



Pinellas County Housing Authority

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www.PinellasHousing.com

APPLICATION FOR SECTION 3 BUSINESS CONCERN CERTIFICATION

Business Name: _____

Business Address: _____

- Business Type:
- | | | |
|--------------------------------------|--|--------------------------------|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> LLC |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Joint Venture | <input type="checkbox"/> Other |

Attached is the following documentation as evidence of my status:

For business entity as applicable: (applies to all applicants)

- | | |
|--|---|
| <input type="checkbox"/> Copy of Articles of Incorporation | <input type="checkbox"/> Certificate of Good Standing |
| <input type="checkbox"/> Assumed Business Name Certificate | <input type="checkbox"/> Partnership Agreement |
| <input type="checkbox"/> List of owners/stockholders and percent ownership of each | <input type="checkbox"/> Corporation Annual Report |
| <input type="checkbox"/> Organization chart with names and titles and a brief function statement | <input type="checkbox"/> Latest board minutes appointing officers |
| | <input type="checkbox"/> Additional documentation |

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

- | | |
|---|---|
| <input type="checkbox"/> Copy of resident 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 |

For businesses claiming Section 3 status by sub-contracting 25 percent of the dollars awarded to qualified Section 3 businesses:

- List of sub-contracted Section 3 business(es) and sub-contract amount(s).

For businesses claiming Section 3 status, claiming at least 30% 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:

- | | |
|---|---|
| <input type="checkbox"/> List of all current full-time employees | <input type="checkbox"/> List of employees claiming Section 3 status |
| <input type="checkbox"/> PHA/IHA Residential lease less than 3 years from day of employment | <input type="checkbox"/> 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:

- | | |
|--|---|
| <input type="checkbox"/> Current financial statement | <input type="checkbox"/> List of owned equipment |
| <input type="checkbox"/> Statement of ability to comply with public policy | <input type="checkbox"/> list of all contracts for the past 2 years |

(Corporate Seal)

Authorizing Signature

Print Name

Attested By: