

SECTION 3 BUSINESS CONCERN CERTIFICATION

Dear Riverside County Business Owner:

The Housing & Workforce Solutions (HWS) invites you to self-certify as a Section 3 Business Concern.

Section 3 of the Housing and Urban Development (HUD) Act of 1968 was established to foster local economic development. It requires that economic opportunities, most importantly employment, generated by certain HUD financial assistance, shall be directed to low- and very low-income persons, particularly those who are recipients of government assistance for housing or residents of the community in which the federal assistance is spent. Section 3 regulations are outlined in Title 24 of the Code of Federal Regulations (CFR) Part 75.

Eligibility:

A business is eligible for self-certification as a Section 3 Business Concern, if its principal office is located in the County of Riverside and meets one of the following conditions:

- At least 51 percent owned and controlled by a County of Riverside resident who is a low- or very low-income person according to HUD Family Income Limits; or
- At least 75 percent of the labor hours performed for the business over the prior three-month period were performed by Section 3 Workers as defined as a County of Riverside resident who is a low- or very low-income person according to HUD Family Income Limits; employed by a Section 3 Business Concern; or a YouthBuild participant.

Please complete and email or mail the application to the following:

Program Analyst at: Sorozco@rivco.org

Housing, & Workforce Solutions
Section 3 Unit
3403 Tenth St, Suite 300 Riverside, CA 92501

If you have any questions, please contact the Section 3 Unit at (951) 955-5933

Thank you,

HWS Section 3/EOC Unit

SECTION 3 BUSINESS CONCERN APPLICATION

Instructions: Please type or legibly print. Complete and submit the Section 3 Business Concern Application, Certification and Affidavit, and if eligibility for certification is based on employees who performed at least 75 percent of total labor hours meeting the definition of a Section 3 Worker, submit Attachment I, "Section 3 Worker List."

Business Name:		Taxpayer ID Number:	
D.B.A (if different from above):			
Name of Owner(s)/President:			
*Principal Office Street Address (no P.O. Box)		City:	Zip Code:
		Number of Offices of Locations outside of Riverside County:	
Business Phone: ()		Fax: ()	
Business Email:		Website Address:	
Contact Person & Title:		Contact Email & Phone:	
Business License Number:	DUNS Number:	Is your Company a Union Shop? <input type="checkbox"/> YES <input type="checkbox"/> NO	
		If yes, identify:	
CSLB and/or Professional License Number(s):	License Expiration Date:	License Name:	
		License Classification:	
Public Works Contractor (PWC) Department of Industrial Relations (DIR) Registration Number:		PWC Registration Expiration Date:	
Primary NAICS Code (6-digits)*: _____		Service Category (check one):	
Secondary NAICS Code (6-digits): _____		<input type="checkbox"/> Construction <input type="checkbox"/> Pest Control <input type="checkbox"/> Professional	
*Go to the following link in order to identify your business's NAICS Code: https://www.census.gov/eos/www/naics		<input type="checkbox"/> Services <input type="checkbox"/> Supplier	
Please describe your business's services:			
Type of Business Entity (check one): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship			
<input type="checkbox"/> Limited Liability Corporation (LLC) <input type="checkbox"/> Other:			
Date Business Established (mm/dd/yyyy):		Last Annual Gross Revenues:	
Single Job Bonding Limit:		Aggregate Bonding Limit:	
Please specify preferred job type(s) (Specify contractual dollar amount and/or trades/services performed):			
Number of Employees at principal office*: Full-time: _____ Part-time: _____ Contract: _____ Total: _____			
Employee Classification (check all that apply): Management/Professional <input type="checkbox"/> Technicians <input type="checkbox"/> Construction Labor <input type="checkbox"/>			

Service Workers <input type="checkbox"/> Office/Clerical <input type="checkbox"/>
Has Business worked directly for the Housing & Workforce Solutions in the past? <input type="checkbox"/> YES <input type="checkbox"/> NO
If your business possesses any of the following certifications, identify and submit a copy of the certificates(s): <ul style="list-style-type: none"> <input type="checkbox"/> Inland Empire Small Business Development Center: <i>City of Riverside</i> <input type="checkbox"/> Business (SB): <i>CA Department of General Services</i> <input type="checkbox"/> Disadvantaged Business Enterprise (DBE): <i>CA Department of Transportation or CA Unified Certification Disabled Veteran</i> <input type="checkbox"/> Business Enterprise (DVBE): <i>CA Department of General Services</i> <input type="checkbox"/> Woman Business Enterprise (WBE): <i>CA Public Utilities Commission or City of Los Angeles</i> <input type="checkbox"/> Minority Business Enterprise (MBE): <i>Pacific Southwest Minority Supplier Development Council, CA Public Utilities Commission or City of Los Angeles</i>
Is your business an EPA (U.S. Environmental Protection Agency) Lead-Safe Certified Firm? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If certified, please submit a copy of the certificate with this application.)</i>
Note: As of April 22, 2010, ALL firms performing renovation work, which may disturb paint in target housing, are REQUIRED to be EPA-certified. Contractors will not be eligible to bid on such work until their EPA certificate is provided. Information about becoming a certified firm is available at: https://www.epa.gov/lead/getcertified
How did you learn about the Section 3 certification program?

Release of Information: If you become certified as a Section 3 Business Concern, do you grant the Housing & Workforce Solutions permission to share and/or release your business information (*excludes Taxpayer ID Number*) with other public agencies and/or firms seeking to contract with certified Section 3 Business Concerns?
 YES NO

***Principal Office:** The location where the greatest number of employees at any one location perform their work. **Exception:** Businesses whose primary industry is service or construction, the calculation of the number of employees excludes those employees who perform the majority of their work at job-site locations to fulfill specific contract obligations.

Example: A construction company has two offices – one in Los Angeles, the other in Riverside. Ten employees work at the Los Angeles location performing management and clerical functions. In Riverside, there is a manager, secretary and 28 construction workers performing work on a specific contract. In this example, the principal office is located in Los Angeles because there are ten employees compared to two employees (after excluding the 28 construction workers) in Riverside.

Who is a Section 3 Worker?

- A Section 3 Worker is a County of Riverside resident who is a low- to very low-income person according to HUD Family Income Limits; employed by a Section 3 Business Concern; or a YouthBuild participant.

2021 HUD FAMILY INCOME LIMITS								
FAMILY Size	1	2	3	4	5	6	7	8
Maximum Gross Annual Family Income	\$44,250	\$50,600	\$56,900	\$63,200	\$68,300	\$73,350	\$78,400	\$83,450

By the execution and delivery of this Application, Certification and Affidavit to the Housing & Workforce Solutions, you hereby covenant and agree to provide documentation upon demand by the Housing & Workforce Solutions, as it may reasonably request, to verify your eligibility for certification as a Section 3 Business Concern.

CERTIFICATION AND AFFIDAVIT

I, _____ (*print name*), declare under penalty of perjury, under the laws of the United States and the State of California, that I am the _____ (*title/position*) of _____ (*name of business*) and that the foregoing information and statements are true and correct:

I hereby certify that my business qualifies as a Section 3 Business Concern due to:

At least 51 percent ownership and control by a County of Riverside resident who is a low- or very low-income person according to the HUD Family Income Limits; or

At least 75 percent of the labor hours performed for the business over the prior three-month period were performed by Section 3 Workers.

I hereby certify on behalf of my business that the statements and information contained on this form are true and accurate, and meet the required HUD Section 3 business self-certification eligibility requirements in accordance with 24 CFR Part 75. I agree on behalf of my business to notify the Housing & Workforce Solutions' Section 3/EOC Unit of any material change in the information contained in this application within 30 days of such change. On behalf of my business I further agree to provide, any and all, documentation reasonably requested by the Housing & Workforce Solutions, in order to verify Section 3 eligibility.

A certified Section 3 Business Concern is not entitled to be awarded a contract simply by being listed in the Housing & Workforce Solutions' registry of certified Section 3 Business Concerns. Businesses that self-certify their eligibility may receive a designation as a Section 3 Business Concern, subject to later verification from local recipient agencies.

Information that is misrepresented in this application or in any documentation or information provided to the Housing & Workforce Solutions in connection with this application shall be grounds for denial or revocation of Section 3 certification and/or immediate termination of any contract that may be awarded. Persons that misrepresent their qualifications to receive a Section 3 Business Concern designation may face debarment and/or civil and/or criminal penalties, as provided for under applicable local, state and federal law. Executed the date referenced below, I acknowledge and declare, under penalty of perjury under laws of the United States and the State of California, that all of the foregoing information is true and correct. I further acknowledge that the Housing & Workforce Solutions will be relying upon this information in making Section 3 Business Concern designations.

***Printed Name:** _____

Title: _____

Authorized Signature: _____

Date: _____

***CORPORATE OFFICER OR PERSON AUTHORIZED TO SIGN BIDS AND CONTRACTS ON BEHALF OF THE BUSINESS**