E. Section 3 Business Concern Certification

Eligibility for Preference: A business concern seeking to qualify for a Section 3 contracting preference shall certify or submit evidence, if requested, that the business concern qualifies for Section 3 status, as defined in 24 CFR 135.5. Certification is valid for three years.

Basic Information:			
Business Name: Business Address:		s Address:	
Phone:	Fax:	Email:	
Type of Business: Corporation	Partnership	Sole Proprietorship	☐ Joint Venture
Type of Services Provided:			
Гуре of Section 3 Business:	<u>'</u>		
	-	-	n where applicable. The City of Chattanooga's Office of age 2) to verify the information provided on this form.
1. Are you currently certified Housing Authority?	as a Section 3 busin	ness by the Department of Hou	sing and Urban Development or other government entity or
☐ No			
Yes (Attach a copy of certificati	on letter)		
2. Does 51% of your busines ☐ No	s ownership consist	t of Section 3 residents?	
Yes (Attach proof of ownership	and Section 3 Resi	ident Certification(s))	
3. Are at least 30% of all full of the date of first employment with		rrently qualified as Section 3 re	esidents, or were qualified as Section 3 residents within 3 years
☐ No			
Yes (Attach a current employee	roster and the quali	fied employees' Section 3 Res	ident Certifications)
4. Will at least 25% of the do any of the above three criteria?	llar amount you sub	ocontract be awarded, under the	e proposed contract, to qualified Section 3 businesses that meet
☐ No			
	nd each proposed Se	ection 3 subcontractor's Busine	tment to certified Section 3 subcontractors (see page 2 for ss Concern Certification form. Please note that if selecting this contract.)
Certification:			
	e statements will di	squalify certification status. I a	d correct to the best of my knowledge. I understand that gree to allow this information to be shared with local and
Signature:			Date:
Title:		Print Na	nme:

The following is a list of documentation (not all inclusive) that the City of Chattanooga's Office of Community Development may request to ascertain accuracy of the Section 3 Business Certification form.

For businesses claiming status as a Section 3 resident owned enterprise (at least 51% of ownership consists of Section 3 residents):

- Company documents outlining ownership structure: copy of articles of incorporation, operating agreement (LLC), list of shareholders and percentage of ownership interest (corporation), partnership agreement, certificate of good standing, corporation annual report, etc.
- Completed and signed Section 3 Resident Certifications for each resident/owner counted as a Section 3 resident
- Substantiating documentation for each Section 3 resident: copy of public housing lease, copy of household income tax return, etc.

For businesses claiming Section 3 status by claiming at least 30% of their workforce are currently Section 3 residents or were Section 3 eligible residents within three years of date of first employment with the business:

- Substantiating documentation to confirm total number of full-time employees such as employment roster with hire dates, payroll documentation, etc.
- Completed and signed Section 3 Resident Certifications for each full-time employee counted as a Section 3 resident
- Substantiating documentation for each Section 3 resident: copy of public housing lease, copy of household income tax return, etc.

For businesses claiming Section 3 status by subcontracting 25% of the dollar amount of all subcontracts under the proposed contract to qualified Section 3 businesses:

- Documentation to confirm total amount available for subcontracting
- Each subcontractor's name, scope of work to be performed, and amount of the subcontract
- Copy of subcontract (*if available)
- Section 3 business concern certification documents for each subcontractor including: o
 - Completed Section 3 Business Concern Certification; and
 - o Substantiating documentation depending on specific certification eligibility (30% of fullemployees are Section 3 residents or 51% of business is owned by Section 3 residents)

F. Section 3 Resident Certification

Eligibility for Preference: A Section 3 resident seeking preference in training and employment shall certify, or submit evidence to the recipient,

contractor, or agency, if requested, that the person qualifies as a Section 3 resident, as defined in 24 CFR 135.5. Home Address: City/State/Zip: _____ Alternate #: _____ Email: ____ Phone # : Yes No Homeless: I meet the following criteria to be a Section 3 Resident: 1. I am a resident of public housing, **OR** I meet the income limits for the City of Chattanooga listed below: INCOME CERIFICATION Please find your household size below and check the box that best corresponds to your annual household income amount. Individuals who meet the income limits set forth below can qualify for Section 3 status for three years from the most recent qualifying year. INCOME CERIFICATION Please find your household size below and check the box that best corresponds to your annual household income amount. Individuals who meet the income limits set forth below can qualify for Section 3 status for three years from the most recent qualifying year. Household size Year 2020 Year 2019 **Year 2018** 1 Person \$40,700 or below \$38,000 or below \$34,550 or below 2 People \$39,500 or below \$46,500 or below \$43,400 or below 3 People \$44,450 or below \$52,300 or below \$48,850 or below 4 People \$49,350 or below \$58,100 or below \$54,250 or below 5 People \$62,750 or below \$58,600 or below \$53,300 or below 6 People \$67,400 or below \$62,950 or below \$57,250 or below 7 People \$72,050 or below \$67.300 or below \$61,200 or below \$65,150 or below 8 People \$76,700 or below \$71,650 or below 2. If requested, I am able to provide the following documentation as evidence of my Section 3 eligibility: Copy of household in come tax return(s) Copy of a lease in a public housing program Copy of receipt or other evidence of Other evidence (ex. utility bill, W-2, 1099 form): participation in a public assistance program (ex. SNAP, WIC, Medicaid/LaCHIP, SSI...) 3. I have the following job skills, certifications, or training: I hereby certify under penalty of perjury that all information presented herein is true and correct to the best of my knowledge. I agree to allow this information to be shared with local and federal entities in an effort to increase my hiring potential. Date: _____ Signature: