# HCD Contract Compliance Forms

### CITY OF HOUSTON

### HOUSING AND COMMUNITY DEVELOPMENT DEPARTMENT

2100 TRAVIS STREET, 9TH FLOOR, HOUSTON, TEXAS 77002 832.394.6200





### **CONTACT INFORMATION**

Please contact your assigned MWSBE and/or Section 3 Contract Administrator/Coordinator for assistance. City of Houston Housing and Community Development Department 2100 Travis Street, 9th Floor, Houston, TX 77002



## **COMPLIANCE FORMS**



**Instructions:** Compliance forms where applicable, must be completed and/or signed by a duly authorized member of the organization. All forms must be uploaded to the LCP Tracker by the below stated deadlines.

The following form(s) are to be submitted before construction commences.											
Compliance Section(s): MWSBE/Section 3	Form/Documents	Due									
All sections	Executed contract agreement, purchase order, and/ or invoice	Within 5 business days of executed contract agreement									
All sections	Compliance Cover Sheet	Within 5 business days of executed contract agreement									
All sections	Request for Contractor/Subcontractor Clearance Form/SAM Verification	Before execution of contract agreement									
All sections	Start of Work Notice	Upon commencement of work									
All sections	Conflict of Interest Disclosure	Required by all sections									
All sections	Termination of Work Notice	Upon commencement of work									
MWSBE/ Section 3	Section 3/MWSBE Utilization Plan	Within 5 business days of executed contract agreement, monthly, and/or when changes occur									
MWSBE	MWSBE Utilization Schedule	Due within 30 days of executed contract and/or when changes occur.									
Section 3	Contractor's Section 3 Compliance Certification	Within 5 business days of executed contract agreement									
Section 3	First Source Hiring Agreement	Within 5 business days of executed contract agreement									
Section 3	Permanent Employee List	Within 5 business days of executed contract agreement									
Section 3	Workforce Analysis Form	Within 5 business days of executed contract agreement									
Section 3	Internal Capacity Affidavit	Within 5 business days of executed contract agreement or when internal capacity is reached									
Section 3	Monthly Verification of Internal Capacity Status	Due last business day of each month									
Section 3	Monthly Activity Report	Due last business day of each month.									
Section 3	Monthly Labor Hours and Employee Report	Due last business day of each month.									
Section 3	New Hire Form	Due last business day of each month									
Section 3	Confirmation of Subcontractor Amount	Within 5 business days of executed contract agreement									
Section 3	E-BID Announcement	Submit at least 14 business days from need to contract									
Section 3	Employment Opportunity Announcement (EOA)	Submit at least 14 business days prior need to hire									
Section 3	Bid Tabulation	Submit no later than 5 business days after final selection is made									
Section 3	Template - Section 3 Signage (GC)	Signage must be posted on site prior to start of work									

### LCPTRACKER UPLOAD LOCATIONS



### **CONTRACTOR VERIFICATION**

Request for Clearance Form w/ Sam Results attached

Debarred Vendor List

Conflict of Interest Form

### MONTHLY EMPLOYEE REPORT

Monthly Labor Hours and Employee Report

### MWSBE UTILIZATON PLAN/ SCHEDULE

MWSBE Utilization Plan

MWSBE Utilization Schedule

### **POP DOCUMENTS**

POP 1

POP 2

POP 3

POP 8

POP 9

B2G Access Form

### **SECTION 3 DOCUMENTS**

Contractor's Section 3 Compliance Certification

First Hiring Agreement

Workforce Analysis Form

Internal Capacity Affidavit

Monthly Activity Report

Monthly Verification of Internal Capacity Status

New Hire Form

Confirmation of Subcontractor Amount

EBID Form

EOA Form

**Bid Tabulation** 

### **SECTION 3 UTILIZATION PLAN**

Section 3 Utilization Plan

### SHARED COMPLIANCE FORMS

Compliance Cover Sheet

Start of Work Notice

Termination of Work

Letter of Explanation

### SUBCONTRACT AGREEMENT

Subcontract Agreement

Master Service Agreement

Purchase Order Agreement

Consultants Agreement

Change Orders

Invoices

### LCPTRACKER COMPLIANCE UPLOAD DESCRIPTION GUIDE



### **CONTRACTOR VERIFICATION**

Sam Verification (Year)

Debarred Vendor List (Year)

COI (Year)

### MWSBE UTILIZATON PLAN/ SCHEDULE

MWSBE UP (Month-Year)

MWSBE Utilization Schedule

### **POP DOCUMENTS**

POP 1
POP 2
POP 3
POP 8
POP 9
B2G Access

### **SECTION 3 DOCUMENTS**

Contractor's S3 Compliance Certification

First Hiring Agreement

Workforce Analysis Form

Internal Capacity Affidavit

MAR (Month-Year)

MVIC (Month-Year)

COSCA Form

MLHE Report (Month-Year)

EBID (Month-Year)

EOA (Month-Year)

Bid Tabulation (Month-Year)

### **SECTION 3 UTILIZATION PLAN**

Section 3 UP (Month-Year)

### SHARED COMPLIANCE FORMS

Compliance Cover Sheet

SOW (Month-Day-Year)

TOW (Month-Day-Year)

Letter of Explanation (LOE)

### SUBCONTRACT AGREEMENT

Contract Agreement

CO # (indicate the number)

Invoices

### SINGLE FAMILY UPLOAD DESCRIPTIONS AND LOCATIONS



#### \*ADDRESS MEANS THE STREET NUMBER AND NAME OF THE PROJECT HOME\*

#### MWSBE UTILIZATON PLAN/ SCHEDULE

Project/House Address: MWSBE UP (MM-YY)

### **SECTION 3 UTILIZATION PLAN**

Project/House Address: Section 3 UP (MM-YY)

### **CONTRACTOR VERIFICATION**

Sam Verification (YYYY)

Debarred Vendor List (YYYY)

COI (YYYY)

### **SECTION 3 DOCUMENTS**

MAR (MM-YY)

MVIC (MM-YY)

COSCA Form

#### SHARED COMPLIANCE FORMS

Project/House Address - Compliance Cover Sheet

Project/House Address - Start of Work Notice (MM-DD-YY)

Project/House Address - Termination of Work Notice (MM-DD-YY)

### SUBCONTRACT/MASTER/PO/ CONSULTANT AGREEMENT

Project/House Address: Contract Agreement

### **COMPLIANCE COVER SHEET**



#### RETURN WITH COMPLIANCE DOCUMENTS (COMPLETE ALL FIELDS)

**Instructions:** This form must be completed upon execution of a contract agreement and is required to complete setup and access to LCP Tracker. The Prime Contractor is responsible for collecting this form from all entities performing on a project.

Project Name:					Project Nu	imber:			
Name of Contractor:									
*Type of Contractor:	Prime	e Contractor	Sub (	Contractor	Lower-tie Subcontra		Consultant	Supplier	Professional Services Provider
I/We have a written c	ontract wit	:h:							
*Service(s) to be prov *Provide a brief description o business will be performing of	f the service								
*NAICS Code (Look up a code here <u>http://w</u>	ww.census.gov/	/eos/www/naics/)							
*Company Address:									
*Company Contact Po	erson:				*EIN or SS	Number:			
*Company Contact E	mail:								
Alternative Contact P	erson:				*Contract	Amount:			
Company Email:					*Phone N	umber:			
Owner's Ethnicity/Ra	cial Backgr	ound:				Gender:			
Certifications:	MBE	WBE	SBE	Section 3	DBE	HUB			

### \*AN ASTERISK INDICATES A MANDATORY REQUIREMENT\*

### REQUEST FOR PRIME CONTRACTOR/ SUBCONTRACTOR CLEARANCE



### NO CONTRACT SHOULD BE EXECUTED BY THE PRIME WITH A SUBCONTRACTOR, LOWER-TIER SUBCONTRACTOR, CONSULTANT, OR SUPPLIER UNTIL THEIR ELIGIBILITY HAS BEEN VERIFIED.

Instructions: To ensure eligibility, a search must be conducted of the (1) Company Name, (2) Principal Owner(s) and (3) the Employer Identification Number (EIN) through www.sam.gov/SAM.

The Prime Contractor must verify the eligibility of all subcontractors, lower-tier subcontractors, suppliers, and consultants performing on the project and upload the search results along with the Request for Clearance form to LCP Tracker.

			Date:			
Project Name:						
Project Address:						
Contractor/Subcontractors	Company Name:					
Prime Contractor	Subcontractor	Lower-Tier Subco	ontractor	Consultant	Supplier	Professional Services Provider
EIN or SS Number:			Address/Zi	p Code:		
Phone Number:						
Check the applicable entity:	Sole Proprieto	orship Corpo	oration	Partnership	Other	

List Principal(s) below:

### **START OF WORK NOTICE**



**Instructions:** This form must be completed by all businesses performing on the project and serves as notice of commencement of work to HCDD.

Contractor Information			
Project Name:			Project Number
Project Address:			
Contractor Name:			
Contract Agreement executed	with: Prime	Subcontractor	Lower-tier Subcontractor
Start of Work Date:			
Contractor Authorization			
Name of Authorized Officer:			
*SIGNATURE M	AY BE PROVIDED BY	ANY AUTHORIZED PA	ARTY OF THE PRIME AND/OR SUBCONTRACTOR*

Signature

Date

CITY OF HOUSTON | HOUSING AND COMMUNITY DEVELOPMENT DEPARTMENT

### **CONFLICT OF INTEREST DISCLOSURE**



### COMPLETED BY BUSINESS ENTITIES

#### INFORMATION

Name of Organization:

Address:

#### DISCLOSURE

Is any employee, director, officer, or anyone else associated with your organization, or any of their immediate family member(s)\*, currently or within the past year an employee, agent, consultant, officer, elected or appointed official, sub-recipient, or vendor of the City of Houston?

#### Yes (see below) No

\*Includes, whether by blood, marriage, or adoption: spouse, parent (including a stepparent), child (including a stepchild), sibling (including a step-sibling), grandparent, grandchild, and in-laws.

Please indicate the names, positions, and telephone numbers for each person applicable to the above question. Use additional forms as needed.

Name	indirect relationship with the City	Telephone Number

### **APPLICANT SIGNATURES**

Warning: Any person who knowingly makes a false claim or statement to HUD may be subject to civil or criminal penalties under 18 U.S.C. 287, 1001 and 31 U.S.C. 3729. Under penalties of perjury, I/we certify that the information presented above is true and accurate to the best of my/ our knowledge and belief. I/We further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in my ineligibility to participate in this program or any other programs that will accept this document. Title 18, Section 1001 of the U.S. Code states that a person is guilty of a FELONY if he/she knowingly and willfully makes a false statement to any department of the United States Government. I/we understand that this application may be delayed or found ineligible if a conflict of interest is found to exist and no waiver is granted.

Name of Organization:

By:	Date:
Name:	
Title:	

#### FOR PROGRAM STAFF USE ONLY

Does applicant list a potential conflict of interest?

Yes (Forward to PGM) No (STOP-process normally)

Initials and Date

CITY OF HOUSTON | HOUSING AND COMMUNITY DEVELOPMENT DEPARTMENT

**TERMINATION OF WORK NOTICE** 



Instructions: This form must be completed by all businesses performing on the project and serves as notice of completion of work to HCDD.

Contractor Information			
Project Name:		Project Num	nber
Project Address:			
Contractor Name:			
Contract Agreement executed v	with: Prime Subco	ontractor Lower-tier Subc	ontractor
Start of Work Date:			
Contractor Authorization	1		
Name of Authorized Officer:			
*SIGNATURE M	IAY BE PROVIDED BY ANY AU	ITHORIZED PARTY OF THE PRIN	IE AND/OR SUBCONTRACTOR*

Signature

Date

## SECTION 3 UTILIZATION PLAN



Prime and Subcontractors working at all tier levels with a contract of \$100,000.00 or more must submit a Section 3 Utilization Plan (Plan). A Plan is required every month from the Prime and Subcontractors until their scope of work is terminated on the project. An updated Plan is required when change orders adjust contract amounts and/or when the project's utilization is amended. Section 3 does not monitor suppliers. Therefore, suppliers are excluded from completing this form.

1A. MM/YYYY:	1B. Project Name:		1C. Project Number:	1D. Contract Amount:	
1E. Prime/Subcontractor Name:		1F. Company Contact Name:	1G. Telephone #:	1H. Company Email:	
2A. Hard Cost Budget (N/A if not applicable)	2B. 10% Hard Cost Goal	2C. Hard Cost % Achieved	2D. Soft Cost Budget (N/A if not applicable)	2E. 3% Soft Cost Goal	2F. Soft Cost % Achieved

#### Self-performing: Yes No

Subcontractor	Section 3 Certified	Gender	*Ethnicity	Description of Service	EIN or SS#	Contract Amount	% Of Contract	Hard Cost or Soft Cost	Address, Phone Number & Email

\* Racial/ethnic code: 1 – White American, 2 – Black American, 3 – Native American, 4 – Hispanic American, 5 – Asian Pacific American, 6 – Hasidic Jew

## **MWSBE** UTILIZATION PLAN



Prime, Subcontractors, and Suppliers working at all tier levels must submit an MWSBE Utilization Plan (Plan). A Plan is required every month from the Prime, Subcontractors, and Suppliers until their scope of work is terminated on the project. An updated Plan is required when change orders adjust contract amounts and/or when the project's utilization is amended.

1A. MM/YYYY:		1B. Proj	ect Na	me:						1C. Pro	oject Number:			1D. Co	ontract Ar	nount:		
1E. Contractor Name	<b>e:</b>				1F. Conta	1F. Contact Name:				1G. Te	lephone #:			1H. Compa	ny Email:			
Self-performing: Ye	es No																	
NAICS Code (6 digits) Subo	contractor/Supplier	мw	S	*Ethnicity			Descrip	tion of Service			EIN or SS#	Contract Am	ount	% Of Contract		Address, Pho	ne Number & En	ail

\* Racial/ethnic code: 1 – White American, 2 – Black American, 3 – Native American, 4 – Hispanic American, 5 – Asian Pacific American, 6 – Hasidic Jew

### **MWSBE** UTILIZATION SCHEDULE - CONSTRUCTION



The MWSBE Utilization Schedule is a projection of funds allocated to certified firms each month throughout the life of the project. This form is only required from the Prime Contractor.

Reporting MM and YYYY:

Project Name and Number:

**Company Name:** 

Subcontractors/Suppliers Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Total
											Grand Total		
Contract Amount:	Ap Go	oproved oal %:		Goal Amount	\$:	Ac Ar	tual nount \$:		Actual Goal %:	:	To Pa	otal ayments:	

NOTE:

1. Actual dollar amounts are assumed for past dates, otherwise numbers should reflect projected dollar amounts.

2. The goal percentage may exceed minimum requirements or be approved by prior deviation for less than.

3. Enter only certified firms projected payments in above fields along with the Contract Amount and Approved goal percentage.

### **MWBE** UTILIZATION SCHEDULE - PROFESSIONAL SERVICES



The MWSBE Utilization Schedule is a projection of funds allocated to certified firms each month throughout the life of the project. This form is only required from the Prime Contractor.

Reporting MM and YYYY:

Project Name and Number:

**Company Name:** 

Subcontractors/Suppliers Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Total
											Grand Total		
Contract Amount:	Ap Go	oproved oal %:		Goal Amount	\$:	Ac Ar	tual nount <b>\$:</b>		Actual Goal %	:		otal ayments:	

NOTE:

15

1. Actual dollar amounts are assumed for past dates, otherwise numbers should reflect projected dollar amounts.

2. The goal percentage may exceed minimum requirements or be approved by prior deviation for less than.

3. Enter only certified firms projected payments in above fields along with the Contract Amount and Approved goal percentage.

### **MWBE** UTILIZATION SCHEDULE - PURCHASING



The MWSBE Utilization Schedule is a projection of funds allocated to certified firms each month throughout the life of the project. This form is only required from the Prime Contractor.

Reporting MM and YYYY:

Project Name and Number:

**Company Name:** 

Subcontractors/Suppliers Name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Total
											Grand Total		
Contract Amount:	Ap Go	oproved bal %:		Goal Amount	\$:	Ac Ar	tual nount \$:		Actual Goal %:		To Pa	otal ayments:	

#### NOTE:

1. Actual dollar amounts are assumed for past dates, otherwise numbers should reflect projected dollar amounts.

- 2. The goal percentage may exceed minimum requirements or be approved by prior deviation for less than.
- 3. Enter only certified firms projected payments in above fields along with the Contract Amount and Approved goal percentage.



The undersigned makes this affidavit with full knowledge that its contents will be used in the expenditure of funds provided by the United States Government. Under penalty of perjury I hereby state:

of

1. I am the

(Owner, Partner, Officer, Representative, Agent)

(Company Name)

- 2. My company adheres to Section 3 of the Housing and Urban Development (HUD) Act of 1968, as amended, 12 U.S.C. 1701u which requires, to the greatest extent feasible, that a "good faith effort" given to identifying small businesses located within the boundaries of the Section 3 service area, making them aware of contracting opportunities, encouraging their participation and actually awarding contracts to Section 3 Business Concerns through the assistance of the City of Houston and their referral system.
- An attempt will be made to undertake outreach activities intended to encourage participation by Section 3 Workers in training and employment opportunities, to include but not be limited to utilizing the referral established by the City of Houston, the Texas Employment Commission, and Houston Works.
- My company also acknowledges and affirms the required steps stipulated in the Code of Federal regulations 24 CFR Part 75 for any "New" 4. services, i.e. employment/labor, services/materials, or subcontracting. Any violation of this requirement will present a negative impact on the performance rating of the recipient, developer, and contractor/subcontractor.

#### All Section 3 covered contracts shall include the following:

- A. The work to be performed under this contract is subject to the requirements of Section 3 of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u (Section 3). The purpose of Section 3 is to ensure that employment and other economic opportunities generated by HUD assistance or HUD-assisted projects covered by Section 3, shall, to the greatest extent feasible, be directed to low- and very low-income persons, particularly persons who are recipients of HUD assistance for housing.
- The parties to this contract agree to comply with HUD's regulations in 24 CFR part 75, which implement Section 3. As evidenced by their B. execution of this contract, the parties to this contract certify that they are under no contractual or other impediment that would prevent them from complying with the part 75 regulations.
- C. The contractor agrees to send to each labor organization or representative of workers with which the contractor has a collective bargaining agreement or other understanding, if any, a notice advising the labor organization or workers' representative of the contractor's commitments under this Section 3 clause and will post copies of the notice in conspicuous places at the work site where both employees and new applicants can see. The notice shall describe the Section 3 preference, set forth minimum number and job titles subject to hire, availability of apprenticeship and training positions, the required qualifications for each; and the name and location of the person(s) taking applications for each of the positions; and the anticipated date the work shall begin.
- D. The contractor agrees to include this Section 3 clause in every subcontract subject to compliance with regulations in 24 CFR part 75, and agrees to take appropriate action, as provided in an applicable provision of the subcontract or in this Section 3 clause, upon a finding that the subcontractor is in violation of the regulations in 24 CFR part 75. The contractor will not subcontract with any subcontractor where the contractor has notice or knowledge that the subcontractor has been found in violation of the regulations in 24 CFR part 75.
- E. The contractor will certify that any vacant employment positions, including training positions, that are filled (1) after the contractor is selected but before the contract is executed, and (2) with persons other than those to whom the regulations of 24 CFR part 75 require employment opportunities to be directed, were not filled to circumvent the contractor's obligations under 24 CFR part 75.
- Noncompliance with HUD's regulations in 24 CFR part 75 may result in sanctions, termination of this contract for default, and debarment E. or suspension from future HUD assisted contracts. G. With respect to work performed in connection with Section 3 covered Indian housing assistance, Section 7(b) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450e) also applies to the work to be performed under this contract. Section 7(b) requires that to the greatest extent feasible (i) preference and opportunities for training and employment shall be given to Indians, and (ii) preference in the award of contracts and subcontracts shall be given to Indian organizations and Indian-owned Economic Enterprises. Parties to this contract that are subject to the provisions of Section 3 and Section 7(b) agree to comply with Section 3 to the maximum extent feasible, but not in derogation of compliance with Section 7(b).

Affiant's Signature	e: Affiant's	Title:	Т	elephone:	
Address:		Affiant's Company Nan	ne:		
	Subscribed and sworn to under oath befor	re me this	Day of	, 20	
	Notary Public Signature M	ly Commission Expires:			

### **SECTION 3** FIRST SOURCE HIRING AGREEMENT



This agreement is entered thisday of, 20byand between the City of Houston and hereinafter referred to as the "City" and hereinafter referred to the "Contractor", in connection with work tobe performed in relation to the City's HUD-assisted project entitled, hereinafter referred to a the "Project".

Whereas, HUD has promulgated certain regulations to implement Section 3 of the Housing and Urban Development (HUD) Act of 1968 12 U.S.C. 1701u) (Section 3), regulations; and

Whereas, the purpose of Section 3 regulations is to ensure that employment and other economic opportunities generated by Section 3 covered assistance shall, to the greatest extent feasible, and consistent with existing Federal, State and local laws and regulations, be directed to low and very low income persons, and business concerns, which provide economic opportunities to such persons.

Whereas, HUD has set forth numerical employment, and contracting goals to be achieved by all Community Development recipients of Section 3 covered assistance and by other recipients of such assistance in which HUD's share exceeds \$200,000.00 per project and by those Contractors whose share such projects exceeds \$100,000.00; and

Whereas, the numerical goal so established by HUD applicable to the Project is set forth below: and

Whereas, recipients of Section 3 covered assistance and their contractors can demonstrate compliance with the Section 3 regulations by committing to employ Section 3 eligible persons as applicable percentage of the aggregate number of new hires during the time period involved in the Section 3 covered project; and

Whereas, the City and the Contractor as desirous of being in compliance with the Section 3 regulations as they relate to the Project;

- 1. The Contractor and any of its subcontractors understands the requirements of 24 CFR Part 75, apply to Section 3 covered projects, regardless of whether the project is fully or partially assisted under HUD programs that provide housing and community development financial assistance.
- 2. The Contractor and any of its subcontractors shall supply the City with a list of all full-time employees currently employed, indicating which, if any, of said employees were hired within the past three years and were also low or very low income persons when so hired;
- 3. The Contractor and any of its subcontractors hire Section 3 Workers and Targeted Section 3 Workers to complete at least 30% of all Labor Hours performed on the project.
- 4. The Contractor and any of its contractors will, to the greatest extent feasible, endeavor to hire 30% percent of the new hires generated by the Project from the following list of Section 3 eligible groups, in the order of priority listed:
  - a. Section 3 Workers of service area or neighborhood;
  - **b.** Section 3 Targeted Workers or service area of neighborhood;
  - c. Youth build participants;
  - d. Homeless projects; Homeless persons; and
  - e. Other Section 3 Workers.
- 5. The Contractor and any of its subcontractors will be encouraged to make new hires from the list of Section 3 eligible groups in Paragraph 3 above for any and all other projects assisted with Federal funding, whether or not such project is subject to the Section 3 regulations;
- 6. The Contractor and any of its subcontractors shall accept referrals of Section 3 eligible persons from the City. Provided, however, that nothing in this agreement is to be construed requiring any party hereto, or its subcontractors, to hire any person or persons who are unqualified to or incapable of carrying out the work required of any such new hires.

Affiant's Signatu	ure: Afi	fiant's Title:		Telephone:	
Address:		Affiant's Company N	ame:		
	Subscribed and sworn to under oath	before me this	Day of	, 20	
	Notary Public Signature	My Commission Expires:			

(18

### **SECTION 3** PERMANENT EMPLOYEE LIST



	Project Number	Date:
Project Name:		Total Amount of Contract:
Name of Contractor/Subcontractor:		
Address:		
Name of Contact Person:		

**Certified Section 3** Monthly Salary or **Employee Names Job Title** Worker Hourly Rate

I certify the above-named individuals are permanent employees of this firm. I understand that falsifying information is perjury and subject to contract termination.

Print Name / Title

19

Signature

Date

### **SECTION 3** CONTRACTOR/SUBCONTRACTOR WORKFORCE ANALYSIS FORM



		ES.		ROJECT WC	ORK FORCE	BREAKDO	WN					
	Νοι	n-Construct	tion		Construction							
Job Category	Estimated # of Positions Needed for Project	# of Positions Occupied by Permanent Employees	# Of Positions Not Occupied	# of Positions to be Filled with Section 3 Workers	Job Category	Estimated # of Positions Needed for Project	# of Positions Occupied by Permanent Employees	# of Positions Not Occupied	# of Positions to be Filled with Section 3 Workers			

#### EMPLOYMENT CERTIFICATION (make additional copies of this form if necessary)

The Company hereby certifies that the above table represents the appropriate number of employee(s) positions required in the execution of the project and represents the number of Section 3 service area Workers that the company proposes to employ. The Company certifies that it will make a good faith effort to employ the number of lower income employees stated utilizing such community-based organizations and service agencies as the Texas Employment Commission and Houston Works.

Name

Title

Signature

Date

### **SECTION 3** INTERNAL CAPACITY AFFIDAVIT



The undersigned makes this affidavit with full knowledge of the content described in the Section 3 Program regulations at 24 CFR Part 75. Each recipient of Section 3 covered financial assistance, and its contractors or subcontractors are required to comply with the requirements of Section 3 for new employment, training, or contracting opportunities that are created during the expenditure of covered funding. This requirement applies to matters which include:

- 1. All construction projects for which the amount of City (HUD-sourced) assistance to the project or program exceeds \$200,000.00.
- 2. All Contractor/Subcontractor situations where the individual contract or subcontract exceeds \$100,000.00 from the City with HUD sourced funds.

This affidavit is to document the contractor has sufficient internal capacity to execute the entire scope of work awarded without the need to subcontract and to acknowledge by the undersigned if subcontracts are required, they may be subject to additional requirements under the Section 3 Program.

#### Under penalty of perjury I hereby state:

l, Print Name	am the	of		Company Name	7
which has executed a contract with	Other Contract Party	to perform			
				Description of Work	
on the project known as	Name of Project	and represe	ent that the contract	covered by this affidavit ha	s met the
conditions, including those described abo	ve and hereby authorize and r	request any pe	rson, firm or corporati	on to furnish any information	requested
by the Housing and Community Develop	ment Department in verifica	tion of the rec	itals comprising this	day of	20
Company Name	Represe	ntative Signat	ure	Title	
STATE OF TEXAS					
COUNTY OF					
Print Name	being duly sworn, depos	es and says th	at he/she is the		
of and Company Name	that the answers to the foreg	oing question	s and all statements t	herein contained are true an	d correct.
Subscribed and sworn to unde	r oath before me this	1	Day of , 20		
Notary Public Signature	My Commission Exp	pires:			
			No	otary Stamp	

\*ONLY SUBMIT FORM IF PRIME/SUBCONTRACTOR DOES NOT HAVE A NEED FOR LOWER-TIER SUBS OR NEW HIRES FOR THE DURATION OF THE PROJECT.\*

### **SECTION 3** MONTHLY VERIFICATION OF INTERNAL CAPACITY STATUS



This form is to be completed and submitted by the 5th of each month by every Subcontractor claiming Internal Capacity, for the duration of their contract. Always report for the previous month; (E.g.: Form due on June 30, 2021, will be reporting activity of June 1-30, 2021).

Reporting MM and YYYY:

Project Name:

Subcontractor:

Contracted With:

By signing below, I hereby verify that my company has remained in the qualifying Internal Capacity parameters stated below:

- No Lower-Tier Subcontracts have been awarded, and/or
- No New Hires (employees placed on payroll) have been hired to work specifically on the project stated above.

By signing below, I also verify that I understand that in the event my company has the need for lower-tier subcontracts and/or new hires, I will immediately alert the General Contractor and will follow the below Section 3 Procurement Processes. I also understand that my company can no longer claim Internal Capacity and will be required to comply with all Section 3 requirements that are now applicable.

#### Section 3 Procurement Process for Lower-Tier Subcontractors

1. Subcontractor will submit EBID Announcement that lists scope of work, contact information and a bid due date (minimum is two weeks). Subcontractors should submit EBID directly to General Contractor.

a. EBID will be forwarded to HCDD and will then be sent to all Section 3 Businesses.

2. Subcontractor will review all bids received and will award contract based on the Section 3 procurement guidelines, depending if bids are construction or non-construction:

- a. 10% of hard cost (construction) budget must be awarded to Section 3 Business.
- b. 3% of soft cost (non-construction) budget must be awarded to Section 3 Business.

3. Subcontractor will submit a Bid Tabulation after all bids have been received. The bid tabulation should indicate which awarded contracts were to a Section 3 Business.

4. Subcontractor will submit a Section 3 Utilization Plan that lists all Lower-Tier Subcontractors and Professional Services being utilized.

#### **Section 3 Procurement Process for New Hires**

1. Subcontractor will submit an Employment Opportunity Announcement (EOA) that lists position details, applicant qualifications, contact information and application deadline. EOA will be submitted directly to the General Contractor.

- a. EOA will be forwarded to HCDD and will then be sent to all certified Section 3 Workers.
- 2. Subcontractor will hold interviews and determine how the 30% New Hire Goal will be met.
  - a. For example, if 10 new hires are needed, at least 3 must be either:
    - i. Currently certified as a Section 3 Worker
    - ii. Qualifies as a Section 3 Worker (required to complete Section 3 Worker Application)
- 3. Subcontractor will notify the General Contractor of hiring results and will submit the following:

a. Statement indicating how the 30% New Hire Goal was met, list of new hire names and Section 3 Worker status. b. Section 3 Worker Applications for new hires that must be certified in order to meet the 30% New Hire Goal.

4. Subcontractor will start submitting monthly reporting and any other additional documents needed for the duration of their contract.

Print Name

Title/Company

Signature

Date

4. All New Hires MUST be listed on the Section 3 and Non-Section 3 New Hire Form.5. This form is NOT required by Prime and Subcontractors claiming, "Internal Capacity".

### EMPLOYMENT AND TRAINING

А			В			С		C.		
Job Category	New Hi	res	No Ne	ew Hires	Emp	oloyees	Traine	es	No 1	rainees
	Section 3 I	New Hires*	Non-Section	3 New Hires*	Section 3 Workers*	Non-Section 3 Workers*	Section 3 Previously That Worked	Reported	New Sectior Reporting f Tir	or the First
	# of New Hires	Hours Worked	# of New Hires	Hours Worked	Hours Worked	Hours Worked	# of Trainees	Hours Worked	# of Trainees	Hours Worked
Professional										
Technician										
Office/Clerical										
Trade:										
Trade:										
Trade:										
Trade:										
Other:										
Other:										
Total:										

1. This form MUST be submitted by ALL contractors (with a contract in excess of \$100,000.00) no later than the last

3. New Hires are reported under Column "B" for the first month following their date of hire. Thereafter, New Hires are

#### Project Name:

Name of Contractor/Subcontractor:

Address:

NOTES:

business day of the month each month.

reported under Column "C".

2. Reporting MUST always reflect previous months activity.

Name of Contact Person:

Phone Number / Email:

CITY OF HOUSTON HOUSING AND COMMUNITY DEVELOPMENT

Date of Submission: Contract Amount:

Reporting MM and YYYY:



Name of Contractor/Subcontractor:

Reporting MM and YYYY:

B Last Name	C Racial/Ethnic Code	D Hire Date	E Hourly Rate	F Sec. 3 Status	G Trade Work	H Hours Worked	l Hours Trained	J Payroll Classification
		Racial/Ethnic	Racial/Ethnic D	Racial/Ethnic Date Hours Date	B Racial/Ethnic Live Date Hourly Date See 7 Status	Racial/Ethnic Lize Date House Son 7 Status Trade Morely	Racial/Ethnic Line Date Levely Date Con Z Status Trade Mours	Racial/Ethnic Uiro Data Lawly Data Con Z Gatur Trode Morel Hours Hours

#### NOTE:

- A. First name of Section 3 Worker
- **B.** Last name of Section 3 Worker
- c. Racial/ethnic code: 1–White American, 2 Black American, 3 Native American, 4 Hispanic American, 5 Asian Pacific American, 6 Hasidic Jew
- **D.** Hire date of Section 3 Worker
- E. Hourly rate of Section 3 Worker
- F. Indicate Section 3 status by entering either: New Hire, Employee or Trainee
- G. Trade work performed by Section Worker
- H. Hours worked during reporting month by Section 3 New Hire or Section 3 Employee
- I. Hours trained during reporting month by Section 3 Trainee
- J. Indicate payroll classification: Full Time, Part Time, FT Temporary, PT- Temporary, FT-Seasonal, PT-Seasonal, Internship

### MONTHLY LABOR HOURS AND EMPLOYEE REPORT



Reporting MM and YYYY:		Projec	t Name	2:		Р	roject Nun	nber:	
Total Number of Employees:	Total Proj <i>(TPLH)</i>	ect Labo	r Hours	: 25% Section	3 Labor Goal:		Actual La Achieved		
Projected Crew Number:	Projectec Hours*: (F			5% Target Work	er Goal:	Actu	al Target V	Vorker %	Achieved
Section 3 Workers performing on project	ct: Ye	5 N	lo If	yes, list the workers in Section A	New Hire/Tar	get Workers	Yes	No	If yes, list new hires in Section B

#### **SECTION A - SECTION 3 WORKERS**

Last Name	First Name	Section 3 Worker Certificate #	Date of Hire	Hours Worked

#### SECTION B - SECTION 3 TARGETED WORKERS

#### Grand Total:

Last Name	First Name	YouthBuild Yes or No	Reside within 1 mile of project Yes or No	Hours Worked

Grand Total:

NOTE: This report is intended to track monthly labor hours and new hires in conformance with Section 3 Labor and Workforce Provision Requirements. To complete this report you must:

- A. Retrieve Payroll Detail report from LCP tracker for the reporting month.
- B. Analyze the LCP Tracker report to determine Total Project Labor Hours (TPLH) for the month. Enter this number in TPLH above.

C. List Section 3 Workers and their hours for the month in Section A above.

**D.** List Section 3 Workers hired during the month in Section B above.

- E. Provide the next month's projected labor hours based on anticipated project activity.
- F. Provide the next month's projected crew number based on anticipated project activity.

### MONTHLY LABOR HOURS AND EMPLOYEE REPORT



Reporting MM and YYYY:		Pre	oject Na	lame:		P	roject Nur	mber:	
Total Number of Employees:		al Project I Irs: <i>(TPLH)</i>		10% Sect	on 3 Labor G	pal:	Actual La Achievec		
Projected Crew Number:	Proj (PLF	ject Labor H)	Hours:	5% Target V	/orker Goal:	Actua	al Target V	Norker %	Achieved
Section 3 Workers performing on pro	iect:	Yes	No	If ves, list the workers in Section A	Nev	v Hire/Target Workers	Yes	No	If ves, list new hires in Section B

#### **SECTION A - SECTION 3 WORKERS**

Last Name	First Name	Section 3 Worker Certificate #	Date of Hire	Hours Worked

#### SECTION B - SECTION 3 TARGETED WORKERS

#### **Grand Total:**

Last Name	First Name	YouthBuild Yes or No	Reside within 1 mile of project Yes or No	Hours Worked

#### Grand Total:

NOTE: This report is intended to track monthly labor hours and new hires in conformance with Section 3 Labor and Workforce Provision Requirements. To complete this report you must:

- A. Retrieve Payroll Detail report from LCP tracker for the reporting month.
- B. Analyze the LCP Tracker report to determine Total Project Labor Hours (TPLH) for the month. Enter this number in TPLH above.
- **C.** List Section 3 Workers and their hours for the month in Section A above.
- **D.** List Section 3 Workers hired during the month in Section B above.

- E. Provide the next month's projected labor hours based on anticipated project activity.
- F. Provide the next month's projected crew number based on anticipated project activity.



Project Name:		Project Number:
Subcontractor N	ame/House Address:	
Executed Contra	ct With:	
Original Contrac	t Amount:	
Contract Amoun	t at Start of Work	

### Please complete one (1) of the following that applies:

### A. Contract Amount Has Remained Less Than \$100,000.00

If the contract amount is below \$100,000.00 prior to the start of work date, the Subcontractor is not required to comply with Section 3 due established minimum threshold. Sign below and submit form.

I, hereby, confirm that the above Subcontractor 's contract amount has stayed below the \$100,000.00 threshold by the start of work date stated above.

Print Name

Title/Company

Signature

Date

### B. Contract Amount Has Increased to Equal to or Greater Than \$100,000.00

If the contract amount is now in excess of \$100,000.00, the Subcontractor is required to comply with the Section 3 federal regulations and the HCDD's Section 3 policy and procedures set forth in the Section 3 Contractor Orientation Guide.

I, hereby, acknowledge that the above Subcontractor's met the minimum threshold and I understand that the Subcontractor is now required to comply with the Section 3 requirements set forth in the Section 3 Contractor Orientation Guide.

Print Name

Title/Company

Signature

Date



### SECTION 3 EBID ANNOUNCEMENT



Date:		Bid Due By:
То:		
Project Name:		
Address, City, State, Zip:		
From:		
Summary of Work:		
This project is		As a General Contractor/Subcontractor, we are hiring a Section
3 Business Concern that o	can perform the following scope of work:	
If interested, please conta federal grant; therefore, w	nct me as soon as possible to schedule an appointment t ve encourage all qualified Section 3 Business Concerns t	to look at the scope of services. This project is funded through a o respond to this EBID for contracting opportunities.
Please email this form to		. Should you have any questions contact:
Name:		Phone Number:
Bidder Information:		
	Yes, I will be bidding on the project	No, I will not be bidding on this project
Contract Name:		
Company:		
Phone Number:		
Address:		
Email:		
Trade/Specialty:		

HCDD contractors are committed to "ensure employment and economic opportunities generated by certain HUD financial assistance shall, to the greatest extent feasible and consistent with existing federal, state and local laws and regulations, be directed to low and very low-income persons."

If your company is interested in certifying as a Section 3 Business Concern complete the application process here: https://hcddsection3.gob2g. com/. This form must be completed and submitted to the assigned Section 3 Contract Administrator/Coordinator for all contracting opportunities.

### **SECTION 3** EOA FOR PROCURING LABOR FOR SECTION 3 WORKERS



Date:	Application Deadline:
To:	
Project:	
From:	
Position Needed/Description:	
Contact Information:	

#### SECTION 3 WORKERS: INCLUDE THIS COVER SHEET WITH YOUR APPLICATION

Yes, I am interested in this position

No, I am not interested in this position

Contact Name:	
Address:	
Phone:	
Email:	
Job:	
Job Skills:	

The Housing and Community Development Department Section 3 Program is committed to ensure that employment and economic opportunities generated by certain HUD financial assistance shall, to the greatest extent feasible and consistent with existing federal, state and local laws and regulations, be directed to low and very low income persons.

Federal Labor Standard Provisions including the Davis Bacon and Related Act may be applicable to the construction of this project.

If you know someone interested to become a certified Section 3 Worker the guidelines and application are available here: https://www.houstontx.gov/housing/compliance.html#sec3.

# SAMPLE BID TABULATION



Date

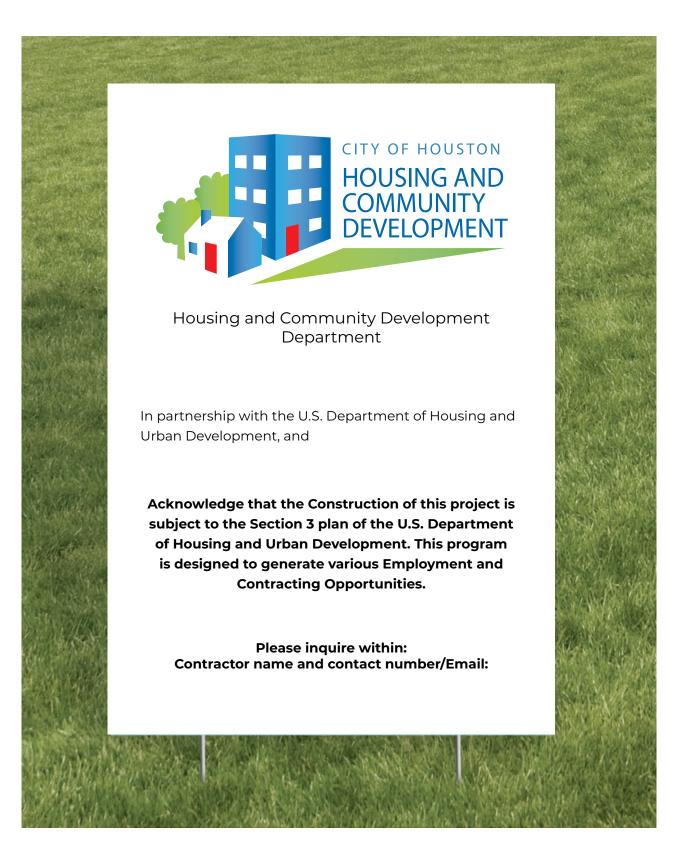
Cost Code:

ProjectedBudget:

Subcontractors	Bid Amount	CostBreakdown
		per unit per square foot
Labor	\$	
Material	\$ - PM:	
Total		
	- SPM:	
Contract	VP:	
P.O.:		

### **SECTION 3** SIGNAGE TEMPLATE





### **SUPPLEMENTAL COMPLIANCE FORMS** TEMPLATES AND REFERENCE MATERIAL



In addition to the forms listed on the previous pages, Prime Contractor, Subcontractor and Suppliers are required, where applicable, to submit supplemental compliance forms during and upon completion of the construction. The supplemental forms, templates and reference material are available for download in LCP Tracker. For your convenience, a sample of available forms and documents in LCP Tracker are attached:

Compliance Section(s): MWSBE/Section 3	Form/Documents	Due
MWSBE	Mediation Arbitration Language	Included in certified firms executed contract agreement and/or purchase order(s)
All sections	System for Award Management Instructions	N/A
All sections	Statement of Information for SAM Results	Within 5 business days of executed contract and annually.
All sections	Assessing Debarred Vendor List	Within 5 business days of executed contract and annually.
Section 3	LCP Tracker Employee Profile	Throughout project duration.
All Sections	LCP Tracker Subcontractor Set-up by Prime	Throughout project duration.

**MWSBE SUBCONTRACTORS/SUPPLIERS** MEDIATION ARBITRATION LANGUAGE



- (MWSBE Subcontractors/Suppliers) shall not delegate or subcontract more than 50% of the work under this subcontracting agreement to any other Subcontractor or supplier without the express written consent of the City of Houston's Office of Business Opportunity.
- 2. (MWSBE Subcontractors/Suppliers) shall permit representatives of the City of Houston, at all reasonable times, to perform 1) audits of the books and records of the Subcontractor, and 2) inspections of all places where work is to be undertaken in connection with this subcontracting agreement. Subcontractor shall keep such books and records available for such purpose for at least four (4) years after the end of its performance under this subcontract. Nothing in this provision shall affect the time for bringing a cause of action or the applicable statute of limitations.
- **3.** Within five (5) business days of execution of this subcontracting agreement, Contractor (prime contractor) and Subcontractor shall designate in writing to the Office of Business Opportunity an agent for receiving any notice required or permitted to be given pursuant to Chapter 15 of the Houston City Code of Ordinances, along with the street and mailing address and phone number of such agent.

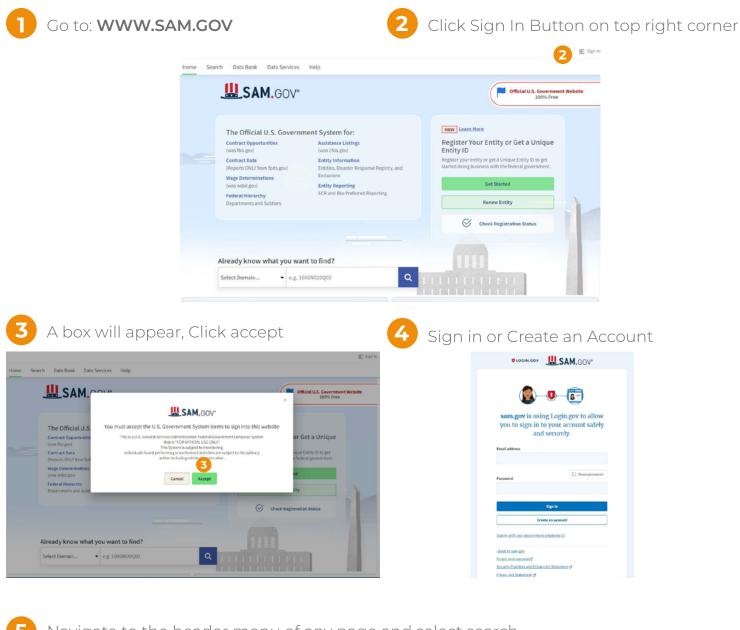
These provisions apply to goal-oriented and regulated contracts as defined in City Code of Ordinances, Chapter 15, Article 5.

HOUSING AND

### SYSTEM FOR AWARD MANAGEMENT (SAM)



Proof of non-federal exclusions search must be conducted for the prime contractors, subcontractors, and lower tier sub-contractors. Searches must be conducted by the company name, Employer Identification Number (EIN) and all principals by full first, middle, and last name. Below are the steps to follow when conducting the search and printing results.



Navigate to the header menu of any page and select search

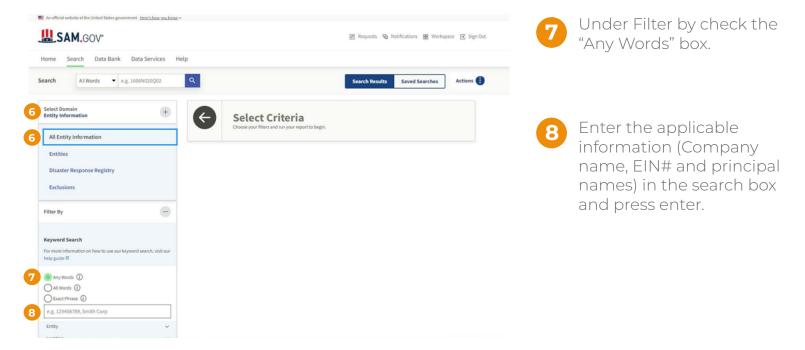
SAM.GOV*		Requests      Votifications	🔀 Workspace 🛛 E Sign Out
Home Search Data Bank	Data Services Help		

### SYSTEM FOR AWARD MANAGEMENT (SAM)



From the search page, navigate to the left-side bar. Select the "plus icon" to the right of the "select domain.

• Select Entity Information and click all Entity Information



Print the first 3-4 pages of the search-exclusion matches and ensure that the contractor is not an exact match:

Search     All Woods	Reset Č
	Southy
Select Domain         Jan 32, 2022           Finity Information         Provide of Registration         Develop 12 of 20, 222 modula           Kill Select Domain         Rev CallBOL LAND SORS, INC. Acros regression	Relevance
All Entity Information DUNE Unjust Entity D CAGE Code P	Physical Address
Entities         189116210         N/PSF         219 Wakers SSI, PRELIBERURE, N LIBERURE, N LIBERURE	205 ILHO ST, SACRAMENTO, CA 75816 USA
Disaster Response Registry District Control Co	
Exclusions typeration type Feb 3, 2022 Feb 3, 2022 Purpose type Purpose of pagintations All Awards feb	
Filter By Point Abalance Anada A	
Build         Display Config         DAT Code         Physical Address         Display Config         Display Config <thdisplay config<="" th="">         Display Config</thdisplay>	Physical Address 200 Bublic (P, Meridian, ED 83642 USA
Let 12346785 Still Carp	Physical Address 1277 E SCHAAR RD STE 5.
	12771 SCHAAF RO STE 5, CLEVELAND, OH 44131 USA

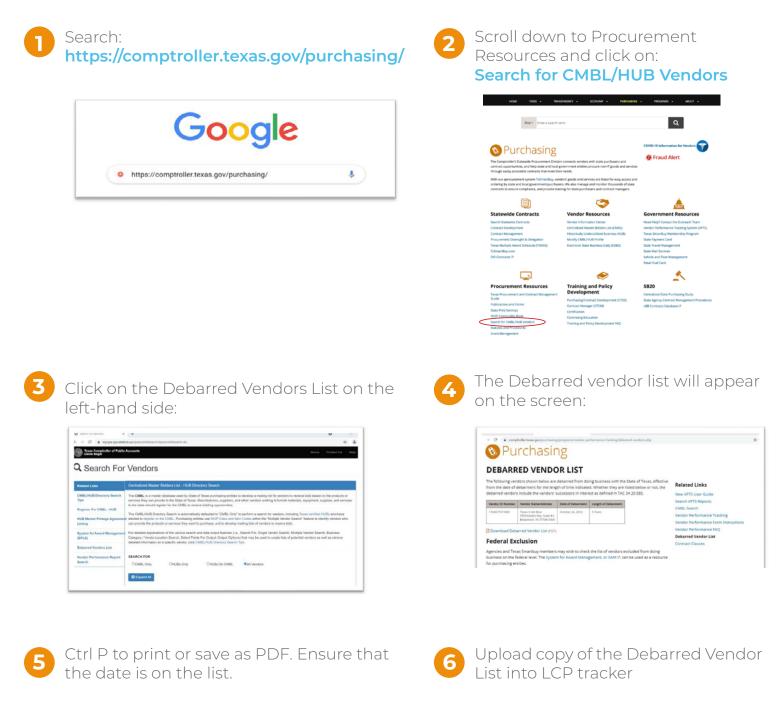
Upload all results generated (Company, EIN#, and Principals) along with the Request for Contractor Clearance form into one document in LCPTracker.

**NOTE:** If any exact match is identified contractor, subcontractor, or lower-tier subcontractor will not be eligible to conduct any business on federal projects. Any partial matches would need to be verified by HCDD and additional information may be requested.

ACCESSING THE DEBARRED VENDOR LIST



Proof of non-debarment from the states comptroller's office must be provided by prime contractors, subcontractors, and lower tiers. Below are the steps for searching and accessing the Debarred Vendor List.



SECTION 3 LCP TRACKER EMPLOYEE PROFILE

Under the Employee Profile Page, the subcontractor will:

The section that is in question is called Demographic Classification and not HUD Section 3 Information.

The provide the state of the st
CITY OF HOUSING AND COMMUNITY DEVELOPMENT Deputitions           Projeck         1. Payril Resords         2. Cetification         Report         Sorgeni a fastory         Feedba
Select Exployer In Edit
+ Filter Employee Selection
Select an Employee           Select an employee to edit *         Heip
Add / Edit Employee Information
Proc Name * Last Name *
Address 1* Address 2
City** State Province * Zp * Validate Address
55N * Employee IO
Exemptions Status Ethniany *
Date Hired * Date Fingerprinted Phone Number *
Driver's License State Driver's License Worker's Comp Code Electrician License
Gender * Hring Source Control
Demographic Classifications
Add Classification
+ HUD Section 3 Information
Section 3 Last day at section 3 Realdancy Status
> Apprentice Information
Default Hourly Paid Fringes (As paid to Fund on behalf of employee)
Pie-Tax Voluntary Encytope Constitutions and Other     Default Other Deduction Notes

Once the sub has selected the employee the system will let them know that they need to add Section 3 on the Demographic Classification

Add / Edit Employee Solection  Add / Edit Employee Information  Add / Edit Employee Information  Add / Edit Employee Information  Address 1* Address 2  State / Province *  Distate / Address 2  State / Province *  State / Province / Province *  State / Province *  State / Province *  State / Province / Province *  State / Province / Provin		Payroll Records	2. Certification	Reports	eDocuments	Set Up	Daily Reporter	LCPoertified				
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9903 DEER TRAIL ≠39 Gg*												
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SSN *     Employee ID       XAAY5228     AMAY5228       Exemptions     Status       O     ACTIVE V       HIBPANIC     V       Date Hired *     Date Fingerprinted       Price Number *     (032) 760-6979       Diver's License State     Driver's License       Diver's License State     Driver's License       Conservice     Conservice       Conservice     V									Malidaha Addad			
Defender*     AMAY5228       Determines     Status       O     ACTV V       Marshall     Phone Number*       V26/2021     Phone Number*       (032) 760-6979       Dite Frageprinted     Phone Number*       (032) 760-6979       Diter*s License State     Divers License       Unewr License State     Divers License       Unewr Operator       Conder*       Imaile V     O contributing engloyee is 19 vented.							//030		Validate Addre	**		
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37

COMMUNITY

SECTION 3 LCP TRACKER EMPLOYEE PROFILE



3

The sub will click on Add Classification

eol Employee To Edit  Filter Employee Selection  et an Employee  Add / Edit Employee Information  Demographic Classification  Chry *  State/Province *  Demographic Classification  Classification  Demographic Classification  De	DEPtracker OF HOUSTON HOUSING AND COMM	Training Materials Suppo			
Filter Employee Selection       et an Employee       Add / Edit Employee Information       Address 1 *       Address 2       9903 DEER TRAIL #39       State/Province *       HOUGTON       TX * Employee ID       SSN *       Employee ID       AAXX XXXXX       Employee ID       State Hined *       Date Hined *       Date Fingerprinted       Phone Number *	ijects 1. Payroll Records 2. Certification	Reports eDocuments	Set Up Daily Reporter LCPcertified	XIII.	
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Dusiness Owner	Demographic Classifications Add Classification "Project Requirements: Section 3 Employee Type				

4

38

### Select the Demographic Type --- Section 3 Employee Type

Demographic Classification
Democratic Trace
Demographic Type *
Select Demographic Type
٩
Ethnicity-IDOL List
OSHA
Race-IDOL List
Section 3 Employee Type
Veteran Status
Notes
ZF
Done Cancel



Demographic Classification	(
Demographic Type *	
Section 3 Employee Type X V	
Demographic Classification *	
Select Demographic Classification	
	Q
Does Not Apply to Worker	
Employed by a Section 3 business	
Income is below income limit established by HUD	
Lives within the service area or neighborhood of the project	
Resident of another project managed by PHA	
Resident of public housing or Section 8-assisted housing	
YouthBuild participant	

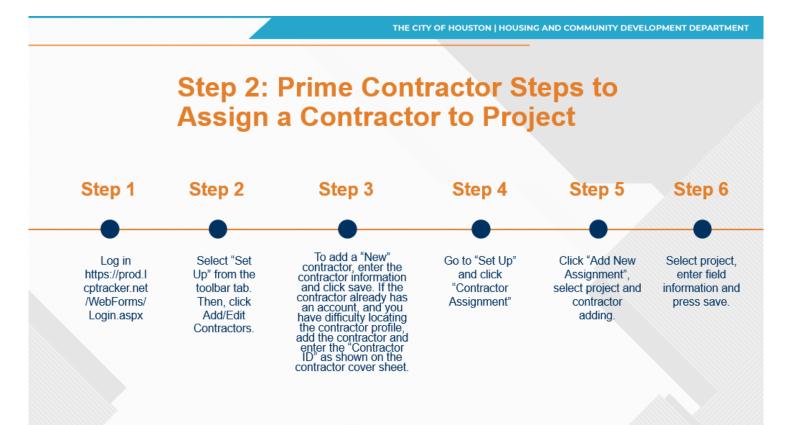
### LCP TRACKER SUBCONTRACTOR SET-UP BY PRIME



THE CITY OF HOUSTON | HOUSING AND COMMUNITY DEVELOPMENT DEPARTMENT

### Contractor Set Up is a two-step process

Add or Edit Contractor Information Add Mode
To add a new contractor, enter information and save. To edit an existing contractor, select it from the list first. You can view all the contractors in the system. You can only edit your own data after it has been entered.
Department All Departments
Select a contractor to edit
Company Name (Contractor)* BBB Construction
Federal Tax ID Number * D-U-N-S Number PWCR Number *
Contractor License No. or 10-digit Phone Number * Contractor License Expiring Date
Stantandominanter (in Bosting on Bosting) +
Phone Number* Contact Fax 888-888-8888
Contact E-Mail * (Login information will be sent to this email address) jane@bbbconstruction.com



### LCP TRACKER SUBCONTRACTOR SET-UP BY PRIME



