



Mercer County Housing Authority
80 Jefferson Avenue, Sharon, PA 16146

Section 3 Business Employee List

COMPANY NAME _____

ADDRESS _____

TELEPHONE # _____ FAX # _____

EMAIL ADDRESS _____

- List all full-time, permanent employees of the company
- Attach a copy of each qualifying employee's state issued ID
- Proof of program participation is required for all participants of Mercer County Public Housing, Section 8, or other Federal Assistance Programs
- Each qualifying employee must complete Form 2

Employee Name	Address	Date of Hire	FT or PT	Trade	Section 3 Yes or No	PH, S8, or FA Resident

FT = Full Time; PT = Part Time; S8 = Section 8 Tenant; PH = Public Housing Tenant; FA = **Federal Assistance Program Participant**

TOTAL NUMBER OF COMPANY EMPLOYEES: _____

SIGNATURE: _____

TITLE: _____

DATE: _____