



REVIEW AND COMMENT

HCVP UTILITY ALLOWANCE SCHEDULE

EFFECTIVE 12/01/2020

24 CFR §982.517(c)(1) stipulates "a PHA must review its schedule of utility allowances each year, and must revise its allowance for a utility category if there PHAs been a change of 10 percent or more in the utility rate since the last time the utility allowance schedule was revised. The PHA must maintain information supporting its annual review of utility allowances and any revisions made in its utility allowance schedule."

To complete the utility rate analysis, the Nelrod Company obtained current rates for electricity, natural gas, bottle gas/propane, water and sewer rates, and trash collection charges from the various providers of Knox County, Illinois. Once the data was collected, comparisons were made to the previously applied rates and charges. Further, HUD's Utility Schedule Model for Section 8 was utilized for the development of consumption averages by unit size. Based on the results of the utility study, the Nelrod Company has recommended a revision to the KCHA Housing Choice Voucher Program Utility Allowance Schedule. The Nelrod Company has provided support documentation for its analysis and recommendation.

The proposed Knox County Housing Authority HCVP Utility Allowance schedule shall be presented to the Board of Commissioners for adoption on 10/27/2020.

Please submit all questions or comments regarding this information to us in writing to:

Knox County Housing Authority
Flat Rent Review and Comment
Attn: Derek Antoine
216 W. Simmons St.
Galesburg, IL 61401
309.342.8129 EXT. 223
309.342.7206 FAX
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Utility Allowance Schedule

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

OMB Approval
No. 25577-0169
exp.7/31/2022

See Public Reporting and Instructions on back.

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

Date (mm/dd/yyyy):

Locality: **Knox County Housing Authority, IL** Unit Type: **Apartment**

Utility or Service:	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
	Monthly Dollar Allowances					

Heating						
a. Natural Gas (avg)	\$13.00	\$15.00	\$17.00	\$20.00	\$23.00	\$25.00
b. Bottle Gas/Propane	\$35.00	\$41.00	\$47.00	\$55.00	\$62.00	\$69.00
c. Electric (avg)	\$20.00	\$23.00	\$32.00	\$40.00	\$48.00	\$57.00
d. Electric Heat Pump (avg)	\$18.00	\$21.00	\$25.00	\$28.00	\$31.00	\$34.00
e. Oil						

Cooking						
a. Natural Gas (avg)	\$1.00	\$1.00	\$2.00	\$3.00	\$4.00	\$4.00
b. Bottle Gas/Propane	\$4.00	\$4.00	\$6.00	\$9.00	\$11.00	\$12.00
c. Electric (avg)	\$5.00	\$6.00	\$8.00	\$10.00	\$13.00	\$15.00

Other Electric & Cooling						
Other Electric (Lights & Appliances) (avg)	\$18.00	\$21.00	\$29.00	\$37.00	\$45.00	\$53.00
Air Conditioning (avg)	\$5.00	\$5.00	\$7.00	\$10.00	\$11.00	\$14.00

Water Heating						
a. Natural Gas (avg)	\$3.00	\$4.00	\$6.00	\$7.00	\$9.00	\$11.00
b. Bottle Gas/Propane	\$10.00	\$11.00	\$16.00	\$20.00	\$26.00	\$30.00
c. Electric (avg)	\$12.00	\$15.00	\$19.00	\$23.00	\$27.00	\$30.00
d. Oil						

Water, Sewer, Trash Collection						
Water	See Attached Water, Sewer & Trash Collection Schedule					
Sewer						
Trash Collection						

Tenant-supplied Appliances						
Range / Microwave Tenant-supplied	\$11.00	\$11.00	\$11.00	\$11.00	\$11.00	\$11.00
Refrigerator Tenant-supplied	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00

Other--specify: Monthly Charges						
Electric Charge \$17.17 (avg)	\$17.00	\$17.00	\$17.00	\$17.00	\$17.00	\$17.00
Natural Gas Charge \$22.24 (avg)	\$22.00	\$22.00	\$22.00	\$22.00	\$22.00	\$22.00

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



Utility Allowance Schedule

See Public Reporting and Instructions on back.

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

Date (mm/dd/yyyy):

Locality: Knox County Housing Authority, IL		Unit Type: Row House/Townhouse/Semi-Detached/Duplex				
Utility or Service:	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Monthly Dollar Allowances						
Heating						
a. Natural Gas (avg)	\$16.00	\$19.00	\$22.00	\$25.00	\$28.00	\$31.00
b. Bottle Gas/Propane	\$45.00	\$51.00	\$59.00	\$69.00	\$77.00	\$86.00
c. Electric (avg)	\$29.00	\$34.00	\$44.00	\$54.00	\$65.00	\$74.00
d. Electric Heat Pump (avg)	\$21.00	\$25.00	\$30.00	\$33.00	\$37.00	\$41.00
e. Oil						
Cooking						
a. Natural Gas (avg)	\$1.00	\$1.00	\$2.00	\$3.00	\$4.00	\$4.00
b. Bottle Gas/Propane	\$4.00	\$4.00	\$6.00	\$9.00	\$11.00	\$12.00
c. Electric (avg)	\$5.00	\$6.00	\$8.00	\$10.00	\$13.00	\$15.00
Other Electric & Cooling						
Other Electric (Lights & Appliances) (avg)	\$22.00	\$26.00	\$37.00	\$47.00	\$57.00	\$67.00
Air Conditioning (avg)	\$4.00	\$5.00	\$9.00	\$13.00	\$17.00	\$20.00
Water Heating						
a. Natural Gas (avg)	\$4.00	\$5.00	\$7.00	\$9.00	\$12.00	\$14.00
b. Bottle Gas/Propane	\$12.00	\$14.00	\$20.00	\$26.00	\$32.00	\$38.00
c. Electric (avg)	\$15.00	\$18.00	\$23.00	\$28.00	\$33.00	\$38.00
d. Oil						
Water, Sewer, Trash Collection						
Water	See Attached Water, Sewer & Trash Collection Schedule					
Sewer						
Trash Collection						
Tenant-supplied Appliances						
Range / Microwave Tenant-supplied	\$11.00	\$11.00	\$11.00	\$11.00	\$11.00	\$11.00
Refrigerator Tenant-supplied	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00
Other--specify: Monthly Charges						
Electric Charge \$17.17 (avg)	\$17.00	\$17.00	\$17.00	\$17.00	\$17.00	\$17.00
Natural Gas Charge \$22.24 (avg)	\$22.00	\$22.00	\$22.00	\$22.00	\$22.00	\$22.00
Actual Family Allowances		Utility or Service		per month cost		
To be used by the family to compute allowance. Complete below for the actual unit rented.		Heating		\$		
		Cooking		\$		
Name of Family		Other Electric		\$		
		Air Conditioning		\$		
		Water Heating		\$		
		Water		\$		
Address of Unit		Sewer		\$		
		Trash Collection		\$		
		Range / Microwave		\$		
		Refrigerator		\$		
		Other		\$		
Number of Bedrooms		Other		\$		
		Total		\$		



Utility Allowance Schedule

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

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

Date (mm/dd/yyyy):

Locality: Knox County Housing Authority, IL		Unit Type: Detached House				
Utility or Service:	0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
Monthly Dollar Allowances						
Heating						
a. Natural Gas (avg)	\$18.00	\$21.00	\$25.00	\$29.00	\$32.00	\$36.00
b. Bottle Gas/Propane	\$50.00	\$58.00	\$69.00	\$78.00	\$88.00	\$98.00
c. Electric (avg)	\$47.00	\$55.00	\$65.00	\$73.00	\$82.00	\$90.00
d. Electric Heat Pump (avg)	\$25.00	\$29.00	\$35.00	\$39.00	\$44.00	\$48.00
e. Oil						
Cooking						
a. Natural Gas (avg)	\$1.00	\$1.00	\$2.00	\$3.00	\$4.00	\$4.00
b. Bottle Gas/Propane	\$4.00	\$4.00	\$6.00	\$9.00	\$11.00	\$12.00
c. Electric (avg)	\$5.00	\$6.00	\$8.00	\$10.00	\$13.00	\$15.00
Other Electric & Cooling						
Other Electric (Lights & Appliances) (avg)	\$26.00	\$31.00	\$42.00	\$55.00	\$66.00	\$78.00
Air Conditioning (avg)	\$3.00	\$4.00	\$9.00	\$14.00	\$20.00	\$25.00
Water Heating						
a. Natural Gas (avg)	\$4.00	\$5.00	\$7.00	\$9.00	\$12.00	\$14.00
b. Bottle Gas/Propane	\$12.00	\$14.00	\$20.00	\$26.00	\$32.00	\$38.00
c. Electric (avg)	\$15.00	\$18.00	\$23.00	\$28.00	\$33.00	\$38.00
d. Oil						
Water, Sewer, Trash Collection						
Water	See Attached Water, Sewer & Trash Collection Schedule					
Sewer						
Trash Collection						
Tenant-supplied Appliances						
Range / Microwave Tenant-supplied	\$11.00	\$11.00	\$11.00	\$11.00	\$11.00	\$11.00
Refrigerator Tenant-supplied	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00
Other--specify: Monthly Charges						
Electric Charge \$17.17 (avg)	\$17.00	\$17.00	\$17.00	\$17.00	\$17.00	\$17.00
Natural Gas Charge \$22.24 (avg)	\$22.00	\$22.00	\$22.00	\$22.00	\$22.00	\$22.00
Actual Family Allowances			Utility or Service		per month cost	
To be used by the family to compute allowance. Complete below for the actual unit rented.			Heating		\$	
			Cooking		\$	
Name of Family			Other Electric		\$	
			Air Conditioning		\$	
			Water Heating		\$	
			Water		\$	
Address of Unit			Sewer		\$	
			Trash Collection		\$	
			Range / Microwave		\$	
			Refrigerator		\$	
			Other		\$	
			Other		\$	
Number of Bedrooms			Other		\$	
			Total		\$	



KNOX COUNTY HOUSING AUTHORITY, IL

Water, Sewer and Trash Collection Section 8 HCV Utility Allowances

All Building Types

		Monthly Dollar Allowances					
		0 BR	1 BR	2 BR	3 BR	4 BR	5 BR
City Abingdon	Water	\$34.00	\$35.00	\$43.00	\$51.00	\$59.00	\$67.00
	Sewer	\$38.00	\$39.00	\$44.00	\$50.00	\$55.00	\$61.00
Jackson Disposal (Abingdon)	Trash	\$23.00	\$23.00	\$23.00	\$23.00	\$23.00	\$23.00
Altona Water Works	Water	\$29.00	\$29.00	\$35.00	\$41.00	\$47.00	\$52.00
	Sewer	\$22.00	\$22.00	\$25.00	\$28.00	\$32.00	\$35.00
	Trash	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00
Aqua Illinois Spoon River Lake Sanitary District (Oak Run)	Water	\$43.00	\$44.00	\$54.00	\$64.00	\$73.00	\$81.00
	Sewer	\$36.00	\$36.00	\$36.00	\$36.00	\$36.00	\$36.00
Village of East Galesburg	Water	\$26.00	\$26.00	\$34.00	\$41.00	\$48.00	\$56.00
	Sewer	\$30.00	\$31.00	\$37.00	\$43.00	\$49.00	\$55.00
	Trash	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00
City of Galesburg	Water	\$28.00	\$28.00	\$33.00	\$38.00	\$43.00	\$48.00
	Sewer	\$18.00	\$19.00	\$25.00	\$31.00	\$37.00	\$43.00
	Trash	\$21.00	\$21.00	\$21.00	\$21.00	\$21.00	\$21.00
City of Knoxville	Water	\$22.00	\$23.00	\$29.00	\$35.00	\$41.00	\$47.00
	Sewer	\$27.00	\$27.00	\$33.00	\$39.00	\$46.00	\$52.00
	Trash	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00
Village of London Mills	Water	\$62.00	\$62.00	\$62.00	\$62.00	\$62.00	\$62.00
	Sewer	\$28.00	\$28.00	\$28.00	\$28.00	\$28.00	\$28.00
	Trash	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00
Village of Maquon	Water	\$35.00					
	Sewer						
	Trash						
Village of Oneida	Water	\$31.00	\$31.00	\$37.00	\$43.00	\$48.00	\$54.00
	Sewer	\$16.00	\$17.00	\$23.00	\$28.00	\$34.00	\$40.00
	Trash	\$11.00	\$11.00	\$11.00	\$11.00	\$11.00	\$11.00
Village of Wataga	Water	\$20.00	\$20.00	\$25.00	\$31.00	\$36.00	\$41.00
	Sewer	\$11.00	\$11.00	\$13.00	\$14.00	\$16.00	\$18.00
	Trash	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00
Village of Yates City	Water	\$45.00	\$46.00	\$60.00	\$75.00	\$89.00	\$103.00
	Sewer	\$21.00	\$22.00	\$29.00	\$36.00	\$43.00	\$50.00



Reasonable Accommodation Medical Equipment Allowances

Electric Provider: Ameren Illinois & Corn Belt Energy (wtd avg) (avg)

Item	Hours per Day	Wattage	Monthly kWh	Energy Charge	Utility Allowance
Oxygen Concentrator	18	400	223	0.114502	\$26.00
Nebulizer	2	75	5	0.114502	\$1.00
Electric Hospital Bed	0.2	200	1	0.114502	\$1.00
Alternating Pressure Pad	24	70	52	0.114502	\$6.00
Low Air-Loss Mattress	24	120	89	0.114502	\$10.00
Power Wheelchair/Scooter	3	360	33	0.114502	\$4.00
Feeding Tube Pump	24	120	89	0.114502	\$10.00
CPAP Machine	10	30	9	0.114502	\$1.00
Leg Compression Pump	24	30	22	0.114502	\$3.00
Dialysis Machine/Equipment	2	710	44	0.114502	\$5.00

Oxygen Concentrator

Use per day varies, assume 12-14 hours a day. The 5-Liter model uses 400 W, the 3-Liter model uses 320 W.

Nebulizer

A medicine delivery system used mostly for pediatric care. Used 4-6 times a day for 20 minutes at a time at 75W.

Semi/Fully Electric Hospital Bed

Use depends on adjustments. 200 W.

0.088304

0.1407

0.114502

Alternating Pressure Pad

An air-filled mattress overlay. Used 24 hours a day for someone who is bed-ridden.

Low Air-Loss Mattress

Takes the place of mattress - air -filled pressurized mattress. Cycles air around every 15-20 minutes.

Power Wheelchairs and Scooters

Need to be charged approximately 8 hours every 3 days. Batteries are 120 V, 3 Amp, 360 W.

Feeding Tube Pump (Continuous Feed)

A pump delivers a constant amount of formula throughout the day or night.

CPAP Machine

For Sleep Apnea. Runs only at night for people who have a tendency to stop breathing at night. At maximum pressure use is 40 Watts. On average - 30 Watts

Leg Compression Pump

Provides intensive compression therapy. Use varies, generally from 8-24 hours daily.

Dialysis Machine/Equipment (Small/Portable)

Filters a patient's blood to remove excess water and waste products. Used 2 hours daily.