



Section 3 Business Concern Certification for Contracting

Instructions: Enter the following information and select the criteria that applies to certify your business' Section 3 Business Concern status.

Business Information

Name of Business _____

Address of Business _____

Name of Business Owner _____

Phone Number of Business Owner _____

Email Address of Business Owner _____

Preferred Contact Information

Same as above

Name of Preferred Contact _____

Phone Number of Preferred Contact _____

Type of Business (select from the following options):

Corporation

Partnership

Sole Proprietorship

Joint Venture



Select from *ONE* of the following three options below that applies:

At least 51 percent of the business is owned and controlled by low- or very low-income persons (Refer to income guidelines on page 5).

At least 51 percent of the business is owned and controlled by current public housing residents or residents who currently live in Section 8-assisted housing. *(if you select this choice, please complete the following * for the business owner's home address):*

*Business Owner's Home Address: _____

* City: _____, *State: _____, *Zip Code _____

Over 75 percent of the labor hours performed for the business over the prior three-month period are performed by Section 3 workers (Refer to definition on page 3). *Must attach or submit individual Section 3 Worker and Targeted Section 3 Worker Self-Certification forms.*



Business Concern Affirmation

I acknowledge I have reviewed this form in its entirety and affirm that the statements are true, complete, and correct to the best of my knowledge and belief. I understand that businesses who misrepresent themselves as Section 3 business concerns and report false information to Sarasota County may have their contracts terminated as default and be barred from ongoing and future considerations for contracting opportunities. hereby certify, under penalty of law, that the following information is correct to the best of my knowledge.

Print Name: _____

Signature: _____ Date: _____

*Certification expires within six months of the date of signature

Information regarding Section 3 Business Concerns can be found at [24 CFR 75.5](#)

FOR ADMINISTRATIVE USE ONLY

Is the business a Section 3 business concern based upon their certification?

YES NO

EMPLOYERS MUST RETAIN THIS FORM IN THEIR SECTION 3 COMPLIANCE FILE FOR FIVE YEARS AFTER CLOSEOUT OF GRANT



Income Eligibility

The worker's income for the previous or annualized calendar year is **at or below 80% of the current area median income for the area in which the worker resides**. The annual income limit is based on the worker's income for a single person household (household of 1) regardless of actual household size.

Individual Income Limits for Sarasota County

Income Limits Category	2024 Income Limits
Extremely Low-Income Limits (30%)	\$21,150
Very Low-Income Limits (50%)	\$35,200
Low Income Limits (80%)	\$56,300

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

for most recent income limits of all counties and states.



Definitions

Section 3 Worker:

Currently meets or when hired met at least one of the following categories as documented within the past five years ¹

- A low or very low-income resident as established by HUD's income limits (refer to Page 4)
- Employed by a Section 3 business concern
- A YouthBuild participant

Targeted Section 3 Worker (Housing and Community Development Assistance (24 CFR 75.21))

- Employed by a Section 3 business concern or
- Currently meets or when hired met at least one of the following categories as documented within the past five years ²
 - Living within the service area or the neighborhood of the project³, as defined in 24 CFR 75.5 or
 - A YouthBuild participant

¹ Not prior to rule change effect as of Nov 30th, 2020

² Not prior to rule change effect as of Nov 30th, 2020

³ The neighborhood service area is defined as a one-mile radius of the project site, or if fewer than 5,000 people, circle centered on the project containing 5,000 people.