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 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 |

REV 2025

# 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

Make selection in one area

| Make selection below if the worker resides in: Delaware County, OH; Fairfield County, OH; Franklin County, OH; Licking County, OH; Madison County, OH; Morrow County, OH; or Pickaway County, OH | Make selection below if the worker resides outside of the counties on the form or if determining income qualification based on the look-back period. Refer to instructions to locate the HUD Low Income Limit based on where the worker resides. |
|---|---|
| $61,050 | $_____ FY _____ |
| Worker's annual income is at or below the amount listed above | Worker's annual income is at or below the amount listed above |
| Yes _____ No _____ | Yes _____ No _____ |

## RESIDENT STATUS

Worker to complete the entries. If form completed by the contractor, leave entries blank.

| Worker is a current or former YouthBuild participant | Worker is a current or former public housing or Section 8-assisted housing resident |
|---|---|
| Yes _____ No _____ | Yes _____ No _____ |
| If yes, enter last participant date | If yes, enter last resident date |
| Month _____ Year _____ | Month _____ Year _____ |

## SECTION 3 STATUS

_____Section 3 Worker _____Targeted Section 3 Worker _____Not Section 3

Form Completed and Signed by _____Worker _____Contractor Representative

I affirm and hereby certify, under penalty of perjury, 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).
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.

### 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 worker'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 worker is a Section 3 worker.

### YOUTHBUILD PARTICIPANT
*For completion by the worker*. Select Yes or No. If yes is selected, the next question must be answered.
If the worker is a current participant or when hired within the past five years* was a participant, the worker is a Section 3 worker AND a Targeted Section 3 worker.

### CMHA PUBLIC HOUSING RESIDENT
*For completion by the worker*. Select Yes or No. If yes is selected, the next question must be answered.
If the worker 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 worker is also a Targeted Section 3 worker.

### CMHA SECTION 8 RESIDENT
*For completion by the worker*. Select Yes or No. If yes is selected, the next question must be answered.
If the worker 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 worker 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 |
|---|---|
| Any worker who currently fits or when hired within the past five years* fit at least one of the following categories, as documented:<br>▪ 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<br>▪ Employed by a Section 3 business concern; or<br>▪ A YouthBuild participant | A Section 3 Worker:<br>▪ Employed by a Section 3 business concern; or<br>Currently fits or when hired fit at least one of the following categories, as documented within the past five years*:<br>▪ A resident of CMHA public housing or CMHA Section 8-assisted housing for which the public housing financial assistance is expended; or<br>▪ A resident of other CMHA public housing projects or Section 8-assisted housing managed by CMHA<br>▪ A YouthBuild Participant |

*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 25, 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 May 2022.
- 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 | FY 2025 |
|---|---|---|---|---|---|
| $47,150 | $46,950 | $52,500 | $55,550 | $57,900 | $61,050 |

**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 2025. Optional: Examining Section 3 status based on the look-back period, select the year the worker was hired. NOTE: The look-back period starts November 30, 2020, not before. Do not select a year prior to 2020.
2. Scroll down and select "Click Here for FY 2025 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.