NOTICE OF ADDENDUM

Date: June 8, 2022

RE: Substance Abuse Residential Facility ADDENDUM #4 - INFORMATIONAL

This notice is for the following additions to the Request for Bid Federal Requirements Package:

1. The funder, Arizona Department of Housing, is requiring that all "Section 3" forms be included with the bid package. The following forms should be included in the Federal Requirements Package after page 27:

   S3C-1A Worker Self Certification
   S3C-1B Worker Employer Certification
   S3C-1C Targeted Worker Self Certification
   S3C-1D Targeted Worker Employee Cert.
   S3P-1 Section 3 Notice
   S3P-2 Sample Employment Survey
   S3R-1C Section 3 Contractor Report

No change to bid submittal date.
Sealed bids, including all addendums will be received by the City Clerk for the City of Page, Page City Hall, 697 Vista Avenue, Page, Arizona, until 4:30 PM, June 9, 2022.

Kyle Christiansen
Director of Public Works, City of Page
A Section 3 Worker seeking preference in training and employment shall certify or submit evidence to the recipient, contractor, or subcontractor that the person is a Section 3 Worker, as defined in Section 24 CRF 75.

Name of Worker __________________________________________________________

| √ | I have reviewed the HUD income chart for my family size. My income for the previous year is below 80% of the median income for my family size. |

I hereby certify that the information provided by me to be true and correct and understand any falsification of any of the information could subject me to disqualification from participation and punishment under the law.

_______________________________  __________________________
Signature                      Date
Section 3 Worker Employer Certification Form (S3C-1B)

An employer of a Section 3 Worker seeking preference in training and employment shall certify and maintain evidence the worker is a Section 3 Worker as defined in Section 24 CRF 75.

Name of Employee ____________________________________________

<table>
<thead>
<tr>
<th>√</th>
<th>I have reviewed the HUD income chart for the current year. The employee named above has an income that is currently below 80 percent of the median income for their family size based on my calculation of what the employee’s wage rate would translate to if annualized on a full-time basis.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The employee was hired within the past five (5) years. I have reviewed the HUD income chart for the year the employee named above was hired. At the time of hire, the employee named above had an income that was below 80 percent of the median income for their family size.</td>
</tr>
</tbody>
</table>

I hereby certify that the information provided by me to be true and correct and understand any falsification of any of the information could subject me to disqualification from participation and punishment under the law.

Employer Name ____________________________________________
Employer Representative Name _________________________________
Signature of Employer Representative ___________________________
Date _________________________________________________________
Targeted Section 3 Worker Self-Certification Form (S3C-1C)

A Section 3 Worker seeking the preference in training and employment shall certify or submit evidence to the recipient, contractor, or subcontractor that the person is a Section 3 Worker, as defined in Section 24 CRF 75.

Name of Worker

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I am a YouthBuild participant.</td>
</tr>
<tr>
<td></td>
<td>I was hired within the past five years and at the time of my hire was a YouthBuild participant.</td>
</tr>
</tbody>
</table>

I hereby certify that the information provided by me to be true and correct and understand any falsification of any of the information could subject me to disqualification from participation and punishment under the law.

Signature ___________________________ Date ___________________________
Targeted Section 3 Worker Employer Certification Form (S3C-1D)

An employer of a Section 3 Worker seeking the preference in training and employment shall certify and maintain evidence the worker is a Section 3 Worker as defined in Section 24 CRF 75.

Name of Employee __________________________________________________________

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td>The employee named above resides within the project area as defined in the bid documents.</td>
</tr>
<tr>
<td></td>
<td>The employee named above was hired within the past five years. At the time of hire, the employee resided within the project area as defined in the bid documents.</td>
</tr>
<tr>
<td></td>
<td>I have certified this business as a Section 3 business and the employee is part of the business’s permanent workforce.</td>
</tr>
</tbody>
</table>

I hereby certify that the information provided by me to be true and correct and understand any falsification of any of the information could subject me to disqualification from participation and punishment under the law.

Employer Name __________________________________________________________

Employer Representative Name _____________________________________________

Signature of Employer Representative _______________________________________

Date ________________________________________________________________
To comply with the requirements of Section 3 of the Housing and Urban Development Act of 1968 as amended by the Housing and Community Development Act of 1992, and implementing regulations, [name of recipient, contractor or sub-contractor] hereby notifies all labor organizations or representatives of workers with whom it has a collective bargaining agreement or other understanding and all employees or applicants for training and employment that it will give preference in filling new positions and in all training opportunities to persons who meet the requirements stated below. All persons must meet the minimum qualifications of the position to be considered for employment/training.

1. Resides within the project area [describe]; or
2. Has an income for the previous or annualized calendar year that is below the HUD very-low or low-income limit; or
3. Is employed by a Section 3 business; OR
4. Is a YouthBuild participant.

*It is the responsibility of the applicant to document his/her status in any of the categories described above.*

[Contractor/sub-contractor] will be accepting applications for the following positions on [date] at [location]:

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**JOBS! JOBS! JOBS!**

Section 3 Notice – Employment and Training Positions Available (Form S3P-1)

Name: [recipient or contractor/sub-contractor]

Project: [describe project]

Project Area: [one-mile radius or larger if fewer than 5,000 people within one mile radius]
Positions that will be available:

<table>
<thead>
<tr>
<th>Title</th>
<th>Number</th>
<th>Minimum Qualifications</th>
</tr>
</thead>
</table>

Training and apprenticeship positions that will be available:

<table>
<thead>
<tr>
<th>Title</th>
<th>Number</th>
<th>Minimum Qualifications</th>
</tr>
</thead>
</table>

For further information, including requests relating to accessibility needs, please contact:

[Name]
[Address]
[Phone Number, TTY, E-mail]

[Recipient should consult with the ADOH to determine if this notice should be posted in languages other than English.]
NOTE: Consult the ADOH to determine if this form should be translated into another language.

The [recipient] anticipates receiving federal housing and community development funds from the State of Arizona Department of Housing to undertake activities to improve the community. As a result of this funding, the [recipient] will be hiring additional staff and/or contractors in the near future to do various types of construction and related work. The [recipient] and/or contractors will be employing people with various types and ranges of skills. If you are interested in this type of employment, please complete the form on the reverse side and return it to the address indicated below. This form also asks whether you would be interested in training in any of these occupations and any special work-related needs you may have. You may be notified at a later date as to any further action you must take to be considered for employment, training or work-related services.

If you have further questions or special accessibility needs, please contact [name] at [phone number or TTY].

Return this form to:  [recipient name and address]
Name
Address
City, State, Zip Code
Phone Number
E-mail Address

Please indicate any services you would need to enable you to accept employment or participate in job training:

- Child care
- Transportation
- Clothing
- English as a second language
- Other:

Please indicate office skills that you have:

- Typing. Words per minute:
- Filing
- Software programs (list):
- Other:
- Other:

Please indicate construction skills that you may have or would like training for in the table on the following page.
<table>
<thead>
<tr>
<th>Job Category</th>
<th>I would like training in this area ✓</th>
<th>Length of Experience</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 – 3 Months ✓</td>
<td>4 – 6 months ✓</td>
<td>7 months – 1 year ✓</td>
</tr>
<tr>
<td>Plumbing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carpentry</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Roofing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Painting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interior</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exterior</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Sewer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Landscaping</td>
<td></td>
<td></td>
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<tr>
<td>Sprinklers</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Plants</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lawns</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tree Pruning</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Tree Cutting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stump Removal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drywall</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tile Flooring</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carpet Laying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insulation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brick Layer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Electrician</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Residential</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commercial</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Laborer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cement Mason</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Form S3R-1C includes four tabs and instructions for reporting by contractors to recipients/subrecipients and by subcontractors to contractors.

Tab 1 – Complete this Tab First: collects contractor/subcontractor information, the ADOH Contract Number and Activity Name and/or Number, and the beginning and ending dates of the payroll period. This information is carried forward to Tabs 2, 3, and 4. Tab 1 also requires contractors/subcontractors answer three (3) yes or no questions and provides further instructions on completing Tabs 2, 3, and/or 4.

Tab 2 – Labor Hours: must be completed with each payroll when any labor hours are worked by the contractor and/or subcontractor(s). This form collects information regarding each employee working on the project, whether they are a Section 3 or Targeted Section 3 worker, and the total project labor hours worked during the reporting period. Section 3 totals and percentages are automatically calculated.

Tab 3 – Subcontracts: must be completed when one or more subcontracts are awarded by any contractor during the reporting period. This form collects the Subcontractor Name, Federal ID Number, Address, type of contract (trade, service, professional service, or supply), whether the contracted entity is a Section 3 Business, the date of the contract, and the dollar amount of the contract.

Tab 4 – Qualitative Activities: must be completed when one or more employees were hired for the project workforce by a contractor/subcontractor, and/or if one or more subcontracts were awarded during the reporting period. This form allows contractors/subcontractors to select yes or no from a dropdown menu for specified qualitative activities. Contractors/subcontractors may also describe qualitative activities not specified.
Enter information only in green-shaded cells.

**Recipient**
- ADOH Contract Number
- Activity Name and/or Number

**Contractor or Subcontractor report**
- Contractor Name
- Section 3 Contractor
- Payroll Period Begin Date
- Payroll Period End Date

**Select contractor or subcontractor from dropdown menu.**
- Enter the Name of the Contractor or Subcontractor
- Indicate if the named contractor/subcontractor is a Section 3 business by selecting yes or no from the dropdown menu.
- Enter the beginning date of the payroll period being reported.
- Enter the ending date of the payroll period being reported.

**Alternate Labor Hours Report Format in Use (Yes/No)**

- If yes, do **not** complete Tab 2 Labor Hours. If no, complete Tab 2 Labor Hours.

**One or more subcontracts were awarded during the payroll period (Yes/No)**

- If yes, complete Tab 3 Subcontracts and Tab 4 Qualitative Activities (lines 18 through 23 as applicable).

**One or more employees were hired for the project workforce during the payroll period (Yes/No)**

- If yes, complete Tab 4 Qualitative Activities (lines 12 through 15 as applicable).
Enter information only in green-shaded cells.

<table>
<thead>
<tr>
<th>Contractor Name</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reporting Period Begin Date</td>
<td>0</td>
</tr>
<tr>
<td>Reporting Period End Date</td>
<td>0</td>
</tr>
</tbody>
</table>

### Section 3 Workers and Targeted Section 3 workers

- Conducted outreach to generate Section 3 worker applicants.
- Held one or more job fairs.
- Other (describe)
- Other (describe)

### Section 3 Businesses

- Conducted outreach to identify and secure bids from qualified Section 3 businesses.
- Provided technical assistance to Section 3 business to help them understand and bid on contracts.
- Divided contracts into smaller jobs to facilitate participation by Section 3 businesses.
- Provided bonding assistance, guarantees, or other efforts to support viable bids.
- Other (describe)
- Other (describe)
Enter information only in green-shaded cells.

<table>
<thead>
<tr>
<th>Contractor Name</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reporting Period Begin Date</td>
<td>0</td>
</tr>
<tr>
<td>Reporting Period End Date</td>
<td>0</td>
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</table>

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**Section 3 Businesses**

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- Provided bonding assistance, guarantees, or other efforts to support viable bids.
- Other (describe)
- Other (describe)
Enter information only in green-shaded cells.

Contractor Name

Reporting Period Begin Date

Reporting Period End Date

Section 3 Workers and Targeted Section 3 workers
Conducted outreach to generate Section 3 worker applicants.
Held one or more job fairs.
Other (describe)
Other (describe)

Activity Conducted (Select Yes or No from the dropdown menu)

Section 3 Businesses
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Provided technical assistance to Section 3 business to help them understand and bid on contracts.
Divided contracts into smaller jobs to facilitate participation by Section 3 businesses.
Provided bonding assistance, guarantees, or other efforts to support viable bids.
Other (describe)
Other (describe)

Activity Conducted (Select Yes or No from the dropdown menu)