

PHILADELPHIA HOUSING AUTHORITY

SECTION 3 VENDOR COMMITMENT

(FORM 1)

**INSTRUCTIONS:** All vendors MUST complete this Section 3 commitment form as part of their bid/proposal, or to amend a commitment after a contract has been successfully awarded. Please answer the questions, **AS PROMPTED**. This form must be signed when completed. If additional forms are required, it will be noted in the appropriate section of this Form 1.

**1. IS YOUR BUSINESS A QUALIFIED SECTION 3 BUSINESS CONCERN?**

☐ YES

☐ NO

If the answer is “Yes,” check at least one reason below, review and initial the acknowledgement section in Question 2, sign this Form, and complete Form 2 and provide appropriate documentation.

\_\_\_\_\_ It is at least 51 percent owned and controlled by low- or very low-income persons;

\_\_\_\_\_ Over 75 percent of the labor hours performed for the business over the prior three-month period are performed by Section 3 workers; or,

\_\_\_\_\_ It is a business at least 51 percent owned and controlled by current public housing residents or residents who currently live in Section 8-assisted housing.

If the answer is “No”, review and initial the acknowledgement section in Question 2, proceed to Question 3 and sign this Form.

**2. YOUR BUSINESS IS EXPECTED TO MEET PHA’S SAFE HARBOR BENCHMARKS BELOW.**

1) The Section 3 worker labor hours on the project must equal at least 25 percent of the total labor hours performed on the project, and shall consist of the following;;

Section 3 Labor Hours / Total Labor Hours = 20%

Targeted Section 3 Labor Hours / Total Labor Hours = 5%

\_\_\_\_\_ **I ACKNOWLEDGE AND UNDERSTAND THE ABOVE SAFE HARBOR BENCHMARKS AND THAT MONTHLY FILING OF LABOR HOURS TO PHA WILL BE REQUIRED**

**IN THE EVENT THAT YOUR ORGANIZATION FAILS TO MEET THE ABOVE SAFE HARBOR BENCHMARKS, YOU WILL RECEIVE CREDIT FOR THE PERCENTAGE OF HOURS THAT QUALIFIED AS SECTION 3 WORKED HOURS; HOWEVER YOU WILL BE REQUIRED TO MAKE UP THE SAFE HARBOR DEFICIT BY PROVIDING QUALITATIVE EFFORTS THAT MAY, WITH APPLIED CREDIT, EQUAL TO UP TO 3% OF THE CONTRACT VALUE.**

**3. PHA QUALITATIVE EFFORTS AND OTHER ECONOMIC OPPORTUNITIES – THIS SECTION MUST BE COMPLETED BY ALL BIDDERS/PROPOSERS WHO ARE NOT A SECTION 3 BUSINESS CONCERN**

Vendors who are successfully awarded a contract with PHA are expected to provide proof of best efforts to achieve the Safe Harbor Benchmarks for worked hours. In addition, vendors are required to plan for and conduct Qualitative Efforts to provide Other Economic Opportunities to Section 3 and Targeted Section 3 workers in the priority order listed below if they are unable to meet the Section 3 Safe Harbor Benchmarks.

- 1) Residents of the public housing projects for which the public housing financial assistance is expended;
- 2) Residents of other public housing projects managed by the PHA that is providing the assistance or for residents of Section 8-assisted housing managed by the PHA;
- 3) Participants in YouthBuild programs; and
- 4) Low- and very low-income persons residing within the metropolitan area in which the assistance is expended.

The following qualify as qualitative efforts to fulfill the requirements of not meeting PHA's Safe Harbor Benchmarks, subject to PHA pre-approval. At least one option must be selected.

- A.** Contributions to the Section 3 Fund that PHA will use for job training and development, continuing education, and Section 3 business development.

☐ **YES** ☐ **NO**

**If your answer is "Yes," your business must contribute up to 3% of the total contract invoice value minus that proportional amount of credit applied for Section 3 hours worked.**

- B.** Your business will provide training or apprenticeship opportunities to those who qualify as low and very low income workers?

☐ **YES** ☐ **NO**

**If "Yes", please complete the TRAINING/APPRENTICESHIP QUESTIONNAIRE section of the DESCRIPTION OF QUALITATIVE EFFORTS & OTHER ECONOMIC OPPORTUNITIES document attached below.**

- C.** Your business will connect Section 3 workers to services supporting work readiness and retention (e.g., work readiness activities, interview clothing, test fees, transportation, childcare)

☐ **YES** ☐ **NO**

**If "Yes", please complete the WORK READINESS QUESTIONNAIRE section of the DESCRIPTION OF QUALITATIVE EFFORTS & OTHER ECONOMIC OPPORTUNITIES document attached below.**

- D.** Your business will provide assistance to apply for/or attend community college, a four-year educational institution, or vocational/technical training.

☐ **YES** ☐ **NO**

**If "Yes", please complete the POST SECONDARY ASSISTANCE QUESTIONNAIRE section of the DESCRIPTION OF QUALITATIVE EFFORTS & OTHER ECONOMIC OPPORTUNITIES document attached below.**

- E. Provide technical training (workshops or one on one support) to help Section 3 business concerns understand and bid on contracts.

☐

YES

☐

NO

If “Yes”, please complete the **TECHNICAL TRAINING FOR SECTION 3 BUSINESSES QUESTIONNAIRE** section of the **DESCRIPTION OF QUALITATIVE EFFORTS & OTHER ECONOMIC OPPORTUNITIES** document attached below.

- F. Divide subcontracts into smaller jobs that result in participation by Section 3 businesses.

☐

YES

☐

NO

If “Yes”, please provide details: \_\_\_\_\_

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- G. Provide bonding assistance, guaranties, or other efforts to support viable bids from Section 3 business concerns.

☐

YES

☐

NO

If “Yes”, please provide details: \_\_\_\_\_

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- H. Develop, stabilize or expand a Section 3 Business(es)?

☐

YES

☐

NO

If your answer is “Yes,” please provide a detailed plan for review and approval by the PHA Section 3 Program for one of the following prior to execution of any agreement:

<input type="checkbox"/>	Assist with the formation of Section 3 Joint Business Venture
<input type="checkbox"/>	Hire or subcontract with a Section 3 Businesses for work unrelated to this contract, if successfully awarded
<input type="checkbox"/>	Provide mentorship, continuing education, and training opportunities that benefit Section 3 Businesses

By signing below, the vendor acknowledges and understands that it has reviewed PHA’s Section 3 compliance requirements and agrees to comply with the selected commitments indicated above. Vendor attests that the proof supplied and representations made for Section 3 status are accurate, to the best of its knowledge and belief and understands that any intentional submission of false information shall be a material breach of the contract. To the extent that the completion of this form is contingent upon future information, for example price negotiations, request for specific services, etc., the undersigned hereby affirms and agrees to fully adhere in good faith to the PHA Section 3 compliance goals. The undersigned acknowledges and affirms responsibility for completion and submission of this form **PRIOR TO AWARD** of a contract and acknowledges that failure to submit this form will render this submission non-responsive.

Attested to by:

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Authorized Officer Signature

Date

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Print Name and Title

Company/Business Name

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Address  
Number

Phone

Email:

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Proposal or Contract Number

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**EMPLOYERS MUST RETAIN THIS FORM IN THEIR SECTION 3 COMPLIANCE FILE**

## PHILADELPHIA HOUSING AUTHORITY

### SECTION 3 VENDOR COMMITMENT

#### DESCRIPTION OF QUALITATIVE EFFORTS & OTHER ECONOMIC OPPORTUNITIES

**INSTRUCTIONS:** All bidders/proposers who are NOT a Section 3 business concern (defined on Section 3 Vendor Commitment Form 1) MUST complete a Section 3 commitment form as part of their bid/proposal, or to amend a commitment after a contract has been successfully awarded.

Vendors must meet the safe harbor benchmarks for Section 3 Labor Hours and Targeted Section 3 Labor Hours listed on Vendor Commitment Form 1. In the event that your organization fails to meet these safe harbor benchmarks, you will receive credit for the percentage of hours that qualified as Section 3 worked hours; however, you will be required to make up the safe harbor deficit by providing “qualitative efforts” that may, with applied credit, equal to up to 3% of the contract value.

“Qualitative efforts” are activities by PHA contractors the help public and assisted housing residents obtain jobs or benefit from other economic opportunities, now or in the future. Vendors commit to certain types of qualified efforts when completing Vendor Commitment Form 1, and PHA Resident Programs & Partnership (RPP) reviews all proposed qualitative efforts. RPP’s review looks for proposed activities that are likely to have a *significant, positive impact* on our resident or other low- and very low-income workers.

If your bid includes a commitment to any of the following qualitative efforts, you MUST complete this form

- **Training/Apprenticeship:** Provide training or apprenticeship opportunities to those who qualify as low- and very low-income workers – *answer questions on pages 2-4.*
  - “Training or apprenticeship opportunities” should qualify graduates/completers for jobs. If a program or service does not lead directly to employment, it is a “work readiness activity.”
- **Work Readiness:** Connect Section 3 workers to services supporting work readiness and retention (e.g., work readiness activities, interview clothing, test fees, transportation, childcare) – *answer questions on page 5.*
- **Post-Secondary Assistance:** Provide assistance to apply for/or attend community college, a four-year educational institution, or vocational/technical training – *answer questions on page 6.*
- **Technical Training for Section 3 Businesses:** Provide technical training (workshops or one on one support) to help Section 3 business concerns understand and bid on contracts – *answer questions on pages 7-8.*

The most important part of your proposal is how valuable your proposed qualitative efforts will be to PHA residents and other Section 3 workers. RPP is looking for proposals that can have an estimated value equal to 3% of the contract value, to help ensure that PHA’s vendors, and PHA, are meeting HUD’s Section 3 requirements. RPP will use the information you provide here to help determine if the value of the proposed qualitative efforts to PHA resident and other Section 3 workers will meet these requirements. Checking more boxes and proposing more efforts will not necessarily help or harm your proposal scoring –the *value* of your proposed activities is what matters.

**Section 3 Vendor Commitment, Description of Qualitative Efforts & Other Economic Opportunities**  
**TRAINING/APPRENTICESHIP QUESTIONNAIRE:**

Answer the following questions if you have committed to *provide training or apprenticeship opportunities to those who qualify as low- and very low-income workers*. Add more page(s) if necessary.

a. Name of proposed training:

b. Brief description of proposed training:

c. Who will provide the training?

*If the training will be provided internally by the vendor (your organization), what are the positions and/or qualifications of the instructors? Example: "Training is led by a shift supervisor with over 10 years' experience."*

*If the training will be provided externally by another organization, identify the provider. Example: "Community College of Philadelphia Welding Technology Program."*

d. What industry-recognized credentials do graduates/completers of the proposed training earn?

*An "industry-recognized credential" is defined\* as being exam-based, administered by third parties, supplemental to traditional postsecondary credentials, and sought or accepted by employers in an industry. Examples of industry-recognized credentials include Certified Information Systems Security Professional, Certified Medical Laboratory Assistant, and Certified Foodservice Management Professional.*

e. ☐ Check this box if the proposed training is an Apprenticeship Program.

e.1. If the training is an Apprenticeship: What is the name of the program or program sponsor?

*Example: IBEW Local 98 Apprentice Training for the Electrical Industry (ATEI)*

\* Definition from Mathematica/Bill & Melinda Gates Foundation "Education-to-Workforce Indicator Framework" (2022).

e.2. If the training is an Apprenticeship: To your knowledge, is this Apprenticeship registered?

☐ Yes, registered with the PA Dept. of Labor & Industry      ☐ Yes, registered with the US Dept. of Labor      ☐ No, it is not registered      ☐ I don't know

☐ Other (please explain):

f. Training results/outcomes:

*Examples: "Successful graduates/completers of this training have been hired by Employers X, Y and Z at starting wages of \$25/hour, with health insurance and other benefits." Hiring opportunities can be with your own organization, or with partner employers – but MUST be realistic and actually available to graduates of the program.*

g. Length of proposed training:

*Examples: "152 hours," or "8 weeks."*

h. Number of participant seats and proposed frequency of training:

*Example: "Up to 10 students twice a year, starting in February and July." If schedule, frequency or other dates are TBD or unknown, explain how you will decide or find out when/how often training should be offered, such as "5 seats reserved in first class after work begins, if we do not meet safe harbor hiring benchmarks for Section 3 workers."*

i. Criteria for admission to proposed training:

*Examples: High school diploma or GED®, 8<sup>th</sup> grade reading level, pass an entrance exam (please identify exam), complete an application and an in-person interview. Most training programs or apprenticeships have some kind of admission criteria; a work readiness program may be open to anyone.*

j. Location of proposed training:

k. Is any specialized equipment required for training? Who is responsible for providing it?

*Example: "Vendor will provide materials and supplies. Participants must purchase uniforms and equipment."*

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l. What is the estimated cost or value of the proposed training?

*Example: "Cost per participant is \$1,425."*

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**Section 3 Vendor Commitment, Description of Qualitative Efforts & Other Economic Opportunities**  
**WORK READINESS QUESTIONNAIRE:**

Answer the following questions if you have committed to *services supporting work readiness and retention* (e.g., *interview clothing, test fees, transportation, childcare, etc.*). Add more pages if necessary.

a. Brief description of proposed work-readiness services:

b. Who will provide the work-readiness services described above?

*If the service(s) will be provided internally by the vendor (your organization), what are the positions and/or qualifications of the instructors? Example: "Resume support is led by a hiring manager from our HR department."*

*If the service(s) will be provided externally, identify the source. Example: "We provide vouchers to obtain job interview attire through the Career Wardrobe."*

c. Results/outcomes:

*Examples: "Program completers will have a fully-refreshed resume and cover letter applicable to jobs in our sector."*

d. Availability:

*Example: "Up to 10 seats twice a year, starting in February and July." If schedule, frequency or other dates are TBD or unknown, explain how you will decide or find out when/how often services should be offered, such as "5 seats reserved in first class after work begins, if we do not meet safe harbor hiring benchmarks for Section 3 workers."*

e. Location of proposed work-readiness program or service:

f. What is the estimated cost or value of the proposed work-readiness program or service?

*Example: "Cost of staff time per participant is \$125," or "Cost of clothing voucher is \$20."*

**Section 3 Vendor Commitment, Description of Qualitative Efforts & Other Economic Opportunities**  
**POST-SECONDARY ASSISTANCE QUESTIONNAIRE:**

Answer the following questions if you have committed to *provide assistance to apply for/or attend community college, a four-year educational institution, or vocational/technical training.*

**a. Brief description of proposed post-secondary assistance:**

*Please identify all of the institutions you propose to assist students in accessing. Examples: "Community College of Philadelphia," or "Sheet Metal Workers' Local 19 Training Center." Describe how you are proposing to assist prospective students.*

**b. Who will provide the work-readiness services described above?**

*If the service(s) will be provided internally by the vendor (your organization), what are the positions and/or qualifications of the instructors? Example: "FAFSA completion support is provided by our HR manager."*

*If the service(s) will be provided externally, identify the source. Example: "We provide vouchers for tutoring."*

**c. Results/outcomes:**

*Examples: "Participants will receive 100 hours of free tutoring in core academic subjects at the Community College of Philadelphia."*

**d. Availability:**

*Example: "Up to 5 students supported per semester." If schedule, frequency or other dates are TBD or unknown, explain how you will decide or find out when/how often assistance should be offered, such as "We will work with the PHA Youth & Family Center to identify students who need additional support, if we do not meet safe harbor hiring benchmarks for Section 3 workers."*

**e. What is the estimated cost or value of the proposed post-secondary assistance?**

*Example: "Cost of staff time per participant is \$125," or "Value of each tutoring voucher is \$750."*

**Section 3 Vendor Commitment, Description of Qualitative Efforts & Other Economic Opportunities**  
**TECHNICAL TRAINING FOR SECTION 3 BUSINESSES QUESTIONNAIRE:**

Answer the following questions if you have committed to *provide technical training (workshops or one on one support) to help Section 3 business concerns understand and bid on contracts.*

a. Name of proposed training:

b. Brief description of proposed training:

c. Who will provide the training?

*If the training will be provided internally by the vendor (your organization), what are the positions and/or qualifications of the instructors? Example: "Training is led by an accountant with over 15 years' experience."*

*If the training will be provided externally by another organization, identify the provider. Example: "The Enterprise Center's Procurement Assistance Program," or "Contractor X, an expert in public sector proposal development."*

d. Training results/outcomes:

*Examples: "Successful graduates/completers of this training will register an EIN and develop a business plan."*

e. Length of proposed training:

*Examples: "152 hours," or "8 weeks."*

f. Number of participant seats and proposed frequency of training:

*Example: "One round of training for up to four resident business owners." If schedule, frequency or other dates are TBD or unknown, explain how you will decide or find out when/how often training should be offered, such as "We will provide speaking services to PHA's Section 3 Entrepreneurship Program after work begins and quarterly for the duration of this contract, if we do not meet safe harbor hiring benchmarks for Section 3 workers."*

g. Location of proposed training:

h. What is the estimated cost or value of the proposed training?

*Example: "Cost of staff time per resident business supported is \$3,000."*

### SECTION 3 BUSINESS APPLICATION

Your business may qualify as a Section 3 Business Concern if it meets the criteria listed on Form 2 and you provide the required documentation. The benefits to qualifying as a Section 3 business are:

1. **Automatic Section 3 Compliance for your PHA Contract:** All of your employees' labor hours qualify as Section 3 Worker labor hours regardless of whether or not they meet Section 3 Worker income requirements. Please note that you will still be required to report all labor hours on a monthly basis.
2. **Potential Business Opportunities:** Section 3 businesses are listed on a PHA directory that is shared with businesses looking to work with Section 3 businesses for their Section 3 compliance obligations. You don't need to have a contract with PHA to be listed on this directory.

Please review Form 2 and see if you qualify!

## SECTION 3 BUSINESS CERTIFICATION FORM

(FORM-2)

**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 (the "Company") \_\_\_\_\_

Address \_\_\_\_\_

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 \_\_\_\_\_

Business Type: ☐ Corporation ☐ Partnership ☐ Sole Proprietorship  
☐ Other: \_\_\_\_\_

### 1. SELECT THE REASON(S) YOUR BUSINESS QUALIFIES AS A SECTION 3 BUSINESS

- ☐ You are a Section 3 Business because at least 51% of the business ownership is owned by Section 3 Workers. Section 3 Workers are those who are low or very-low income individuals who meet the income eligibility criteria as defined in Form 6.
- ☐ You are claiming a Section 3 Business because over 75 percent of the labor hours performed for the business over the prior three month period are performed by Section 3 Workers;
- ☐ You are a Section 3 Business because 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.

## 2. ATTACH DOCUMENTATION NECESSARY TO QUALIFY AS A SECTION 3 BUSINESS

- ☐ Section 3 Business because at least 51% of the business ownership is held by Section 3 Worker: Complete Form 4 and provide a Form 6 for each individual claiming Section 3 Worker status. Valid photo identification is required with each Form 6.
- ☐ Section 3 business because over 75 percent of the labor hours performed for the business over the prior three month period are performed by Section 3 Workers; Complete Form 3 and provide a Form 6 for each employee who is alleged to be a Section 3 Worker. In the alternative, you may complete Form 7 in which you, as the employer, can certify that the employee's annual income is less than the threshold found in Form 6. Photo identification is required with each Form 6 and each individual listed on Form 7.
- ☐ Section 3 business because 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. You must provide: Complete Form 4 and provide a Form 6 for each individual claiming Targeted Section 3 Worker status. Valid photo identification is required with each Form 6.

### Employer Attestation

I affirm that the above statements (on the front side 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 Philadelphia Housing Authority may have their contracts terminated as default and be barred from ongoing and future considerations for contracting opportunities. I hereby certify, under penalty of law, that the following information is correct to the best of my knowledge.

\_\_\_\_\_  
Authorized Officer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name, Title, and Company Name

\_\_\_\_\_  
Proposal or Contract Number

\*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

Form reviewed and approved by an Office of Audit and Compliance (OAC) Section 3 Compliance Representative: ☐ YES ☐ NO

Name of OAC Representative: \_\_\_\_\_

Signature of OAC Representative: \_\_\_\_\_ Date form reviewed: \_\_\_\_\_

**EMPLOYERS MUST RETAIN THIS FORM IN THEIR SECTION 3 COMPLIANCE FILE**

**LIST OF ALL EXISTING FULL TIME EMPLOYEES (FORM 3)**

Instructions: Please provide the following information for **all** full time employees employed by the contractor/vendor, regardless of whether the employee is a Section 3 Worker or Targeted Section 3 Worker. **(Add additional sheets if necessary)**

DEVELOPER/CONTRACTOR: \_\_\_\_\_ PROPOSAL/CONTRACT #: \_\_\_\_\_

PROJECT NAME AND LOCATION: \_\_\_\_\_ DATE: \_\_\_\_\_

EMPLOYEE NAME/ADDRESS	SOCIAL SECURITY # (LAST 4 DIGITS)	DATE OF HIRE	JOB POSITION/ CATEGORY/TRADE	INDIVIDUAL INCOME EARNED ON AN ANNUAL BASIS IS \$66,8500 OR LESS (Y/N) (AS OF 4/1/2025)	NUMBER OF HOURS WORKED OVER THE PAST 3 MONTHS	SECTION 3/ TARGETED SECTION 3 WORKER (Y/N)



## SECTION 3 RESIDENT OWNED BUSINESS OWNERSHIP PROFILE

### (FORM 4)

**Instructions:** Please provide ownership information to establish that at least 51% of the business ownership is owned by Section 3 Workers OR at least 51 % of the business is owned and controlled by current Public Housing residents or residents who currently participates in a Section 8-assisted program. Section 3 Workers are those who are low or very-low income individuals who meet the income eligibility criteria as defined 24 CFR 75. All owners, partners, proprietors, and the like, must be listed, regardless of whether the individual is current Public Housing resident or participates in a Section 8 assisted program. Complete Form 4 and provide a Form 6 for each individual claiming Section 3 and Targeted Section 3 Worker status. Valid photo identification is required with each Form 6. **(Add additional sheets if necessary)**

DEVELOPER/CONTRACTOR: \_\_\_\_\_ PROPOSAL/CONTRACT #: \_\_\_\_\_

PROJECT NAME AND LOCATION: \_\_\_\_\_ DATE: \_\_\_\_\_

OWNER NAME/ ADDRESS AND COUNTY	SOCIAL SECURITY #  (LAST 4 DIGITS)	DATE OF BIRTH	JOB TITLE	% OWNERSHIP INTEREST	INDIVIDUAL INCOME EARNED ON AN ANNUAL BASIS IS \$66,850 OR LESS (Y/N) (AS OF 4/1/2025)	PUBLIC HOUSING OR SECTION 8 PROGRAM PARTICIPANT (Y/N)



## **SECTION 3 JOB BANK JOB DESCRIPTION FORM (FORM 5)**

### **Philadelphia Housing Authority's Section 3 Job Bank:**

#### **Vendor Participation Requirements**

The Philadelphia Housing Authority (PHA) has created a Section 3 Job Bank on its website that lists all available Section 3 positions with PHA vendors. In addition to conducting independent Section 3 job recruitment, you are required to participate in the Section 3 Job Bank as part of your Section 3 compliance commitment. Participation in the Section 3 Job Bank requires the following:

- 1) Timely submission of job description(s);
- 2) Status updates on whether the position(s) has been filled;
- 3) Interviewing Section 3 Workers referred to the vendor by PHA; and
- 4) Timely submission of post-interview survey form or monthly referral reports for referred Section 3 Workers

Please complete the attached Section 3 Job Bank Job Description Form and return to [section3@pha.phila.gov](mailto:section3@pha.phila.gov). Vendors using the services of sub-contractors are responsible for ensuring subcontractors participate in the Section 3 Job Bank.

**PLEASE NOTE: Failure to participate in the Section 3 Job Bank may result in a notation in your Section 3 compliance record.**

### SECTION 3 JOB BANK JOB DESCRIPTION FORM (FORM – 5)

**INSTRUCTIONS:** Complete all applicable fields in this form. Any attachments/web links submitted in lieu of this form must include the information requested from this form in its entirety.

<b>Company Name:</b>	Click here to enter text	<b>Contract No(s).</b>	Click here to enter text
<b>Date Posted:</b>	Click here to enter a date.	<b>Willing to Train:</b>	Enter – Yes or No
<b>Position Start Date:</b>	Click here to enter a date.	<b>Position End Date:</b>	Click here to enter a date.
<b>Job Title:</b>	Click here to enter text.		
<b>Contract #:</b>	Click here to enter text.	<b>Job Category/Field:</b>	[i.e.: plumbing, legal, marketing]
<b>Location:</b>	Click here to enter text.	<b>Travel Required:</b>	Click here to enter text.
<b>Neighborhood(s):</b>	Click here to enter text.	<b>Number of Positions Available:</b>	Click here to enter text.
<b>Position Type:</b>	[i.e.: full-time, part-time, seasonal, job share, contract, intern]	<b>Fringe Benefits:</b>	Click here to enter text.
<b>Compensation:</b>	[i.e.: salary, wage/hourly ]		Click here to enter text.
<b>External posting URL:</b>	Click here to enter text.		
<b>Job Description</b>			
<b>ROLE AND RESPONSIBILITIES</b>  [Type a description of the essential roles, responsibilities and activities a candidate can expect to assume in this position, using the Details style. For bullets, use the Bulleted List style.]  [Bulleted list item] [Bulleted list item]  [For a numbered list, use the Numbered List style.]  [Numbered List item] [Numbered List item]			
<b>QUALIFICATIONS AND EDUCATION REQUIREMENTS</b>  [Type a description of the work experience and educational background that a candidate should have when applying for position. Use the Details, Bulleted List, and/or Numbered List styles as needed.]			
<b>PREFERRED SKILLS</b>  [Type a description of any additional skills or experience that would be considered favorable for a candidate who is applying for this position. Use the Details, Bulleted List, and/or Numbered List styles as needed.]			
<b>ADDITIONAL NOTES</b>  [Type any additional notes if needed.]			
<b>FOR PHA OFFICE USE ONLY</b>			
<b>Reviewed By Section 3:</b>	Click here to enter text.	<b>Date:</b>	Click here to enter a date.
<b>Reviewed By HR:</b>	Click here to enter text.	<b>Date:</b>	Click here to enter a date.
<b>Approved By RPP:</b>	Click here to enter text.	<b>Date:</b>	Click here to enter a date.
<b>Last Updated By:</b>	Click here to enter text.	<b>Date:</b>	Click here to enter text.

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**PHILADELPHIA HOUSING AUTHORITY**

**Section 3 Worker and Targeted Section 3 Worker Self-Certification Form (Form 6)**

**To be completed by Employee**

The purpose of HUD's Section 3 program is to provide employment, training and contracting opportunities to individuals whose income is below certain thresholds, particularly those who are recipients of government assistance for housing or other public assistance programs. Your response is confidential, and has no effect on your employment.

**Eligibility Guidelines for Section 3 Worker or Targeted Section 3 Worker Status**

**Definitions of Section 3 Worker and Targeted Section 3 Worker is as below.**

**Section 3 Worker:** Any worker who currently fits or when hired within the past five years fit at least one of the following categories, as documented:

- (i) The worker's income for the previous or annualized calendar year is below the income limit established by HUD.
- (ii) The worker is employed by a Section 3 business concern.
- (iii) The worker is a YouthBuild participant.

**Targeted Section 3 Worker:** A Targeted Section 3 worker for public housing financial assistance means a Section 3 worker who is:

- (1) A worker employed by a Section 3 business concern; or
- (2) A worker who currently fits or when hired fit at least one of the following categories, as documented within the past five years:
  - (i) A resident of public housing or Section 8-assisted housing;
  - (ii) A resident of other public housing projects or Section 8-assisted housing managed by the PHA that is providing the assistance; or
  - (iii) A YouthBuild participant.

**Instructions:**

The below must be completed by an employee on a Section 3 project or Section 3 covered contract if they believe that they meet the above definition of a Section 3 Worker or a Targeted Section 3 Worker as defined in 24 CFR Part 75. A copy of employee's photo identification is required to be attached with this form.

Enter/select the appropriate information to determine your Section 3 Worker or Targeted Section 3 Worker status and return it to your employer.

Employee Name: \_\_\_\_\_

- 1. Are you a resident of the City of Philadelphia/Philadelphia County? ☐ YES ☐ NO
- 2. Are you a resident of any of the following county? ☐ YES ☐ NO

If Yes, please enter County \_\_\_\_\_

New Castle County, DE; Cecil County, MD; Burlington County, NJ; Camden County, NJ; Gloucester County, NJ; Salem County, NJ; Bucks County, PA; Chester County, PA; Delaware County, PA; Montgomery County, PA

3. I certify that my individual income earned on an annual basis for year 2025 or previous year 2024 is less than \$66,850 ☐ YES ☐ NO
4. Were you hired in last five (5) years by your current employer? ☐ YES ☐ NO  
If Yes, what was your income for the year when hired \_\_\_\_\_

See <https://www.huduser.gov/portal/datasets/il.html> for the most recent and previous years HUD income limits.

If you answered Yes above, you are a Section 3 Worker. Please complete below to determine if you are Targeted Section 3 Worker as well.

5. Are you a resident of Philadelphia Housing Authority Public Housing or a Housing Choice Voucher Holder (Section 8)? ☐ YES ☐ NO  
If Yes, Please print Client ID# \_\_\_\_\_
6. Were you a YouthBuild Participant in last five (5) years? ☐ YES ☐ NO
7. Are you employed by a Section 3 Business Concern? ☐ YES ☐ NO  
If Yes, please print the name of current employer \_\_\_\_\_

#### Employee Affirmation

**I certify that all of the information given above and below is true and correct to the best of my information and belief. If found to be inaccurate, I understand that I may be disqualified as an applicant and/or a certified Section 3 individual which may be grounds for termination of training, employment, or contracts that resulted from this certification. I attest under penalty of perjury that my total individual income annually is as per the amount listed above on page 1. I understand that proof of this statement may be requested in the future.**

Employee Address: \_\_\_\_\_

(Must be a street address and not a P.O. Box#) (Apt #), (City, State, Zip)

PHA Site Name (if applicable): \_\_\_\_\_ Phone # \_\_\_\_\_

Last four digits of social security number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date Hired: \_\_\_\_\_

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

**NOTE: EMPLOYERS MUST RETAIN THIS FORM IN THEIR SECTION 3 COMPLIANCE FILE FOR FIVE YEARS. ALL EMPLOYERS MUST SUBMIT THIS FORM FOR EVERY EMPLOYEE FOR WHOM SECTION 3 STATUS IS APPLICABLE ALONG WITH A COPY OF THE EMPLOYEE'S PHOTO IDENTIFICATION TO PHA'S LABOR STANDARDS OFFICER.**

**PHILADELPHIA HOUSING AUTHORITY**

**Section 3 Worker and Targeted Section 3 Worker Employer-Certification (Form 7) To be completed by Employer**

The purpose of HUD's Section 3 program is to provide employment, training and contracting opportunities to individuals whose income is below certain thresholds, particularly those who are recipients of government assistance for housing or other public assistance programs. Your response is confidential.

**Eligibility Guidelines for Section 3 Worker or Targeted Section 3 Worker Status**

**Definitions of Section 3 Worker and Targeted Section 3 Worker is as below.**

**Section 3 Worker:** Any worker who currently fits, or when hired within the past five years fit, at least one of the following categories, as documented:

- (i) The worker's income for the previous or annualized calendar year is below the income limit established by HUD.
- (ii) The worker is employed by a Section 3 business concern.
- (iii) The worker is a YouthBuild participant.

**Targeted Section 3 Worker:** A Targeted Section 3 worker for public housing financial assistance means a Section 3 worker who is:

- (1) A worker employed by a Section 3 business concern; or
- (2) A worker who currently fits, or when hired fit, at least one of the following categories, as documented within the past five years:
  - (i) A resident of public housing or Section 8-assisted housing;
  - (ii) A resident of other public housing projects or Section 8-assisted housing managed by the PHA that is providing the assistance; or
  - (iii) A YouthBuild participant.

See <https://www.huduser.gov/portal/datasets/il.html> for the most recent and previous years HUD income limits.





**PHILADELPHIA HOUSING AUTHORITY**

**Section 3 Worker and Targeted Section 3 Worker Employer-Certification (Form 7) To be completed by Employer**

**Employer Certification Requirements**

All employers must either provide separate Section 3 and Targeted Section 3 Self Certification Form 6's for each of their alleged Section 3 or Targeted Section workers OR submit this form along with the complete information in the attached table for every employee who will perform work on the Section 3 covered project/contracts with the Philadelphia Housing Authority (PHA) and if they believe that they meet the above definition of a Section 3 Worker or a Targeted Section 3 Worker as defined in 24 CFR Part 75. A copy of employee's photo identification is required to be attached with this form.

**Employer Attestation**

**I acknowledge and understand the definition of Section 3 and Targeted Section 3 Workers and hereby certify that all employees listed in the attached table are believed to be Section 3 or Targeted Section 3 Workers.**

**I attest under penalty of perjury that all of the information given below is true and correct to the best of my knowledge and belief. I understand that proof of this statement may be requested in the future. If found to provide intentional misrepresentations, it may be grounds for the termination of the contract(s) that resulted from this certification. Furthermore, I understand that I may be disqualified as a vendor for future Philadelphia Housing Authority contracts.**

Name of Business (the "Company") \_\_\_\_\_

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

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

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



PHILADELPHIA HOUSING AUTHORITY

**Section 3 Worker and Targeted Section 3 Worker Employer-Certification (Form 7) To be completed by Employer**

**LIST OF ALL EXISTING FULL TIME EMPLOYEES –FORM 7(CONTD.)**

Instructions: Please provide the following information for **all** employees for whom Section 3 and Targeted Section 3 Worker status is sought. The below employees must be performing, or be anticipated to perform work on your PHA contract. **(Add additional sheets if necessary)**

Developer/Contractor: \_\_\_\_\_ Proposal/Contract #: \_\_\_\_\_

Project Name & Location: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Name & Address	County Residence	Last 4 of SSN	Date of Hire	Job Position/ Category /Trade	Employee's individual income earned on an annual basis for year 2025, or the income for the previous year 2024, is less than \$66,850 as of 4/01/2025 (Y/N)	Employee hired in last 5 years? (Y/N)	Section 3 Worker? (Y/N)	Targeted Section 3 Worker? (Y/N)