Davis-Bacon Labor Relations

Section 3, Minority and Woman-Owned Business Certification

The undersigned bidder/contractor certifies as part of its bid or contract that it is a Section 3 Business Concern as indicated below (check applicable box):

*A Section 3 Resident is defined as any low or very low-income person residing within Utah County. Low income is defined at 80% of the area median income based on family size.*

Family Size Max Annual Income

1 $46,900

2 $53,600

3 $60,300

4 $66,950

Family Size Max Annual Income

5 $72,350

6 $77,700

7 $83,050

8 $88,400

{ } Category 1 Business Concern: A business that is owned by 51% or more Section 3 Residents; OR

{ } Category 2 Business Concern: Over 75% of the labor hours performed for the business over the

prior three-month period was performed by Section 3 Workers; OR

{ } Category 3 Business Concern: A business is 51% or more owned AND controlled by current

public housing residents or residents who currently live in Section 8-assisted housing

{ } Is not a Section 3 Business Concern

The undersigned bidder/contractor certifies as part of its bid or contract that it is a minority-owned business as indicated below (check applicable box):

{ } Minority-Owned Business: A business that is owned by 51% or more by a minority resident.

Race: \_\_\_\_\_\_\_\_\_\_\_\_ AND Hispanic: Y / N

{ } Is not a Minority-Owned Business

The undersigned bidder/contractor certifies as part of its bid or contract that it is a woman-owned business as indicated below (check applicable box):

{ } Woman-Owned Business: A business that is owned 51% or more by a woman resident.

{ } Is not a Woman-Owned Business

**CERTIFICATION**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Business Name Project Name

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Business Address DUNS # Tax ID #(EIN)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_\_\_\_\_\_\_\_\_\_**

Signatory Name Signature Date