

THE FOLLOWING FORMS MUST BE
COMPLETED BY THE PRIME CONTRACTOR

Affirmative Action Program Implementing Section 3 of the Housing & Urban Development Act of 1968

Contractor's Name		Project Name	
Address	Zip Code	Project Number	
EEO Officer		Project Location (City, County, State)	
Phone Number		Construction Start Date	Construction End Date

I. Determination of Project Area Boundaries

A. Address of Proposed Project

Street	City or Township	County
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B. Below, indicate whether this project is located in an Urban Renewal Area, Neighborhood Development Program Area, Model Cities Area, Metropolitan Development Plan Area or Indian Reservation.

(Specify)

If yes, the project area for purposes of this Section 3 Affirmative Action Plan is co-extensive with boundaries of the Urban Renewal, NDP, Model Cities, Metropolitan Plan or Indian Reservation Boundaries.

If no, specify the smallest political jurisdiction within which the project is located, i.e., township, city, village, county, etc.

(Specify)

The project for purposes of this Section Affirmative Action plan is coextensive with the political jurisdiction specified above.

C. Based on the information given in Columns 1, 2, and 3 (Table B) and the availability of eligible business concerns within the project area doing business in professions or occupations identified, set forth your goals for the number of contracts to be awarded to eligible project area businesses in Column 4 and for the approximate dollar amount to be awarded to project area businesses in Column 5. Eligible project area businesses will be utilized to the greatest extent feasible.

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II. Specific Affirmative Action Steps

_____ (Name of Contractor) agrees to implement the following specific affirmative action steps directed at increasing the utilization of lower income residents and project businesses:

- A. The target area of this affirmative action plan is the Lake County region.
- B. To attempt to recruit from the appropriate areas the necessary number of lower income residents through local advertising media, signs placed at the proposed site for the project, and community organizations, and public or private institutions operating within or serving the project area such as Service Employment and Redevelopment (SER), Opportunities Industrialization Center (OIC), Urban League, Concentrated Employment Program, Hometown Plan, or the U.S. Employment Service.
- C. To maintain a list of all lower income area residents who have applied either on their own or on referral from any source and to employ such persons if otherwise eligible and if a vacancy exists.
- D. *To insert this affirmation action plan in all bid documents and to require all bidders to submit a Section 3 affirmative action plan including utilization goals and the specific steps planned to accomplish those goals.
- E. *To insure that contracts which are typically let on a negotiated rather than a bid basis in areas other than Section 3 covered project areas are also let on a negotiated basis, whenever feasible, when let in a Section 3 covered project area.
- F. To formally contact unions, subcontractors and trade associations to secure their cooperation for this program.
- G. To insure that all appropriate project area business concerns are notified of pending contractual opportunities.
- H. To maintain records, including copies of correspondence, memoranda, etc., which document that all of the above affirmative action steps have been taken.
- I. To appoint or recruit an executive official of the company or agency as Equal Opportunity Officer to coordinate the implementation of this Section 3 affirmative action plan.
- J. To list on Table C all projected work force needs for all phases of this project by occupation, trade, skill level, and number of positions.

*Loans, grants, contracts, and subsidies for less than \$10,000 will be exempt.

As officers and representatives of _____
(Name of Contractor), we, the undersigned, have read and fully agree to this affirmative action plan and become a party to the full implementation of this program.

Signature	Title
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Proposed List of Sub-Contractors

Vendor Type	Union? (Yes/No)	Type of Business (Sole Proprietor, Corporation, Partnership)	Total Approximate Dollar Amount	Lake County Business?	MBE/WBE?

Company	Project Name
Project Number	EEO Officer's Signature
Date	

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Certification Form Regarding Equal Employment Opportunity

In accordance with Executive Order 11246 (30 F.R. 12319-25), the implementing rules and regulations thereof, and orders of the Secretary of Labor, a certification regarding equal opportunity is required of contractors and their proposed subcontractors.

Contractor's Name: _____
Address: _____
Phone Number: _____
IRS EIN: _____

1. Participation in a previous contract or subcontract.
 - a. Bidder has participated in a previous contract or subcontract subject to the Equal Opportunity Clause.
 _____ Yes _____ No
 - b. Compliance reports were required to be filed in connection with such contract or subcontract.
 _____ Yes _____ No
 - c. Bidder has filed all compliance reports required by Executive Orders 10925, 11114, 11246, or by regulations of the Equal Employment Opportunity Commission issued pursuant to Title VII of the Civil Rights Act of 1964.
 _____ Yes _____ No
 - d. If answer to item c. is "No", please explain in detail on reverse side of this certification.

2. Dollar amount of proposed bid. \$ _____
3. Anticipated performance period. _____
4. Female owned business.
 _____ Yes _____ No

5. Expected total number of employees who will perform the proposed construction.

6. Non-segregated facilities.
 - a. Notice to Prospective Federally-Assisted Construction Contractors.

Contractor receiving federally assisted construction contract awards exceeding \$10,000 which are not exempt from the provisions of the Equal Opportunity Clause will be required to provide for the forwarding of the following notice to prospective subcontractors for supplies and construction contracts where the subcontracts exceed \$10,000 and are not exempt from the provisions of the Equal Opportunity Clause.

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b. Certification of Non-segregated Facilities.

The federally-assisted construction contractor certifies that he does not maintain or provide for his employees any segregated facilities at any of his establishments, and that he does not permit his employees to perform their services at any location under his control where segregated facilities are maintained. The federally-assisted construction contractor certifies further that he will not maintain or provide for his employees any segregated facilities at any of his establishments and that he will not permit his employees to perform their services at any location under his control where segregated facilities are maintained. The federally-assisted construction contractor agrees that a breach of this certification is a violation of the Equal Opportunity clause in this contract. As used in this certification, the term "segregated facilities" means any waiting rooms, work areas, rest rooms and wash rooms, restaurants and other eating areas, time clocks, locker rooms and other storage or dressing areas, parking lots, drinking fountains, recreation or entertainment areas, transportation, and housing facilities provided for employees which are segregated by explicit directive or are in fact segregated on the basis of race, creed, color, or national origin because of habit, local custom, or otherwise. The federally-assisted construction contractor agrees that (except where he has obtained identical certifications from proposed subcontractors prior to the award of subcontracts exceeding \$10,000 which are not exempt from the provisions of the Equal Opportunity Clause) he will retain the duplicate of such certifications in his files. The contractor will include the original in his Bid Package.

7. Race or ethnic group designation of bidder. Enter race or ethnic group in the appropriate blank:

Race Category	Ethnicity Category
White	Hispanic?
Black/African American	Hispanic?
Asian	Hispanic?
American Indian/Alaska Native	Hispanic?
Native Hawaiian/Other Pacific Islander	Hispanic?
American Indian/Alaskan Native & White	Hispanic?
Asian & White	Hispanic?
Black/African American & White	Hispanic?
Am. Indian/Alaska Native & Black/African Am.	Hispanic?
Other Multi-Racial	Hispanic?
Other	Hispanic?

Remarks:

Certification: The information above is true and complete to the best of my knowledge and belief.

Name & Title of Signer

Signature

Date

Note: The penalty for making false statements in offers is prescribed in 18 U.S.C. 1001.

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Contractor's Certification Concerning Labor Standards and Prevailing Wage Requirements

(Appropriate Recipient)	Date
Project Name	Project Number

The undersigned, having executed a contract with _____ for _____ (nature of work) for the construction of the above-identified project, acknowledges that:

- a. The Labor Standards Provisions are included in the aforesaid contract;
- b. Correction of any infractions of the aforesaid conditions including infractions by any of his subcontractors and any lower tier subcontractors is his responsibility.

The contractor certifies that:

- a. Neither the contractor nor any firm, corporation, partnership or associate in which he or she has a substantial interest is designated as an ineligible contractor by the Comptroller General of the United States pursuant to Section 5.6(b) of the Regulations of the Secretary of Labor, Part 5 (29 CFR, Part 5) or pursuant to Section 3(a) of the Davis-Bacon Act, as amended (10 U.S.C. 276a-2(a));
- b. No part of the aforementioned contract has been or will be subcontracted to any subcontractor if such subcontractor or any firm, corporation, partnership or association in which such subcontractor has a substantial interest is designated as an ineligible contractor pursuant to the aforesaid regulatory or statutory provisions.

The contractor agrees to obtain and forward to the aforementioned recipient, within ten days after the execution of any lower subcontract, a Subcontractor's Certification Concerning Labor Standards and Prevailing Wage Requirements, executed by the lower tier subcontractor.

The contractor certifies that:

- a. The legal name and the business address of the undersigned are:

- b. The undersigned is:
 - (1) A Single Proprietorship _____
 - (2) A Partnership _____
 - (3) A Corporation Organized In The State Of: _____
 - (4) Other Organization (describe) _____

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c. The name, title and address of the owner, partners, or officers of the undersigned are:

Name	Title	Address

d. The names and addresses of all other persons, both natural and corporate, having a substantial interest in the undersigned and the nature of the interest are (If none, so state):

Name	Title	Address

e. The names, addresses, and trade classifications of all other building construction contractors in which the undersigned has a substantial interest are (If none, so state):

Name	Title	Address

Name & Title of Signer	
Signature	Date

WARNING

U.S. Criminal Code, Section 1010, Title 18, U.S.C., provides in part: "Whoever,...makes, passes, utters, or publishes any statement, knowing the same to be false...shall be fined not more than \$5,000 or imprisoned not more than two years, or both."

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Lake County Community Development Section 3 Employee Certification Form

(To Be Completed Only By New Hires Working On Project)

Please provide the information requested on this form so that we can verify to the Department of Housing and Urban Development that your employment is achieving the Section 3 goals of our program. The information will be placed in Lake County Community Development project files and also with your employer. In addition, this information is also subject to verification by Lake County Community Development.

Job Title: _____

1. Circle the number in your household. Count yourself and all household members.

Household Size	1	2	3	4	5	6	7	8
Monthly Income	\$2,200	\$2,512	\$2,825	\$3,142	\$3,392	\$3,642	\$3,892	\$4,146

2. Before taking this job, was your gross household monthly income ABOVE or BELOW the amount shown in question 1? (Circle above or below)

ABOVE

BELOW

3. (a) Please indicate your racial group (**optional**)

<p>_____ Native American, Eskimo</p> <p>_____ African American</p> <p>_____ White (non-Hispanic)</p>	<p>_____ Asian, Pacific Islander</p> <p>_____ Hispanic</p> <p>_____ Other (specify)</p>
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(b) Sex: _____ Male _____ Female

- (c) Are you a female head of household? (**optional**)

_____ Yes _____ No

- (d) Are you disabled? _____ Yes _____ No (**optional**)

_____ Yes _____ No

4. Certification: The respondent hereby certifies that all information provided in this certification is true and complete to the best of his/her knowledge.

Name: _____

Date of Hire: _____

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