

**Section 8 Existing Housing Allowances for
Tenant-Furnished Utilities and Other Services**

Richfield, MN

Effective 01/01/2025

UNIT SIZE AND TYPE

	-0-			-1-			-2-			-3-			-4-			-5-		
	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																		
Natural Gas	32	39	42	36	43	48	41	55	58	46	67	71	51	80	84	55	92	97
Electric	36	52	86	42	61	101	58	80	119	73	99	136	89	119	154	105	138	172
Cooking																		
Natural Gas	4			4			5			6			7			8		
Electric	7			9			13			16			20			24		
Other Electric	35	43	47	45	56	61	58	72	80	71	89	98	84	105	116	97	122	135
Water Heating																		
Natural Gas	7			8			12			15			18			22		
Electric	25			29			37			45			53			61		
Water	11			15			20			24			31			35		
Sewer	15			21			27			32			41			48		
Trash *	25			25			25			25			25			25		

*Includes required recycle fee for Richfield

M = Multiple Dwelling
T/D - Townhouses and Duplexes
SF = Single Family

I certify that the rent of _____ is reasonable for the unit. I have conducted a rent reasonableness review. It has been determined that the rent does not exceed rents charged for unassisted units.

Initial _____ Date _____