

**INDEPENDENCE HOUSING AUTHORITY**  
**SECTION 8 MONTHLY ALLOWANCES FOR TENANT FURNISHED**  
**UTILITIES AND OTHER SERVICES AND BY NUMBER OF BEDROOMS**

**LOCALITY:** Kansas City Metropolitan Area

**UNIT TYPE:** Single Family House

Utility or Service	0 Bedroom	1 Bedroom	2 Bedrooms	3 Bedrooms	4 Bedrooms	5 Bedrooms
<b>HEATING</b>						
Gas		16	20	22	28	34
Electric		70	84	105	122	131
Electric - Heat Pump		67	80	100	116	124
<b>COOKING</b>						
Gas		3	4	5	5	5
Electric		10	12	13	15	16
<b>WATER HEATING</b>						
Gas		6	7	9	10	12
Electric		16	22	30	37	43
<b>OTHER ELECTRIC</b>						
LIGHTS AND MISCELLANEOUS		37	43	49	56	64
AIR CONDITIONING		18	22	27	31	33
<b>OTHER SERVICES</b>						
WATER and SEWER		59	74	85	97	109
TRASH		43	43	43	43	43
RANGE		3	3	4	4	5
REFRIGERATOR		4	4	5	6	6
<b>TOTAL UTILITY ALLOWANCE</b>						

For the unit you select, circle the number of bedrooms and the monthly allowance for each utility or service you are required to pay under the lease. Write the total in the appropriate number of bedrooms column. This is called the **UTILITY ALLOWANCE** for that unit. The Housing Authority will use that number to determine compliance with the Housing Choice Voucher Program 40% rule on the initial occupancy and any time you move thereafter.

FOR HOUSING AUTHORITY USE ONLY

Name of Family: \_\_\_\_\_

Effective Date of Certification: \_\_\_\_\_

Address of Unit: \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_

\_\_\_\_\_  
Housing Coordinator II Signature

**Effective April 1, 2021**

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UTILITIES AND OTHER SERVICES AND BY NUMBER OF BEDROOMS**

LOCALITY: Kansas City Metropolitan Area

UNIT TYPE: Mobile Home

Utility or Service	0 Bedroom	1 Bedroom	2 Bedrooms	3 Bedrooms	4 Bedrooms	5 Bedrooms
<b>HEATING</b>						
Gas	11	15	18	21	26	32
Electric	52	66	79	98	114	122
Electric - Heat Pump	53	67	80	100	116	124
<b>COOKING</b>						
Gas	3	3	4	5	5	5
Electric	9	10	12	13	15	16
<b>WATER HEATING</b>						
Gas	6	6	7	9	10	12
Electric	16	16	22	30	37	43
<b>OTHER ELECTRIC</b>						
LIGHTS AND MISCELLANEOUS	29	37	43	49	56	64
AIR CONDITIONING	17	18	22	27	31	33
<b>OTHER SERVICES</b>						
WATER and SEWER	56	59	74	85	97	109
TRASH	43	43	43	43	43	43
RANGE	3	3	3	4	4	5
REFRIGERATOR	3	4	4	5	6	6
<b>TOTAL UTILITY ALLOWANCE</b>						

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Name of Family: \_\_\_\_\_

Effective Date of Certification: \_\_\_\_\_

Address of Unit: \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_

\_\_\_\_\_  
Housing Coordinator II Signature

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**SECTION 8 ALLOWANCES FOR TENANT FURNISHED**  
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**LOCALITY:** Kansas City Metropolitan Area

**UNIT TYPE:**  
 Duplex/Row/Townhouse/Semi-  
 Detached

Utility or Service	0 Bedroom	1 Bedroom	2 Bedrooms	3 Bedrooms	4 Bedrooms	5 Bedrooms
<b>HEATING</b>						
Gas	10	13	16	19	23	29
Electric	47	59	71	89	104	111
Electric - Heat Pump	45	56	68	84	98	105
<b>COOKING</b>						
Gas	3	3	4	4	4	5
Electric	9	10	11	13	14	16
<b>WATER HEATING</b>						
Gas	6	6	7	9	10	12
Electric	16	16	22	30	37	43
<b>OTHER ELECTRIC</b>						
LIGHTS AND MISCELLANEOUS	29	37	43	49	56	64
AIR CONDITIONING	17	18	22	27	31	33
<b>OTHER SERVICES</b>						
WATER and SEWER	56	59	74	85	97	109
TRASH	43	43	43	43	43	43
RANGE	3	3	3	4	4	5
REFRIGERATOR	3	4	4	5	6	6

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Name of Family: \_\_\_\_\_

Effective Date of Certification: \_\_\_\_\_

Address of Unit: \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_

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**LOCALITY:** Kansas City Metropolitan Area

**UNIT TYPE:**

Flat/Garden/Multifamily Apt /

Low Rise / Highrise

Utility or Service	0 Bedroom	1 Bedroom	2 Bedrooms	3 Bedrooms	4 Bedrooms	5 Bedrooms
<b>HEATING</b>						
Gas	9	12	15	18	22	27
Electric	44	56	67	84	98	104
Electric - Heat Pump	42	53	64	79	93	99
<b>COOKING</b>						
Gas	3	3	4	4	4	5
Electric	9	10	11	13	14	16
<b>WATER HEATING</b>						
Gas	6	6	7	9	10	12
Electric	16	16	22	30	37	43
<b>OTHER ELECTRIC</b>						
LIGHTS AND MISCELLANEOUS	29	37	43	49	56	64
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WATER and SEWER	56	59	74	85	97	109
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**Effective Date of Certification:** \_\_\_\_\_

**Address of Unit:** \_\_\_\_\_

**Number of Bedrooms:** \_\_\_\_\_

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Housing Coordinator II Signature

**Effective April 1, 2021**