U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Locality		Unit Type			Date
Georgia North		Manufactured H	lome		
Utility or Service			-		
		6 BR			
Heating	a. Natural Gas	37			
	b. Bottle Gas	168			
	c. Electric	53			
	d. Heat Pump	50			
Cooking	a. Natural Gas	9			
	b. Bottle Gas	39			
	c. Electric	20			
		-			
Other Electric		58			
Air Conditioning		22			
Water Heating	a. Natural Gas	16			
	b. Bottle Gas	65			
	c. Electric	40			
		-			
Water		57			
Sewer		64			
Trash Collection		23			
Range/Microwave		11			
Refrigerator		13			
Other -	Monthly Gas Fee	41			
	Monthly Electric Fee	23			
Actual Family Allo	wances To be used by the	family to compute a	llowance.	Utility or Service	per month cost
Complete below fo	or the actual unit rented			Space Heating	
Name of Family				Cooking	
				Other Electric	
				Air Conditioning	
				Water Heating	
Unit Address				Water	
				Sewer	
				Trash Collection	
				Range/Microwave	
Number of Bedrooms				Refrigerator	
				Other	
				Total	

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Locality		Unit Type					Date
Georgia North		Single Fam	ily Detach	ed			
Utility or Service							
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	12	16	21	26	33	38
	b. Bottle Gas	45	65	84	103	132	149
	c. Electric	15	21	27	33	42	47
	d. Heat Pump	17	26	30	34	45	50
Cooking	a. Natural Gas	3	4	5	6	7	8
	b. Bottle Gas	10	16	19	23	29	36
	c. Electric	6	8	10	12	16	18
		-	-	-	-	-	-
Other Electric		18	25	32	39	50	57
Air Conditioning		7	9	12	15	19	21
Water Heating	a. Natural Gas	4	6	8	10	12	14
	b. Bottle Gas	16	23	32	39	45	58
	c. Electric	9	15	20	25	30	35
		-	-	-	-	-	-
Water		23	27	31	38	44	49
Sewer		22	27	32	40	49	54
Trash Collection		23	23	23	23	23	23
Range/Microwave		11	11	11	11	11	11
Refrigerator		13	13	13	13	13	13
Other -	Monthly Gas Fee	41	41	41	41	41	41
	Monthly Electric Fee	23	23	23	23	23	23
Actual Family Allo	wances To be used by the	family to comp	ute allowan	ce.	Utility or Service	е	per month cost
Complete below for	or the actual unit rented				Space Heati	ng	
Name of Family					Cooking		
					Other Electri	ic	
					Air Condition	ning	
					Water Heatir	ng	
Unit Address					Water		
					Sewer		
					Trash Collec	tion	
					Range/Micro	wave	
Number of Bedrooms					Refrigerator		
					Other		
					Total		

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Locality		Unit Type			Date
Georgia North		Single Family De	etached		
Utility or Service					
		6 BR			
Heating	a. Natural Gas	43			
	b. Bottle Gas	168			
	c. Electric	53			
	d. Heat Pump	50			
Cooking	a. Natural Gas	9			
	b. Bottle Gas	39			
	c. Electric	20			
		-			
Other Electric		65			
Air Conditioning		24			
Water Heating	a. Natural Gas	16			
	b. Bottle Gas	65			
	c. Electric	40			
		-			
Water		57			
Sewer		64			
Trash Collection		23			
Range/Microwave		11			
Refrigerator		13			
Other -	Monthly Gas Fee	41			
	Monthly Electric Fee	23			
Actual Family Allo	wances To be used by the	family to compute a	llowance.	Utility or Service	per month cost
Complete below fo	or the actual unit rented			Space Heating	
Name of Family				Cooking	
				Other Electric	
				Air Conditioning	
				Water Heating	
Unit Address				Water	
				Sewer	
				Trash Collection	
				Range/Microwave	
Number of Bedrooms				Refrigerator	
				Other	
				Total	

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Office of Public and Indian Housing

Locality		Unit Type					Date		
Georgia North		Semi-Detac	hed (Duple	ex)					
Utility or Service		Monthly Dollar Allowances							
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR		
Heating	a. Natural Gas	11	15	20	25	32	36		
	b. Bottle Gas	42	61	81	97	123	139		
	c. Electric	14	19	25	31	39	45		
	d. Heat Pump	8	12	13	15	21	23		
Cooking	a. Natural Gas	3	4	5	6	7	8		
	b. Bottle Gas	10	16	19	23	29	36		
	c. Electric	6	8	10	12	16	18		
		-	-	-	-	-	-		
Other Electric		18	25	32	39	50	57		
Air Conditioning		7	9	12	15	19	21		
Water Heating	a. Natural Gas	4	6	8	10	12	14		
	b. Bottle Gas	16	23	32	39	45	58		
	c. Electric	9	15	20	25	30	35		
		-	-	-	-	-	-		
Water		23	27	31	38	44	49		
Sewer		22	27	32	40	49	54		
Trash Collection		23	23	23	23	23	23		
Range/Microwave		11	11	11	11	11	11		
Refrigerator		13	13	13	13	13	13		
Other -	Monthly Gas Fee	41	41	41	41	41	41		
	Monthly Electric Fee	23	23	23	23	23	23		
Actual Family Allo	wances To be used by the	family to comp	ute allowand	ce.	Utility or Service	е	per month cost		
Complete below fo	r the actual unit rented				Space Heati	ng			
Name of Family					Cooking				
					Other Electri	ic			
					Air Condition	ning			
					Water Heatin	 ng			
Unit Address					Water				
					Sewer				
					Trash Collec	tion			
					Range/Micro	wave			
Number of Bedrooms					Refrigerator				
					Other				
					Total				

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Locality		Unit Type	Unit Type					
Georgia North		Semi-Detached	(Duplex)					
Utility or Service			Monthly Dollar Allowances					
		6 BR						
Heating	a. Natural Gas	39						
	b. Bottle Gas	149						
	c. Electric	49						
	d. Heat Pump	51						
Cooking	a. Natural Gas	9						
	b. Bottle Gas	39						
	c. Electric	20						
Other Electric		62						
Air Conditioning		23		+				
Water Heating	a. Natural Gas	16		+				
Water Fredam's	b. Bottle Gas	61						
	c. Electric	39						
	0. 2.001.10	-						
Water		57						
Sewer		64						
Trash Collection		23						
Range/Microwave		11						
Refrigerator		13						
Other -	Monthly Gas Fee	41						
	Monthly Electric Fee	23						
Actual Family Allo	owances To be used by the	family to compute a	llowance.	Utility or Service	per month cost			
Complete below for	or the actual unit rented			Space Heating				
Name of Family				Cooking				
				Other Electric				
				Air Conditioning				
				Water Heating				
Unit Address				Water				
				Sewer				
				Trash Collection				
		Range/Microwave						
Number of Bedrooms				Refrigerator				
				Other				
				Total				

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Office of Public and Indian Housing

Locality		Unit Type					Date	
Georgia North		Row/ Town	Row/ Town House					
Utility or Service								
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas	10	15	19	23	30	34	
	b. Bottle Gas	42	58	74	94	107	120	
	c. Electric	14	19	24	30	38	43	
	d. Heat Pump	8	10	12	17	21	23	
Cooking	a. Natural Gas	3	4	5	6	7	8	
	b. Bottle Gas	10	16	19	23	29	36	
	c. Electric	6	8	10	12	16	18	
		-	-	-	-	-	-	
Other Electric		16	23	29	35	45	52	
Air Conditioning		6	8	11	13	17	19	
Water Heating	a. Natural Gas	4	6	8	10	12	14	
	b. Bottle Gas	16	23	32	39	45	58	
	c. Electric	9	15	20	25	30	35	
		-	-	-	-	-	-	
Water		23	27	31	38	44	49	
Sewer		22	27	32	40	49	54	
Trash Collection		23	23	23	23	23	23	
Range/Microwave		11	11	11	11	11	11	
Refrigerator		13	13	13	13	13	13	
Other -	Monthly Gas Fee	41	41	41	41	41	41	
	Monthly Electric Fee	23	23	23	23	23	23	
Actual Family Allo	wances To be used by the	family to comp	ute allowan	ce.	Utility or Servic	e	per month cost	
Complete below fo	or the actual unit rented				Space Heati	ng		
Name of Family					Cooking			
					Other Electr	ic		
					Air Conditio	ning		
					Water Heati	ng		
Unit Address					Water			
					Sewer			
					Trash Collec	tion		
					Range/Micro	wave		
Number of Bedrooms					Refrigerator			
					Other			
					Total			

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Locality		Unit Type			Date
Georgia North		Row/Town Hou	se		
Utility or Service			Monthly	Dollar Allowances	
		6 BR			
Heating	a. Natural Gas	38			
	b. Bottle Gas	149			
	c. Electric	48			
	d. Heat Pump	23			
Cooking	a. Natural Gas	9			
	b. Bottle Gas	45			
	c. Electric	20			
		-			
Other Electric		58			
Air Conditioning		22			
Water Heating	a. Natural Gas	16			
	b. Bottle Gas	65			
	c. Electric	40			
		-			
Water		57			
Sewer		64			
Trash Collection		23			
Range/Microwave		11			
Refrigerator		13			
Other -	Monthly Gas Fee	41			
	Monthly Electric Fee	23			
Actual Family Allo	wances To be used by the	family to compute a	illowance.	Utility or Service	per month cost
Complete below fo	r the actual unit rented			Space Heating	
Name of Family				Cooking	
				Other Electric	
				Air Conditioning	
				Water Heating	
Unit Address				Water	
				Sewer	
				Trash Collection	ı
					/e
Number of Bedrooms				Refrigerator	
				Other	
				Total	

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Office of Public and Indian Housing

Locality		Unit Type					Date		
Georgia North		Low-Rise A	partment						
Utility or Service		Monthly Dollar Allowances							
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR		
Heating	a. Natural Gas	9	14	16	21	28	32		
	b. Bottle Gas	36	54	65	84	110	129		
	c. Electric	13	18	21	27	32	39		
	d. Heat Pump	8	10	12	17	21	23		
Cooking	a. Natural Gas	3	4	5	6	7	8		
	b. Bottle Gas	10	16	19	23	29	36		
	c. Electric	6	8	10	12	16	18		
		-	-	-	-	-	-		
Other Electric		16	23	29	35	45	52		
Air Conditioning		5	7	10	13	15	17		
Water Heating	a. Natural Gas	4	6	8	10	12	14		
	b. Bottle Gas	16	23	32	39	45	58		
	c. Electric	9	15	20	25	30	35		
		-	-	-	-	-	-		
Water		23	27	31	38	44	49		
Sewer		22	27	32	40	49	54		
Trash Collection		23	23	23	23	23	23		
Range/Microwave)	11	11	11	11	11	11		
Refrigerator		13	13	13	13	13	13		
Other -	Monthly Gas Fee	41	41	41	41	41	41		
	Monthly Electric Fee	23	23	23	23	23	23		
Actual Family All	owances To be used by the	family to comp	oute allowan	ce.	Utility or Service		per month cost		
Complete below f	or the actual unit rented				Space Heati	ng			
Name of Family					Cooking				
					Other Electr	ic			
					Air Conditio	ning			
					Water Heati	ng			
Unit Address					Water				
					Sewer				
					Trash Collec	ction			
					Range/Micro	owave			
Number of Bedrooms					Refrigerator				
					Other				
					Total				

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Locality		Unit Type					Date
Georgia North		Low-Rise A	Apartment	t			
Utility or Service				Monthly D	ollar Allowances		
		6 BR					
Heating	a. Natural Gas	37					
	b. Bottle Gas	132					
	c. Electric	43					
	d. Heat Pump	23					
Cooking	a. Natural Gas	9					
	b. Bottle Gas	39					
	c. Electric	20					
		-					
Other Electric		58					
Air Conditioning		20					
Water Heating	a. Natural Gas	16					
	b. Bottle Gas	65					
	c. Electric	40					
	•	-					
Water		57					
Sewer		64					
Trash Collection		23					
Range/Microwave		11					
Refrigerator		13					
Other -	Monthly Gas Fee	41					
	Monthly Electric Fee	23					
Actual Family All	owances To be used by the	family to com	pute allowa	nce.	Utility or Serv	rice	per month cost
Complete below f	or the actual unit rented				Space Hea	iting	
Name of Family					Cooking		
					Other Elec	tric	
					Air Conditi	oning	
					Water Hea	ting	
Unit Address					Water		
					Sewer		
					Trash Coll	ection	
			Range/Mic				
Number of Bedrooms					Refrigerato		
					Other		
					Total		

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Locality		Unit Type					Date
Georgia North		Elevator/Hi	gh-Rise				
Utility or Service							
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Heating	a. Natural Gas	8	11	14	17	21	25
	b. Bottle Gas	32	45	54	68	84	97
	c. Electric	10	14	18	21	27	31
	d. Heat Pump	8	10	12	17	21	23
Cooking	a. Natural Gas	3	4	5	6	7	8
	b. Bottle Gas	10	16	19	23	29	36
	c. Electric	6	8	10	12	16	18
		-	-	-	-	-	-
Other Electric		16	23	29	35	45	52
Air Conditioning		5	7	10	13	15	17
Water Heating	a. Natural Gas	4	6	8	10	12	14
	b. Bottle Gas	16	23	32	39	45	58
	c. Electric	9	15	20	25	30	35
		-	-	-	-	-	-
Water		23	27	31	38	44	49
Sewer		22	27	32	40	49	54
Trash Collection		23	23	23	23	23	23
Range/Microwave		11	11	11	11	11	11
Refrigerator		13	13	13	13	13	13
Other -	Monthly Gas Fee	41	41	41	41	41	41
	Monthly Electric Fee	23	23	23	23	23	23
Actual Family Allo	wances To be used by the f	family to comp	ute allowan	ce.	Utility or Service	Э	per month cost
Complete below fo	r the actual unit rented				Space Heati	ng	
Name of Family					Cooking		
					Other Electri	С	
					Air Condition	ning	
					Water Heati	ng	
Unit Address					Water		
					Sewer		
					Trash Collec	tion	
					Range/Micro	wave	
Number of Bedrooms					Refrigerator		
					Other		
					Total		

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Office of Public and Indian Housing

Locality		Unit Type			Date
Georgia North		Elevator/High-R	ise		
Utility or Service			Monthly	Dollar Allowances	_
		6 BR			
Heating	a. Natural Gas	31			
	b. Bottle Gas	110			
	c. Electric	35			
	d. Heat Pump	23			
Cooking	a. Natural Gas	9			
	b. Bottle Gas	39			
	c. Electric	20			
		-			
Other Electric		58			
Air Conditioning		20			
Water Heating	a. Natural Gas	16			
	b. Bottle Gas	66			
	c. Electric	65			
		-			
Water		57			
Sewer		64			
Trash Collection		23			
Range/Microwave		11			
Refrigerator		13			
Other -	Monthly Gas Fee	41			
	Monthly Electric Fee	23			
Actual Family Allo	wances To be used by the	family to compute a	llowance.	Utility or Service	per month cost
Complete below fo	or the actual unit rented			Space Heating	
Name of Family				Cooking	
				Other Electric	
				Air Conditioning	5
				Water Heating	
Unit Address				Water	
				Sewer	
				Trash Collection	1
				Range/Microway	ve
Number of Bedrooms				Refrigerator	
				Other	
				Total	

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0169

(exp. 04/30/2026)

Locality		Unit Type					Date		
Georgia North		Manufactur	ed Home						
Utility or Service		Monthly Dollar Allowances							
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR		
Heating	a. Natural Gas	12	16	21	26	33	38		
	b. Bottle Gas	45	65	84	103	132	149		
	c. Electric	15	21	27	33	42	47		
	d. Heat Pump	17	26	30	34	45	50		
Cooking	a. Natural Gas	3	4	5	6	7	8		
	b. Bottle Gas	10	16	19	23	29	36		
	c. Electric	6	8	10	12	16	18		
		-	-	-	-	-	-		
Other Electric		16	23	29	35	45	52		
Air Conditioning		6	8	11	13	17	19		
Water Heating	a. Natural Gas	4	6	8	10	12	14		
	b. Bottle Gas	16	23	32	39	45	58		
	c. Electric	9	15	20	25	30	35		
		-	-	-	-	-	-		
Water		23	27	31	38	44	49		
Sewer		22	27	32	40	49	54		
Trash Collection		23	23	23	23	23	23		
Range/Microwave		11	11	11	11	11	11		
Refrigerator		13	13	13	13	13	13		
Other -	Monthly Gas Fee	41	41	41	41	41	41		
	Monthly Electric Fee	23	23	23	23	23	23		
Actual Family Allo	wances To be used by the t	family to comp	ute allowand	ce.	Utility or Service	e	per month cost		
Complete below fo	r the actual unit rented				Space Heati				
Name of Family					Cooking				
					Other Electri	C			
					Air Condition	ning			
					Water Heatin				
Unit Address					Water				
					Sewer				
					Trash Collec	tion			
					Range/Micro	wave			
Number of Bedrooms					Refrigerator				
					Other				
					Total				