

Exhibit 1

CERTIFICATION FOR BUSINESS CONCERNS SEEKING SECTION 3 PREFERENCE IN CONTRACTING AND DEMONSTRATION OF CAPABILITY

Name of Business _____

Address of Business _____

Type of Business: Corporation Partnership
 Sole Proprietorship Joint Venture

Attached is the following documentation as evidence of status:

For Business claiming status as a Section 3 resident-owned enterprise:

- Copy of resident lease Copy of receipt of public assistance
 Copy of evidence of participation in a public assistance program Other evidence

For business entity as applicable:

- Copy of Articles of Incorporation Certificate of Good Standing
 Assumed Business Name Certificate Partnership Agreement
 List of owners/stockholders and % ownership of each Corporation Annual Report
 Organization chart with names and titles and brief function statement Latest Board minutes appointing officers
 Additional documentation

For business claiming Section 3 status by subcontracting 25 percent of the dollar awarded to qualified Section 3 business:

- List of subcontracted Section 3 business(es) and subcontract amount

For business claiming Section 3 status, claiming at least 30 percent of their workforce are currently Section 3 residents or were Section 3 eligible residents within 3 years of date of first employment with the business:

- List of all current full-time employees List of employees claiming Section 3 status
 PHA/IHA Residential lease less than 3 years from day of employment Other evidence of Section 3 status less than 3 years from date of employment

Evidence of ability to perform successfully under the terms and conditions of the proposed contract:

- Current financial statement
 Statement of ability to comply with public policy
 List of owned equipment
 List of all contracts for the past two years

Authorizing Name and Signature

(Corporate Seal)

Attested by: _____

Exhibit 1-A

CERTIFICATION OF BIDDER REGARDING SECTION 3 AND SEGREGATED FACILITIES

Name of Proposed Contractor

Project Name & Number

The undersigned hereby certifies that:

- a. Section 3 provisions are included in the Contract.
- b. A written Section 3 plan was prepared and submitted as part of the bid proceedings (if bid equals or exceeds \$100,000).
- c. No segregated facilities will be maintained.

Signer Name _____

Title _____

SIGNATURE

DATE

BIDDER

Section 3 Plan Format

If award is received _____ agrees to implement the following
(Name of Bidder)
specific affirmative action steps directed at increasing the utilization of lower income residents and
businesses within the City of _____ .

- A. To ascertain from the locality's CDBG program official the exact boundaries of the Section 3 covered project area and where advantageous, seek the assistance of local officials in preparing and implementing the affirmative action plan.
- B. To attempt to recruit from within the city the necessary number of lower income residents through: Local advertising media, signs placed at the proposed site for the project, and community organizations and public or private institutions operating within or serving the project area such as Service Employment and Redevelopment (SER), Opportunities Industrialization Center (OIC), Urban League, Concentrated Employment Program, Hometown Plan, or the U.S. Employment Service.
- C. To maintain a list of all lower income area residents who have applied either on their own or on referral from any source, and to employ such persons, if otherwise eligible and if a vacancy exists.
- *D. To insert the Section 3 Contract Provisions clause in all subcontracts over \$100,000, to obtain Tables A and B from said subcontractors, and to obtain all documentation for completion of Tables C and D prior to final payment.
- *E. To formally contact unions, subcontractors and trade associations to secure their cooperation for this program.
- F. To insure that all appropriate project area business concerns are notified of pending sub-contractual opportunities.
- G. To maintain records, including copies of correspondence, memoranda, etc., which document that all of the above affirmative action steps have been taken.
- H. To appoint or recruit an executive official of the company or agency as Equal Opportunity Officer to coordinate the implementation of this Section 3 plan.
- I. To list on Table A, information related to proposed subcontracts to be awarded to Section 3 businesses.

- J. To list on Table B, all projected workforce needs for all phases of this project by occupation, trade, skill level and number of positions.
- K. If successful bidder, to submit prior to final payment, Tables C and D to city/county grantees which includes all applicable hires and subcontractors utilized on this project.

* Loans, grants, contracts and subsidies for less than \$100,000 will be exempt.

As officers and representatives of _____
Name of Bidder

we, the undersigned, have read and fully agree to the Affirmative Action Plan and become a party to the full implementation of this program.

 Signature

 Title

 Date

 Signature

 Title

 Date

Exhibit 2

THE CITY/COUNTY
of _____

RESIDENT EMPLOYMENT OPPORTUNITY DATA

<p>CITY OF _____</p> <p>ELIGIBILITY FOR PREFERENCE</p>
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Eligibility for Preference

A Section 3 resident seeking the preference in training and employment provided by this part shall certify, or submit evidence to the recipient contractor or subcontractor, if requested, that the person is a Section 3 resident, as defined in Section 135.5. (An example of evidence of eligibility for the preference is evidence of receipt of public assistance, or evidence of participation in a public assistance program.)

Certification for Resident Seeking Section 3 Preference in Training and Employment

I, _____, am a legal resident of the _____ and meet the income eligibility guidelines for a low- or very-low-income person as established on the reverse.

My permanent address is:

I have attached the following documentation as evidence of my status.

- | | |
|--|---|
| <input type="checkbox"/> Copy of lease | <input type="checkbox"/> Copy of receipt of public assistance |
| <input type="checkbox"/> Copy of evidence of participation
in a public assistance program | <input type="checkbox"/> Other evidence |
- _____

Signature

Print Name

Date

BIDDER'S SECTION 3 ESTIMATED NEW HIRES

TABLE B

Job Category	Total Estimated Positions Needed for Project	No. Positions Occupied by Permanent Employees	Number of Positions Not Occupied	Number of Positions to be Filled with Section 3 Residents
Officer/Supervisor				
Professionals				
Technical				
Hsq. Sales/Rental Management				
Office/Clerical				
Service Workers				
Others				
TRADE:				
Journeyman				
Helpers				
Apprentices				
Trainees				
Others				
TRADE:				
Journeyman				
Helpers				
Apprentices				
Trainees				
Others				

Company

CDBG Project Name (City/County)

CDBG Project Number

Person Completing Form

Date

CONTRACTOR'S SECTION 3 NEW HIRES REPORT

TABLE C

Job Category	Total Estimated Positions Needed for Project	No. Positions Occupied by Permanent Employees	Number of Positions Not Occupied	Number of Positions to be Filled with Section 3 Residents
Officer/Supervisor				
Professionals				
Technical				
Hsq. Sales/Rental Management				
Office/Clerical				
Service Workers				
Others				
TRADE:				
Journeyman				
Helpers				
Apprentices				
Trainees				
Others				
TRADE:				
Journeyman				
Helpers				
Apprentices				
Trainees				
Others				

Company

CDBG Project Name (City/County)

CDBG Project Number

Person Completing Form

Date

CONTRACTOR'S SECTION 3 BUSINESS UTILIZATION REPORT

TABLE D

CDBG Project Number: _____ Total Dollar Amount of Contract _____

Name of Prime Contractor: _____

Address _____

Federal Identification Number _____

Subcontractor	Sec 3 Business?	Address	Phone #	Trade/ Service/ Supply	Contract Amount	Award Date	Bid – Competitive or Negotiated?	DUNS # Number	
Total – all Section 3 contracts									

Section 3
NOTICE TO CITIZENS IN THE CITY/COUNTY OF _____
OPPORTUNITY FOR WORK

The City/County of _____ has received a \$_____ Community Development Block Grant from the Kansas Department of Commerce to _____ (type of project) in the City/County of _____.

This grant will provide the City/County of _____ the opportunity to search for eligible local citizens interested in participating in the project. Section 3 of the Housing and Urban Development Act of 1968, as amended through 1994, provides that to the greatest extent feasible, preference for economic opportunities will be given to citizens in _____ City/County who are determined to be low- to moderate- income individuals. A low- to moderate- income individual can be calculated by documenting household income of less than 80 percent of the county median income. Opportunities such as job training and employment that arise through this Community Development Block Grant project will be directed toward City/County residents. Contractors can be eligible for a Section 3 contract as awarded in connection with CDBG projects if they meet one of the following definitions:

- Business is owned by 51 percent or more Section 3 residents;
- Business employs Section 3 residents in full-time positions;
- Businesses who subcontract with other businesses that provide economic opportunity to Section 3 residents.

Section 3 requirements apply to the City/County as a grantee, if the project activity is \$200,000 or more, and to all contractors and subcontracts \$100,000 or more if the \$200,000 threshold is met.

If you wish to determine if you qualify or have an interest in serving as a subcontractor for this project, please contact _____, _____, _____ (Name), (Address), (Phone Number).

If you are interested in job training or other employment resources, please contact:

KANSASWORKS services at 1-877-509-6757

www.kansasworks.com

Exhibit 6

Click here to access the [HUD Complaint Register Form](#)

<p>Complaint Register Under Section 3 of the Housing And Urban Development Act of 1968</p>	<p>U.S. Department of Housing and Urban Development Office of Fair Housing and Equal Opportunity</p>	<p>OMB Approval No. 2529-0043 (Expires 11/30/2010)</p>
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Name of Complainant (Person or organization)	Home Phone
Street Address	Work Phone
City, State, Zip code	
Against whom is this complaint being filed?	Business Phone
Name of organization or company	
Street Address	
City, State, Zip code	
Name and identify others (if any) who violated the law in this case	

You are (check all that apply)	
<input type="checkbox"/> A. Low/Very low income	<input type="checkbox"/> D. Section 3 business concern
<input type="checkbox"/> B. Public housing resident	<input type="checkbox"/> E. A representative of D
<input type="checkbox"/> C. A representative of A or B	

Complaint is against (check one or more boxes)	
<input type="checkbox"/> A. Applicant	<input type="checkbox"/> D. Recipient
<input type="checkbox"/> B. Sub-Recipient	<input type="checkbox"/> E. Contractor
<input type="checkbox"/> C. Subcontractor	<input type="checkbox"/> F. Other (please specify _____)

Basis for non compliance with Section 3		
<input type="checkbox"/> Denied Training	<input type="checkbox"/> Denied Employment	<input type="checkbox"/> Denied Contracting

What did the person you are complaining against do? (Check all that apply – provide documentation)	
<input type="checkbox"/> A. Failed to meet numerical goals, as set out in the Section 3 regulations	<input type="checkbox"/> F. Failed to incorporate the Section 3 clause in Section 3 solicitations or contracts
<input type="checkbox"/> B. Failed to ensure that its contractors and subcontractors comply with Section 3	<input type="checkbox"/> G. Failed to train and/or employ Section 3 residents
<input type="checkbox"/> C. Failed to notify Section 3 residents about training and/or employment opportunities	<input type="checkbox"/> H. Failed to award contracts to Section 3 business concerns
<input type="checkbox"/> D. Failed to notify Section 3 business concerns about contracting opportunities	<input type="checkbox"/> I. Contracted with a contractor found to be in violation of applicable statutes and/or HUD regulations
<input type="checkbox"/> E. Failed to notify potential contractors for Section 3 covered projects of the requirements of Section 3	<input type="checkbox"/> J. Failed to provide preference to Section 3 residents in training and or employment opportunities.
	<input type="checkbox"/> K. Failed to provide preferences for Section 3 business concerns in contracting opportunities

When did the act(s) checked above occur? (Include the most recent date if several dates are involved):
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Identify HUD assistance program(s). (Check all that apply)			
<input type="checkbox"/> A. PIH/DEV	<input type="checkbox"/> D. Other PIH	<input type="checkbox"/> G. CDBG	<input type="checkbox"/> J. Other CPD
<input type="checkbox"/> B. PIH/MOD	<input type="checkbox"/> E. 202/811	<input type="checkbox"/> H. HOME	<input type="checkbox"/> K. Lead-based Paint
<input type="checkbox"/> C. PIH/OPER	<input type="checkbox"/> F. Other Housing	<input type="checkbox"/> I. Homeless	<input type="checkbox"/> L. Other

Summarize what happened? Attach additional information if necessary

Signature	Date
I declare under penalty of perjury that I have read this compliant (including any attachments) and that it is true and correct.	