

Bloomington HRA Utility Allowance/Rent Reasonableness Form

_____ Housing Choice Voucher

_____ Rental Homes

Client Name: _____

Owner Name: _____

Address: _____

Address: _____

Circle utilities paid by Tenant or appliances owned by Tenant

M=Multiple Dwelling T/D=Townhome/Duplex SF=Single Family House

Utility/Service	0 Br	1 Br	2 Br	3 Br	4 Br	5 BR
	M-T/D-SF	M-T/D-SF	M-T/D-SF	M-T/D-SF	M-T/D-SF	M-T/D-SF
Heating: a. Gas	41 50 54	46 56 62	53 71 75	59 88 93	66 105 110	72 122 128
b. Oil	116 146 166	137 172 195	161 200 230	185 229 264	210 258 299	233 286 333
c. Electric	31 44 73	36 52 86	49 68 101	63 85 116	76 101 131	89 117 146
Cooking: a. Gas	5	5	7	8	10	12
b. Electric	6	7	11	14	17	20
Other Electric: (lights)	34 41 44	45 55 60	56 69 76	67 83 92	78 98 107	89 112 123
Water Heating: a. Gas	10	11	16	21	25	30
b. Electric	21	25	32	39	45	52
Water	10	14	19	23	29	33
Sewer	15	22	28	34	43	50
Trash Collection	32	32	34	36	36	36
Range	4	4	4	4	4	4
Refrigeration	4	4	4	4	4	4
Total Allowance for this Unit:						

Payment Standard \$ _____

Proposed Contract Rent \$ _____

Utility Allowance \$ _____

Gross Rent \$ _____

_____ The requested rent meets the appropriate PS and is considered reasonable based on current rents for comparable unassisted units.

_____ The requested rent exceeds the current voucher PS, but is considered reasonable.

_____ The requested rent has been determined unreasonable and the client has been informed.

_____ Comparable rent for similar size and type of unit (with comparable amenities) \$ _____.

Name of apartment complex or address _____.

I certify that this rent is reasonable in relation to rents currently being charged for comparable units, and this rent is not in excess of rents currently being charged by the owner for comparable unassisted units and have evaluated the unit in consideration of: location, size, type, quality, age of unit, amenities, housing services, maintenance and utilities supplied by owner.

_____, Program Specialist II _____

Signature of HRA Representative

Date

Rent Reasonableness Audited by: _____