

CAPITAL CONSTRUCTION DEPARTMENT 700 ANDOVER PARK WEST - SUITE C * SEATTLE, WA 98188

ADDENDUM:		1	TODAY'S DA	TE: 5/19/23
PROJECT NAME:	Burien Park I	Roof Replaceme	nt	
CONTACT / TITLE:	Carl Frankel	PROJ	ECT MANAGER	
PHONE / EMAIL:	206.574.1249	carlf@	kcha.org	
illis Audellaulli is t	✓ BID	□ RFQ	∏ RFP	h Action as Follows:
☑ CLARIFY	□ CHANGE	☑ DELETE	✓ ADD	□ SUBSTITUTE
12 Page(s) 7				

- 1. ADD: Contractor to remove existing shingles and underlayment at over framed roof sections.
- 2. CLARIFY: Contractor to install and attach new downspouts to existing downspout underground connections. Contractor responsible to install PVC pipe for the bottom 8' of each downspout. Provide and install all PVC connections with proper sized adapters for a complete downspout system.
- 3. CLARIFY: <u>All flashing</u> and necessary coping to be replaced with new except for most step flashing. Existing wall to roof flashings at top of roofs to remain and counter flashing to be provided and installed.
- 4. ADD: Provide and install (up to 60 LF) of 4"x4"x8" step flashing that was incorrectly installed or missing. Replace with new.
- 5. CLARIFY: Contractor is responsible for safely bringing demolished roofing materials down off the roof. A lift or shoot may be utilized. Protection of all tenants, staff, workers, decks, building components, landscaping and all other tenant and KCHA assets is required. Any and all damage to be the contractor's responsibility.
- 6. CLARIFY: Fascia type to be 1"x10" Hardi trim boards. Contractor to fully secure existing subfascia prior to installation of new fascia boards. Install tar paper or underlayment between subfascia and new fascia at all locations.
- 7. ADD: Contractor to Demolish, dispose of and provide and install up to 80LF of sub-fascia that may be damaged. Match new to existing size and style.

- 8. ADD: Contractor to provide and install up to 40 sheets of ½" CDX roof sheathing (This includes demo, disposal and new sheathing installation.)
- 9. ADD: Section 3 reporting is required for this project. Please see attached Section 3 documents which include;

Section 3 Business Certification Form

Section 3 Individual Certification Form

Section 3 Labor Hours Benchmark Report Form

10. DELETE: Contract Document C.11 Final Affidavit.

.

END OF ADDENDUM #1



SECTION 3 – BUSINESS CERTIFICATION RETURN FORM SINGLE SIDED

THIS FORM MUST BE SIGNED AND RETURNED

	Project Name:		
C	Company Name:		
			Contact Title:
	Contact Phone:		Contact Email:
T	ype of Trade or B	usiness:	
Cı	urrent Number of	Regula	r, Full Time Employees (Puget Sound Region):
1.	Have over 75 pe been performed		The labor hours performed for your business over the prior three-month period on 3 workers?
	Yes	No	If "yes" is checked, submit the section 3 Individual Certification form(s) for all the regular, full-time employees (Puget Sound Region).
2.			business owned and controlled by low- or very low-income persons (persons of the median income level for the past 12 months - see attached income
	Yes	No	If "yes" is checked, submit either the section 3 Individual Certification form(s) or the Section 3 Subcontractor Business Work Plan form.
3.	Does your busin will take place?	iess prov	vide economic opportunities for KCHA residents at the site(s) where the work
	Yes	No	If "yes" is checked, please provide supporting documentation.
4.			vide economic opportunities for residents of other KCHA developments or ng managed by KCHA?
	Yes	No	If "yes" is checked, please provide supporting documentation.
5.	•	_	rovide economic opportunities to Section 3 workers residing within the t Sound Region)?
	Yes	No	If "yes" is checked, please provide supporting documentation.



I certify, under penalty of perjury, that my compa	any Is Is Not a Section 3 Business.							
I further certify that, if my company is awarded the bid, and needs to hire additional employees for the project , we will carry out Section 3 hiring, training and subcontracting requirements to the best of our ability.								
Signature	Name							
Title	Date							
Phone Number	Email Address							

If you have more specific questions about Section 3 requirements, contact KCHA at section3@kcha.org.

SECTION 3 – 2023 INCOME GUIDELINES

	In	co	ome Limit 1 pe	rs(on
Location	Extremely Low Income		Very Low Income		Low Income
Kitsap County (Bremerton, Silverdale)	\$22,900		\$38,150		\$61,000
King/ Snohomish Counties (Seattle, Bellevue, Everett)	\$28,800		\$47,950		\$70,650
Pierce County (Tacoma)	\$22,600		\$37,650		\$60,200
Skagit County (Sedro-Woolley)	\$19,150		\$31,900		\$51,050
Thurston County (Olympia, Tumwater)	\$21,550		\$35,900		\$57,400



SECTION 3 – SUBCONTRACTOR WORK PLAN RETURN FORM SINGLE SIDED

RETURN THIS FORM WITH THE BID *IF*:

	CLAIMING <u>YES</u> TO QUES				
	Company Name:				
			Contact Title:		
			Contact Email:		
	Contact I none.		Contact Email:		
	SECTION 3 BUSINES	SS CONCERN	SUBCONTRACTED TASK(S)	SUBCONTRACT AMOUNT	% OF OVERALL CONTRACT
	Subcontractor's Name:				
1.	Subcontractor's Address:				
	Subcontractor's Phone No.:				
2.	Subcontractor's Name:				
	Subcontractor's Address:				
	Subcontractor's Phone No.:				
	Subcontractor's Name:				
3.	Subcontractor's Address:				
	Subcontractor's Phone No.:				
	Subcontractor's Name:				
4.	Subcontractor's Address:				
	Subcontractor's Phone No.:		-		
то	TAL CONTRACT VALUE	:	TOTAL SUBCONTRAC	Γ VALUE:	
-		CENTAGE OF TOTAL			
	or a list of Section 3 Certified ttps://portalapps.hud.gov/Sec				



SECTION 3 – INDIVIDUAL CERTIFICATION FORM

Section 3 of the Housing and Urban Development (HUD) Act of 1968, as amended, requires that Housing Authorities and agencies receiving HUD funding, to the greatest extent feasible, provide economic opportunities to low-income persons. **Information provided on this form shall remain confidential and be used for reporting purposes only.** *Print all information*

NAME:						
ADDRESS:						
EMAIL ADDRES	S:		PH0	ONE NUMBER:		
HIRE DATE:			PO	SITION TITLE:		
EMPLOYER / CO	MPANY NA	ME:				
PROJECT NAME	:					
1. I am a reside	nt in a KCHA	Property.			Yes	No
Property Name:						
2. I am currentl	y in KCHA's	Section 8 Pro	gram.) // -	Yes	No
3. I am currentl	y a participan	t in a HUD Y	outhBuild Pr	ogram.	Yes	No
4. County and I			opriated box	es):		
	TSAP COUN L income for		onths was: (a	check appropriate	box)	
Below	or Equal to	\$61,000	_	Greater than	\$61,000	
My TOTA		the past 12 m		check appropriate	box)	
Below	or Equal to	\$70,650	_	Greater than	\$70,650	
	ERCE COUNT Income for		onths was: (a	check appropriate	box)	
Below	or Equal to	\$60,200	_	Greater than	\$60,200	
d. I live in SK My TOTA			onths was: (a	check appropriate	box)	
Below	or Equal to	\$51,050	_	Greater than	\$51,050	
	HURSTON C L income for			heck appropriate	box)	
Relov	or Equal to	\$57,400		Greater than	\$57 400	





f	. I live in	COUNTY a	and		
	My TOTA	L income for the past 12 months was:	\$		
5.	Section 8 ass	we years, I have been a resident of p isted housing managed by KCHA; a ng projects or Section 8 assisted articipant.	resident of other	Yes	No
I hereb	by certify under	the penalty of perjury that the infor	mation above is true ar	nd correct.	
Signatu	ıre		Date		

If submitting for a new hire, attach completed forms to Labor Hours Benchmark Status Report and submit to project manager. If submitting for Section 3 business qualification, attach to Section 3 Business Certification Form. For questions, please contact KCHA by email at section3@kcha.org.



SECTION 3 – INDIVIDUAL CERTIFICATION FORM FAQ's

Question: What is this form?

Answer: This form is a Section 3 Certification Form that will be used to determine if an individual

is a Section 3 worker as defined by HUD 24 CFR 75 and the KCHA.

Question: Who fills out this form?

Answer: Any individual who is paid in full or part with HUD funds. (If unsure if position is HUD

funded, please contact Contract administrator.)

Question: What will this form be used for?

Answer: This form will be used for the purpose of determining Section 3 eligibility and for statistical

purposes.

Question: Who collects this form and where does it go?

Answer: Any employer or contractor that has a contract with the KCHA that is HUD funded will

collect this data from any employee who was employed within the last five years. Once the

data is collected the original copy will come to KCHA.

Question: Who is a KCHA Resident?

Answer: Someone who lives in a KCHA Housing Development whose name is listed on a current

lease.

Question: How long should I go back to calculate my income?

Answer: Individuals should calculate back 12 months from their date of hire.

Question: What if I don't live in King County?

Answer: Individuals who do not reside in King County may still be eligible to be certified by KCHA

as a Section 3 resident.

If you have more specific questions, please contact KCHA at section3@kcha.org.



SECTION 3 – LABOR HOURS BENCHMARK REPORT - INSTRUCTIONS

Complete the Labor Hours Benchmark Status Report as indicated below and return the completed form <u>along</u> with the pay application(s) for the same period.

Return the Labor Hours Benchmark Status Report and pay application to:

	a, WA 98188
Attn: _	
Email:	

REPORT LINES:

- 1) Name of the project as it appears on the Contract
- 2) Company Name

King County Housing Authority

700 Andover Park West

- 3) Name of the person filling out the Labor Hours Benchmark Status Report
- 4) Phone number of the person filling out the Labor Hours Benchmark Status Report
- 5) Email address of the person filling out the Labor Hours Benchmark Status Report
- 6) Contract number as it appears on the Contract
- 7) Contract Award date (date of Letter of Award)
- 8) Reporting Period should be the same as the pay application period
- 9) Total hours worked by all workers on the project this will be everyone that is listed on the certified payrolls during Reporting Period.
- 10) Total hours worked on the project by Section 3 workers during the Reporting Period.

A Section 3 worker is identified as:

- a. The worker's income for the previous or annualized calendar year is below the income limit established by HUD; or
- b. Is employed by a Section 3 business concern; or
- c. Is a YouthBuild participant.

These will be the workers identified as Section 3 employees upon the submittal of their Section 3 Individual Certification Form at the beginning of the project OR when they were brought onto the project. A copy of these forms should be available from your company's payroll office. Copies can also be obtained by submitting a request to section3@kcha.org. Please include your company's name, project name and contact information.

11) Total hours worked on the project by Targeted Section 3 workers during the Reporting Period.

A Targeted Section 3 worker is identified as:

- a. Employed by a Section 3 business concern; or
- b. Is a resident of public housing or Section 8 assisted housing; or
- c. Resides within one mile of the project site.

These workers will be identified as Targeted Section 3 employees upon the submittal of their Section 3 Individual Certification Form at the beginning of the project OR when they were brought onto the project. A copy of these forms should be available from your company's payroll office. Copies can also be obtained by submitting a request to section3@kcha.org. Please include your company's name, project name and contact information.

See sample scenarios on pgs. 3 & 4



SECTION 3 – LABOR HOURS BENCHMARK REPORT

		GENERAL INFORMATI	ION			
1)	PROJECT NAME:		-			
2)	COMPANY NAME:					
3)	CONTACT PERSON:					
4)	CONTACT PHONE NO.:					
5)	CONTACT EMAIL ADDRESS:					
6)	CONTRACT NO.:	7) CONTRACT	Γ AWARD DATE:			
	SECTION	3 LABOR HOUR BENCH	MARKS			
8)	REPORTING PERIOD: FROM:		TO:			
T 1 9)	The totals below are for YOUR COMPANY ONLY and JUST THOSE WORKERS WORKING ON THE PROJECT SITE. TOTAL LABOR HOURS FOR ALL WORKERS ON THE PROJECT DURING THE REPORTING PERIOD (onsite work crew):					
10)	TOTAL LABOR HOURS FOR AI DURING THE REPORTING PERI					
11)	TOTAL LABOR HOURS FOR ALL <u>TARGETED</u> SECTION 3 WORKERS ON THE PROJECT DURING THE REPORTING PERIOD (onsite work crew who self-certified as Targeted Section 3 Workers):					
I ce	rtify that the information in this report	is true and correct to the best	of my knowledge:			
SIGN	NATURE		TITLE			
PRIN	IT NAME		DATE			
Т.	be completed by KCHA Staff					
10	RECEIVED BY	<i>!</i> :				
grav	VACTATION .		THE P			
SIGI	NATURE		TITLE			
PRIN	NT NAME		DATE			



SCENARIO 1:

A crew of 5 <u>none</u> of whom self-certified as a Section 3 worker.

Reporting period is from June 1 to June 30, 2022.

The total hours that the crew worked on the project site during the reporting period totaled 1,000.

SECTION 3 LABOR HOUR BENCHMARKS

	REPORTING PERIOD: FROM: 6-1-22 TO: 6-30-22						
T 1:9)	to totals below are for YOUR COMPANY ONLY and JUST THOSE WORKERS WORKING ON THE PROJECT DURING THE REPORTING PERIOD (onsite work crew):	ECT SITE. 1000					
10)	TOTAL LABOR HOURS FOR ALL SECTION 3 WORKERS ON THE PROJECT DURING THE REPORTING PERIOD (onsite work crew who self-certified as Section 3 Workers):	0					
11)	TOTAL LABOR HOURS FOR ALL <u>TARGETED</u> <u>SECTION 3</u> WORKERS ON THE PROJECT DURING THE REPORTING PERIOD (onsite work crew who self-certified as Targeted Section 3 Workers):	0					
A cre	CENARIO 2: crew of 5, two of whom self-certified as Section 3 workers. eporting period is from June 1 to June 30, 2022. he total hours that the <u>crew</u> worked on the project site during the reporting period totaled 1,000. he total hours of the two that self-certified as Section 3 workers during the reporting period totaled 80. SECTION 3 LABOR HOUR RENCHMARKS						
Γhe t	otal hours that the <u>crew</u> worked on the project site during the reporting period totaled 1,000.	30.					
Γhe t	otal hours that the <u>crew</u> worked on the project site during the reporting period totaled 1,000. otal hours of the <u>two that self-certified as Section 3 workers</u> during the reporting period totaled 8	30.					
The t	otal hours that the <u>crew</u> worked on the project site during the reporting period totaled 1,000. otal hours of the <u>two that self-certified as Section 3 workers</u> during the reporting period totaled 8 SECTION 3 LABOR HOUR BENCHMARKS						
The table to the table to the table to the table	otal hours that the <u>crew</u> worked on the project site during the reporting period totaled 1,000. otal hours of the <u>two that self-certified as Section 3 workers</u> during the reporting period totaled 8 SECTION 3 LABOR HOUR BENCHMARKS REPORTING PERIOD: FROM: 6-1-22 TO: 6-30-22 Totals below are for YOUR COMPANY ONLY and JUST THOSE WORKERS WORKING ON THE PROJECT DURING THE	ECT SITE.					
The to th	otal hours that the <u>crew</u> worked on the project site during the reporting period totaled 1,000. otal hours of the <u>two that self-certified as Section 3 workers</u> during the reporting period totaled 8 SECTION 3 LABOR HOUR BENCHMARKS REPORTING PERIOD: FROM: 6-1-22 TO: 6-30-22 Let totals below are for YOUR COMPANY ONLY and JUST THOSE WORKERS WORKING ON THE PROJECT TOTAL LABOR HOURS FOR ALL WORKERS ON THE PROJECT DURING THE REPORTING PERIOD (onsite work crew): TOTAL LABOR HOURS FOR ALL SECTION 3 WORKERS ON THE PROJECT	ECT SIT					



SCENARIO 3:

A crew of 5, <u>one</u> of whom self-certified as a Section 3 worker and the other as a Targeted Section 3 worker. Reporting period is from June 1 to June 30.

The total hours that the <u>crew</u> worked on the project site during the reporting period totaled 1,000.

The total hours of the one that self-certified as a Section 3 worker during the reporting period totaled 40.

The total hours of the one that self-certified as a Targeted Section 3 worker during the reporting period totaled 40.

	SECT	ION	3 LABOR HO	OUR BENCHMARKS	
8)	REPORTING PERIOD: FRO	OM:	6-1-22	TO: <u>6-30-22</u>	
				THOSE WORKERS WORKING ON THE PROJECT DURING THE	IECT SITE.
9)	REPORTING PERIOD (onsite we	ork ci	·ew):		1000
10)				3 WORKERS ON THE PROJECT crew who self-certified as Section 3 Workers):	40
11)				<u>D</u> SECTION 3 WORKERS ON THE (onsite work crew who self-certified as Targeted	40
	Section 5 Workers).				40
		the	project during	the reporting period totaled ZERO. DUR BENCHMARKS	
8)	REPORTING PERIOD: FRO	OM:	6-1-22	TO: <u>6-30-22</u>	
				THOSE WORKERS WORKING ON THE PRO ON THE PROJECT DURING THE	JECT SITE.
9)	REPORTING PERIOD (onsite we			on me moveer behave me	0
10)				3 WORKERS ON THE PROJECT crew who self-certified as Section 3 Workers):	0
11)				<u>D</u> SECTION 3 WORKERS ON THE (onsite work crew who self-certified as Targeted	0

YES, A LABOR HOUR BENCH MARK FORM HAS TO BE SUBMITTED EVEN IF NO WORK IS PERFORMED **BUT** THE GC/SUB (ALL TIERS) HAVE NOT FINISHED THE PROJECT.