**SECTION 3 REPORT**

|  |  |  |  |
| --- | --- | --- | --- |
| **DOA AGREEMENT #** | IDIS/HTF Contract ??? |  | **CONTACT INFORMATION** |
| (Contract #) |  |  | Preparer’s Name | Emily Francis |
|  |  |  | Title | Commercial Lending Officer |
| **NAME OF GRANTEE** |  |  | Telephone | Off. (608) 261-5925 / Cell (312) 505-3323 |
|  |  |  | E-mail | Emily.Francis@WHEDA.com |

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| **HUD REPORTING PERIOD** | **[ ]**  **Semi-Annual Report:** October 1, 20\_\_\_ to March 31, 20\_\_\_ |
| **[x]**  **Annual Report:** October 1, 20\_19\_ to September 30, 20\_20\_ |
| Complete one form for each program/contract with DEHCR. |
| **Please check program** | **[x]**  **CDBG** | **[ ]**  **NSP** | **[ ]**  **HOME** | **[ ] HOPWA** |
|  | **[ ]**  **CDBG-DR (Disaster Recovery)** | **[ ]**  **ESG** |  |

|  |
| --- |
| Part I: Employment and Training |
| Job Category | Number of New Hires | Number of New Hires that are Section 3 Residents | Number of Section 3 Trainees |
| Professionals | 0 | 0 | 0 |
| Clerical | 0 | 0 | 0 |
| Case Management | 0 | 0 | 0 |
| Facilities / Maintenance | 0 | 0 | 0 |
| Technical (Bookkeeping, IT, etc.) | 0 | 0 | 0 |
| Carpentry | 0 | 0 | 0 |
| Masonry | 0 | 0 | 0 |
| Plumbing | 0 | 0 | 0 |
| Electrical | 0 | 0 | 0 |
| Administration | 0 | 0 | 0 |
| Define Other:  | 0 | 0 | 0 |
| Define Other:  | 0 | 0 | 0 |
| Define Other:  | 0 | 0 | 0 |

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| Part II: Contracts Awarded |
| **Construction Contracts** |
| 1. Total dollar amount of all contracts award on the project
 | $ | 0 |
| 1. Total dollar amount of contracts awarded to Section 3 businesses
 | $ | 0 |
| 1. Percentage of the total dollar amount that was awarded to Section 3 businesses
 |  | 0 | % |
| 1. Total number of Section 3 businesses receiving contracts
 | 0 |
| **Non-Construction Contracts** |
| 1. Total dollar amount of non-construction contracts award on the project
 | $ | 0 |
| 1. Total dollar amount of non-construction contracts awarded to Section 3 businesses
 | $ | 0 |
| 1. Percentage of the total dollar amount that was awarded to Section 3 businesses
 |  | 0 | % |
| 1. Total number of Section 3 businesses receiving non-construction contracts
 | 0 |

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| Part III: Best Efforts |
| Describe the Grantee’s best efforts to give training and employment opportunities to LMI residents and/or businesses, check all that apply: |
| **[ ]**  Job Posting at Job Centers | **[ ]**  Job Posting in Community List Serves |
| **[ ]**  Job Posting in Local Newspaper/Shopper | **[ ]**  Job Posting at Public Municipal Building |
| **[ ]**  Job Posting at Housing Authority | **[ ]**  Job Posting at Technical College or University |
|  |  |
| **[ ]**  Website or Social Media Outreach | **[ ]**  Disadvantage Business Outreach |
|  |  |
| **[ ]**  No new hires during reporting period | **[ ]**  Project Complete – No Activity |
| **[ ]**  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
|  |
| Comments: |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  **/ /**  |
| Signature of Preparer |  | Title |  | Date Signed |

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|  |  |  |
| Printed Name of Preparer |  |  |

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| --- | --- | --- | --- | --- |
|  |  |  |  |  **/ /**  |
| UGLG/Grantee Signature |  | Title |  | Date Signed |

**SECTION 3 ANNUAL REPORT FORM INSTRUCTIONS**

Federal regulation 24 CFR 135 requires the Grantee (i.e. Unit of General Local Government, Non-Profit, Housing Authority, etc.) **and each** of its contractors/sub-contractors/service providers that receives or are contracted for a project that is paid for with federal funds must complete a Section 3 report. The Grantee will compile all contractors/sub-contractors/service providers forms and submit a cumulative Section 3 Report to the Division of Energy, Housing and Community Resources (DEHCR) for each contract with DEHCR.

* **Agreement Number and Grantee Name**

Provide the *DOA Agreement #* and *Name of Grantee* in the upper left-hand corner on the first page of the form. This information can be found on the Contract/Grant Agreement with the Wisconsin Department of Administration (DOA).

* **Contact Information**

Provide the *Preparer’s Name*, *Title*, *Telephone*, and *E-mail* pertaining to the individual compiling the report information.

* **US Department of Housing and Urban Development (HUD) Reporting Period**

Select the appropriate reporting period for the report. (To checkmark a box, double-click the box and select the “checked” option that appears under Default Value in the pop-up window.) *Please note, CDBG Disaster Recovery (IKE) must continue to report quarterly.*

* **Program**

Identify the program under which the Section 3 Report is being submitted. (To checkmark a box, double-click the box and select the “checked” option that appears under Default Value in the pop-up window.)

* **Part I: Employment and Training**

Report any new hires and trainees who are hired/trained with regards to the DOA Agreement/Contract listed above during the specified reporting period. For each Job Category listed in the table, indicate how many New Hires were completed during the specified reporting period, along with the number of New Hires that are/were Section 3 Residents (determination based on the county where the work is being performed) and the total number of Section 3 Trainees (that completed training during the specified reporting period) as it relates to the DOA Agreement. If no hires or trainees occurred, report “0” (zero) in the space(s) provided. If New Hire(s) or Trainee(s) does not fall into the pre-populated list of Job Categories, then enter the job title(s) in the Define Other field(s) and appropriately count the hire(s) or trainee(s). The job title entered in the Define Other field must be specified.

* **Part II – Contracts Awarded**

Construction Contracts:

1. Enter the total dollar amount of construction contracts awarded during the reporting period. The total dollar amount should include both HUD and match funds. *Note: If DEHCR has awarded a contract to a grantee, but the grantee has not awarded the contract to a construction contractor, then the amount reported would be $0.00 (zero dollars).*
2. Enter the total dollar amount of construction contracts awarded to Section 3 businesses during the reporting period. The amount entered should reflect both HUD and match amounts. The amount entered cannot exceed the amount entered for Line 1 (above).
3. Enter the percentage of the dollar amount for the construction contracts awarded to Section 3 businesses during the reporting period (Line 2 divided by [Line 1 + Line 2]). The result cannot exceed 100%.
4. Enter the total number of Section 3 businesses receiving construction contracts during the reporting period.

Non-Construction Contracts

*Non-construction contracts are professional services contracts that are associated with construction (i.e. Architecture, Engineering, Site Preparation, Legal, etc.).*

1. Enter the total dollar amount of non-construction contracts awarded during the reporting period. The total dollar amount should include both HUD and match funds. *Note: If DEHCR has awarded a contract to a grantee, but the grantee has not awarded the contract to another contractor/firm, then the amount reported would be $0.00 (zero dollars).*
2. Enter the total dollar amount of non-construction contracts awarded to Section 3 businesses during the reporting period. The amount entered should reflect both HUD and match amounts. The amount entered cannot exceed the amount entered for Line 1 (above).
3. Enter the percentage of the dollar amount for the non-construction contracts awarded to Section 3 businesses during the reporting period (Line 2 divided by [Line 1 + Line 2]). The result cannot exceed 100%.
4. Enter the total number of Section 3 businesses receiving non-construction contracts during the reporting period.

***IMPORTANT: Each numerical field must be completed for Parts I and II. If no new hires or trainees occurred, or no new contracts/sub-contracts were awarded, then report “0” or “$0.00” in each appropriate field. Responses of “N/A” or blank/empty fields will not be accepted.***

* **Part III – Best Efforts**

Grantees should make every effort within their disposal to meet the regulatory requirements of Section 3. For example, this may mean going a step beyond the normal notification process for employment and contracting procedures by developing strategies that will specifically target Section 3 residents and businesses for these types of economic opportunities.

Describe the Grantee’s best efforts to give training and employment opportunities to Low- and Moderate-Income (LMI) residents and/or businesses during the reporting period. Check **ALL** efforts that apply. Include any comments to emphasize any targeted outreach efforts that were made, along with procedures established to ensure the LMI residents and businesses were given opportunities in the evaluation and hiring/contracting processes. If no new hires were made, select the appropriate box. (To checkmark a box, double-click the box and select the “checked” option that appears under Default Value in the pop-up window.)

For examples of best efforts see *Appendix to 24 CFR Part 135* ([*https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&sid=3a08288138e0183f1b595e73c537673a&rgn=div5&view=text&node=24:1.2.1.2.10&idno=24#ap24.1.135\_192.1*](https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&sid=3a08288138e0183f1b595e73c537673a&rgn=div5&view=text&node=24:1.2.1.2.10&idno=24#ap24.1.135_192.1)*).*

* **Required Signatures**

Provide the signature, position title, date signed, and printed name of the report preparer.

Provide the signature, position title, and date signed by the Grantee’s Chief Elected Official, Executive Director or his/her designee. If the form is being completed by a contractor or sub-contractor, then the signature must be of the owner, business manager or project manager.

Original copies of completed Section 3 Reports must be maintained in the Grantee’s project files. A copy of the completed Section 3 Report must be e-mailed (preferred) or mailed to:

Assigned Project Representative

Wisconsin Department of Administration

Division of Energy, Housing and Community Resources

P. O. Box 7970

Madison, WI 53707-7970.