

## **EXHIBIT D**

## City of Virginia Beach Department of Housing and Neighborhood Preservation

## SECTION 3 NEW HIRES SECTION 3 MONTHLY COMPLIANCE FORM

This form is to be distributed to the Recipient/Developer/Contractor at the Pre-Construction Meeting. Recipient/Developer/Contractor is required to provide Exhibits A through F to all contractors and/or subcontractors when soliciting bids for contracts exceeding \$100,000.00.

PROJECT NAME:PROJECT/BID #:	
PROJECT ADDRESS:FUNDING:	
SUBMITTED BY and FOR:Company Name of Developer/Contractor/Subcontractor:	
Company Name of Developer/Contractor/Subcontractor.	
CONSTRUCTION TRADE or PROFESSIONAL SERVICE TYPE:	—
<b>NOTE:</b> Recipient/Developer/Contractor must at the end of each month (MONTH) <u>and</u> for each Payment Release Request (PAY PERIOD), sign and date the New Hires Section 3 Monthly Compliance Form and submit to the Section 3 Compliance Manager by the 5th day of the month next after the last month in the reporting period.	
PAY PERIOD / MONTH from: to:	
PAY PERIOD / MONTH from:to:to: (month) (date) (year) (month) (date) (year)	
Payment Release Request Attached for Draw #: n	
I/We have not hired any new employees during the PAY PERIOD/MONTH specified.	
I/We have hired Section 3 employees and/or Non-Section 3 employees during the PAY PERIOD/MONTH specified.	
NOTE: If a certified Section 3 individual was interviewed and Hired or Not Hired during this period, please complete the information on Exhibit F and attach with this report.	1
I/We have taken one or more of the following "Recruitment Steps" to hire a Section 3 resident with the higher training and employment priority ranking: (check all that apply)	≥st
Advertised to fill vacancy (ies) at the site(s), where work is taking place, in connection with this project. Below, I have checked the steps I have taken to find Section 3 low-income residents, from the targeted ground neighborhoods, to fill any vacancies.	ıps
Placed signs or posters in prominent places at each of the above listed developments.	
Taken photographs of above item to document that the above step was completed	
Distributed employment flyers to each of the residents at these developments Posted employment flye to each of the residents at these developments	rs

NEW HIRES SECTION 3 MONTHLY COMPLIANCE FOI	KIVI (CON'T)
Contacted City Environmental Specialist or DHNP employment referrals referrals (if applicable)	and HUD Youthbuild Program
Contacted U.S. HUD State Officer at (305) 536-4421 to identify any HUD operating in Virginia Beach; then contacted these programs for Youthbuild r	· · · · · · · · · · · · · · · · · · ·
Kept a log of all applicants and indicated the reasons why Section 3 residues	dents who applied were not hired
Retained copies of any employment applications completed by public houcher holders or other Section 3 residents	ousing Section 8 certificate or
Sent a notice about Section 3 training and employment requirements are organizations or to worker representatives with whom our firm has a collect	
Sent proof of all checked items to the DHNP Section 3 Compliance Mana email or hand delivered to DHNP.	ager identified above via mail,
Developer/Contractor/Recipient Certification:	
	nformation provided herein is
rue and accurate.	·
rue and accurate. Construction Trade or Professional Service Type:	<u> </u>
swear and confirm to the best of my knowledge and understanding that the incrue and accurate.  Construction Trade or Professional Service Type:  Company Name of Developer/Contractor/Subcontractor:	
Construction Trade or Professional Service Type:  Company Name of Developer/Contractor/Subcontractor:  Jame and Title of Signer (Print or Type):	
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onstruction Trade or Professional Service Type:  ompany Name of Developer/Contractor/Subcontractor:  lame and Title of Signer (Print or Type):  ignature:  IOTARY CERTIFICATE tate of Virginia ity of Virginia Beach, to-wit:  on the day of 20, before  (Title), for  f corporation, LLC or sole proprietorship), known to be the person named her	me personally appeared  (Name),  (Name
Construction Trade or Professional Service Type:	Date:  me personally appeared  (Name),  (Name) ein and who executed the uted the same.