

HAWS CERTIFIED CONTRACTOR'S APPLICATION

HAWS prohibits discrimination in any manner on the basis of race, creed, color, national origin, sex, age, or disability and will pursue an affirmative policy of fostering, promoting and conducting business with minority owned enterprises.

PART I

COMPANY IDENTIFICATION:

NAME: _____ TELEPHONE: _____
ADDRESS: _____ FAX: _____
SOCIAL SECURITY/FEDERAL ID#: _____
CITY PRIVELEDE LICENSE# _____
NC GENERAL CONTRACTORS LICENSE# _____

SERVICES OFFERED: (Check all that applies)

<input type="checkbox"/> Carpentry	<input type="checkbox"/> Painting	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Electrical
<input type="checkbox"/> Pest Control	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Plastering	<input type="checkbox"/> Flooring
<input type="checkbox"/> HVAC	<input type="checkbox"/> Glazing	<input type="checkbox"/> Insulation	<input type="checkbox"/> Masonry
<input type="checkbox"/> General Cleaning	<input type="checkbox"/> Roofing	<input type="checkbox"/> Cabinet Refinishing	

PART II

WORK REFERENCE:

1. _____
2. _____
3. _____

CREDIT REFERENCES:

1. _____
2. _____
3. _____

EMPLOYMENT:

1. Do you consider yourself to be a Equal Opportunity Employer? YES NO
2. What is the number of fulltime employees, counting yourself, normally carried on your payroll? _____
3. Have you done work for the Housing Authority of W-S previously? YES NO
If yes, give date and location of most recent job in the past 2-3 years _____

INSURANCE:

1. Do you carry Workman's Compensation Insurance as required by the State of North Carolina for all full-time, part-time, and temporary help? YES NO
2. What are the limits of your coverage under Manufacturers' and Contractor's Public Liability Insurance? _____
3. Are you prepared to post a Bid Bond and /or Performance Bond if required? YES NO

INSURANCE AGENT: _____
POLICY #: _____ EXPIRATION DATE: _____

PART III

This firm is seeking certification as (Check all that apply)

- Section 3 Firm
- Public Housing Resident-Owned Firm
- Minority Owned Firm
- Woman-Owned Firm

DEFINITION OF SECTION 3 BUSINESS CONCERN / MWBE BUSINESS

SECTION 3 POLICY

It is the policy of the Congress and the purpose of this Section 3 policy to ensure that the employment and other economic opportunities generated by Federal financial assistance for housing and community development programs shall, to the greatest extent feasible, be directed toward low and very low income persons, particularly those who are recipients of government assistance for housing, and to business concerns which provide economic opportunities to low and very low income persons.

A. SECTION 3 BUSINESS

Section 3 Business Concern means a business concern that is:

- (1) 51% or more owned by Section 3 resident; **or**
- (2) Whose permanent, fulltime employees include persons, at least 30% of whom are currently Section 3 residents, of within three years of the date of first employment with the business were Section 3 resident(s); **or**
- (3) That provides evidence of a commitment to subcontract in excess of 25% of the dollar award of all subcontracts to be awarded to business concerns that meet the qualifications set forth in paragraphs (1) or (2) in this definition of "Section 3 Business Concern".

B. SECTION 3 RESIDENT

Section 3 Resident means:

- (1) A public housing resident, **or**
- (2) An individual who resides in the metropolitan area or non-metropolitan area in which the Section 3 covered assistance is expended, **and** who is:
 - (i) A low-income person whose incomes do not exceed 80% of the median income for the area;**or**
 - (ii) A very low-income person whose incomes do not exceed 50% of the median income for the area.

C. RESIDENT-OWNED BUSINESS

Resident-owned business means:

Any business concern which is owned and controlled by public housing residents;

- (1) Which is at least 51% owned by one or more public housing resident(s); **and**
- (2) Whose management and daily business operations are controlled by one or more such individuals (public housing residents).

D. MINORITY- OWNED BUSINESS

"Minority Business" means a business:

- a. Which is at least fifty-one percent (51%) owned by one or more minority persons, and
- b. Which management and daily business operations are controlled by one or more of the minority persons who own it.

(2) "Minority Person" means a person who is a citizen or lawful permanent resident of the United States and who is:

- a. Black, that is, a person having origins in any of the Black racial groups in Africa;
- b. Hispanic, that is, a person of Spanish or Portuguese culture with origins in Mexico, South or Central America, or the Caribbean Islands, regardless of race;
- c. American Indian, or
- d. Female
- e. Asian
- f. Other _____

E. If you are seeking certification as a firm owned by a Section 3 individual, a public housing resident, a minority, or a woman, please identify below the owners, their title, their category, and their percentage of ownership.

NAME	TITLE	CATEGORY				% OWNERSHIP
		Section 3	Public Housing Resident	Minority	Woman	

Please attach documentation of ownership such as a copy of incorporation documents. In addition, if you are seeking certification as a Section 3 individual, please attach a copy of the Schedule C from your latest IRS 1040 tax return or other documentation verifying that you are in business. If you are seeking certification, as a firm owned by a public housing resident, please provide documentation of your occupancy in public housing.

If you are seeking certification as a Section 3 Firm because at least 30% of your permanent, full-time employees are Section 3 individuals, please complete the table below. Please also attach a complete roster of all current employees, designating which are Section 3. For each designated Section 3 employee, please provide a copy of their most recent pay stub

TOTAL # OF CURRENT EMPLOYEES	# SECTION 3	% OF TOTAL

If you are seeking designation as a Section 3 firm because you have made a commitment to subcontract more than 25% of the dollar value, of any contracts you receive, please sign the statement below:

For the consideration of being certified by the Housing Authority of the City of Winston-Salem, I agree to subcontract in excess of 25% of the dollar value, of all contracts I receive, to other certified Section 3 firms.

Signature _____ Title _____ Date _____

GENERAL PROVISIONS

1. ALL CONTRACTS, COMMUNICATION, AND OTHER RELATED DOCUMENTS MUST BE KEPT ON FILE FOR A PERIOD OF THREE (3) YEARS AFTER THE COMPLETION OF THE JOB AS REQUIRED BY HUD.
2. ALL LICENSES AND INSURANCE MUST BE KEPT CURRENT. THE CONTRACTOR MUST PROVIDE CURRENT COPIES ANNUALLY AND NOTIFY HAWS IMMEDIATELY OF ANY CHANGES.
3. GENERAL CONTRACTORS SHALL ADHERE TO SECTION 3/MWBE POLICIES AND PROCEDURES.
4. FOR ALL WORK OVER \$30,000.00, THE CONTRACTOR MUST HAVE A NORTH CAROLINA GENERAL CONTRACTOR'S LICENSE FOR APPROPRIATE TRADE AND THE AMOUNT OF JOB.
5. ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH ALL APPLICABLE LOCAL, STATE, AND FEDERAL CODES; PROPERTY REHABILITATION AND/OR MANUFACTURERS STANDARDS AND HAWS SPECIFICATIONS.
6. ALL INVOICES FOR PAYMENT SHALL INCLUDE THE INVOICE NUMBER, AND APPROPRIATE DETAILED DOCUMENTATION FOR CHARGES AND SENT TO THE ATTENTION OF ACCOUNTS PAYABLE, HOUSING AUTHORITY OF WINSTON-SALEM, 901 CLEVELAND AVENUE, WINSTON-SALEM, NC 27101.
7. SERVICE PROVIDED IS SUBJECT TO INSPECTION AND ACCEPTANCE BY AUTHORIZED HAWS PERSONNEL.
8. ALL CHANGE ORDERS SUBMITTED BY THE CONTRACTOR WHICH RESULT IN AN INCREASE OF THE CONTRACT SHALL BE AUTHORIZED BY HAWS IN WRITING BEFORE WORK IS TO BEGIN.

THESE PROVISIONS ARE ACCEPTED AND AGREED UPON THE _____ DAY OF _____ IN THE YEAR 20____.

COMPANY NAME

ADDRESS

SIGNATURE

ADDRESS

PRINT NAME

TITLE