



**Return to: City of Woonsocket, Department of Planning & Development, 169 Main Street, PO Box B, Woonsocket, RI 02895**

Section 3 is a provision of the Housing and Urban Development (HUD) Act of 1968 that helps foster local economic development, neighborhood economic improvement, and individual self-sufficiency. The Section 3 program requires that recipients of certain HUD financial assistance, to the greatest extent feasible, provide job training, employment, and contracting opportunities for low- or very-low income residents in connection with projects and activities in their neighborhoods. Section 3 also provides opportunities for business owners who meet the definition of a Section 3 business concern to receive preference in bidding on HUD-funded contracts.

### SECTION 3 BUSINESS APPLICATION

**This Section 3 application is optional and not required to do business with The City of Woonsocket.**

**LEGAL NAME OF BUSINESS:** \_\_\_\_\_

**TRADESTYLE NAME (d.b.a.):** \_\_\_\_\_

**ADDRESS OF BUSINESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**FAX NUMBER:** \_\_\_\_\_

**MOBILE NUMBER:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**NAME OF AUTHORIZED AGENT:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**1. TYPE OF BUSINESS:**

- Corporation  Partnership  Sole Proprietorship  Joint Venture  LLC

**2. OWNERSHIP / CERTIFICATIONS:**

- Minority-owned  Woman-owned

| 3. ATTACH THE FOLLOWING TO YOUR APPLICATION: | CORPORATIONS must submit:   |                          | PARTNERSHIPS and JOINT VENTURES must submit:  |
|--|---|--------------------------|---|
| <input type="checkbox"/>                     | Letter of Good Standing from Secretary of State                                     | <input type="checkbox"/> | Letter of Good Standing from Secretary of State                                     |
| <input type="checkbox"/>                     | Articles of Incorporation showing all owners/stockholders and ownership percentages | <input type="checkbox"/> | Partnership or Joint Venture Agreement showing all owners and ownership percentages |
| <input type="checkbox"/>                     | Corporate Tax Return for previous year <b>OR</b> Corporate Financial Statements     | <input type="checkbox"/> | Business Tax Return for previous year <b>OR</b> Business Financial Statements       |
|  | <b>LLCs must submit:</b>  |                          | <b>SOLE PROPRIETORSHIPS must submit:</b>  |

|                          |   |                          |   |
|--------------------------|---|--------------------------|---|
| <input type="checkbox"/> | Letter of Good Standing from Secretary of State   | <input type="checkbox"/> | Letter of Good Standing from Secretary of State (if available)                                  |
| <input type="checkbox"/> | Articles of Organization showing all members and ownership percentages                                | <input type="checkbox"/> | Proof of business filing with the State of RI   |
| <input type="checkbox"/> | Personal/Business Tax Return for previous year for each owner <b>OR</b> Business Financial Statements | <input type="checkbox"/> | Personal/Business Tax Return for previous year <b>OR</b> Personal/Business Financial Statements |

**Certificates of Good Standing** may be obtained from the **Secretary of State**

|  |  |
|--|--|
| <b>4. SECTION 3 ELIGIBILITY: (check all that apply)</b> I am claiming Section 3 status as: |  |
|  | <b>An individual, sole proprietorship, partnership, corporation or joint venture that has 51% ownership by a Section 3 qualified INDIVIDUAL. Please submit:</b>  |
| <input type="checkbox"/>   | Section 3 Business Concern Application and all required supporting documentation (this application)  |
| <input type="checkbox"/>   | Section 3 Employee List  |
| <input type="checkbox"/>   | For the Owner claiming 51% or more Ownership, submit:<br>___ Section 3 Resident Certification Letter <b>OR</b><br>___ Section 3 Resident Preference Claim Form with all required supporting documentation <b>AND</b> Section 3 Resident or Employee Household Income Certification |
|  | <b>A business claiming 30% of current full-time workforce qualify as section 3 residents, or within three years of the date of first employment with the business concern were section 3 residents. Please submit:</b>   |
| <input type="checkbox"/>   | Section 3 Business Concern Application and all required supporting documentation (this application)  |
| <input type="checkbox"/>   | Section 3 Business Employee List   |
| <input type="checkbox"/>   | Section 3 Business Contractor or Subcontractor Payroll Report Complete for each F/T employee who has been employed at least one month. (this includes all employees of the company)  |
| <input type="checkbox"/>   | For each Section 3 Employee, submit:<br>___ Section 3 Resident Certification Letter <b>OR</b><br>___ Section 3 Resident Preference Claim Form with all required supporting documentation <b>AND</b> Section 3 Resident or Employee Household Income Certification                  |
|  | <b>A business committing to subcontract in excess of 25 percent of the dollar award of all subcontracts to be awarded to Section 3 Certified Businesses qualifying based on ownership or employees. Please submit:</b>   |
| <input type="checkbox"/>   | Section 3 Business Concern Application and all required supporting documentation (this application)  |
| <input type="checkbox"/>   | Section 3 Business Employee List   |
| <input type="checkbox"/>   | Section 3 Contractor or Subcontractor Report (this list must demonstrate that 25% of the total dollar award of all subcontracts are to be awarded to Section 3 business concerns).   |
| <input type="checkbox"/>   | For each Section 3 Subcontract submit:<br>___ Section 3 Resident Certification Letter for each Section 3 Certified Business subcontractor, <b>AND</b><br>___Section 3 Business Employee List for each Section 3 Certified Business subcontractor                                   |

*I hereby certify that, to the best of my knowledge, the information contained herein and in the attached documents is true and accurate.*

**COMPANY NAME:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**NOTARY:** \_\_\_\_\_