

SECTION 3 BUSINESS ELIGIBILITY FORM

This form must be completed to certify whether your firm qualifies for a preference as a Section 3 Business Concern.

Business Name:

Address:

City:

State/Zip:

e-mail:

Federal Tax ID:

Contact Person & Title:

Contact Phone:

CCB#:

City of Portland Bus. License #:

Work Description (select all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Asphalt Paving | <input type="checkbox"/> Excavating & Grading | <input type="checkbox"/> Overhead Doors |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Fencing | <input type="checkbox"/> Painting/Wallpapering |
| <input type="checkbox"/> Concrete Cutting | <input type="checkbox"/> Final Cleaning | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Concrete Pumping | <input type="checkbox"/> Fire Sprinklers | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Concrete Work | <input type="checkbox"/> Floorcovering | <input type="checkbox"/> Signage |
| <input type="checkbox"/> Countertops | <input type="checkbox"/> Glazing / Storefront | <input type="checkbox"/> Structural Steel / Misc. Iron |
| <input type="checkbox"/> Crane Services | <input type="checkbox"/> HVAC | <input type="checkbox"/> Tile |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Insulation | <input type="checkbox"/> Waterproofing |
| <input type="checkbox"/> Drilling/Boring | <input type="checkbox"/> Hazardous Material Abatement | <input type="checkbox"/> Welding |
| <input type="checkbox"/> Drywall / Sheetrock | <input type="checkbox"/> Landscaping/Irrigation | <input type="checkbox"/> Window Coverings |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Masonry | <input type="checkbox"/> Other |
| <input type="checkbox"/> Elevator | | |

How does your firm qualify as a Section 3 Business Concern?

- At least 51% owned and controlled by low-income or very low-income persons (please attach Section 3 Worker Eligibility Form and supporting documentation)*
- Over 75% of our labor hours over the previous 3-month period were performed by Section 3 Workers (please complete page 2, List of Employees, and provide Section 3 Worker Eligibility Form and supporting documentation, for eligible employees).*
- At least 51% owned and controlled by current residents of public housing or Section 8 assisted housing (please attach supporting documentation)*
- My firm does not qualify as a Section 3 Business Concern*

SIGNATURE

Date

SECTION 3 WORKER ELIGIBILITY FORM

All employees working on-site must complete this form to determine Section 3 eligibility. Information provided on this form shall remain confidential and shall be used for eligibility and reporting purposes only. Please email this form to Cathleen.Massier@portlandoregon.gov

Name: _____ Address: _____

City, State, Zip: _____

Employer Name: _____ Hire Date: _____

Please select from one (or more) of the following options, to determine your Section 3 Worker or Targeted Section 3 Worker eligibility.

I do not qualify as a Section 3 Worker or Targeted Section 3 Worker.

Section 3 Worker Eligibility

A Section 3 worker is any worker who currently meets, or when hired within the past five years met, at least one of the following criteria, as documented:

My income last year was _____ which met HUD's income limits for low or very-low income (see table, below). The number of member in my household is _____

INCOME LIMITS (Clark, Columbia, Multnomah, Clackamas, Washington, Skamania, & Yamhill)			
Number in Household	Annual Household Income Less Than	Number in Household	Annual Household Income Less Than
1	\$59,650	5	\$92,050
2	\$68,200	6	\$98,850
3	\$76,700	7	\$105,650
4	\$85,200	8	\$112,500

I am currently employed by a Section 3 Business Concern.
Name of Section 3 Business Concern: _____

I am a YouthBuilder participant (please attach supporting documentation).

Targeted Section 3 Worker Eligibility

A Targeted Section 3 Worker is a Section 3 Worker who also meets at least one of the following criteria:

I am employed by a Section 3 Business Concern.
Name of Section 3 Business Concern: _____

I am currently, or within the last 5 years was, a resident of public or Section 8 assisted housing (please attach copy of lease agreement, voucher or award letter).

I currently live, or within the last 5 years lived, within the service area or neighborhood of the project (please attach proof of address).

I am currently, or within the last 5 years was, a YouthBuild participant (please attach documentation).

I hereby certify under penalty of perjury that the information above is true and correct.

Signature: _____

Date: _____

WARNING: Title 18, US Code Section 1001, States that a person who knowingly and willingly makes false or fraudulent statements to any Department or Agency of the United States is guilty of a felony. State law may also provide penalties for false or fraudulent statements.