



### Documentation for Business Claiming Section 3 Status

Name of Business: \_\_\_\_\_

DUNS Number of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

- Type of Business:
- |  |  |
|--|--|
| <input type="checkbox"/> Corporation         | <input type="checkbox"/> Partnership   |
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Joint Venture |

**Attached is the following documentation as evidence of our Section 3 status:**

\_\_\_\_\_

**For a business claiming status as a Section 3 resident-owned enterprise**

- |   |   |
|---|---|
| <input type="checkbox"/> Copy of resident lease   | <input type="checkbox"/> Copy of receipt of public assistance |
| <input type="checkbox"/> Copy of evidence of participation in a public assistance program | <input type="checkbox"/> Other evidence                       |

\_\_\_\_\_

**For a business claiming Section 3 status by subcontracting 25 percent of the dollar amount awarded to qualified Section 3 businesses**

- List of Section 3 subcontractor(s) and subcontract amount(s).

\_\_\_\_\_

**For a business claiming Section 3 status based on at least 30 percent of their workforce currently qualifying as Section 3 residents or having been qualified as Section 3 eligible residents within three years of date of first employment with the business**

- List of all current full-time employees, and
- List of employees claiming Section 3 status and for each such employee:
- PHA/IHA Residential lease less than three years from date of employment, or
  - Other evidence of Section 3 status less than three years from day of employment.

I certify that the above information is correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Type Name and Title

\_\_\_\_\_  
Date

**Note:** The local government shall maintain this form and supporting documentation in the CDBG project files for review during monitoring.