

Section 3 Business Concern Registration Form

Please complete this form to register your business with the Knox County Housing Authority as a Section 3 Business.

Registration as a Section 3 Business Concern with the Knox County Housing Authority:

1. Complete this form in its entirety.
2. Complete the attached Verification Form, and submit all required documentation.
3. Once received, reviewed, and approved, you'll receive acknowledgement from the KCHA as to your business Section 3 registration status.
4. Information you provide about your business may be shared with the Department of Housing and Urban Development for reporting purposes.
5. Such registration is not a guarantee that your business will be awarded any contracts or subcontracts by the KCHA or its contractors/vendors.
6. If awarded contract by the KCHA or other contractor doing work for the agency, you will be required to submit all required Section 3 Certification forms.

BUSINESS INFORMATION

Business Name: _____

Business Phone: _____

Business Address: _____

City _____

State _____

Zip _____

Contact Name: _____

Title: _____

Contact Phone Number: _____

Contact Email: _____

Website: _____

Employer Identification Number: _____

KCHA Program Participant? Yes ☐

No ☐

If So, Name of Program/Development: _____

Type of Business Entity:

- ☐ Sole-Proprietorship
- ☐ Limited Liability Corporation
- ☐ General Partnership
- ☐ Limited Partnership
- ☐ Corporation
- ☐ Other

If Other, Please Specify: _____

Business Supply/Service (Check All Applicable Boxes)

- ☐ Architecture and Engineering
- ☐ Appraisals
- ☐ Catering
- ☐ Construction Management
- ☐ Consulting
- ☐ Demolition
- ☐ Electrical Service
- ☐ Electrical Supply
- ☐ HVAC/Plumbing Service
- ☐ HVAC/Plumbing Supply
- ☐ Information Technology (IT) Service
- ☐ Information Technology Supply
- ☐ Janitorial Service
- ☐ Janitorial Supply
- ☐ Lawn/Landscaping Service
- ☐ Lawn/Landscaping Supply
- ☐ Legal Service
- ☐ Office Service
- ☐ Office Supply
- ☐ Painting Service
- ☐ Painting Supply
- ☐ Tools/Hardware
- ☐ Other

If Other, Please Specify: _____

Additional Comments:

I hereby certify that the information provided to be true and correct, and understand that falsification of any information could subject the business entity and myself to disqualification from participation and punishment under the law.

Signature:

Date:

Name (Printed):

Title:

Company Name:

Section 3 Business Concern Verification Form

Please complete this form to register your business with the Knox County Housing Authority as a Section 3 Business.

Section 3 Business Concerns must present evidence of their section 3 Business Concern status to KCHA in order to complete registration.

BUSINESS VERIFICATION

Please submit the following documentation as evidence to verify your business as a Section 3 Business Concern:

1. Select one (1) category below that qualifies your business as a Section 3 Business Concern, and select and submit the necessary documentation under your category.

- ☐ Business is owned, at least 51%, by Section 3 residents.
 - ☐ Copy of most recent KCHA Public Housing Lease or Housing Choice Voucher
 - ☐ Copy of your most recent NYCHA's household composition letter
 - ☐ Copy of receipt of public assistance (e.g. - TANF)
 - ☐ Copy of most recent personal income tax return
 - ☐ Other: _____
- ☐ Business in which 30% of its permanent full-time employees include persons, at least 30% of whom are currently Section 3 residents, or within 3 years of the date of first employment with the business concern were Section 3 residents.
 - ☐ List of current full-time employees
 - ☐ List of employees claiming Section 3 status
 - ☐ Payroll from the last 3 months
 - ☐ Section 3 Resident Certification Form completed by all S3 staff (attached)
- ☐ Business claiming Section 3 Business Concern status by providing evidence of a commitment to subcontract in excess of 25% of the dollar award of all subcontracts to be awarded to business concerns that meet the qualifications in either of the two preceding bullet points.
 - ☐ Proof of successful Section 3 registration for the Section 3 subcontractors
 - ☐ Notice of contract award or copy of contract
 - ☐ List of subcontracted Section 3 business(es) and subcontract amount(s)

2. Proof of Ownership

- ☐ Sole Proprietorship
 - ☐ Owner's individual federal tax return (most recent completed tax year)
- ☐ Limited Liability Company (LLC)
 - ☐ Articles of Organization
 - ☐ LLC Operating Agreement, with a list of owners/members and ownership percentage held by each

- ☐ Partnership
 - ☐ Certificate of limited or general partnership, if one exists
 - ☐ Partnership Agreement, with a list of partners and ownership percentage held by each
- ☐ Corporation
 - ☐ Certificate of Incorporation
 - ☐ Bylaws
 - ☐ Shareholders' Agreement
 - ☐ List of Shareholders and number of shares of stock held by each
 - ☐ Corporation's Annual Report and latest Biennial Statement

3. Other than with respect to a sole proprietorship, please submit a corporate resolution or minutes of, as applicable, the controlling person of your business (i.e. managing partner, director, manager, managing member) or governing body of your business (i.e. board of directors, board of managers) that authorizes your business to submit this form and authorizes the signatory hereon to sign this form on behalf of your business.

4. Address Verification

- ☐ Driver's License or another State Identification
- ☐ Proof of Address (if address on the form does not match your address on your ID)

Mail signed and notarized form to:

Ms. Cheryl Lefler
Assistant Director, Procurement Specialist
Knox County Housing Authority
216 W. Simmons St.
Galesburg, IL 61401
Attn: Section 3 Business Concern Certification

I hereby certify that the information provided to be true and correct, and understand that falsification of any information could subject the business entity and myself to disqualification from participation and punishment under the law.

Signature:

Date:

Name (Printed):

Title:

Company Name:



Section 3 Business Concern Verification Form

Please complete this form to register your business with the Knox County Housing Authority as a Section 3 Business.

For businesses that claim section 3 status because at least 30% of their permanent full-time workforce is section 3 residents (Please submit a certificate for each such section 3 residents).

RESIDENT CERTIFICATION INFORMATION

Name of Business:

Name of Employee:

Address of Employee:

Date of Hire:

The following must be completed and signed by each permanent, full-time employee who is claiming to meet HUD's section 3 income requirement:

Name:

I hereby certify as follows:

The total number of people in my household is:

Number of Persons in Household

My total gross annual household income is:

Total Gross Annual Household Income

I am a program participant with a public housing authority:

Name of Public Housing Authority

I swear that the above information is true and correct to the best of my knowledge, information and belief. I understand that this information is subject to verification by the U.S. Department of Housing and Urban Development (HUD) and by agencies receiving HUD funding. I agree to give HUD and/or Section 3 recipient agencies all documentation that they may request concerning my residence and my household income as of the initial Date of Hire, including, but not limited to, a copy of my household's federal income tax return.

Signature:

Date:

R(07/16/2014)