>Total</b>	\$

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