



REQUEST FOR CONTRACTOR ELIGIBILITY

Email completed form to: Carol Wells, Iowa Finance Authority (IFA) carol.wells@iowafinance.com Phone: 515.452-0419	Requested by: _____ Address: _____ _____ _____ Phone: _____ Fax: _____ Email: _____
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Project Name: _____ **IFA Contract Number:** _____
Project Address: _____ **IFA Project Manager:** _____

General Contractor/Subcontractor Name & Address: _____ _____ _____	Type: <input type="checkbox"/> General <input type="checkbox"/> Sub MBE: <input type="checkbox"/> Yes <input type="checkbox"/> No WBE: <input type="checkbox"/> Yes <input type="checkbox"/> No - If an MBE/WBE, provide Tax ID #: _____ - If MBE/WBE is a Subcontractor, include Prime Contractor's Tax ID #: _____
Owner: _____	
Iowa Contractor Registration #: _____	Section 3 (see below): <input type="checkbox"/> Yes <input type="checkbox"/> No
Contract \$ Value: _____	Racial Ethnic Code (see below): _____
Type of Trade (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:

Section 3 requirements are triggered when a project receives \$200,000.00 or more in HOME funding. A signed Intent to Comply form must accompany this contractor clearance form if Section 3 applies.

A Section 3 contractor/subcontractor is a business concern that is 51% or more owned by Section 3 residents OR whose permanent full-time employees include persons, at least 30 percent of whom are currently section 3 residents, or within three years of the date of first employment with the business were section 3 residents; OR that provides evidence of a commitment to subcontract in excess of 25 percent of the dollar award of all subcontracts to be awarded to businesses that meet at least one of the two previous criteria. 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