

EXHIBIT A

Allowance for Tenant-Furnished Utilities and Other Services

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

OMB Approval No. 2577-0169
(exp 9/30/2017)

| Locality | | apartment 4/1/2018 | | | | | Unit Type | Effective |
|--------------------|----------------|---------------------------|------|------|------|------|---|------------|
| | | | | | | | Rowhouse/townhouse Row House/Garden Apt. | 04/01/2018 |
| Utility or Service | | Monthly Dollar Allowances | | | | | | |
| | | 0 BR | 1 BR | 2 BR | 3 BR | 4 BR | 5 BR | |
| Heating | a. Natural Gas | 17 | 20 | 23 | 26 | 28 | 31 | |
| | b. Electric | 14 | 16 | 21 | 25 | 30 | 34 | |
| | c. Bottle Gas | 44 | 54 | 60 | 67 | 73 | 83 | |
| | d. Oil | | | | | | | |
| Cooking | a. Natural Gas | 3 | 3 | 5 | 6 | 9 | 10 | |
| | b. Electric | 5 | 6 | 9 | 12 | 14 | 17 | |
| | c. Bottle Gas | 8 | 8 | 13 | 18 | 23 | 26 | |
| Other Electricity | | 17 | 20 | 29 | 38 | 50 | 63 | |
| Air Conditioning | | 1 | 1 | 2 | 2 | 3 | 3 | |
| Water Heating | a. Natural Gas | 6 | 8 | 12 | 15 | 18 | 22 | |
| | b. Electric | 12 | 14 | 19 | 22 | 26 | 30 | |
| | c. Bottle Gas | 18 | 21 | 31 | 39 | 49 | 57 | |
| | d. Oil | | | | | | | |
| Water | | 20 | 21 | 29 | 38 | 46 | 54 | |
| Sewer | | 32 | 32 | 32 | 32 | 32 | 32 | |
| Trash Collection | | 27 | 27 | 27 | 42 | 42 | 42 | |
| Range/Microwave | | 12 | 12 | 12 | 12 | 12 | 12 | |
| Refrigerator | | 13 | 13 | 13 | 13 | 13 | 13 | |
| Other -- specify | | | | | | | | |

Actual Family Allowances To be used by the family to compute allowance.
Complete below for actual unit rented.

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

Number of Bedrooms

EXHIBIT A

Allowance for Tenant-Furnished Utilities and Other Services

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

OMB Approval No. 2577-0169
(exp 9/30/2017)

| Locality | | single family 4/1/2018 | | | | | Unit Type Single family detached | Effective |
|--------------------|----------------|---------------------------|------|------|------|------|---|-----------|
| Utility or Service | | Monthly Dollar Allowances | | | | | | |
| | | 0 BR | 1 BR | 2 BR | 3 BR | 4 BR | 5 BR | |
| Heating | a. Natural Gas | 25 | 29 | 32 | 37 | 40 | 44 | |
| | b. Electric | 29 | 34 | 40 | 46 | 53 | 60 | |
| | c. Bottle Gas | 65 | 75 | 85 | 96 | 104 | 117 | |
| | d. Oil | | | | | | | |
| Cooking | a. Natural Gas | 3 | 3 | 5 | 6 | 9 | 10 | |
| | b. Electric | 5 | 6 | 9 | 12 | 14 | 17 | |
| | c. Bottle Gas | 8 | 8 | 13 | 18 | 23 | 26 | |
| Other Electricity | | 26 | 31 | 38 | 64 | 82 | 100 | |
| Air Conditioning | | 1 | 1 | 2 | 4 | 5 | 6 | |
| Water Heating | a. Natural Gas | 9 | 10 | 14 | 18 | 23 | 27 | |
| | b. Electric | 15 | 18 | 23 | 28 | 33 | 38 | |
| | c. Bottle Gas | 23 | 26 | 36 | 49 | 60 | 70 | |
| | d. Oil | | | | | | | |
| Water | | 31 | 32 | 40 | 49 | 57 | 66 | |
| Sewer | | 53 | 53 | 53 | 53 | 53 | 53 | |
| Trash Collection | | 27 | 27 | 27 | 42 | 42 | 42 | |
| Range/Microwave | | 12 | 12 | 12 | 12 | 12 | 12 | |
| Refrigerator | | 13 | 13 | 13 | 13 | 13 | 13 | |
| Other -- specify | | | | | | | | |

Actual Family Allowances To be used by the family to compute allowance.
Complete below for actual unit rented.

Name of Family _____

Address of Unit _____

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 | \$ _____ |

EXHIBIT A

Allowance for Tenant-Furnished Utilities and Other Services

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

OMB Approval No. 2577-0169
(exp 9/30/2017)

| Locality | | Unit Type Manufactured home Mobile Home | | | | | Effective |
|-----------------------|----------------|--|------|------|------|------|------------|
| manufactured 4/1/2018 | | | | | | | 04/01/2018 |
| Utility or Service | | Monthly Dollar Allowances | | | | | |
| | | 0 BR | 1 BR | 2 BR | 3 BR | 4 BR | 5 BR |
| Heating | a. Natural Gas | 20 | 25 | 28 | 31 | 35 | 38 |
| | b. Electric | 31 | 37 | 38 | 39 | 40 | 41 |
| | c. Bottle Gas | 54 | 65 | 73 | 83 | 91 | 98 |
| | d. Oil | | | | | | |
| Cooking | a. Natural Gas | 3 | 3 | 5 | 6 | 9 | 10 |
| | b. Electric | 5 | 6 | 9 | 12 | 14 | 17 |
| | c. Bottle Gas | 8 | 8 | 13 | 18 | 23 | 26 |
| Other Electricity | | 26 | 31 | 46 | 64 | 82 | 100 |
| Air Conditioning | | 1 | 1 | 2 | 3 | 4 | 5 |
| Water Heating | a. Natural Gas | 9 | 10 | 14 | 18 | 23 | 27 |
| | b. Electric | 15 | 18 | 23 | 28 | 33 | 38 |
| | c. Bottle Gas | 23 | 26 | 36 | 49 | 60 | 70 |
| | d. Oil | | | | | | |
| Water | | 20 | 21 | 29 | 38 | 46 | 54 |
| Sewer | | 53 | 53 | 53 | 53 | 53 | 53 |
| Trash Collection | | 27 | 27 | 27 | 42 | 42 | 42 |
| Range/Microwave | | 12 | 12 | 12 | 12 | 12 | 12 |
| Refrigerator | | 13 | 13 | 13 | 13 | 13 | 13 |
| Other -- specify | | | | | | | |

Actual Family Allowances To be used by the family to compute allowance.
Complete below for actual unit rented.

| | Utility or Service | per month cost |
|--------------------------|-------------------------|-----------------|
| | <u>Heating</u> | _____ |
| | <u>Cooking</u> | _____ |
| Name of Family _____ | <u>Other Electric</u> | _____ |
| | <u>Air Conditioning</u> | _____ |
| Address of Unit _____ | <u>Water Heating</u> | _____ |
| | <u>Water</u> | _____ |
| | <u>Sewer</u> | _____ |
| | <u>Trash Collection</u> | _____ |
| | <u>Range/Microwave</u> | _____ |
| | <u>Refrigerator</u> | _____ |
| Number of Bedrooms _____ | <u>Other</u> | _____ |
| | <u>_____</u> | _____ |
| | Total | \$ _____ |