

Utility Allowance Schedule

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

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The following allowances are used to determine the total cost of tenant-furnished utilities and appliances.

| Locality/PHA | | Unit Type | | | | | Date (mm/dd/yyyy) |
|--------------------|----------------|---------------|------|------|------|------|-------------------|
| FY26 Polk County | | Single Family | | | | | 04/01/2026 |
| Utility or Service | | 0 BR | 1 BR | 2 BR | 3 BR | 4 BR | 5 BR |
| Heating | a. Natural Gas | \$20 | \$23 | \$25 | \$27 | \$30 | \$33 |
| | b. Bottle Gas | | | | | | |
| | c. Electric | \$20 | \$24 | \$27 | \$30 | \$34 | \$37 |
| | d. Heat Pump | \$13 | \$15 | \$17 | \$20 | \$22 | \$24 |
| | e. Oil | | | | | | |
| Cooking | a. Natural Gas | \$3 | \$3 | \$5 | \$7 | \$9 | \$10 |
| | b. Bottle Gas | \$3 | \$3 | \$5 | \$7 | \$9 | \$11 |
| | c. Electric | \$5 | \$6 | \$9 | \$11 | \$14 | \$17 |
| Other Electricity | | \$23 | \$28 | \$39 | \$50 | \$61 | \$72 |
| Air Conditioning | | \$10 | \$11 | \$26 | \$40 | \$54 | \$69 |
| Water Heating | a. Natural Gas | \$7 | \$9 | \$12 | \$16 | \$19 | \$23 |
| | b. Bottle Gas | | | | | | |
| | c. Electric | \$13 | \$15 | \$20 | \$24 | \$28 | \$32 |
| | d. Heat Pump | | | | | | |
| | e. Oil | | | | | | |
| Water | | \$31 | \$32 | \$38 | \$45 | \$51 | \$57 |
| Sewer | | \$27 | \$27 | \$32 | \$36 | \$41 | \$45 |
| Trash Collection | | \$24 | \$24 | \$24 | \$24 | \$24 | \$24 |
| Other -- specify | | \$25 | \$25 | \$25 | \$25 | \$25 | \$25 |
| Range/Microwave | | \$11 | \$11 | \$11 | \$11 | \$11 | \$11 |
| Refrigerator | | \$12 | \$12 | \$12 | \$12 | \$12 | \$12 |

Actual Family Allowances - May be used by the family to compute allowance while searching for a unit.

Head of Household Name _____

Unit Address _____

Number of Bedrooms _____

| Utility or Service | per month cost |
|--------------------|-----------------|
| Heating | _____ |
| Cooking | _____ |
| Other Electric | _____ |
| Air Conditioning | _____ |
| Water Heating | _____ |
| Water | _____ |
| Sewer | _____ |
| Trash Collection | _____ |
| Range/Microwave | _____ |
| Refrigerator | _____ |
| Other | _____ |
| Total | \$ _____ |