



PUBLIC NOTICE

NOTICE OF HOUSING CHOICE VOUCHER (S8) UTILITY ALLOWANCE SCHEDULES UPDATE

The Lynchburg Redevelopment and Housing Authority (LRHA) gives notice that our Housing Choice Voucher (S8) Utility Allowance Schedules have been updated and are available for public review and comment for a 30-day period. Beginning on December 12, 2016, the public may review these documents at our Administrative Office between the hours of 8:30 a.m. and 4:30 p.m., Monday through Friday. Our office is located at 918 Commerce Street, Lynchburg, VA. The documents will be available for review through January 13, 2017. Please submit any comments, in writing, to Chandra Hyacinth, Compliance Officer, by close of business January 13, 2016.

If you have any questions regarding the S8 Housing Choice Voucher Utility Allowance Schedules update, please contact LRHA at 434-485-7200 or by email at chandra.hyacinth@lynchburgva.gov.

The new Utility Allowances will be effective February 1, 2017.



We Do Business In Accordance With the Federal Fair Housing Law

Fax: 434.845.9144 • TTY: 800.828.1120 VA 711

918 COMMERCE STREET • LYNCHBURG, VA 24504 • (434) 485-7200

**Allowance for
Tenant-Furnished Utilities
and Other Services**

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

OMB Approval No. 2577-0169 (4/30/2018)

LOCALITY		UNIT TYPE					DATE
Lynchburg Redevelopment and Housing Authority		Single Family					2/1/17 10/7/2016
UTILITY OR SERVICE		MONTHLY DOLLAR ALLOWANCE					
		0-BR	1-BR	2-BR	3-BR	4-BR	5-BR
HEATING							
a. Natural Gas		\$23	\$27	\$30	\$34	\$38	\$40
b. Electric		\$38	\$47	\$54	\$64	\$71	\$77
c. Fuel Oil		\$40	\$48	\$54	\$62	\$68	\$72
d. Propane		\$42	\$50	\$56	\$64	\$71	\$75
AIR CONDITIONING		\$9	\$12	\$15	\$19	\$23	\$27
COOKING							
a. Natural Gas		\$6	\$6	\$8	\$8	\$9	\$9
b. Electric		\$10	\$10	\$13	\$13	\$15	\$15
c. Propane		\$12	\$12	\$15	\$16	\$17	\$17
OTHER ELECTRIC		\$27	\$30	\$33	\$39	\$43	\$51
WATER HEATING							
a. Natural Gas		\$9	\$12	\$15	\$22	\$29	\$35
b. Electric		\$10	\$17	\$24	\$38	\$53	\$68
c. Fuel Oil		\$13	\$18	\$22	\$31	\$41	\$51
d. Propane		\$17	\$23	\$29	\$42	\$55	\$68
WATER							
a. City of Lynchburg		\$16	\$20	\$24	\$32	\$36	\$39
SEWER							
a. City of Lynchburg		\$9	\$19	\$28	\$47	\$56	\$66
TRASH COLLECTION		\$0	\$0	\$0	\$0	\$0	\$0
REFRIGERATOR		\$5	\$5	\$5	\$5	\$5	\$5
RANGE		\$4	\$4	\$4	\$4	\$4	\$4
OTHER: Natural Gas Base Rate		\$17	\$17	\$17	\$17	\$17	\$17
ACTUAL FAMILY ALLOWANCES: (To be used by family to complete allowance. Complete below for Actual Unit Rented)					UTILITY OR SERVICE		PER MONTH
NAME OF FAMILY					HEATING		\$
					AIR CONDITIONING		\$
ADDRESS OF UNIT					COOKING		\$
					OTHER ELECTRIC		\$
					WATER HEATING		\$
					WATER		\$
					SEWER		\$
					TRASH COLLECTION		\$
					REFRIGERATOR		\$
					RANGE		\$
NUMBER OF BEDROOMS					OTHER		\$
					TOTAL		\$

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

OMB Approval No. 2577-0169 (4/30/2018)

LOCALITY Lynchburg Redevelopment and Housing Authority		UNIT TYPE Duplex					DATE 2/1/17 10/7/2016
		MONTHLY DOLLAR ALLOWANCE					
UTILITY OR SERVICE	0-BR	1-BR	2-BR	3-BR	4-BR	5-BR	
HEATING							
a. Natural Gas	\$19	\$21	\$24	\$26	\$30	\$33	
b. Electric	\$29	\$34	\$41	\$46	\$55	\$60	
c. Fuel Oil	\$32	\$37	\$43	\$47	\$54	\$59	
d. Propane	\$34	\$38	\$45	\$49	\$56	\$61	
AIR CONDITIONING	\$8	\$10	\$13	\$17	\$21	\$24	
COOKING							
a. Natural Gas	\$6	\$6	\$8	\$8	\$9	\$9	
b. Electric	\$10	\$10	\$13	\$13	\$15	\$15	
c. Propane	\$12	\$12	\$15	\$16	\$17	\$17	
OTHER ELECTRIC	\$27	\$30	\$33	\$39	\$43	\$51	
WATER HEATING							
a. Natural Gas	\$9	\$12	\$15	\$22	\$29	\$35	
b. Electric	\$10	\$17	\$24	\$38	\$53	\$68	
c. Fuel Oil	\$13	\$18	\$22	\$31	\$41	\$51	
d. Propane	\$17	\$23	\$29	\$42	\$55	\$68	
WATER							
a. City of Lynchburg	\$16	\$20	\$24	\$32	\$36	\$39	
SEWER							
a. City of Lynchburg	\$9	\$19	\$28	\$47	\$56	\$66	
TRASH COLLECTION	\$0	\$0	\$0	\$0	\$0	\$0	
REFRIGERATOR	\$5	\$5	\$5	\$5	\$5	\$5	
RANGE	\$4	\$4	\$4	\$4	\$4	\$4	
OTHER: Natural Gas Base Rate	\$17	\$17	\$17	\$17	\$17	\$17	
ACTUAL FAMILY ALLOWANCES: (To be used by family to complete allowance. Complete below for Actual Unit Rented)				UTILITY OR SERVICE		PER MONTH	
NAME OF FAMILY				HEATING		\$	
				AIR CONDITIONING		\$	
ADDRESS OF UNIT				COOKING		\$	
				OTHER ELECTRIC		\$	
				WATER HEATING		\$	
				WATER		\$	
				SEWER		\$	
				TRASH COLLECTION		\$	
				RANGE		\$	
				REFRIGERATOR		\$	
NUMBER OF BEDROOMS				OTHER		\$	
				TOTAL		\$	

**Allowance for
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U.S. Department of Housing and Urban
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Office of Public and Indian Housing

OMB Approval No. 2577-0169 (4/30/2018)

LOCALITY		UNIT TYPE					DATE
Lynchburg Redevelopment and Housing Authority		Row House or Townhouse					2/1/17 10/7/2016
UTILITY OR SERVICE	MONTHLY DOLLAR ALLOWANCE						
	0-BR	1-BR	2-BR	3-BR	4-BR	5-BR	
HEATING							
a. Natural Gas	\$17	\$20	\$23	\$24	\$28	\$31	
b. Electric	\$26	\$32	\$38	\$42	\$49	\$56	
c. Fuel Oil	\$29	\$35	\$40	\$43	\$49	\$56	
d. Propane	\$31	\$36	\$42	\$45	\$51	\$58	
AIR CONDITIONING	\$8	\$10	\$13	\$16	\$21	\$25	
COOKING							
a. Natural Gas	\$6	\$6	\$8	\$8	\$9	\$9	
b. Electric	\$10	\$10	\$13	\$13	\$15	\$15	
c. Propane	\$12	\$12	\$15	\$16	\$17	\$17	
OTHER ELECTRIC	\$27	\$30	\$33	\$39	\$43	\$51	
WATER HEATING							
a. Natural Gas	\$9	\$12	\$15	\$22	\$29	\$35	
b. Electric	\$10	\$17	\$24	\$38	\$53	\$68	
c. Fuel Oil	\$13	\$18	\$22	\$31	\$41	\$51	
d. Propane	\$17	\$23	\$29	\$42	\$55	\$68	
WATER							
a. City of Lynchburg	\$16	\$20	\$24	\$32	\$36	\$39	
SEWER							
a. City of Lynchburg	\$9	\$19	\$28	\$47	\$56	\$66	
TRASH COLLECTION	\$0	\$0	\$0	\$0	\$0	\$0	
REFRIGERATOR	\$5	\$5	\$5	\$5	\$5	\$5	
RANGE	\$4	\$4	\$4	\$4	\$4	\$4	
OTHER: Natural Gas Base Rate	\$17	\$17	\$17	\$17	\$17	\$17	
ACTUAL FAMILY ALLOWANCES: (To be used by family to complete allowance. Complete below for Actual Unit Rented)			UTILITY OR SERVICE		PER MONTH		
NAME OF FAMILY			HEATING		\$		
			AIR CONDITIONING		\$		
ADDRESS OF UNIT			COOKING		\$		
			OTHER ELECTRIC		\$		
			WATER HEATING		\$		
			WATER		\$		
			SEWER		\$		
			TRASH COLLECTION		\$		
			REFRIGERATOR		\$		
			RANGE		\$		
NUMBER OF BEDROOMS			OTHER		\$		
			TOTAL		\$		

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OMB Approval No. 2577-0169 (4/30/2018)

LOCALITY		UNIT TYPE					DATE
Lynchburg Redevelopment and Housing Authority		Garden Apartment			1-4 FLOORS		2/1/17 10/7/2016
UTILITY OR SERVICE	MONTHLY DOLLAR ALLOWANCE						
	0-BR	1-BR	2-BR	3-BR	4-BR	5-BR	
HEATING							
a. Natural Gas	\$15	\$18	\$21	\$23	\$27	\$29	
b. Electric	\$22	\$28	\$33	\$40	\$47	\$52	
c. Fuel Oil	\$26	\$31	\$36	\$41	\$47	\$52	
d. Propane	\$27	\$33	\$37	\$43	\$49	\$54	
AIR CONDITIONING	\$8	\$10	\$13	\$17	\$21	\$24	
COOKING							
a. Natural Gas	\$6	\$6	\$8	\$8	\$9	\$9	
b. Electric	\$10	\$10	\$13	\$13	\$15	\$15	
c. Propane	\$12	\$12	\$15	\$16	\$17	\$17	
OTHER ELECTRIC	\$27	\$30	\$33	\$39	\$43	\$51	
WATER HEATING							
a. Natural Gas	\$9	\$12	\$15	\$22	\$29	\$35	
b. Electric	\$10	\$17	\$24	\$38	\$53	\$68	
c. Fuel Oil	\$13	\$18	\$22	\$31	\$41	\$51	
d. Propane	\$17	\$23	\$29	\$42	\$55	\$68	
WATER							
a. City of Lynchburg	\$16	\$20	\$24	\$32	\$36	\$39	
SEWER							
a. City of Lynchburg	\$9	\$19	\$28	\$47	\$56	\$66	
TRASH COLLECTION	\$0	\$0	\$0	\$0	\$0	\$0	
REFRIGERATOR	\$5	\$5	\$5	\$5	\$5	\$5	
RANGE	\$4	\$4	\$4	\$4	\$4	\$4	
OTHER: Natural Gas Base Rate	\$17	\$17	\$17	\$17	\$17	\$17	
ACTUAL FAMILY ALLOWANCES: (To be used by family to complete allowance. Complete below for Actual Unit Rented)				UTILITY OR SERVICE		PER MONTH	
NAME OF FAMILY				HEATING		\$	
ADDRESS OF UNIT				AIR CONDITIONING		\$	
				COOKING		\$	
				OTHER ELECTRIC		\$	
				WATER HEATING		\$	
				WATER		\$	
				SEWER		\$	
				TRASH COLLECTION		\$	
				REFRIGERATOR		\$	
				RANGE		\$	
NUMBER OF BEDROOMS				OTHER		\$	
				TOTAL		\$	

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OMB Approval No. 2577-0169 (4/30/2018)

LOCALITY		UNIT TYPE					DATE
Lynchburg Redevelopment and Housing Authority		High-Rise			5-12 FLOORS		2/1/17 10/1/2016
UTILITY OR SERVICE	MONTHLY DOLLAR ALLOWANCE						
	0-BR	1-BR	2-BR	3-BR	4-BR	5-BR	
HEATING							
a. Natural Gas	\$11	\$12	\$13	\$15	\$17	\$18	
b. Electric	\$13	\$15	\$18	\$22	\$25	\$28	
c. Fuel Oil	\$17	\$19	\$22	\$25	\$28	\$31	
d. Propane	\$19	\$21	\$24	\$27	\$30	\$33	
AIR CONDITIONING	\$6	\$7	\$9	\$12	\$15	\$18	
COOKING							
a. Natural Gas	\$6	\$6	\$8	\$8	\$9	\$9	
b. Electric	\$10	\$10	\$13	\$13	\$15	\$15	
c. Propane	\$12	\$12	\$15	\$16	\$17	\$17	
OTHER ELECTRIC	\$27	\$30	\$33	\$39	\$43	\$51	
WATER HEATING							
a. Natural Gas	\$9	\$12	\$15	\$22	\$29	\$35	
b. Electric	\$10	\$17	\$24	\$38	\$53	\$68	
c. Fuel Oil	\$13	\$18	\$22	\$31	\$41	\$51	
d. Propane	\$17	\$23	\$29	\$42	\$55	\$68	
WATER							
a. City of Lynchburg	\$16	\$20	\$24	\$32	\$36	\$39	
SEWER							
a. City of Lynchburg	\$9	\$19	\$28	\$47	\$56	\$66	
TRASH COLLECTION	\$0	\$0	\$0	\$0	\$0	\$0	
REFRIGERATOR	\$5	\$5	\$5	\$5	\$5	\$5	
RANGE	\$4	\$4	\$4	\$4	\$4	\$4	
OTHER: Natural Gas Base Rate	\$17	\$17	\$17	\$17	\$17	\$17	
ACTUAL FAMILY ALLOWANCES: (To be used by family to complete allowance. Complete below for Actual Unit Rented)				UTILITY OR SERVICE		PER MONTH	
NAME OF FAMILY				HEATING		\$	
ADDRESS OF UNIT				AIR CONDITIONING		\$	
				COOKING		\$	
				OTHER ELECTRIC		\$	
				WATER HEATING		\$	
				WATER		\$	
				SEWER		\$	
				TRASH COLLECTION		\$	
				REFRIGERATOR		\$	
				RANGE		\$	
NUMBER OF BEDROOMS				OTHER		\$	
				TOTAL		\$	

Medical Equipment Allowances

2/1/17

Item	Hrs/Day	Wattage	Monthly Consumption (kWh)	Allowance
Oxygen Concentrator	18	400	219	\$25
Nebulizer	2	75	5	\$1
Electric Hospital Bed	0.2	200	1	\$1
Alternating Pressure Pad	24	70	51	\$6
Low Air-Loss Mattress	24	120	88	\$10
Power Wheelchair/Scooter	3	360	33	\$4
CPAP Machine	10	30	9	\$2

Oxygen Concentrator

Use per day varies, assume 12 to 24 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 75 W.

Semi/Fully Electric Hospital Beds

Use depends on adjustments. 200 W.

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.

CPAP Machines

Used for Sleep Apnea. Machines run only at night for people who have a tendency to stop breathing at night. At maximum pressure they use 40 Watts. On average - 30Watts.