

# Utility Allowance Schedule

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

OMB Approval No. 2577-0169  
(exp 7/31/2022)

Mesquite Housing

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

Secondary -  
Seagraville

Locality/PHA: **1/2021 APT/TOWNHOME** Unit Type: **Rowhouse/townhouse**  
**Row House/Garden Apt.** Date (mm/dd/yyyy): **01/01/2021**

Utility or Service	Monthly Dollar Allowances						
	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR	
Heating	a. Natural Gas	27	28	29	30	32	33
	b. Electric	11	13	14	15	17	18
	c. Bottle Gas						
	d. Oil						
	e. Heat Pump						
Cooking	a. Natural Gas	2	2	3	4	5	6
	b. Electric	6	7	10	13	16	17
	c. Bottle Gas						
Other Electricity	21	25	35	45	55	65	
Air Conditioning	16	18	24	31	37	44	
Water Heating	a. Natural Gas	4	4	6	8	10	12
	b. Electric	13	15	20	23	26	29
	c. Bottle Gas						
	d. Oil						
Water	14	14	16	18	20	22	
Sewer	15	15	18	21	25	29	
Trash Collection	20	20	20	20	20	20	
Other -- specify							
Range/Microwave	10	10	10	10	10	10	
Refrigerator	14	14	14	14	14	14	

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

Head of Household Name

Unit Address

1BR - \$78.00  
2BR - \$103.00

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	
<b>Total</b>	<b>\$</b>

QUEST ASSET MANAGEMENT, INC.

PROPERTY NAME  
ADDRESS  
CITY, STATE, ZIP  
PHONE / FAX

UTILITY ALLOWANCE CONFIRMATION

Date: Jan 7, 2021

Mesquite Housing  
Name of Housing Authority

Phone: (972) 389-8727

1616 D. Galloway Ave.  
Address

Fax: (972) 216-6429

Mesquite TX 75149  
City, State, Zip Code

To Whom It May Concern:

Could you please provide us with a current copy of the Utility Allowance that is being used as of today? We will need the Utility Allowance Worksheet for Multifamily apartments.

Is this the current Utility Allowance Worksheet that is being used?

Yes  No

Do you anticipate any changes to the UA? Yes  No

If, yes please provide us with a date. \_\_\_\_\_.

Marcy Lovell  
Representative Printed Name

Phone: (972) 339-8343

[Signature]  
Signature of Representative

Fax: (972) 216-6429

1-7-2021  
Date

Thank you,

\_\_\_\_\_  
Property Manager