

SECTION 3 BUSINESS SELF-CERTIFICATION

1. Company Name: _____

2. Company Address: _____

3. Your Name: _____

4. Telephone: _____ Fax : _____ Email address: _____

5. Contractor's License: Class A B C N/A License Number: _____

6. Business License _____ Number Federal ID Number _____

7. Type of Business: Corporation Partnership
 Sole Proprietorship Joint Venture

TYPES OF SECTION 3 BUSINESS ENTERPRISES

Please check "Yes" or "No". If you answer "YES" to one or more of the following questions, you may designate your company as a Section 3 Business Enterprise. Certification will expire after 3 years.

1. 51% or more of your business is owned by a Section 3 residents*; or

Yes No

Attach list of Section 3 owners and income certifications

2. At least 75% of labor hours are worked by persons that are currently Section 3 residents*, or within five years of the date of first employment with the business concern were Section 3 residents; or

Yes No

Attach list of employees, Section 3 employees, and self-certifications

3. At least 51% of the business is owned by current public housing residents or residents who currently live in Section 8-assisted housing

Yes No

Attach list of subcontracted businesses, types and amounts

Please check the appropriate box below and specify the qualifying category above.

I am Section 3 Certified verified above. My Company is not Section 3 qualified.

VERIFICATION - *The company hereby agrees to provide, upon request, documents verifying the information provided on this form.*

I declare and affirm under penalty of law that the statements made herein are true and accurate to the best of my knowledge. I understand that falsifying information and incomplete statements will disqualify certification status.

Signature of Business Owner or Authorized Representative

Date

***Section 3 resident is:** 1) a public housing, or 2) a HCVP participant, or 3) a resident of another federally assisted housing program managed by the local PHA, or 4) a low- or very low-income person residing in the metropolitan area or Non-metropolitan County in which the Section 3 covered assistance is expended.