Dayton Metropolitan Housing Authority
400 Wayne Ave.
P.O. Box 8750
Dayton, Ohio 45401-8750
Telephone (937) 910-7500
Fax (937) 910-7689

# Section 3 Business Employee List (To be submitted with bid/offer)

Form sec3-001b

**COMPANY NAME:** _____

**ADDRESS:** _____

**TELEPHONE NUMBER:** _____ **FAX:** _____

**Instructions: Please complete (type or legibly print) information for all employees of the company. For Section 3 employees,* attach form sec3-002a, Section 3 Resident Preference Claim Form AND form sec3-002b, Section 3 Resident or Employee Household Income Certification (contact DMHA for these forms). USE ADDITIONAL PAGES OF THIS FORM WHERE NECESSARY AND NUMBER EACH PAGE.**

| Employee Name | Address | Work Classification | Date of Hire | FT or PT | Sec. 3 Employee (Yes or No) |
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**Legend: FT = Full Time PT = Part time Sec. 3 = Section 3 Resident**

**TOTAL NUMBER OF EMPLOYEES:** _____

**SIGNATURE:** _____ **DATE**: _____

**TITLE:**_____

* **Section 3 person** is an individual who is a public housing resident, or who resides in the metropolitan area where the Section 3 assistance is being expended AND who is low or very low income,** or a person seeking the training and/or employment preference provided by Section 3 program, or a person receiving unemployment benefits, or a returning veteran, or a recent college or vocational school graduate or a woman in non-traditional career.

Income Level Determination**

| # IN HOUSEHOLD | 1 PERSON | 2 PERSONS | 3 PERSONS | 4 PERSONS | 5 PERSONS | 6 PERSONS | 7 PERSONS | 8 PERSONS |
|---|---|---|---|---|---|---|---|---|
| VERY LOW-INCOME | $21,750 | $24,850 | $27,950 | $31,050 | $32,550 | $36,000 | $38,500 | $41,000 |
| LOW-INCOME | $34,800 | $39,750 | $44,750 | $49,700 | $53,700 | $57,650 | $61,650 | $65,600 |