

Utility Allowance Schedule

See Public Reporting and Instructions on back.

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

OMB Approval No. 2577-0169
exp. 04/30/2026

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

Locality/PHA		Unit Type					Date (mm/dd/yyyy)	
Wilson Housing Authority, NC - Inside City Limits		Single-Family (Detached House)					08/08/2024	
Utility or Service	Fuel Type	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	Natural Gas	\$33	\$38	\$44	\$49	\$55	\$59	
	Bottled Gas	\$90	\$107	\$121	\$135	\$151	\$162	
	Electric	\$15	\$18	\$21	\$24	\$26	\$29	
	Electric – Heat Pump	\$15	\$18	\$21	\$24	\$26	\$29	
	Fuel Oil	\$83	\$100	\$112	\$129	\$141	\$154	
	Other	N/A	N/A	N/A	N/A	N/A	N/A	
Cooking	Natural Gas	\$4	\$4	\$7	\$8	\$11	\$12	
	Bottled Gas	\$10	\$10	\$17	\$24	\$31	\$35	
	Electric	\$4	\$5	\$7	\$10	\$12	\$14	
	Other	N/A	N/A	N/A	N/A	N/A	N/A	
Other Electric	<i>light, appl., el. fee</i>	\$49	\$54	\$65	\$76	\$87	\$98	
Air Conditioning		\$6	\$7	\$16	\$24	\$33	\$41	
Water Heating	Natural Gas	\$11	\$12	\$18	\$23	\$29	\$36	
	Bottled Gas	\$31	\$35	\$48	\$66	\$79	\$97	
	Electric	\$13	\$15	\$20	\$24	\$28	\$32	
	Electric – Heat Pump	N/A	N/A	N/A	N/A	N/A	N/A	
	Fuel Oil	\$29	\$33	\$45	\$62	\$75	\$91	
Water		\$36	\$37	\$46	\$55	\$65	\$74	
Sewer		\$51	\$53	\$65	\$79	\$91	\$104	
Trash Collection		\$22	\$22	\$22	\$22	\$22	\$22	
Other – specify	<i>Gas fee</i>	\$19	\$19	\$19	\$19	\$19	\$19	
Range/Microwave		\$12	\$12	\$12	\$12	\$12	\$12	
Refrigerator		\$13	\$13	\$13	\$13	\$13	\$13	
Actual Family Allowances – May be used by the family to compute allowance while searching for a unit.					Utility/Service/Appliance		Allowance	
Head of Household Name					Heating			
					Cooking			
					Other Electric			
					Air Conditioning			
Unit Address					Water Heating			
					Water			
					Sewer			
					Trash Collection			
					Other			
Number of Bedrooms					Range/Microwave			
					Refrigerator			
					Total			

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This form includes the utilities that the PHA must consider: heating (space), cooking, other electric (e.g. lights, appliances, general usage), air conditioning (if the majority of housing units in the market provide centrally air-conditioned units or there is appropriate wiring for tenant-installed air conditioners), water heating, water, sewer, trash, the cost to provide a range, and the cost to provide a refrigerator. This form includes several fuel types, however, the PHA is not required to have a utility allowance for every fuel type listed on the form. The PHA is only required to have an allowance for the fuel types that are typical in the PHA's jurisdiction.

Electric resistance vs. electric heat pump: The most recent update to the HUD-52667 includes "Electric Heat Pump" as a fuel type under "Heating" and "Water Heating". PHAs may choose to provide an allowance on the schedule for electric (resistance), electric heat pump, or both. Heat pumps are more efficient and are associated with lower consumption. By adding this to the form, HUD is not requiring PHAs to consider both. This is up to the PHA, however, the [HUD Utility Schedule Model](#) tool available on HUDUser.gov provides an allowance for both electric resistance and electric heat pump.

Determining Allowances: In general, PHAs use local sources of information on the cost of utilities and services, such as:

1. Electric utility suppliers
2. Natural gas utility suppliers
3. Water and sewer suppliers
4. Fuel oil and bottled gas suppliers
5. Public service commissions
6. Real estate and property management firms
7. State and local agencies
8. Appliance sales and leasing firms

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Wilson Housing Authority, NC - Inside City Limits		Mult-Family (Apartment)					08/08/2024	
Utility or Service	Fuel Type	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	Natural Gas	\$23	\$27	\$30	\$34	\$38	\$41	
	Bottled Gas	\$66	\$76	\$83	\$93	\$107	\$114	
	Electric	\$10	\$12	\$15	\$16	\$18	\$20	
	Electric – Heat Pump	\$10	\$12	\$15	\$16	\$18	\$20	
	Fuel Oil	\$58	\$71	\$79	\$87	\$100	\$108	
	Other	N/A	N/A	N/A	N/A	N/A	N/A	
Cooking	Natural Gas	\$4	\$4	\$7	\$8	\$11	\$12	
	Bottled Gas	\$10	\$10	\$17	\$24	\$31	\$35	
	Electric	\$4	\$5	\$7	\$10	\$12	\$14	
	Other	N/A	N/A	N/A	N/A	N/A	N/A	
Other Electric	<i>lights, appl., el. fee</i>	\$41	\$44	\$52	\$60	\$67	\$75	
Air Conditioning		\$8	\$9	\$12	\$16	\$19	\$23	
Water Heating	Natural Gas	\$8	\$10	\$15	\$19	\$23	\$27	
	Bottled Gas	\$24	\$29	\$41	\$52	\$66	\$76	
	Electric	\$10	\$12	\$16	\$19	\$23	\$26	
	Electric – Heat Pump	N/A	N/A	N/A	N/A	N/A	N/A	
	Fuel Oil	\$21	\$25	\$37	\$51	\$62	\$75	
Water		\$36	\$37	\$46	\$55	\$65	\$74	
Sewer		\$51	\$53	\$65	\$79	\$91	\$105	
Trash Collection		\$22	\$22	\$22	\$22	\$22	\$22	
Other – specify	<i>Gas fee</i>	\$19	\$19	\$19	\$19	\$19	\$19	
Range/Microwave		\$12	\$12	\$12	\$12	\$12	\$12	
Refrigerator		\$13	\$13	\$13	\$13	\$13	\$13	
Actual Family Allowances – May be used by the family to compute allowance while searching for a unit.					Utility/Service/Appliance	Allowance		
Head of Household Name					Heating			
					Cooking			
Unit Address					Other Electric			
					Air Conditioning			
					Water Heating			
Number of Bedrooms					Water			
					Sewer			
					Trash Collection			
					Other			
					Range/Microwave			
					Refrigerator			
					Total			

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Locality/PHA		Unit Type					Date (mm/dd/yyyy)	
Wilson Housing Authority, NC - Outside City Limits		Single-Family (Detached House)					08/08/2024	
Utility or Service	Fuel Type	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	Natural Gas	\$35	\$41	\$47	\$52	\$58	\$63	
	Bottled Gas	\$90	\$107	\$121	\$135	\$151	\$162	
	Electric	\$15	\$18	\$21	\$24	\$26	\$29	
	Electric – Heat Pump	\$15	\$18	\$21	\$24	\$26	\$29	
	Fuel Oil	\$83	\$100	\$112	\$129	\$141	\$154	
	Other	N/A	N/A	N/A	N/A	N/A	N/A	
Cooking	Natural Gas	\$4	\$4	\$7	\$9	\$12	\$13	
	Bottled Gas	\$10	\$10	\$17	\$24	\$31	\$35	
	Electric	\$4	\$5	\$7	\$10	\$12	\$14	
	Other	N/A	N/A	N/A	N/A	N/A	N/A	
Other Electric	<i>lights, appl., el. fee</i>	\$38	\$43	\$54	\$65	\$76	\$87	
Air Conditioning		\$6	\$7	\$16	\$24	\$33	\$41	
Water Heating	Natural Gas	\$12	\$13	\$19	\$25	\$31	\$38	
	Bottled Gas	\$31	\$35	\$48	\$66	\$79	\$97	
	Electric	\$13	\$15	\$20	\$24	\$28	\$32	
	Electric – Heat Pump	N/A	N/A	N/A	N/A	N/A	N/A	
	Fuel Oil	\$29	\$33	\$45	\$62	\$75	\$91	
Water		\$54	\$54	\$68	\$76	\$92	\$101	
Sewer		\$454	\$47	\$59	\$73	\$85	\$99	
Trash Collection		\$3	\$3	\$3	\$3	\$3	\$3	
Other – specify	<i>Gas fee</i>	\$10	\$10	\$10	\$10	\$10	\$10	
Range/Microwave		\$12	\$12	\$12	\$12	\$12	\$12	
Refrigerator		\$13	\$13	\$13	\$13	\$13	\$13	
Actual Family Allowances – May be used by the family to compute allowance while searching for a unit.					Utility/Service/Appliance		Allowance	
Head of Household Name					Heating			
					Cooking			
					Other Electric			
					Air Conditioning			
Unit Address					Water Heating			
					Water			
					Sewer			
					Trash Collection			
					Other			
Number of Bedrooms					Range/Microwave			
					Refrigerator			
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Cooking	Natural Gas	\$4	\$4	\$7	\$9	\$12	\$13	
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Other Electric	<i>lights, appl., e.l. fee</i>	\$31	\$34	\$42	\$50	\$57	\$65	
Air Conditioning		\$8	\$9	\$12	\$16	\$19	\$23	
Water Heating	Natural Gas	\$9	\$10	\$16	\$20	\$25	\$29	
	Bottled Gas	\$24	\$29	\$41	\$52	\$66	\$76	
	Electric	\$10	\$12	\$16	\$19	\$23	\$26	
	Electric – Heat Pump	N/A	N/A	N/A	N/A	N/A	N/A	
	Fuel Oil	\$21	\$25	\$37	\$51	\$62	\$75	
Water		\$54	\$54	\$68	\$76	\$92	\$101	
Sewer		\$45	\$47	\$59	\$73	\$85	\$99	
Trash Collection		\$3	\$3	\$3	\$3	\$3	\$3	
Other – specify	<i>Gas fee</i>	\$10	\$10	\$10	\$10	\$10	\$10	
Range/Microwave		\$12	\$12	\$12	\$12	\$12	\$12	
Refrigerator		\$13	\$13	\$13	\$13	\$13	\$13	
Actual Family Allowances – May be used by the family to compute allowance while searching for a unit.					Utility/Service/Appliance	Allowance		
Head of Household Name					Heating			
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Unit Address					Other Electric			
					Air Conditioning			
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Reasonable Accommodation Medical Equipment Allowances

Wilson Energy, Aug. 8, 2024

Item	Hours per Day	Wattage	Monthly kWh	Energy Charge	Utility Allowance
Oxygen Concentrator	18	400	219	0.1	\$22.00
Nebulizer	2	75	5	0.1	\$1.00
Electric Hospital Bed	0.2	200	1	0.1	\$1.00
Alternating Pressure Pad	24	70	51	0.1	\$5.00
Low Air-Loss Mattress	24	120	88	0.1	\$9.00
Power Wheelchair/Scooter	3	360	33	0.1	\$3.00
CPAP Machine	10	30	9	0.1	\$1.00

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.

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.

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

Note – All allowances are rounded to the nearest dollar with a minimum of \$1

