

Section 3 Business Concern Certification

**MDHA – Section 3 Business Concern Certification**

*All fields are required.*

­­­­­­­­­­­­­­Business Name Enter Business Name

Business Address Enter Business Address

Business Owner Name Enter Business Owner Name

Contact Name Enter Contact Name

Email Address Enter Email Address for Contact

Phone Number Enter Phone Number for Contact

Business Type Choose Business Type

**Select one of the following three options to qualify as a Section 3 Business Concern.**

At least 51% of the business is owned and controlled by low or very low-income persons.

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

Over 75% of the labor hours performed for the business over a three-month period are performed by Section 3 workers.

**Business Concern Attestation**

I confirm that the above statements are accurate to best of my knowledge and belief. I understand that businesses that knowingly misrepresent themselves as Section 3 Business Concerns and report false information to Metropolitan Development and Housing Agency 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.

[ ]  I agree

You agree that your electronic signature has the same validity and effect as your handwritten signature on the document, and that it has the same meaning as your handwritten signature.

Electronic Signature Click or tap here to enter text.

Today’s Date Click or tap here to enter text.



If you are using another email service other than Outlook, you will need to save the document and email it to the following MDHA staff:

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