



Community Resource Partnership Determination

Request to be vetted as an independent referral resource under 24 CFR 214.103(j)

Agency Name: _____ HUD Approval No.: _____

Primary Contact: _____ Date: _____

Serv Inc. has asked to be vetted and added as one independent option in your agency's community resource base under 24 CFR 214.103(j). The arrangement is zero-cost, non-financial, and non-exclusive; no referral fees or anything of value are exchanged in either direction (24 CFR 214.303(f)).

Your agency's discretion

24 CFR 214.103(j) requires your agency to maintain working relationships with community resources for client needs you cannot serve. The composition of that resource base is your agency's decision. HUD does not require you to add any specific organization, and you are free to accept, decline, or request more information, consistent with the anti-steering and conflict-of-interest rules of 24 CFR 214.303. This form simply records your determination.

Determination (check one)

- ☐ Accepted — please send the MOU and onboarding steps.
- ☐ More information needed before deciding.
- ☐ Declined.

If declined or pending (optional, helps us serve agencies better)

Reason: _____

What, if anything, would Serv Inc. need to demonstrate for reconsideration?

For our records, Serv Inc. periodically documents the availability of independent consumer-protection referral resources. Returning this form ensures your agency's position is recorded accurately. If no determination is returned within 14 days, we record it as "no determination returned."

Name & Title

Signature & Date