

Effective March 1, 2023 with all new moves and annual recertifications

Utility Allowance Schedule

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB Approval No. 25577-0169 exp.7/31/2022

See Public Reporting and Instructions on back.

The following allowances are used to determine the total cost of

Date (mm/dd/yyyy):

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|--|----------------------|--------------------------------|--|-----------------|----------------|------------|--|--|
| tenant-furnished utilities and appliances. | | | \ | •• | | | | |
| Locality: Boulder County Housing & Human | | Unit Type: Multi-Family | | | | | | |
| Services, CO | (Apartment/Townhome) | | | | | | | |
| Utility or Service: City of Boulder & | 0 BR | 1 BR | 2 BR | 3 BR | 4 BR | 5 BR | | |
| Longmont | | Monthly Dollar Allowances | | | | | | |
| Heating | • | | | | | | | |
| a. Natural Gas | \$28.00 | \$33.00 | \$38.00 | \$43.00 | \$49.00 | \$54.00 | | |
| b. Bottle Gas/Propane | \$60.00 | ! | | \$92.00 | \$106.00 | \$115.00 | | |
| c. Electric <i>(avg)</i> | \$18.00 | | | \$36.00 | \$44.00 | \$51.00 | | |
| d. Electric Heat Pump <i>(avg)</i> | \$16.00 | · | \$22.00 | \$25.00 | \$28.00 | \$31.00 | | |
| e. Oil | Ψ10.00 | ψ15.00 | ΨΖΖ.00 | Ψ <u></u> 23.00 | Ψ20.00 | Ψ51.00 | | |
| Cooking | | | | | | | | |
| | \$4.00 | \$4.00 | \$6.00 | \$7.00 | \$9.00 | \$11.00 | | |
| | | · | · · · · · · · · · · · · · · · · · · · | | | | | |
| b. Bottle Gas/Propane | \$7.00 | | | \$16.00 | \$21.00 | \$23.00 | | |
| c. Electric (avg) | \$5.00 | \$5.00 | \$8.00 | \$10.00 | \$13.00 | \$15.00 | | |
| Other Electric & Cooling | 1 . | | | | | | | |
| Other Electric (Lights & Appliances) <i>(avg)</i> | \$18.00 | | · | \$37.00 | \$45.00 | \$53.00 | | |
| Air Conditioning <i>(avg)</i> | \$3.00 | \$4.00 | \$5.00 | \$6.00 | \$8.00 | \$9.00 | | |
| Water Heating | | _ | | | | | | |
| a. Natural Gas | \$8.00 | \$9.00 | \$13.00 | \$17.00 | \$22.00 | \$26.00 | | |
| b. Bottle Gas/Propane | \$18.00 | \$21.00 | \$28.00 | \$37.00 | \$48.00 | \$55.00 | | |
| c. Electric <i>(avg)</i> | \$12.00 | \$14.00 | \$18.00 | \$22.00 | \$26.00 | \$30.00 | | |
| d. Oil | | | | | | | | |
| Water, Sewer, Trash Collection | | | | | | | | |
| Water (avg) | \$31.00 | \$32.00 | \$39.00 | \$48.00 | \$57.00 | \$66.00 | | |
| Sewer (avg) | \$50.00 | \$51.00 | \$60.00 | \$70.00 | \$79.00 | \$89.00 | | |
| Trash Collection (avg) | \$43.00 | \$43.00 | \$43.00 | \$43.00 | \$43.00 | \$43.00 | | |
| Tenant-supplied Appliances | | | <u> </u> | | · | | | |
| Range / Microwave Tenant-supplied | \$11.00 | \$11.00 | \$11.00 | \$11.00 | \$11.00 | \$11.00 | | |
| Refrigerator Tenant-supplied | \$12.00 | | | \$12.00 | \$12.00 | \$12.00 | | |
| Otherspecify: Monthly Charges | 7 | 7 1=100 | 1 1 1 1 1 1 | 7 | 7 1 - 100 | 4 1 = 10 0 | | |
| Electric Charge \$11.74 (avg) | \$12.00 | \$12.00 | \$12.00 | \$12.00 | \$12.00 | \$12.00 | | |
| Natural Gas Charge \$11.58 | \$12.00 | | - | \$12.00 | \$12.00 | \$12.00 | | |
| Actual Family Allowances | | | Utility or Service | | per month cost | | | |
| To be used by the family to compute allowance. Complete below for the actual | | | Heating | | \$ | tir cost | | |
| unit rented. | | | Cooking | | \$ | | | |
| Name of Family | | | Other Electric | | \$ | | | |
| | | | Air Conditioning | | \$ | | | |
| Address of Unit | | | Water Heating Water | | \$ \$ | | | |
| radicus of offic | Sewer | | \$ | | | | | |
| | | | Trash Collection | | \$ | | | |
| | | | Range / Microwave | | \$ | | | |
| | | Refrigerator Other | | \$ \$ | | | | |
| Number of Bedrooms | | Other | | \$ \$ | | | | |
| | | | Total | | \$ | | | |





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Reasonable Accommodation Medical Equipment Allowances

Electric Provider: XCEL Energy & City of Longmont (wtd avg) (avg)

| Item | Hours per Day | Wattage | Monthly kWh | Energy Charge | Utility Allowance |
|----------------------------|------------------|---------|----------------|------------------|----------------------|
| Oxygen Concentrator | 18 | 400 | 223 | 0.1137515 | \$25.00 |
| Nebulizer | 2 | 75 | 5 | 0.1137515 | \$1.00 |
| Electric Hospital Bed | 0.2 | 200 | 1 | 0.1137515 | \$1.00 |
| Alternating Pressure Pad | 24 | 70 | 52 | 0.1137515 | \$6.00 |
| Low Air-Loss Mattress | 24 | 120 | 89 | 0.1137515 | \$10.00 |
| Power Wheelchair/Scooter | 3 | 360 | 33 | 0.1137515 | \$4.00 |
| Feeding Tube Pump | 24 | 120 | 89 | 0.1137515 | \$10.00 |
| CPAP Machine | 10 | 30 | 9 | 0.1137515 | \$1.00 |
| Leg Compression Pump | 24 | 30 | 22 | 0.1137515 | \$3.00 |
| Dialysis Machine/Equipment | 2 | 710 | 44 | 0.1137515 | \$5.00 |

Oxygen Concentrator

Use per day varies, assume 12-14 hours a day. The 5-Liter model uses 400 W, the 3-Liter model uses 320 W.

Nebulizer

A medicine delivery system used mostly for pediatric care. Used 4-6 times a day for 20 minutes at a time at 75W.

Semi/Fully Electric Hospital Bed

Use depends on adjustments. 200 W.

0.14287 0.084633 0.1137515

Alternating Pressure Pad

An air-filled mattress overlay. Used 24 hours a day for someone who is bed-ridden.

Low Air-Loss Mattress

Takes the place of mattress - air -filled pressurized mattress. Cycles air around every 15-20 minutes.

Power Wheelchairs and Scooters

Need to be charged approximately 8 hours every 3 days. Batteries are 120 V, 3 Amp, 360 W.

Feeding Tube Pump (Continuous Feed)

A pump delivers a constant amount of formula throughout the day or night.

CPAP Machine

For Sleep Apnea. Runs only at night for people who have a tendency to stop breathing at night. At maximum pressure use is 40 Watts. On average - 30 Watts

Leg Compression Pump

Provides intensive compression therapy. Use varies, generally from 8-24 hours daily.

Dialysis Machine/Equipment (Small/Portable)

Filters a patient's blood to remove excess water and waste products. Used 2 hours daily.



UTILITY ALLOWANCES MONTHLY FIXED CHARGES Form HUD-52667

<u>Explanation of Utility Provider Monthly Fixed Charges</u> (Monthly Customer Charge - See "Other-specify")

- Fact 1: Utility providers do not separate consumption usage like that required for the form HUD-52667 (by end-uses: Space Heating is Natural Gas; Cooking is Natural Gas; Water Heating is Natural Gas; or Space Heating is Electric; etc.).
- Fact 2: Most utility providers bill their customers a service charge that is not based on usage. It is usually called a Monthly Customer Charge (e.g. Base Charge, Service Availability Charge, etc.). Some utility providers have an ongoing monthly (or Semi-Annual) credit. It is added to (or subtracted from) the customer's bill each month. Even if the client does not use any utilities during the month, they are still billed a monthly service charge.
- Fact 3: Per HUD regulations, Section 8 HCV Utility Allowances are based on the community as-a-whole. Your agency doesn't necessarily know in advance what utilities the tenant will have to pay, or whether the unit has natural gas appliances, bottle gas service, etc.

<u>Service Fixed Charge (Monthly Customer Charge)</u>

Therefore, since the service charge is not based on consumption usage, it cannot be divided equally between the end-uses on the form HUD-52667. That is why HUD supplied a row on the utility allowance schedule labeled "Other-specify". This row is to be used for **any monthly charges** that cannot be divided or combined with any other end-use. Some examples of customer charges: extermination charge for mosquito spraying (which is billed to tenant by the City even though the tenant themselves do not pay for water usage; fire protection charge; street lights; etc.).

Calculating Total Utility Allowances on form HUD-52667

Natural Gas Service Monthly Fixed Charge

When the total utility allowance is calculated for a particular unit which has natural gas appliances, if the tenant pays natural gas utilities, and the utility provider has a monthly service charge, **add the service charge amount once in the "per month cost" column on the form HUD-52667**. It does not matter how many appliances the tenant has that are fueled by natural gas.

Electric Service Monthly Fixed Charge

All dwelling units are supplied with electricity. If the tenant pays for electric utilities and the electric utility provider has a monthly service charge, all allowances will include the service fixed charge amount, but add it only once in the "per month cost" column on the form HUD-52667.

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Description of Unit (Structure/Building) Types (Grouped by use of Energy)

1. Apartment/Walk-Up/Condominium/Garden Apartment/Low-Rise/Flat/Mid-Rise (Multi-Family) – 3 or More Units

Building with a group of individual units with 2 or more common walls; attached to other units; separate entrances, and may have common staircases.

- Each building may have an end unit, inside unit, top unit, bottom unit, etc.
- Usually, but not always, have units on both sides of building.
- Apartments usually have one owner while condominiums are usually individually owned.

2. High-Rise Apartment (Multi-Family) – 5 or More Units

A multi-unit building; 5 or more stories; sharing one or more common entrances (may have elevator).

3. Row House/Townhouse/Triplex/Fourplex/Multiplex (Multi-Family) - 3 or More Units

An individual unit attached to other individual units; 1 or more common walls; separate ground level entrances; 1 or 2 story units.

- Each building will have end units and inside units.
- Fourplex units usually share 2 common walls; can be square-shaped or L-shaped.
- Triplex building can be V-shaped.

4. Semi-Detached/Duplex (Multi-Family)

Building with 2 individual housing units; with separate entrances; one common wall; 1 or 2 story units.

5. Detached House (Single-Family)

A detached building intended to house one family; sits on its own piece of land; not attached to another dwelling.

6. Manufactured/Mobile Home (Single-Family)

A detached movable or portable housing structure; at least 32 feet in length and over 8 feet in width; constructed to be towed on its own chassis and designed to be installed with or without a permanent foundation.

May be 2 or more units fitted together to make one residence.

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