



CERTIFICATION FOR SECTION 3 BUSINESS CONCERNS

Business Name: _____

Business Description or Trade Type: _____

Business Address: _____

Street Address (and/or PO Box)

City, State, Zip Code

Phone: _____ Cell Phone: _____ Fax Number: _____

Contact Person: _____ Title: _____

Email Address: _____ Year Business Started: _____

Corporation

Partnership

Sole Proprietorship

LLC

Note: If a corporation or partnership, attach a copy of the incorporation, partnership or LLC documents. Sole Proprietorship may submit an Assumed Business Name Certificate if applicable. If "Doing Business As" a name other than the owner's name, please include a copy of the DBA registration.

Names of Board Members, Owner, or Partners: _____

Section 3 Category

Select one of the three categories below that best describes your business type. Attach all requested documents to this certification form.

Category 1: 51% or more of business ownership/control is held by low- or very low-income persons. Attach the following information:

Section 3 Worker Certification form for each qualified business owner

Category 2: Greater than 75% of all business labor hours performed over the prior three-month period were performed by low- or very low-income workers. Attach the following information:

List of all current employees with a breakdown of all labor hours from last three months

Section 3 Worker Certification form from each Section 3 qualified employee

Category 3: 51% or more of business ownership/control is held by current residents of public housing or Section 8 assisted housing. Attach the following information:

Section 3 Worker Certification form for each qualified business owner

Section 3 Income Limits

Businesses with owners residing in the Grand Rapids-Kentwood Metropolitan Statistical Area (consisting of Kent, Ionia, Montcalm, and Ottawa counties) whose gross individual income (not household income) does not exceed 80% of the Area Median Income (AMI), as determined by HUD, qualify for Section 3 business status. Individuals must also meet this income requirement to be eligible for Section 3 Worker status.

The current 80% AMI income limit for one person as of June 15, 2022 was:

\$50,150 per year before taxes

Signature

I understand the information above may require verification. I agree to provide documentation if requested. I hereby certify that the information provided above is true and accurate, and understand falsification of any information could subject me to disqualification from participation and punishment under the law.

Owner's Printed Name

Owner's Signature

Date

Return this signed certification form and all attachments to:

City of Grand Rapids
Community Development Department
300 Monroe Avenue NW, Suite 460
Grand Rapids, MI 49503

(For office use only, please do not complete this section)

Date Certification Received: _____

Reviewed By: _____