state government, attach to Section B a copy of the document that authorizes you to provide housing counseling.

5. COMMUNITY BASE

- a. Attach to Section B a description of your organization's experience and record of achievement during the past three years in providing housing counseling or other similar services to the communities in which you plan to provide housing counseling services.
- b. <u>Branches or Affiliates</u>. Provide a list of your organization's main office and branch offices or affiliates. Include the following information for your main office and each branch or affiliate.
 - (1) Official name
 - (2) Address, including ZIP Code
 - (3) Mailing address if different from address on line 2 above
 - (4) Telephone Number(s): include toll-free number, if available
 - (5) Name, title, and telephone number of the person in charge of the housing counseling program
- c. If you plan to provide housing counseling to non-English-speaking persons, attach to Section B evidence that you have staff who fluently speak your clients' native language.
- 6. Audit Report. Attach to Section B a copy of your audit report for an audit conducted within the 12-month period prior to the date of your application. See paragraph 2-1 of this handbook. HUD assumes and the applicant assures that its branches or affiliates have had an audit conducted within the 12-month period prior to the date of this application.

Preliminary Application - Section B - Assurances and Signatures

The applicant assures HUD that it complies with the following items and will, as a HUD-approved housing counseling agency:

1. Administer its housing counseling in accordance with Title VI of the Civil Rights Act of 1964, Title VIII of the Civil Rights Act of 1968, Executive Order 11063,