Solicitation of Interest for the Housing Authority of the City of Bremerton Maintenance Roster

The Bremerton Housing Authority (BHA) is soliciting applications for qualified contractors interested in being added to its maintenance roster for minor maintenance projects at all of its properties. To qualify for the Maintenance Roster, contractors must complete the following forms:

- Profile of Firm Form
- Listing of Maintenance Services Available
- Fee Structure Form
- W-9
- Section 3 Certification Paperwork (Optional)

In addition, contractors must have and submit the following:

- A copy of its Bremerton Business License
- A copy of its Master Business License with the State of Washington
- Evidence of Insurance

OPTIONAL: BHA encourages businesses to review the Section 3 information included in this packet to determine if the contractor is eligible to become certified. Certification as a Section 3 business enables the contractor to be eligible to receive preference as stated in the Section 3 information. If you have questions about Section 3, please contact Andi Reed at areed@bremertonhousing.org.

Before being placed on the roster, the Bremerton Housing Authority will verify that the contractor is not on the Federal or State debarment list and is in good standing with state agencies.

Contractors will be required to submit a Statement of Intent to the Department of Labor and Industries when they have been retained for their first work with BHA. At the end of the calendar year, an Affidavit of Wages Paid will need to be submitted to the Department of Labor and Industries that includes all work performed for the Bremerton Housing Authority during the calendar year. Contractors must pay employees at least the HUD wage and fringe rates included with this packet. Wage and fringe rates vary with the type of work performed.

The Bremerton Housing Authority will choose contractors from the roster on a rotating basis for maintenance work. Contractors will need to reapply periodically to remain on the roster.

There is no deadline for submittal of applications to the Maintenance Roster. Please submit all required information by email to Andi Reed at areed@bremertonhousing.org.

If you are already on the maintenance roster, please submit:

- Profile of Firm Form
- Listing of Maintenance Services Available
- Fee Structure Form
- W-9
- Section 3 Certification Paperwork (**Optional**)

We track the need to update license and insurance certificates throughout the year. If we need you to update those items, we will let you know.

PROFILE OF FIRM FORM

1)	H	Prime	Subcontracto	or			
2)	님	Firm's Legal Na					
3)	Ш	Mailing Addres	S:		☐ Individual/Sole Propri	ietor 🗆 Corpor	ration Partnership
4)		Check appropr	iate box:			pany (LLC). Ei	nter tax classification
5)	Ħ	Street Address	(if different):		Outlot: (maleate)		
6)		City, State, Zip	,				
7)	Ħ	Primary Contact					
8)	$\overline{\Box}$	E-mail Address			<u> </u>		
9)	Ħ	Telephone #:	()	-	Fax #: () -	
10)	П	Federal Tax ID) #:			,	
11)		UBI #:			DUNS #:		
12)		City of Brem Li	cense #:		WA ST License Type	e & #:	
13)		Year Firm Esta	ıblished:		Year Firm Establishe	ed in Breme	rton:
		Former Name	& Year				
14)		Established, if	· · · —	Name:			Year:
4>		Name of Paren		Parent Co			.,
15)		Acquired, if app	plicable:	Name:			Year:
16) I	dentif	y the Principals/	Partners in Firm	n (submit und	er the specified TAB	a brief profe	ssional resume for eac
		NAME			TITLE		% of OWNERSHIP
		n project (submi			anager and any othe orief professional resu		
		n project (submi	it under the spe			ume for each	
		n project (submi	it under the spe			ume for each	
8) F fi	Propos rm an Ca An Reside	ser Diversity Sold enter where placesian herican (Male) ent- (RBE), Minor more ownershient	tatement: You provided the corporate Corporate Corporate an Indiana In	must circle al rect percentage Held tion Woman-own anagement by	I of the following that ge (%) of ownership o Government Agency% ed (WBE) Business one or more of the founicAsian/Pacific	apply to the f each: Enterprise (Dllowing:	ownership of this Non-Profit Organization ————————————————————————————————————
8) F fi	Proposition Can Am	ser Diversity State and enter where plucasian herican (Male) ent- (RBE), Minor more ownershient	tatement: You provided the correction (MBE), or ip and active material an Mative ican Americal	must circle al rect percentage Held tion Woman-own anagement by Hispan** Amer	I of the following that ge (%) of ownership o Government Agency% ed (WBE) Business one or more of the founce Asian/Pacific ican American%	apply to the f each: Enterprise (ollowing: Hasidic Jew%	ownership of this Non-Profit Organization ————————————————————————————————————
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18) F fi	Proposition Canal	ser Diversity Stand enter where paucasian herican (Male) ent- (RBE), Minor more ownershient Africad* American (MBE)	tatement: You provided the correction (MBE), or ip and active main an Mative ican America — Woma	must circle al rect percentage deld tion Woman-own anagement by Hispan** Amer	orief professional results of the following that ge (%) of ownership of Government Agency ————————————————————————————————————	apply to the feach: Enterprise (ollowing: Hasidic Jew d Veteran certification/nurenter if available	ownership of this Non-Profit Organization ————————————————————————————————————
I8) F	Proposition Canal	ser Diversity State and enter where paucasian herican (Male) ent- (RBE), Minor more ownershied American (MBE) ent- (RBE), Minor more ownershied American Amer	tatement: You provided the correction (MBE), or ip and active main an Mative ican America — Woma	must circle al rect percentage deld tion Woman-own anagement by Hispan** Amer	orief professional results of the following that ge (%) of ownership of Government Agency ————————————————————————————————————	apply to the feach: Enterprise (ollowing: Hasidic Jew d Veteran certification/nurenter if available	ownership of this Non-Profit Organization ————————————————————————————————————

Page 1

ATTACHMENT B

PROFILE OF FIRM FORM

(19)	Worker's Compensation Insurance Carrier:				
	Policy #:	Expiration Date:	/	/	
(20)	General Liability Insurance Carrier:				
` ,	Policy #:	Expiration Date:	/	/	
(21)	Professional Liability Insurance Carrier: Policy #:	Expiration Date:	/		
	. Oney #	- Expiration Bate.		<u>, </u>	
(22)	<u>Debarred Statement:</u> Has this firm or a services by the federal government, stat government agency within or out of the Stafull detailed explanation, including dates, circ	e government, the telegraphic	State of W ☑ Yes ☑ N	ashingtoi	
(23)	<u>Disclosure Statement:</u> Does this firm or a professional relationships with any commiss a full detailed explanation, including dates, or	sioner of officer of BH	A? Yes	☐ No	past personal or If YES, attach
(24)	Non-collusive Affidavit: The undersigned proposal is genuine and not collusive and connived or agreed, directly or indirectly, wirefrain from proposing, and has not in an collusion, or communication or conference, any other proposer, to fix overhead, profit of proposer or to secure any advantage agains and that all statements in said proposal are	that said proposer th any proposer or pe y manner, directly or with any person, to be cost element of said st BHA or any person	entity has rson, to put indirectly sfix the proposal prop	not collu in a shar sought b osal price orice, or t	ded, conspired, m proposal or to y agreement or e of affiant or of hat of any other
(25)	Verification Statement: The undersigned this form he/she is verifying that all informative and accurate, and agrees if BHA discentitle BHA to not consider or make an away	ation provided herein covers any informatio	is, to the be n entered h	est of his/ nerein is	her knowledge, false, that shall
Sign	ature	/ / Date (mm/dd/yr)			
Sign	aluit	Date (IIIII/dd/yl)			
Print	ed Name	Title			

SUBCONTRACTOR(S) MUST COMPLETE SEPARATE ATTACHMENT: PLACE UNDER DESIGNATED TAB.

HUD Wage Rate Explanation

The Bremerton Housing Authority is required to pay wage rates specified by HUD for routine and non-routine maintenance work. The applicable wage rates are included in this packet, and the type of wage rate that applies to each type of service is indicated on the Maintenance Service List.

Because HUD wage rates can be difficult to understand, I have provided an example of the three acceptable methods of payment below for a laborer under the Non-Routine Maintenance Wage Rate Determination. These options apply to all labor classifications and both routine and non-routine wage rates.

HUD requires that the laborer is paid a minimum wage rate and fringe benefit rate. Those rates as well as the total are:

Required Wage Rate - Laborer (Non-Routine Wage Rate): \$15.44/hour Required Fringe Benefit -Laborer (Non-Routine Wage Rate): \$4.68/hour Minimum Wage and Fringe that must be paid in some combination: \$20.12/hour

- The employee must receive the minimum wage rate in wage. So the employee must receive at least \$15.44 per hour for every hour of work performed.
- The cost of all benefits provided to the employee needs to be converted to an hourly cost in order to determine if the employer is currently paying \$4.68 or more in benefits. Fringe benefits include: vacation (including paid holidays, personal days); health and welfare (sick pay, health and/or life insurance); pension (retirement/annuity plans); and apprenticeship/training (fees regularly paid by the employer to established training programs). Only employer contributions may be counted toward this figure. Employer payments which are mandated by Federal, state or local law (e.g., Social Security, State disability or unemployment insurance) are not considered fringe benefits.

Example #1:

After converting the cost of fringe benefits for the employee to an hourly rate, the company has determined that it provides fringe benefits to the employee of \$4.68 per hour or more. The company is only required to pay the employee \$15.44 per hour in wages. The company may pay more than that amount, but that is the minimum amount the employee must receive for each hour worked in that classification.

Example #2:

After converting the cost of fringe benefits for the employee to an hourly rate, the company has determined that it provides fringe benefits to the employee of only \$2.00 per hour. Because this amount is less than the \$4.68 required by HUD, the remaining \$2.68 per hour must be paid in addition to the minimum wage rate. The company is therefore required to pay the employee \$18.12 (\$15.44 + \$2.68) per hour in wage and

fringe. The company may pay more than that amount, but that is the minimum amount the employee must receive for each hour worked in that classification.

Example #3:

The company pays no fringe benefits to its employees. It will need to pay the full amounts of both the wage and fringe benefit amounts to the employee for each hour worked. The employee must receive \$20.12 (\$15.44 + \$4.68) per hour. The company may pay more than that amount, but that is the minimum amount the employee must receive for each hour worked in that classification.

Employee works in more than one job classification:

If an employee performs work in two different job classifications, that employee must be paid the wage rate for the appropriate job classification for however many hours are worked. If that person works as a laborer for three hours and a plumber for five hours, that employee needs to receive the laborer's wage and fringe benefit amount for three hours and the plumber's wage and fringe benefit amount for five hours.

Owner/Operators:

If a company is owned by a sole proprietor or partnership, HUD wage and fringe benefit amounts do not apply to the owner(s) of the company. Those rates do apply to any employees that the company has.

U.S. Department of Hou Urban Developm	nent
	Routine Maintenance
1 110000	☐ Routine Maintenance ☐ Nonroutine Maintenance
Effective Date:	Expiration Date:
Oct 1, 2015	Extended until new CBA is approved by BHA & Local 589
American Housing Assistance and S	ing Act of 1937, as amended, (public housing Self-determination Act of 1996, as amended, (Indian mechanics no less than the wage rate(s) indicated for
9.15.201!	5
)
	HOURLY WAGE RATES
BAS	IC WAGE FRINGE BENEFIT(S) (if any)
\$19.26 \$19.26 \$19.26 \$19.26 \$19.26 \$19.26 \$19.26 \$15.44 \$15.44	\$13.04 \$13.04 \$13.04 \$13.04 \$13.04 \$13.04 \$13.04 \$4.68 \$4.68
u	Urban Developm Office of Labor Relate LR 2000 Agency IE WA003A Effective Date: Oct 1, 2015 Unant to Section 12(a) of the U.S. Housing Assistance and Section Housing Assistance Assis

Fee Structure

Please indicate below how your fees are structured: My company pays each employee an hourly wage rate equal to or above the wage rate required by HUD for the applicable job classification. In addition, my company pays fringe benefits equal to or more than the fringe benefit amount required by HUD for the applicable job classification. The employee receives only wages equal to or more than the hourly wage rate required by HUD. In addition, my company pays a portion of the amount of fringe benefits required by HUD for the applicable job classification. The employee receives wages equal to or more than the hourly wage rate required by HUD as well as the amount required to compensate for the difference between fringe benefits paid and hourly fringe benefits required by HUD. In addition, my company pays no fringe benefits. The employee receives wages equal to or more than the hourly wage rate required by HUD as well as the full amount of fringe benefits required by HUD per hour for the applicable job classification. My company has a fee schedule (please attach) for all services. Company employees are paid in accordance with HUD requirements for wages and fringe benefits. Fee schedule is attached. My company provides lump sum estimates for services performed. Company employees are paid in accordance with HUD requirements for wages and fringe benefits. The only employees of my company are owners of the company. HUD wage

M_{V}	company provides	after-hours	and/or emerge	ncv services	Yes □	No □
IVIV	Collibativ biovides	aitei-iioui s	and/or emerge	TILV SCIVICCS.	163 🗆	110 _

rates and fringe benefits do not apply to my company.

List of Maintenance Services Your Company Can Provide

The Bremerton Housing Authority anticipates needing contractor services for general commercial building maintenance tasks. The various tasks that we anticipate are listed on the following pages. Please indicate in the left-hand column which services you are qualified and licensed (if applicable) to perform.

There is also a page to indicate tasks that are missing and which category of work they would fall under. If you do not see a service listed that you provide and you think we may need, please list that service on that page.

The type of wage rate applicable is indicated in the column to the left of the task. For some tasks, the type of wage rate applicable will depend on the complexity of the task being performed.

General Maintenance

Indicate Services Provided	Task	HUD Wage Rate Type
	Accessibility Service/Repair	Depends on task
	Replacing Lights	Routine
	Door Issues	Routine
	Fire Damage Restoration	Non-Routine
	General Contractor	Non-Routine
	Insulation	Non-Routine
	Issues with Bathroom Fixtures	Depends on task
	Paint Touch-Up	Depends on task
	Pressure Washing	Routine
	Snow Removal	Non-Routine
	Window Cleaning	Routine

Appliances and Equipment

Indicate Services Provided	Task	HUD Wage Rate Type
	Appliance Repair	Depends on task
	Food Service Equipment Repair	Non-Routine
	Furnace/Fan/HVAC Repair	Non-Routine
	Refrigeration	Non-Routine

Asphalt

Indicate Services Provided	Task	HUD Wage Rate Type
	Sealcoat	Non-Routine
	Asphalt Repair	Non-Routine
	Asphalt Removal	Non-Routine
	Parking Lot Striping	Non-Routine

Backflow Assemby

Indicate Services Provided	Task	HUD Wage Rate Type
	Backflow Assembly Testing	Non-Routine
	Backflow Assembly Repair	Non-Routine

Carpentry

Indicate Services Provided	Task	HUD Wage Rate Type
	Carpentry - Finish	Non-Routine
	Carpentry - Rough	Non-Routine
	Carpentry - Interior	Non-Routine

Carpet

Indicate Services Provided	Task	HUD Wage Rate Type
	Carpet Cleaning	Routine
	Carpet Replacement	Non-Routine

Cleaning

Indicate Services Provided	Task	HUD Wage Rate Type
	Cleaning Services	Routine

Concrete

Indicate Services Provided	Task	HUD Wage Rate Type
	Concrete Coating/Sealing	Non-Routine
	Concrete Polishing and Staining	Non-Routine
	Concrete Removal and Recycling	Non-Routine
	Concrete Repair	Non-Routine
	Curbs, Gutters, Sidewalks, and Driveways	Non-Routine

Countertops

Indicate Services Provided	Task	HUD Wage Rate Type
	Installation	Non-Routine

Doors

Indicate Services Provided	Task	HUD Wage Rate Type
	Doors - Pedestrian Automatic and Manual	Depends on task
	Overhead Doors or Gates	Non-Routine
	Garage Doors	Non-Routine

Electrical

Indicate Services Provided	Task	HUD Wage Rate Type
	Lighting - Exterior	Non-Routine
	Lighting - Interior	Non-Routine
	Electrical Low Voltage	Non-Routine

Fire and Alarm Systems

Indicate Services Provided	Task	HUD Wage Rate Type
	Fire Alarms	Non-Routine
	Sprinklers	Non-Routine
	Fire Extinguishers	Non-Routine
	Security Systems	Non-Routine
	CCTV	Non-Routine

Graffiti Removal

Indicate Services Provided	Task	HUD Wage Rate Type
	Graffiti Removal	Depends on task

HVAC Systems

Indicate Services Provided	Task	HUD Wage Rate Type
	Air Duct/Exhaust Ventilation Cleaning	Non-Routine
	HVAC/R	Non-Routine
	Electrical Related to HVAC and Generator	Non-Routine

Locks

Indicate Services Provided	Task	HUD Wage Rate Type
	Locks/Safes	Non-Routine
	Closers	Non-Routine
	Exit Devices	Non-Routine

Painting

Indicate Services Provided	Task	HUD Wage Rate Type
	Interior	Non-Routine
	Exterior	Non-Routine

Pest Control

Indicate Services Provided	Task	HUD Wage Rate Type
	Pest Control	Non-Routine

Plumbing

Indicate Services Provided	Task	HUD Wage Rate Type
	Heat and Frost Insulation of Ducts/Pipes	Non-Routine
	Incinerators and Boilers	Non-Routine
	Plumbing	Non-Routine
	Septic Pumping	Non-Routine
	Pump Tank Pumping	Non-Routine

Roof Repairs

Indicate Services Provided	Task	HUD Wage Rate Type
	Roof Maintenance	Non-Routine

Site Improvement, Repair and Maintenance

Indicate Services Provided	Task	HUD Wage Rate Type
	Brush and Vegetation Removal	Non-Routine
	Erosion Control	Non-Routine
	Fencing and Gates	Non-Routine
	Irrigation Systems	Non-Routine
	Landscape Improvements	Non-Routine

Trash Removal

Indicate Services Provided	Task	HUD Wage Rate Type
	Trash Removal	Routine

Water or Sewer Damage

Indicate Services Provided	Task	HUD Wage Rate Type
	Water Damage Restoration	Non-Routine
	Sewer	Non-Routine
	Fire Damage	Non-Routine
	Mold Damage	Non-Routine

Window Repair

Indicate Services Provided	Task	HUD Wage Rate Type
	Window Installation	Non-Routine
	Window Repair	Non-Routine

Maintenance Services Available But Not Listed

Task Not Listed	Category of Maintenance Work

Business registry Page 1 of 1



Section 3 Business Registry

INSTRUCTIONS FAQS CONTACT US

OMB Approval No. 2529-0052 (exp. 05/31/2018)

What is the Section 3 Business Registry	Am I a Section 3 Business	Register a Business	Search for a Business
lease fill in the fields below:			
Please complete the information below and click the onsidered a Section 3 business. L. Is 51% of Your Business Owned By Section 3 Residents		n at least one basis below	then your organization is
a. Percent owned by Section 3 residents:			
b. Percent Owned by All Others:			
Check			
2. Does 30% of Your Current Full-Time Staff Meet the I 3 Resident?	Definition of a Section		
a. Total Number of Full-Time Employees:			
b. Number of Full-Time Employees That Currently Meet the Definition of a Section 3 Resident:			
Number of Full-Time Employees That May Have Met the Definition of a Section 3 Resident Within the Last 3 Years:			
	Check		
3. Does Your Business have Evidence of Firm Commitm 25% of the Total Dollar Amount of Subcontracts to Sec	ent(s) to Provide tion 3 Businesses?		
a. Total Dollar Amount of Subcontracts To Be Awarded With HUD Funds:	S		
b. Total Dollar Amount of HUD-Funded Subcontracts To Be Awarded To Section 3 Businesses:	s		
	S Check		

U.S. Department of Housing and Urban Development 451 7th Street S.W., Washington, DC 20410 Telephone: (202) 708-1112 TTY: (202) 708-1455. HUD

Certification for Business Concerns Seeking Section 3 Business Preference in Contracting and Demonstration of Capability

Firm's Legal Name:			
Mailing Address:			
Check appropriate box:	☐ Individual/Sole Proprietor ☐ ☐ Limited Liability Company (LL (D=Disregarded Entity, C=Co ☐ Other: (Indicate)	LC). Ente	nter tax classification
ATTAC	HED IS THE FOLLOWING DOCU	MENTATI	ATION AS EVIDENCE OF STATUS:
OR BUSINESSES CLAIMING ST	ATUS AS A SECTION 3 RESIDEN	NT-OWN	NED ENTERPRISE:
Copy of resident lease	e Other evidence C	opy of evi	evidence of participation in a public assistance program
FOR THE BUSINESS ENTITY, AS	APPLICABLE:		
Copy of Articles of I	ncorporation		Certificate of Good Standing
Assumed Business	Name Certificate		Partnership Agreement
List of owners/stock	holder and % of each		Corporation Annual Report
Latest Board minute	s appointing officers		Additional documentation
Organization chart v	vith names and titles and brief f	unctiona	nal statement
For business claiming business:	Section 3 status by subcon	tracting	ng 25% of the dollar awarded to qualified Section
List of subcontracted	Section 3 business and subcon	tract am	mount
			ast 30% of their workforce are currently Section is of date of first employment with the business:
List of all current full	_		List of all employees claiming Section 3 status
PHA Residential lea of employment)	se (less than 3 years from date	e 🗌	Other evidence of Section 3 status (less than3 year from date of employment)
Evidence of ability to pe	erform successfully under the	e terms a	s and conditions of the proposed contract:
Current financial sta	tement		List of owned equipment
Statement of ability	to comply		List of all contracts for the past 2 years with public policy
© 1			· N. d
Signature			Notary
	1 1	My tern	erm expires:
Printed Name	Date (mm/dd/yr)		
			NOTARY
Title			SEAL:

Certification for Business Concerns Seeking Section 3 Business Preference in Contracting and Demonstration of Capability

JOEOTED / II TIKW/KTTVE / Ko	CTION PLAN FOR UTILIZATION OF PRO	THECH AREA BUSINESSES!	
Number of All Contracts		SOLOT AREA BOOMEOOLO.	
Name of Company:			
Dollar Value of All Conti	racts Proposed:		
Project:	·		
To The Greatest Exte	ent Feasible, Contracts Will Be Av	varded Through Negotiation	or Rid to Qualified Proje
Area Businesses.	THE Casible, Contracts will be Av	varaca i iliougii Negotiatioi i	or bla to Qualifica i roji
AL OF THESE CONTRACTS	FOR PROJECT AREA BUSINESSES:		
PROPOSED TYPE OF CONT	TRACT APPROX. COST	PROPOSED TYPE OF CONTRAC	CT APPROX. COST
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	AR, PERMANENT EMPLOYEES, TRA	INCLO, ALLININCLO.	
Address: Name of Company: Project:			
Name of Company:	PRESENT PERMANENT EMPLOYEES (At Time of Contract Signing)	SECTION 3 WORKFORCE PROJECTION (Residents)	TOTAL PROJECTED WORKFORCE INCREASE
Name of Company:	EMPLOYEES	WORKFORCE PROJECTION	PROJECTED WORKFORCE
Name of Company: Project:	EMPLOYEES	WORKFORCE PROJECTION	PROJECTED WORKFORCE
Name of Company: Project: APPRENTICES	EMPLOYEES	WORKFORCE PROJECTION	PROJECTED WORKFORCE
Name of Company: Project: APPRENTICES JOURNEYPERSONS	EMPLOYEES	WORKFORCE PROJECTION	PROJECTED WORKFORCE
Name of Company: Project: APPRENTICES JOURNEYPERSONS LABORERS	EMPLOYEES	WORKFORCE PROJECTION	PROJECTED WORKFORCE
Name of Company: Project: APPRENTICES JOURNEYPERSONS LABORERS SUPERVISORY	EMPLOYEES	WORKFORCE PROJECTION	PROJECTED WORKFORCE
Name of Company: Project: APPRENTICES JOURNEYPERSONS LABORERS SUPERVISORY SUPERINTENDENT	EMPLOYEES	WORKFORCE PROJECTION	PROJECTED WORKFORCE
Name of Company: Project: APPRENTICES JOURNEYPERSONS LABORERS SUPERVISORY SUPERINTENDENT PROFESSIONAL CLERICAL	EMPLOYEES	WORKFORCE PROJECTION (Residents)	PROJECTED WORKFORCE INCREASE
Name of Company: Project: APPRENTICES JOURNEYPERSONS LABORERS SUPERVISORY SUPERINTENDENT PROFESSIONAL CLERICAL TE: RESIDENTS ARE THOS	EMPLOYEES (At Time of Contract Signing)	WORKFORCE PROJECTION (Residents) RESIDENTS WHO HAVE BEEN QU	PROJECTED WORKFORCE INCREASE
Name of Company: Project: APPRENTICES JOURNEYPERSONS LABORERS SUPERVISORY SUPERINTENDENT PROFESSIONAL CLERICAL TE: RESIDENTS ARE THOS	EMPLOYEES (At Time of Contract Signing)	WORKFORCE PROJECTION (Residents)	PROJECTED WORKFORCE INCREASE
Name of Company: Project: APPRENTICES JOURNEYPERSONS LABORERS SUPERVISORY SUPERINTENDENT PROFESSIONAL CLERICAL TE: RESIDENTS ARE THOS	EMPLOYEES (At Time of Contract Signing)	WORKFORCE PROJECTION (Residents) RESIDENTS WHO HAVE BEEN QU	PROJECTED WORKFORCE INCREASE

Page 2 of 3

PREFERENCE FOR SECTION 3 BUSINESS CONCERNS IN CONTRACTING OPPORTUNITIES

BHA is required, and also requires its contractors, to provide equal employment opportunity to all employees and applicants for employment without regard to race, color, religion, sex, national origin, disability, veteran's or marital status, or economic status and to take affirmative action to ensure that both job applicants and existing employees are given fair and equal treatment.

BHA, in accordance with applicable laws and regulations, has established goals in order to comply with Section 3 requirements. The goals are:

- 1. 30% of the aggregate number of new hires in any fiscal year should be Section 3 eligible;
- 2. 10% of all construction contract dollars to Section 3 Businesses; and
- 3. 3% of all other contracts collars to Section 3 Businesses.

BHA has established the following priority for preference when providing contracting opportunities to Section 3 Businesses:

Priority I: Category 1 Business

Residents of the BHA housing development(s) for which the contract shall be expended.

Priority II: Category 2 Business

Residents of other BHA properties and BHA clients in other BHA programs.

Priority III: Category 3 Business

All other residents residing in BHA's jurisdiction who meet the income guidelines for the Section 3 preference.

Eligibility for Preference

A business concern seeking to qualify for a Section 3 contracting preference shall certify or submit evidence that the business concern is a Section 3 business concern.

HUD directs within 24 CFR 135 that the Bremerton Housing Authority may make award to qualified Section 3 business concerns with the highest priority ranking and with the lowest responsive bid if that bid is:

- (a) Within the maximum total contract price established by the HA; or
- (b) Not more than 10% higher than the total bid price of the lowest responsive bid from any responsible bidder.