## **Community Development Financial Institutions Fund**

## **CDE Certification Application**

Type B & C Only

## Criteria: ACCOUNTABILITY & SERVICE AREA

A CDE Applicant must identify the service area that it serves or intends to serve; and demonstrate that it maintains accountability to the LICs in those areas.

## SUBSIDIARY CDE Name: \_\_\_\_\_

(Complete and submit requested information for <u>each</u> Subsidiary seeking certification, except those for which the **EXPRESS OPTION** is selected. Reproduce additional copies of the form as needed.)

1. Select one and identify the service area geography the entity currently serves or intends to serves:

Local service area [e.g., county(ies); PMSA(s)]: \_\_\_\_\_

State-wide or territory-wide service area: \_\_\_\_\_

Multi-state service area: \_\_\_\_\_

National service area:
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2. Select and identify the method of accountability maintained to the residents of LICs (check all that apply):

Governing Board of the Applicant CDE

Governing Board of the Applicant CDE's Controlling Entity

Governing Board of the Subsidiary Applicant

Advisory Board(s)

- Enter the number of Advisory Boards used to maintain accountability \_\_\_\_\_
- Enter the names of the Advisory Boards used to maintain accountability
  - o #1\_\_\_\_\_ o #2\_\_\_\_\_
  - o #3 \_\_\_\_\_