

**CERTIFICATION FOR BUSINESS CONCERNS SEEKING SECTION 3
PREFERENCE IN CONTRACTING AND DEMONSTRATION OF CAPABILITY
HOUSING AUTHORITY OF THE COUNTY OF KERN**

The undersigned acknowledges by this certification its understanding that the project is subject to the Section 3 Plan which warrants that employment and other economic opportunities generated by certain United States Department of Housing and Urban Development (HUD) financial assistance shall, to the greatest extent feasible, and consistent with existing Federal, State and local laws and regulations, be directed to low-and very-low income persons, particularly those who are recipients of assistance for housing.

In reliance of that said warranty, any intent by a firm to claim the preference to be given to business concerns providing economic opportunities to low- or very low-income persons is hereby certified by the undersigned by virtue of any applicable statements selected below:

- The firm is at least 51% owned and controlled by low or very low-income persons
- Over 75% of labor hours performed for the business over the prior three-month period are performed by Section 3 workers
- The firm is at least 51% owned and controlled by current public housing residents or residents who currently live in Section 8 assisted housing

** Under the New Rule, Section 3 Businesses can no longer receive IFB Bid Preference. However, PHAs and other recipients must make their best efforts to contract with Section 3 Businesses in a priority order (24 CFR Part 75.9 and 75.19) While the numerical goals for Section 3 Business contracting are eliminated, maintaining a Section 3 Business Registry and contracting with Section 3 Businesses remains important to meet the benchmark labor hours required in the New Rule. (Source: <https://hapaorg1.starchapter.com>)

Please attach the following documentation as evidence of status:

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

Copy of resident lease	Copy of receipt of public assistance
Copy of evidence of participation in a public assistance program	Other evidence

For business entity as applicable:

Copy of Articles of Incorporation	Certificate of Good Standing
Assumed Business Name Certificate	Partnership Agreement
List of owners/stockholders and % ownership of each	Corporation Annual Report
Organization chart with names and titles and brief function statement	Latest Board minutes appointing officers
	Additional documentation

For business claiming Section 3 status based on 75% or more of their labor hours performed by Section 3 and/or Targeted Section 3 Workers (OR) were Section 3 eligible residents within 5 years of date of first employment with the business:

List of all current full-time employees and total labor hours

Housing Authority residential lease less than 5 years from day of employment

List of employees claiming Section 3 status and total number of Section 3 / Targeted Sec. 3 labor hours (should equal to 75% for Sec. 3)
Other evidence of Section 3 status less than 5 years from date of employment

The undersigned swears that the foregoing statements are true and correct and understands that false statements may initiate action under Federal or State laws concerning false statements.

Signature: _____

Date: _____

Title: _____

Print Name: _____

Name of Firm: _____

Business Address: _____

Phone: _____

Business License Number: _____

Contractor's License Number: _____

SUBMIT WITH BID

ATTACHMENT "C"