



SECTION 3 PREFERENCE INCOME VERIFICATION FORM

(This is not a job application.)

A section 3 resident seeking the preference in training and employment provided by this part shall certify, or submit evidence to the recipient contractor or subcontractor, if requested, that the person is a Section 3 resident, as defined in 24 CFR 135.5. (An example of evidence of eligibility for the preference is evidence of receipt of public assistance, or evidence of participation in a public assistance program.)

CERTIFICATION FOR SECTION 3 RESIDENT

I, _____, am a legal resident of the Mecklenburg County Area* and I

(check one box)

- qualify as a Section 3 resident do not qualify as a Section 3 resident

based on my family size and household income during 2015 for the income levels as outlined in the Mecklenburg County Area Median Income limits listed below.

2016 Mecklenburg County Area Median Income Limits

Family Size	1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons
Income	\$37,550	\$42,900	\$48,250	\$53,600	\$57,900	\$62,200	\$66,500	\$70,800

Note: Mecklenburg County is part of the Charlotte-Gastonia-Concord, NC-SC HUD Metro FMR Area. The Charlotte-Gastonia-Concord HUD Metro FMR Area contains the following areas: Cabarrus County, NC; Gaston County, NC; Mecklenburg County, NC; Union County, NC; and York County, SC.

My permanent address is: _____

Street Address **(No PO Box)**

 City State Zip

Phone: _____ Email _____

Number of family who live in my household: _____

My total annual household income for the prior calendar year (2015) is: _____

I have attached **ONE** of the following documentation as evidence of my status:

- Proof of public assistance (i.e., TANF, Food Stamps, Medicaid, SCHIP)
- Proof of participation in a HUD Youth Build program
- Proof of participation in a federal, state or local public assistance program (JTPA, etc.)
- Copy of current Federal Tax filings (2015) *(Please conceal any Social Security Numbers)*

I certify that my answers are true and complete to the best of my knowledge.

 Print Name

 Signature

 Date

Please return to the CHA Section 3 Coordinator at 400 East Boulevard Charlotte, 28203 or fax to 704-336-7892.

(Over)



Charlotte Housing Authority

Building Community, People & Partnerships

Use additional sheets if needed and you may attach a résumé.

Education:

Circle Highest Level Completed: 12th Grade GED College 1 2 3 4 Graduate 1 2 3 4

College Courses (Specify): _____ College Degree (Specify): _____

Certificates (Specify): _____

Technical Training (Specify): _____

Do you currently hold any licenses which are necessary for your present job or a past job? If so, what license?



Work Experience

Last or current job: _____ Employment dates from: _____ to _____

Business: _____

Job title: _____

Specific duties: _____



Next most recent job: _____ Employment dates from: _____ to _____

Business: _____

Job title: _____

Specific duties: _____



Next most recent job: _____ Employment dates from: _____ to _____

Business: _____

Job title: _____

Specific duties: _____



Next most recent job: _____ Employment dates from: _____ to _____

Business: _____

Job title: _____

Specific duties: _____



Internal Use Only:

Verified by: _____

Referred to: _____

Results: _____