



## COLUMBUS METROPOLITAN HOUSING AUTHORITY

### Section 3 Business Certification Form

The Section 3 Business Certification Form should be completed and submitted for a business seeking Section 3 status and preference for contracting opportunities. Supporting documents may be requested to confirm Section 3 business status according to the definitions described in the U.S. Department of Housing and Urban Development Section 3 regulations codified at 24 CFR Part 75.

Business Name					
Business Address					
City		State		Zip Code	
Telephone Number		Federal Tax ID Number			
Website Address					

Corporation
  Partnership
  Sole Proprietorship
  Joint Venture
  Non-Profit

Contact Name	Authorized Representative
Email Address	

Select one of the Section 3 business qualifying definitions below as documented by company records within the last six-month period

#### At least 51 percent owned and controlled by low- or very low-income persons

The following supporting documents may be required to confirm status:

- List of all low- to very low-income owners on company letterhead signed by a company officer.
- Signed letter from each low- to very low-income owner confirming low- or very low-income status according to HUD income limits.

#### Over 75 percent of the labor hours performed for the business over the prior three-month period are performed by Section 3 workers

The following supporting documents may be required to confirm status:

- List of all company workers on company letterhead to include the identification of Section 3 workers.
- Completed Section 3 Worker Certification Forms for all Section 3 Workers.
- Letter signed by a company officer on company letterhead that includes the following documentation:
  - labor hours performed by all workers over the prior three-month period
  - labor hours performed by all Section 3 workers over the prior three-month period
  - calculation that over 75 percent of the labor hours performed over the prior three-month period were performed by the company's Section 3 Workers

#### At least 51 percent owned and controlled by current public housing residents or residents who currently live in Section 8-assisted housing

The following supporting documents may be required to confirm status:

- List of all current public housing or Section 8-assisted housing residents on company letterhead signed by a company officer.
- Signed letter from each public housing or Section 8-assisted housing resident confirming current resident status.

I affirm and certify that information submitted within this form is true and correct to the best of my knowledge and according to company records. I understand that businesses that misrepresent themselves as a Section 3 business may have the contract terminated as default and be barred from ongoing and future contracting considerations.

Authorized Representative's Signature	Date
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**COLUMBUS METROPOLITAN HOUSING AUTHORITY**

**Section 3 Worker Certification Form**

The Columbus Metropolitan Housing Authority is committed to compliance with the U.S. Department of Housing and Urban Development Section 3 regulations codified at 24 CFR Part 75. The Section 3 Worker Certification Form is used to determine an individual's Section 3 status. Please review instructions that provide details on how to complete this form and properly identify a Section 3 Worker and Targeted Section 3 Worker.

Name							
Street Address							
City		County		State		Zip Code	
Telephone Number				Email			
Contractor Name		_____ Section 3 Business					
Worker's Hire Date	Month		Day		Year		

**ANNUAL INCOME**

**Please answer below if the worker resides in one of the following Columbus, OH HUD Metro FMR Area counties:**

Delaware County, OH; Fairfield County, OH; Franklin County, OH; Licking County, OH; Madison County, OH; Morrow County, OH; Pickaway County, OH

The worker's annual income is at or below   Yes  No

**If the worker resides outside of the counties named above or if determining income qualification based on the look-back period, please see instructions to locate the HUD Low Income Limit based on where the worker resides.** Place the amount in the space below.

The worker's annual income is at or below   Yes  No

Low-income limit entered is based on FY \_\_\_\_\_.

**RESIDENT STATUS**

Current or former YouthBuild participant \_\_\_\_\_ Yes \_\_\_\_\_ No

o If yes, what month and year last a participant? \_\_\_\_\_

Current or former CMHA public housing resident \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what month and year last a resident? \_\_\_\_\_

Name of the CMHA property \_\_\_\_\_

Current or former CMHA Section 8 resident \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what month and year last a resident? \_\_\_\_\_

**SECTION 3 STATUS**

Refer to the instructions and place an X next to the appropriate selection(s) representing the worker's Section 3 qualification status.

Not Section 3       Section 3 Worker       Targeted Section 3 Worker

This form was completed by the  Resident/Worker  Business/Contractor Representative

I affirm and hereby certify, under penalty of law, that the information completed within this document is true and accurate to the best of my knowledge and belief. *(Actual/original signature required).*

Name	
Signature	
Date	

## Section 3 Worker Certification Form INSTRUCTIONS

Who should complete this form?

- Residents seeking status as Section 3 and preference for employment and training opportunities on CMHA projects.
- Workers (or contractors on behalf of workers) working on CMHA projects to determine Section 3 status.
- Workers employed by a business seeking Section 3 business certification.

The Section 3 Worker Certification Form is a self-certification document established for the expressed purpose of determining a worker's Section 3 worker and Targeted Section 3 worker status.

**The Section 3 Worker Certification Form is not to be required as a condition of employment.**

For CMHA projects, the Section 3 Worker Certification Form may be completed by the individual or the contractor.

### NAME

Enter the individual's first and last name.

### ADDRESS

Enter the individual's complete street address.

### CITY, COUNTY, STATE, ZIP CODE, TELEPHONE NUMBER, EMAIL

Enter the individual's city, county, state, zip code, telephone number, and email address.

### CONTRACTOR NAME

Enter the name of the contractor (the worker's employer). The contractor should complete this entry.

Is the contractor a Section 3 business? If yes, place a check next to Section 3 Business.

If the contractor is a Section 3 business (must be confirmed by CMHA), all workers employed by the contractor are Section 3 workers AND Targeted Section 3 workers.

### HIRE DATE

Enter the month, day, and year the worker was hired by the contractor. The contractor should complete this entry.

### ANNUAL INCOME

Mark Yes or No. *If completed by the contractor, the contractor certifies that the worker's income is based on the calculation of what the worker's wage rate would translate to if annualized on a full-time basis [§ 75.31 (1)(iv)].*

See [Determining Income Status](#) to locate current and past HUD low-income limits based on where the worker resides.

If the individual's income is currently or when hired within the past five years\* was at or below the low-income limit established by HUD (*Yes marked*), the individual is a Section 3 worker.

### YOUTHBUILD PARTICIPANT

Select Yes or No. If yes is selected, the next question must be answered. *If the form is completed by the contractor and the contractor does not know the answer, the worker should be asked this question to complete the entry.*

If the individual is a current participant or when hired within the past five years\* was a participant, the individual is a Section 3 worker AND a Targeted Section 3 worker.

### CMHA PUBLIC HOUSING RESIDENT

Select Yes or No. If yes is selected, the next question must be answered. *The individual may complete this entry, or the contractor may request certification of resident status from CMHA or ask the worker the question to complete the entry.*

If the individual is a current CMHA public housing resident or when hired within the past five years\* was a CMHA public housing resident **AND** is a Section 3 worker, the individual is also a Targeted Section 3 worker.

### CMHA SECTION 8 RESIDENT

Select Yes or No. If yes is selected, the next question must be answered. *The individual may complete this entry, or the contractor may request certification of resident status from CMHA or the owner/property manager of the Section 8 property or ask the worker the question to complete the entry.*

If the individual is a current CMHA Section 8 resident or when hired within the past five years\* was a CMHA Section 8 resident **AND** is a Section 3 worker, the individual is also a Targeted Section 3 worker.

### SECTION 3 STATUS

The individual who completed the form should complete this entry based on review of the completed entries.

### FORM COMPLETED BY, NAME, SIGNATURE, DATE

The name and signature should be that of the individual who completed the form. These entries are required.

\*HUD Section 3 implementing regulations codified at 24 CFR Part 75 became effective November 30, 2020; as such, the five-year look-back period begins on this date and not before.

NOTE: The employer must retain the Section 3 Worker Certification Form on file for five years from the date of signature.

## Determining Income Status

DEFINITIONS	
Section 3 Worker	Targeted Section 3 Worker
<p>Any worker who currently fits or when hired within the past five years* fit at least one of the following categories, as documented:</p> <ul style="list-style-type: none"> <li>▪ A low- or very low-income resident (the worker’s income for the previous or annualized calendar year is below the income limits established by HUD); or</li> <li>▪ Employed by a Section 3 business concern; or</li> <li>▪ A YouthBuild participant</li> </ul>	<p>A Section 3 Worker:</p> <ul style="list-style-type: none"> <li>▪ Employed by a Section 3 business concern; or</li> </ul> <p>Currently fits or when hired fit at least one of the following categories, as documented within the past five years*:</p> <ul style="list-style-type: none"> <li>▪ A resident of CMHA public housing or CMHA Section 8-assisted housing for which the public housing financial assistance is expended; or</li> <li>▪ A resident of other CMHA public housing projects or Section 8-assisted housing managed by CMHA</li> <li>▪ A YouthBuild Participant</li> </ul>

\*HUD Section 3 implementing regulations codified at 24 CFR Part 75 became effective November 30, 2020; as such, the five-year look-back period begins on this date and not before.

### LOOK-BACK PERIOD

The definitions include the following language: “any worker who currently fits or when hired within the past five years fit at least one of the following categories . . .”

- Taking advantage of the look-back period may increase the number of Section 3 workers for a contractor.
- If examining a worker’s Section 3 qualification based on when the worker was hired, the look-back period may only go back to November 30, 2020, when the new regulations became effective.
- If a worker was hired before November 30, 2020, the worker does not qualify for the look-back period examination.

#### Examples

- Aaron was hired on March 15, 2021. He was hired after November 30, 2020, and qualifies for the look-back period examination.
- The contractor has the option to examine Aaron’s 2021 annualized income to determine whether his 2021 income was at or below HUD’s 2021 low-income limit threshold based on where Aaron resided in 2021.
- Sarah was hired May 3, 2022. She was hired after November 30, 2020, and qualifies for the look-back period examination.
- Her current annualized income is greater than the current HUD low-income limit threshold based on where she resides.
- Her 2022 annualized income is greater than HUD’s 2022 low-income limit threshold based on where she resided in 2022.
- Sarah is a former YouthBuild participant. She was last a participant in December 2021.
- Sarah qualifies as a Section 3 worker and Targeted Section 3 worker because her hire date and last YouthBuild participant date are after November 30, 2020.
- Joshua was hired November 12, 2020.
- He was hired before November 30, 2020, and does not qualify for the look-back period examination.

### INDIVIDUAL INCOME LIMIT

**HUD low-income limits for individuals who reside in the Columbus, OH HUD Metro FMR Area counties:** Delaware County, OH; Fairfield County, OH; Franklin County, OH; Licking County, OH; Madison County, OH; Morrow County, OH; and Pickaway County, OH

FY 2020	FY 2021	FY 2022	FY 2023	FY 2024
\$47,150	\$46,950	\$52,500	\$55,550	\$57,900

To access HUD low-income limits for an individual who resides outside of the counties named above, visit the link below and follow the steps.

<https://www.huduser.gov/portal/datasets/il.html>

1. Select 2024. If determining income limits for a previous year, select that year. *Recall the look-back period begins on November 30, 2020. Determination may not be considered earlier than FY 2020.*
2. Scroll down and select “Click Here for FY 2024 IL Documentation.” *Please keep in mind, if a different year is selected under step 1, that year will appear in the “Click Here for FY. . .” selection.*
3. Locate and select the state where the individual resides.
4. Locate and select the county where the individual resides.
5. Select “View County Calculations.”
6. View the “Low (80%) Income Limits” based on one (1) “Persons in the Family.”
7. Enter the low-income limit on the Section 3 Worker Certification Form in the space provided.
8. Enter the annual income year selected under step 1 on the Section 3 Worker Certification Form in the space provided.
9. If the individual’s income is at or below the amount identified, the individual is a Section 3 worker.