



SECTION 3 BUSINESS CONCERN CERTIFICATION FOR CONTRACTING

INSTRUCTIONS

Enter the following information and select the criteria that applies to certify your business' Section 3 Business Concern status.

BUSINESS INFORMATION

| | | |
|--|------------------------------|--------------|
| 1. NAME OF BUSINESS: | | |
| 2. STREET ADDRESS: | | |
| 3. CITY: | 4. STATE: | 5. ZIP CODE: |
| 6. BUSINESS OWNER NAME: | | |
| 7. BUSINESS OWNER PHONE: | 8. BUSINESS OWNER EMAIL: | |
| 9. INSERT PREFERRED CONTACT INFORMATION BELOW: <input type="checkbox"/> SAME AS ABOVE | | |
| 10. PREFERRED CONTACT PHONE: | 11. PREFERRED CONTACT EMAIL: | |
| 12. TYPE OF BUSINESS (SELECT FROM THE FOLLOWING OPTIONS): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Joint Venture | | |
| 13. SELECT FROM ONE OF THE FOLLOWING THREE OPTIONS BELOW THAT APPLIES: <input type="checkbox"/> At least 51 percent of the business is owned and controlled by low- or very low-income persons (<i>Refer to income guidelines on page 4</i>). <input type="checkbox"/> At least 51 percent of the business is owned and controlled by current public housing residents or residents who currently live in Section 8-assisted housing. <input type="checkbox"/> Over 75 percent of the labor hours performed for the business over the prior three-month period are performed by Section 3 workers (<i>Refer to definition on page 4</i>). | | |

BUSINESS CONCERN AFFIRMATION

| | | |
|--|----------|--|
| <p>I affirm that the above statements above are true, complete, and correct to the best of my knowledge and belief. I understand that businesses who misrepresent themselves as Section 3 business concerns and report false information to _____ [insert name of recipient/grantee] may have their contracts terminated as default and be barred from ongoing and future considerations for contracting opportunities. I hereby certify, under penalty of law, that the following information is correct to the best of my knowledge.</p> | | |
| 1. PRINTED NAME: | | |
| 2. SIGNATURE: | 3. DATE: | |
| <p><i>*Certification expires within six months of the date of signature.</i> Information regarding Section 3 Business Concerns can be found at 24 CFR 75.5</p> | | |
| FOR ADMINISTRATIVE USE ONLY | | |
| <p>Is the business a Section 3 business concern based upon their certification? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>EMPLOYERS MUST RETAIN THIS FORM IN THEIR SECTION 3 COMPLIANCE FILE FOR FIVE YEARS.</p> | | |

The City of _____ [insert locality here]
 Or
 the _____ [insert name here] Housing Authority
Section 3 Income Limits

ELIGIBILITY GUIDELINES

The worker’s income must be at or below the amount provided below for an individual (household of 1) regardless of actual household size.

Individual Income Limits for City of _____ [insert locality here]
FY 20_____ [insert year here]

| Income Limits Category | FY 20_____ [enter year here] Income Limits |
|-----------------------------------|--|
| Extremely Low Income Limits (30%) | |
| Very Low Income Limits (50%) | |
| Low Income Limits (80%) | |

See huduser.gov/portal/datasets/il/il2024/select_Geography.odn for most recent income limits.

Section 3 Worker Definition:

- A low or very low-income resident (the worker’s income for the previous or annualized calendar year is below the income limit established by HUD); or
- Employed by a Section 3 business concern; or
- A YouthBuild participant.

Targeted Section 3 Worker Definition:

- Employed by a Section 3 business concern or
- Currently meets or when hired met at least one of the following categories as documented within the past five years:
 - A resident of public housing; or
 - A resident of other public housing projects or Section 8-assisted housing; or
 - A YouthBuild participant.