



SECTION 3 SELF-CERTIFICATION FORM for CONTRACTORS / SUBCONTRACTORS

Business	License Number	DUNS Number
Physical Address	City	State ZIP Code
Mailing Address (if different from the above)	City	State ZIP Code
Email Address	Telephone	

Please certify the following (1, 2, or 3; and 4; and 6 must be true to self-certify):

- ☐ 1) The Business is 51%-owned by Tangipahoa Parish residents of low income.
- ☐ 2) The Business employs a full-time workforce of which at least 30% is Tangipahoa Parish residents of low income.
- ☐ 3) The Business subcontracts more than 25% of its work to businesses described by 1 or 2 above.
- ☐ 4) The Business is located in Tangipahoa Parish.
- ☐ 5) The Business is a (mark all that apply):
- ☐ a) Minority-owned Business Enterprises (MBE)
 - ☐ b) Woman-owned Business Enterprise
 - ☐ c) Disadvantaged Business Enterprise (DBE)
- ☐ 6) I, the undersigned, am duly authorized to represent the Business named above in seeking Section 3 preference for said Business for jobs and/or contracts created by HUD-funded projects of the City of Hammond. The information I have provided is true and accurate to the best of my knowledge and ability and I understand falsification of this information could subject me and/or my Business to penalties under local, State, and/or federal laws.

I further certify the Business is qualified for:

Signature	
Name	
Title	Job(s)
Date	Project Number