



NAVAJO NATION DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

ETHEL B. BRANCH
Attorney General

HEATHER CLAH
Deputy Attorney General

DEPARTMENT OF JUSTICE
INITIAL ELIGIBILITY DETERMINATION
FOR NAVAJO NATION FISCAL RECOVERY FUNDS

RFS/HK Review #: _____

Date & Time Received: _____

Date & Time of Response: _____

Entity Requesting FRF: _____

Title of Project: _____

Administrative Oversight: _____

Amount of Funding Requested: _____

Eligibility Determination:

- FRF eligible
- FRF ineligible
- Additional information requested

FRF Eligibility Category:

- (1) Public Health and Economic Impact
- (2) Premium Pay
- (3) Government Services/Lost Revenue
- (4) Water, Sewer, Broadband Infrastructure

U.S. Department of Treasury Reporting Expenditure Category: _____

Returned for the following reasons (Ineligibility Reasons/Paragraphs 5.E.(1)-(10) of FRF Procedures):

- | | |
|--|--|
| <input type="checkbox"/> Missing Form | <input type="checkbox"/> Expenditure Plan incomplete |
| <input type="checkbox"/> Supporting documentation missing | <input type="checkbox"/> Funds will not be obligated by 12/31/2024 |
| <input type="checkbox"/> Project will not be completed by 12/31/2026 | <input type="checkbox"/> Incorrect Signatory |
| <input type="checkbox"/> Ineligible purpose | <input type="checkbox"/> Inconsistent with applicable NN or federal laws |
| <input type="checkbox"/> Submitter failed to timely submit CARES reports | |
| <input type="checkbox"/> Additional information submitted is insufficient to make a proper determination | |

Other Comments: _____

Name of DOJ Reviewer: _____

Signature of DOJ Reviewer: _____

Disclaimers:

If additional information has been requested and you wish to provide it, please resubmit all the required forms updated to include the additional information. Full resubmission will expedite the Initial Eligibility Determination process. Therefore, please include a new RFS form indicating resubmission, revised Appendix A, Budget Form 1, and other supporting documents. **Please email your resubmission to arpa@nndoj.org.** Please be aware that under Resolution BFS-31-21 a Project or Program can only be reviewed twice, therefore it is critical that you include all the requested additional information for your second submission.

An NNDOJ Initial Eligibility Determination is based on the documents provided, which NNDOJ will assume are true, correct, and complete. Should the Project or Program change in any material way after the initial determination, the requestor must seek the advice of NNDOJ. An initial determination is limited to review of the Project or Program as it relates to whether the Project or Program is a legally allowable use – it does not serve as an opinion as to whether or not the Project or Program should be funded, nor does it serve as an opinion as to whether or not the amount requested is reasonable or accurate.

**THE NAVAJO NATION
FISCAL RECOVERY FUNDS REQUEST FORM & EXPENDITURE PLAN
FOR NON-GOVERNANCE CERTIFIED CHAPTERS**

Part 1. Identification of parties.

Non-Governance Certified Chapter requesting FRF: **Sanostee (TseAlnaoztii)**

Date prepared: 05/12/23

Chapter's mailing address: **P O Box 219
Sanostee, New Mexico 87461**

phone/email: **505-723-2703**
website (if any): **sanostee@navajochapters.org**

This Form prepared by: **Jourdan Washburn**
Secretary/Treasurer

phone/email: **505-723-2703**
chelseamoore@navajochapters.org
CONTACT PERSON'S name and title *CONTACT PERSON'S info*

Title and type of Project: **Waterline Extension**

Chapter President: **Jeanne Haskie**

phone & email: **505-320-5605,jghaskie@naataani.org**

Chapter Vice-President: **Gerald Henderson**

phone & email: **505-354-9026, ghenderson@naataani.org**

Chapter Secretary: **Jourdan Washburn**

phone & email: **575-496-7735,chelseamoore@navajochapters.org**

Chapter Treasurer: **Jourdan Washburn**

phone & email: **575-496-7735,chelseamoore@navajochapters.org**

Chapter Manager or CSC: **vacant**

phone & email:

DCD/Chapter ASO: **Danielle Redhouse**

phone & email: **dredhouse@nndcd.org**

List types of Subcontractors or Subrecipients that will be paid with FRF (if known): **NECA**

document attached

Amount of FRF requested: **\$500,000.00** FRF funding period: **01/01/2023 - 9/30/2024**
indicate Project starting and ending/deadline date

Part 2. Expenditure Plan details.

(a) Describe the Program(s) and/or Project(s) to be funded, including how the funds will be used, for what purposes, the location(s) to be served, and what COVID-related needs will be addressed:

The waterline is critical connection to be planned, designed and constructed to connect to existing homes structure. The utility connections and available in these households will combat the susceptibility to the COVID virus and other viruses and to control the spread of these viruses.

document attached

(b) Explain how the Program or Project will benefit the Navajo Nation, Navajo communities, or the Navajo People:

The new waterline connected for these homes will benefit the elders, handicapped, disable and low income families who live without the amenities of water for safety and sanitary purposes.

document attached

(c) Provide a prospective timeline showing the estimated date of completion of the Project and/or each phase of the Project. Disclose any challenges that may prevent you from incurring costs for all funding by December 31, 2024 and/or fully expending funds and completing the

APPENDIX A

Program(s) or Project(s) by December 31, 2026:

Funding period starting in May 2023; approval process through Navajo Nation departments and entities from June through August 2023; contracting with NECA for construction in September 2023 through November 2023; procurement and construction to be completed by April 2025.

document attached

(d) Identify who will be responsible for implementing the Program or Project:

Tse Alnaoztii (Sanostee) Chapter will work in collaboration with CPMD and NECA to complete this project.

document attached

(e) Explain who will be responsible for operations and maintenance costs for the Project once completed, and how such costs will be funded prospectively:

The homeowners will be responsible for the maintenance and cost as required by NTUA for water expenses. After completion of the project, NTUA will be responsible for the main waterline to the water meter.

document attached

(f) State which of the 66 Fiscal Recovery Fund expenditure categories in the attached U.S. Department of the Treasury Appendix 1 listing the proposed Program or Project falls under, and explain the reason why:

Public Health 1.7 Capital investments or physical plant changes to public facilities that respond to the COVID-19 public health emergency.
Infrastructure 5.13 Drinking water source - to provide public in-home water system for survival essential

document attached

Part 3. Additional documents.

List here all additional supporting documents attached to this FRF Expenditure Plan (or indicate N/A):

Tse Alnaoztii (Sanostee) Chapter Resolution TAT-23-05-56.

Chapter Resolution attached

Part 4. Affirmation by Funding Recipient.

Funding Recipient affirms that its receipt of Fiscal Recovery Funds and the implementation of this FRF Expenditure Plan shall be in accordance with Resolution No. CJY-41-21, the ARPA, ARPA Regulations, and with all applicable federal and Navajo Nation laws, regulations, and policies:

Chapter's Preparer:


signature of Chapter Preparer

Approved by:


signature of Chapter President (or Vice-President)

Approved by:

VACANT
signature of CSC

Approved by:


signature of Chapter ASD

Approved to submit for Review:


signature of DCO Director

THE NAVAJO NATION
PROGRAM BUDGET SUMMARY

Waterline Extension

PART I. Business Unit No.: New Program Title: Tse Alnaozfil (Sanostee) Chapter Division/Branch: Community Development
 Prepared By: Jourdan Washburn, Sec/Treasurer Phone No.: 505-723-2703 Email Address: sanostee@navajochapters.org

PART II. FUNDING SOURCE(S)	Fiscal Year Term	Amount	% of Total	PART III. BUDGET SUMMARY			Fund Type Code	(A)	(B)	(C)	
				NNC Approved Original Budget	Proposed Budget	Difference or Total					
CYJ-41-21 NN Recovery Fnd	01/01/2023- 9/30/2024	\$ 500,000.00	100%	2001	Personnel Expenses						
				3000	Travel Expenses						
				3500	Meeting Expenses						
				4000	Supplies						
				5000	Lease and Rental						
				5500	Communications and Utilities						
				6000	Repairs and Maintenance						
				6500	Contractual Services	6		\$ 500,000.00	\$ 500,000.00		
				7000	Special Transactions						
				8000	Public Assistance						
				9000	Capital Outlay						
				9500	Matching Funds						
				9500	Indirect Cost						
				TOTAL				\$0.00	500,000.00	500,000	
TOTAL:				\$500,000.00	100%	PART IV. POSITIONS AND VEHICLES					
						(D)	(E)				
				Total # of Positions Budgeted:							
				Total # of Vehicles Budgeted:							

PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.

SUBMITTED BY: James Adakai, Delegated Department Manager II APPROVED BY: Calvin Castillo, Executive Director
 Program Manager's Printed Name Division Director / Branch Chief's Printed Name
 5-16-23  5/16/23
 Program Manager's Signature and Date Division Director / Branch Chief's Signature and Date

THE NAVAJO NATION
PROGRAM PERFORMANCE CRITERIA

PART I. PROGRAM INFORMATION:

Business Unit No.: New

Program Name/Title:

Tse Alnaoztil (Sanostee) Chapter - *Waterline Extension*

PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:

PART III. PROGRAM PERFORMANCE CRITERIA:

1st QTR		2nd QTR		3rd QTR		4th QTR	
Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual

1. Goal Statement:

To plan, design and construct waterline extensions

Program Performance Measure/Objective:

To construct water line extensions for homes.

						20	
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2. Goal Statement:

Program Performance Measure/Objective:

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3. Goal Statement:

Program Performance Measure/Objective:

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4. Goal Statement:

Program Performance Measure/Objective:

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5. Goal Statement:

Program Performance Measure/Objective:

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PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.

James Adakai, Delegated Department Manager II

Program Manager's Printed Name

[Signature] 5-16-23
Program Manager's Signature and Date

Calvin Castillo, Executive Director

Division Director/Branch Chief's Printed Name

[Signature] 5-16-23
Division Director/Branch Chief's Signature and Date

THE NAVAJO NATION
DETAILED BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION:			
Program Name/Title: <u>Tse Alnaoztii (Sanostee) Chapter</u>		Business Unit No.: <u>New</u>	
<p style="text-align: center;"><i>Waterline Extension</i></p>			
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification (LOD 7)	Total by DETAILED Object Code (LOD 6)	Total by MAJOR Object Code (LOD 4)
6500	<p>CONTRACTUAL SERVICES</p> <p>Plan, design and construct new water line extensions, include architectual design and other technical services. \$500,000.00</p>	\$ 500,000.00	\$ 500,000.00
TOTAL		\$ 500,000.00	\$ 500,000.00

**THE NAVAJO NATION
PROJECT BUDGET SCHEDULE**

PART I. Business Unit No.: <u>new</u> Project Title: <u>Tse Alnaoztii (Sanostee) Waterline Extension Project</u> Project Description: <u>Tse Alnaoztii (Sanostee) Waterline Extension Project</u> Check one box: <input type="checkbox"/> Original Budget <input type="checkbox"/> Budget Revision <input type="checkbox"/> Budget Reallocation <input type="checkbox"/> Budget Modification															PART II. Project Information Project Type: <u>Water Line Extension</u> Planned Start Date: <u>01/01/2023</u> Planned End Date: <u>09/30/2026</u> Project Manager: <u>DCD</u>															
PART III. List Project Task separately, such as Plan, Design, Construct, Equip or Furnish.	PART IV. Use Fiscal Year (FY) Quarters to complete the information below. O = Oct.; N = Nov.; D = Dec. etc.															Expected Completion Date if project exceeds 8 FY Qtrs. Date: <u>9/30/26</u>														
	FY 2023				FY 2024																									
	1st Qtr.			2nd Qtr.			3rd Qtr.			4th Qtr.			1st Qtr.			2nd Qtr.			3rd Qtr.			4th Qtr.								
	O	N	D	J	F	M	A	M	J	Jul	A	S	O	N	D	J	F	M	A	M	J	Jul	A	S	O	N	D	J	F	M
Project proposal/Funding										X	X	X	X																	
Project Assessments & Technical Plan, Design													X	X	X	X			X	X	X	X								
Construction - Installation																							X	X	X	X	X	X		
Project Close out																													X	X
PART V.	\$			\$			\$			\$			-			\$ 150,000.00			\$ 200,000.00			\$			\$ 150,000.00			PROJECT TOTAL		
Expected Quarterly Expenditures																												\$500,000.00		

FOR OMB USE ONLY: Resolution No: _____ FMIS Set Up Date: _____ Company No. _____ OMB Analyst: _____