**CDBG-DR FUNDED PROGRAMS**

**SECTION 3 RESIDENT SELF-CERTIFICATION** **FORM[[1]](#footnote-1)**

# **Purpose**

The purpose of this form is to identify those individuals who qualify under the federal definition of a Section 3 Resident under the Puerto Rico Department of Housing (**PRDOH**) CDBG-DR Program. A Section 3 status could assist in providing a preference in training and employment opportunities. To allow for participation in training and employment opportunities. The act of completing this form, as well as providing supporting documentation,[[2]](#footnote-2) is completely voluntary.

**This template should be customized by contractors or subrecipients prior to using this form with potential Section 3 Residents seeking employment with you. Edit the areas highlighted in yellow on page 1 and page 4.**

# Section 3 **Resident Definition**

A Section 3 Resident is an individual whose annual wage or salary is at or under the annual income level for a one-person household[[3]](#footnote-3) or can meet the family size income for the 2019 Department of Housing and Urban Development (**HUD**) Income Limits indicated in this form.

# **Instructions**

All tables below should be completed with the required information and checkbox questions should contain a response. **Forms that are not completed or are partially missing information will be returned to the individual for completion.**

|  |
| --- |
| Individual InformationUse the checkboxes below to identify your preferred method of contact. You can select more than one.  |
| Both Last Names | [type here] |
| First Name | [type here]  |
| [ ]  Physical Address | [type here] |
| [ ]  Postal Address (if different) | [type here]  |
| [ ]  Email | [type here] |
| [ ]  Phone Number | [type here] |
| Municipality | [type here] |

# 2019 Household Size and Income Levels

HUD has released and made available the 2019[[4]](#footnote-4) HUD Household Income Limits for all Municipalities for CDBG-DR.

Use the Income limits to identify your Section 3 status. Choose one (1) option from the boxes below, either income level for individual or family income limit. It is required to submit evidence to demonstrate you/your family comply(ies) with the Income Limit Identified.

**HUD 2019 Individual Annual Income Qualifications: Less than or equal to $28,850.00**

**Is your annual income less than or equal to the 2019 limit outlined above?**

[ ] **Yes** [ ]  **No**

**OR**



|  |
| --- |
| 2019 Family Income Limit for Puerto Rico |
| Family Size  | 2019 Income Limit Amount | My Family Income |
| 2 | $33,000 | [ ]  |
| 3 | $37,100 | [ ]  |
| 4 | $41,200 | [ ]  |
| 5 | $44,500 | [ ]  |
| 6 | $47,800 | [ ]  |
| 7 | $51,100 | [ ]  |
| 8 | $54,400 | [ ]  |

Is your family size income less than or equal to the 2019 limit chosen?

[ ] Yes[ ]  No

# Supporting Evidence of Income Limit

Please confirm which type of evidence you are providing.

|  |  |
| --- | --- |
| [ ]  | Proof of residency in a public housing development |
| [ ]  | Receipt and proof of public assistance |
| [ ]  | Evidence of participation in a public assistance program |
| [ ]  | Tax Returns/W2 confirming income levels |
| [ ]  | Other: **[type here]** |

# Final Certifications

|  |  |
| --- | --- |
| Opt-In | [ ] I would like to receive notifications about upcoming networking events and open job opportunities from PRDOH. [ ] I will attach my resume. |
| [ ] I understand that PRDOH will review this Section 3 Resident Certification form and supporting documentation upon receipt. If the form is incomplete or the supporting documentation is not provided or is not clear, I understand that it is my responsibility to provide any additional documents within **thirty (30) calendar days** of receipt of a written request for information from PRDOH. I understand that failure to respond to a request for additional information after **thirty (30) calendar days** will result in the dismissal of my submission. |
| [ ] I certify, under the penalty of perjury, that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in this certification or other information provided to any possible employing contractor or subcontractor may result in job termination or prosecution. |
| [ ] I authorize my information shared in this form to be added to a database of Section 3 Residents. I understand being on this list may provide additional employment opportunities, however inclusion on that list does not guarantee employment. I acknowledge only my information in this form will be shared with PRDOH staff, developers and contractors working on Section 3 covered projects.  |

**Signature**

**Date**

**Residents completing and submitting a Section 3 Resident Self-Certification Form with the supporting documentation can send the information to:**

[type here]

* **Via email at:**

[type here]

* **Online at:**
* **In writing at:**

[type here]

[type here]

* **In Person at:**

# Frequently Asked Questions (FAQ’s)

1. **Why is PRDOH providing this form?**

PRDOH is the grantee of CDBG-DR funding and would like to engage Puerto Rican Residents who may qualify as Section 3 candidates in all new hiring and training opportunities. PRDOH also wants any subrecipients or contractors working with federal CDBG-DR funding to use this form to identify eligible residents for their new hiring or training opportunities.

1. **Why does this form offer 2019-income limits?**

HUD releases information once a year. This form contains 2019-income limits and will be edited annually once new income limits are released.

1. **Will my information become public?**

PRDOH will safeguard your information. Only if you choose to be placed on a listing for job, training or hearing about networking opportunities will PRDOH share this with contractors or other subrecipients who are looking for candidates. You can always choose to opt out afterwards by writing to our email: Section3CDBG@vivienda.pr.gov.

1. **How many times do I have to complete this form?**

Once every three (3) years until you are either hired or placed in a training opportunity funded with CDBG-DR funds. If you are not chosen for any job opportunity you applied for or training opportunity, and the 2020 HUD data is released, you are encouraged, but not required, to complete this form again.

**END OF FORM**

1. This Section 3 Resident Certification is valid for a period of three (3) years [↑](#footnote-ref-1)
2. Examples of acceptable evidence to determine eligibility for preference is proof of residency in a public housing development, receipt of public assistance, or evidence of participation in a public assistance program. [↑](#footnote-ref-2)
3. As per Federal Register Vol. 83, No. 28 (February 9, 2018), 83 FR 5844, for the purposes of CDBG-DR funding, HUD authorizes grantees to determine that an individual is eligible to be considered a Section 3 Resident if the annual wages or salary of the person are at, or under, the HUD-established income limit for a one-person family for the jurisdiction. [↑](#footnote-ref-3)
4. As of the revision date of this form, HUD has already published data for 2020. [↑](#footnote-ref-4)