

**DEPARTMENT OF ECONOMIC & COMMUNITY DEVELOPMENT  
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM  
SECTION 3 UTILIZATION REPORT**

(To be Completed by contractors and subs for all Projects at or Exceeding \$200,000)

**A. SECTION 3 EMPLOYEE LABOR INFORMATION**

Name of CDBG Grantee: \_\_\_\_\_

Name of Project: \_\_\_\_\_

CDBG Project Number: \_\_\_\_\_ Wage Decision Number: \_\_\_\_\_

Total number of Labor Hours on the project \_\_\_\_\_

Total number of Section 3 Labor Hours on the project \_\_\_\_\_ = \_\_\_\_\_ % of total labor hours.

Number of Section 3 Employees Utilized on Project by Prime Contractor: \_\_\_\_\_

Number of Section 3 Employees Utilized on Project by Subcontractors: \_\_\_\_\_

Total Number of Section 3 Employees Utilized on Project: \_\_\_\_\_

**B. CERTIFICATION OF PRIME CONTRACTOR**

As officer and representative of: \_\_\_\_\_

Name of Prime Contractor

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

On behalf of the Company, I hereby certify that the above information is true and accurate and is reported fully as required by the Section 3 Affirmative Action Plan as part of the contract for this CDBG assisted construction project. It is further understood that final payment from the State of Maine CDBG Program for this project cannot be made until this Report is submitted to the CDBG Grantee or authorized designee.

\_\_\_\_\_  
Name and Title of Authorized Representative (print or type)

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date