



### SECTION 3 BUSINESS CONCERN CERTIFICATION FOR CONTRACTING

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**Instructions:** Enter the following information and select the criteria that applies to certify your business' Section 3 Business Concern status. If duplicating the form, please duplicate it on one page – front and back – to avoid separation of pages.

#### 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

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 (at or below 80% of reporting year's Galveston County/Houston MSA Median Income).

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.

Over 75 percent of the labor hours performed for the business over the prior three-month period are performed by Section 3 workers (certified Section 3 workers or workers hired in as low-income persons within the past 5 years or currently earning low incomes).

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**BUSINESS CONCERN AFFIRMATION**

I affirm that the above statements (on the frontside of this form) 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 the City of League City or U. S. Department of Housing and Urban Development may have their contracts terminated as default and be barred from ongoing and future considerations for contracting opportunities with either organization. I hereby certify, under penalty of law, that the following information is correct to the best of my knowledge.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Business: \_\_\_\_\_

\*Certification expires twelve months after the date of signature, with a 12-month extension granted via signed request by business.

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

May the City of League City include the Business in a publicly available list of Section 3 businesses?  YES

NO

*(if "no" the information will be placed only in an in-house file and will not be published or shared with other entities, including bidders seeking Section 3 Businesses with which to contract)*

**FOR ADMINISTRATIVE USE ONLY**

Is the business a Section 3 business concern based upon their certification?  YES  
 NO

If "yes" is the business willing to share their Section 3 status with other jurisdictions or potential contractors?

YES  NO

**CITY OF LEAGUE CITY AND ANY CONTRACTOR HIRING THE BUSINESS UNDER SECTION 3  
MUST RETAIN THIS FORM IN THEIR SECTION 3 COMPLIANCE FILE FOR FIVE YEARS.**