## **REQUEST FOR CONTRACTOR ELIGIBILITY**

**Email completed form to: Requested by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Jamie Giusti, Iowa Finance Authority **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

[**jamie.giusti@iowafinance.com**](mailto:jamie.giusti@iowafinance.com) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Phone: 515.452.0441 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project Name:**  **IFA Contract Number:**

**Project Address:**  **IFA Project Manager:**  Rita Eble

**General Contractor/Subcontractor Name & Address:** **Type:** 🞎 General 🞎 Sub

**MBE:** 🞎 Yes 🞎 No

**WBE:** 🞎 Yes 🞎 No

- If an MBE/WBE, provide Tax ID #:

**Owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** - If MBE/WBE is a Subcontractor, include General Contractor’s

**Iowa Contractor Registration #:**  Tax ID #:

**Contract $ Value: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Section 3 (see below):** 🞎 Yes 🞎 No

**Type of Trade (see below): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Racial Ethnic Code (see below):**

**IFA USE ONLY**

**This verification of eligibility consists only of a check against the current System for Awards Management (SAM) excluded parties’ contractors.**

**Verified: Yes No Signature**  **Date**

**Type of Trade:**

1 – New Construction 3 – Repair 5 – Project Management 7 – Tenant Services 9 – Arch/Eng. Appraisal

2 – Substantial Rehab. 4 – Service 6 – Professional 8 – Education/Training 0 – Other

**Section 3:**

Recipients and their contractors/subcontractors are required to give hiring and training preference to Section 3 residents, to the greatest extent feasible, when new employment opportunities result from a HOME funded project. When a recipient or contractor/subcontractor has identified that new employment or training opportunity will result from the normal completion of the HOME construction and/or rehabilitation projects, the HOME grant administrator should work with that entity to assist with advertising the opportunity to Section 3 residents. Notices of employment/training opportunities must be sent to the Iowa Chapter of the National Association of Housing and Redevelopment Officials (NAHRO). Notices should be sent to the NAHRO Chapter President. Contact information can be found here: http://www.ianahro.org/contactus.cfm NAHRO will share the notice with public housing authorities, in an effort to help reach Section 3 businesses. A sample notice for employment/training opportunities is provided in the Rental Management Guide. Additional suggestions on strategies for reaching Section 3 residents is provided later in this section of the HOME Management Guide. Remember, recipients are required to document affirmative steps Refer to the HOME Program Procedural Manual for additional information.

**Racial/Ethnic Codes:**

1 = White Americans 2 = Black Americans 3 = Native Americans 4 = Hispanic Americans 5 = Asian/Pacific Americans 6 = Hasidic Jews