

**Allowances for
 Tenant-Furnished Utilities
 and Other Services**

See Public Reporting Statement and Instructions on back.

Locality		Unit Type					Date (mm/dd/yyyy)
STATE OF VERMONT		SINGLE-FAMILY					07/01/2009
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	82	100	119	137	156	156
	b. Bottle Gas	95	133	172	211	249	249
	c. Electric	116	123	129	136	143	143
	d. Kerosene	146	158	170	182	194	206
	e. Wood	91	96	100	103	106	106
	f. Oil	93	132	171	210	249	249
Cooking	a. Natural Gas	3	4	4	5	6	6
	b. Bottle Gas	5	6	7	8	9	9
	c. Electric	6	7	8	9	11	11
	d.						
Other Electric		10	25	39	53	67	67
Air Conditioning							
Water Heating	a. Natural Gas	34	42	50	58	66	66
	b. Bottle Gas	52	64	77	89	102	102
	c. Electric	10	25	39	53	67	67
	d. Oil	42	58	75	91	107	107
Water							
Sewer							
Trash Collection		30	30	30	30	30	30
Trash Collection-Drop Off		9	9	18	18	18	18
Refrigerator							
Other -- Specify							

Actual Family Allowances To be used by the family to compute allowance. Complete below for the actual unit rented.		Utility or Service	per month cost
Name of Family	Address of Unit	Heating	\$
		Cooking	
		Other Electric	
		Air Conditioning	
		Water Heating	
		Water	
		Sewer	
		Trash Collection	
		Range/Microwave	
		Refrigerator	
Number of Bedrooms		Other	
		Total	\$

Allowances for
 Tenant-Furnished Utilities
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Locality		Unit Type Low-rise					Date (mm/dd/yyyy)
STATE OF VERMONT		MULTI-FAMILY					07/01/2009
Utility or Service		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	57	75	94	112	131	131
	b. Bottle Gas	30	69	108	146	185	185
	c. Electric	63	70	77	83	90	90
	d. Oil	77	116	155	195	234	234
Cooking	a. Natural Gas	3	4	4	5	6	6
	b. Bottle Gas	5	6	7	8	9	9
	c. Electric	6	7	8	9	11	11
	d.						
Other Electric		7	22	36	50	65	65
Air Conditioning							
Water Heating	a. Natural Gas	12	20	28	36	44	44
	b. Bottle Gas	18	30	43	55	68	68
	c. Electric	7	22	36	50	65	65
	d. Oil	21	37	53	70	86	86
Water							
Sewer							
Trash Collection		30	30	30	30	30	30
Trash Collection-Drop Off		9	9	18	18	18	18
Refrigerator							
Other -- Specify							

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