

LAWRENCEVILLE HOUSING AUTHORITY and  
GWINNETT HOUSING CORPORATION

502 Glenn Edge Drive  
Lawrenceville, GA 30046  
770-963-4900

Lejla Slowinski, Executive Director



# VENDOR APPLICATION FORM

The undersigned does hereby swear that the statements contained in the application and all attachments, which have been provided in support of this application, are true, accurate, and complete, and include all material information necessary to identify and explain the ownership and operation of:

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Full Name of Business

The undersigned agrees that, as part of the certification procedure, LHA/ GHC may freely contact any person or organization named in the application to verify statements made in the application. Any material misrepresentations will be grounds for immediate rejection of the application for certification, termination of any contract which may be awarded, and for initiating action under Federal and State laws concerning fraudulent statements.

If after filing this application, and before work is completed on a contract covered by this program, there is any significant change in the information submitted, the undersigned agrees to inform LHA/GHC of the change either directly or through the prime contractor, as applicable.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PART 1: GENERAL INFORMATION**

Business Owner/President: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Indicate the products and/or services you provide. Check all applicable boxes.

- |  |   |
|--|---|
| <input type="checkbox"/> Construction            | <input type="checkbox"/> Technology Consulting  |
| <input type="checkbox"/> Construction Management | <input type="checkbox"/> Technology Supplies    |
| <input type="checkbox"/> Electrical Work         | <input type="checkbox"/> Human Resources        |
| <input type="checkbox"/> Electrical Supplies     | <input type="checkbox"/> Consulting             |
| <input type="checkbox"/> Plumbing Work/Sewer     | <input type="checkbox"/> Legal Services         |
| <input type="checkbox"/> Plumbing Supplies       | <input type="checkbox"/> Property Appraisals    |
| <input type="checkbox"/> Property Management     | <input type="checkbox"/> Office Supplies        |
| <input type="checkbox"/> Landscaping Services    | <input type="checkbox"/> Demolition             |
| <input type="checkbox"/> Maintenance Supplies    | <input type="checkbox"/> Other, Please describe |

Type: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**\*\* The pages following are for Section 3 (24 CFR 75) certification only. If these don't apply to you or your business please leave blank. \*\***

## Section 3 Business Concern Certification for Contracting

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**Instructions:** Enter the following information and select the criteria that applies to certify your business' Section 3 Business Concern status.

### Business Information

Name of Business \_\_\_\_\_

Address of Business \_\_\_\_\_

Name of Business Owner \_\_\_\_\_

Phone Number of Business Owner \_\_\_\_\_

Email Address of Business Owner \_\_\_\_\_

### Preferred Contact Information

Same as above

Name of Preferred Contact \_\_\_\_\_

Phone Number of Preferred Contact \_\_\_\_\_

### Type of Business (select from the following options):

Corporation

Partnership

Sole Proprietorship

Joint Venture

### Select from **ONE** of the following three options below that applies:

At least 51 percent of the business is owned and controlled by low- or very low-income persons (Refer to income guidelines on page 6).

At least 51 percent of the business is owned and controlled by current public housing residents or residents who currently live in Section 8-assisted housing.

Over 75 percent of the labor hours performed for the business over the prior three-month period are performed by Section 3 workers (Refer to definition on page 6).

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**Business Concern Affirmation**

I affirm that these statements are true, complete, and correct to the best of my knowledge and belief. I understand that businesses who misrepresent themselves as Section 3 business concerns and report false information to Lawrenceville Housing Authority or Gwinnett Housing Corporation may have their contracts terminated as default and be barred from ongoing and future considerations for contracting opportunities. I hereby certify, under penalty of law, that the following information is correct to the best of my knowledge.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Certification expires within six months of the date of signature

Information regarding Section 3 Business Concerns can be found at [24 CFR 75.5](#)

**FOR ADMINISTRATIVE USE ONLY**

Is the business a Section 3 business concern based upon their certification?

**YES**       **NO**

**EMPLOYERS MUST RETAIN THIS FORM IN THEIR SECTION 3 COMPLIANCE FILE FOR FIVE YEARS.**



## The Lawrenceville Housing Authority and Gwinnett Housing Corporation

### Section 3 Income Limits

#### Eligibility Guidelines

The worker's income must be at or below the amount provided below for an individual (household of 1) regardless of actual household size.

#### Individual Income Limits

FY 2021 Income Limit Area	Income Limits Category	FY 2021 Income Limits
	Extremely Low Income Limits (30%)	\$ 18,100
Gwinnett County	Very Low Income Limits (50%)	\$ 30,200
	Low Income Limits (80%)	\$ 48,300

See <https://www.huduser.gov/portal/datasets/il.html> for most recent income limits.

#### Section 3 Worker Definition:

- A low or very low-income resident (the worker's income for the previous or annualized calendar year is below the income limit established by HUD); or
- Employed by a Section 3 business concern; or
- A YouthBuild participant.

#### Targeted Section 3 Worker Definition: (24 CFR 75.21)

- Employed by a Section 3 business concern *or*
- Currently meets or when hired met at least one of the following categories as documented within the past five years:
  - Living within the service area or the neighborhood of the project, as defined in 24 CFR 75.5;
  - A YouthBuild participant.