



**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:**

- |  |   |
|--|---|
| <input type="checkbox"/> (1) Public Health and Economic Impact | <input type="checkbox"/> (2) Premium Pay                            |
| <input type="checkbox"/> (3) Government Services/Lost Revenue  | <input type="checkbox"/> (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: \_\_\_\_\_

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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](mailto: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: **ROCK POINT CHAPTER**

Date prepared: 3/13/23

Chapter's PO BOX 190  
mailing address: ROCK POINT AZ 86545

phone/email: (928) 659-4350-4351  
website (if any): rockpoint@navajochapters.org

This Form prepared by: **CHARLENE KIRK**  
**COMMUNITY SERVICES COORDINATOR**

phone/email: (928) 659-4350

**CHARLENE KIRK**

CONTACT PERSON'S name and title

CONTACT PERSON'S info

Title and type of Project: **ROCK POINT-DUMP TRUCK PROJECT**

Chapter President: **PATTERSON YAZZIE**

phone & email: (505) 399-0414, pyazzie@naataanii.org

Chapter Vice-President: **JANICE JIM**

phone & email: (928) 245-7002, jimjan56@hotmail.com

Chapter Secretary: **NANCY J. HARVEY**

phone & email: (928) 349-2369, nancyjharvey@hotmail.com

Chapter Treasurer: **SAME AS ABOVE**

phone & email:

Chapter Manager or CSC: **CHARLENE KIRK**

phone & email: (505) 486-8754, kirkshyenne@nnchapters.org

DCD/Chapter ASO: **CHINLE/EDGERTON GENE**

phone & email: (928) 587-5258, egene@nndcd.org

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

☐ document attached

Amount of FRF requested: \$200,000

FRF funding period: **June 01, 2023 to December 13, 2026**

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 Rock Point Chapter will use the funds to purchase a new dump truck. The equipment will be used for removing, transporting and other usage for Rock Point Chapter community members. This will include removing and delivering grade soil for deceased community members for their services. This purchase will allow ease of mind for community members and provide end of life services for community members.

☐ document attached

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

The Rock Point Chapter will be able to provide services for their community members using the dump truck. On the Navajo Nation, heavy equipment is difficult to find especially for funeral services. Having this available will allow community members less worry and stress while they take care of their loved ones.

☐ 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

THE NAVAJO NATION  
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Chapter's PO BOX 190 phone/email: (928) 659-4350-4351  
mailing address: ROCK POINT, AZ 86545 website (if any): rockpoint@navajochapters.org

This Form prepared by: CHARLENE KIRK phone/email: (928) 659-4350  
COMMUNITY SERVICES COORDINATOR CHARLENE KIRK  
CONTACT PERSON'S name and title CONTACT PERSON'S info

Title and type of Project: ROCK POINT-DUMP TRUCK PROJECT

Chapter President: PATTERSON YAZZIE phone & email: (505) 399-0414, pyazzie@naataanii.org

Chapter Vice-President: JANICE JIM phone & email: (928) 245-7002, jimjan56@hotmail.com

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## APPENDIX A

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

This project estimates the successful completion of the warehouse and will obligate the funds no later than December 31, 2024 and will fully expend the funds no later than December 13, 2026. Challenges would be Navajo Nation review timeline.

☐ document attached

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

DCD will be the oversight of the sub-recipient agreement with Rock Point Chapter to ensure the dump truck is purchased in a timely manner.

☐ 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 Rock Point Chapter will be responsible for the maintenance, upkeep and security dump truck.

☐ 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:

### 6.1 PROVISION OF GOVERNMENT SERVICES

The Rock Point Chapter will utilize this equipment to remove debris and deliver grade soil for graveside services. Along with this service, they will be able to help their community members by taking away unsanitary debris and ensuring the residence is as safe as possible.

☐ document attached

### Part 3. Additional documents.

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

Resolution and other documents as they are available.

☐ 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:

*Charlene Kuhl*  
signature of Chapter CONTACT PERSON

Approved by:

*[Signature]*  
signature of Chapter President (or Vice-President)

Approved by:

*Charlene Kuhl*  
signature of CSC

Approved by:

*[Signature]*  
signature of Chapter ASO

Approved to submit  
for Review:

*[Signature]*  
signature of DCD Director

FY 2023

**THE NAVAJO NATION  
PROGRAM BUDGET SUMMARY**

Page 1 of 3  
BUDGET FORM 1

PART I. Business Unit No.: <u>NEW</u>		Program Title: <u>Rock Point Dump Truck Project</u>		Division/Branch: <u>Div. of Comm. Dev/ Chinle ASC</u>	
Prepared By: <u>Charlene Kirk</u>		Phone No.: <u>(928) 659-4350</u>		Email Address: <u><a href="mailto:kirkshyenne@nnchapters.org">kirkshyenne@nnchapters.org</a></u>	

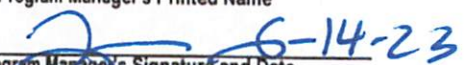
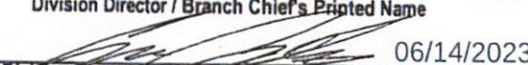
  

PART II. FUNDING SOURCE(S)	Fiscal Year /Term	Amount	% of Total	PART III. BUDGET SUMMARY	Fund Type Code	(A) NNC Approved Original Budget	(B) Proposed Budget	(C) Difference or Total
NN Fiscal Recovery Funds	6/1/23-12/13/26	200,000.00	100%	2001 Personnel Expenses				
				3000 Travel Expenses				
				3500 Meeting Expenses				
				4000 Supplies				
				5000 Lease and Rental				
				5500 Communications and Utilities				
				6000 Repairs and Maintenance				
				6500 Contractual Services				
				7000 Special Transactions				
				8000 Public Assistance				
				9000 Capital Outlay	b		200,000	200,000
				9500 Matching Funds				
				9500 Indirect Cost				
				<b>TOTAL</b>		\$0.00	200,000.00	200,000

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: <u>James Adakai, Deputy Director</u>		APPROVED BY: <u>Calvin Castillo, Executive Director</u>	
Program Manager's Printed Name		Division Director / Branch Chief's Printed Name	
 Program Manager's Signature and Date		 Division Director / Branch Chief's Signature and Date	

FY 2023

THE NAVAJO NATION  
PROGRAM PERFORMANCE CRITERIAPage 2 of 3  
BUDGET FORM 2

## PART I. PROGRAM INFORMATION:

Business Unit No.: NEW

Program Name/Title:

Rock Point Dump Truck Project

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

## PART III. PROGRAM PERFORMANCE CRITERIA:

## 1. Goal Statement:

To purchase dump truck.

Program Performance Measure/Objective:

Purchase of dump truck completed.

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

						1	
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## 2. Goal Statement:

To provide services to Rock Point community for funeral services, debris removal, etc.

Program Performance Measure/Objective:

To provide the Rock Point Chapter for essential services

						5	
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## 3. Goal Statement:

Program Performance Measure/Objective:

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## 4. Goal Statement:

Program Performance Measure/Objective:

--	--	--	--	--	--	--	--

## 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, Deputy Director

Program Manager's Printed Name

Program Manager's Signature and Date

Calvin Castillo, Executive Director

Division Director/Branch Chief's Printed Name

Division Director/Branch Chief's Signature and Date

06/14/2023

**FY 2023**

## THE NAVAJO NATION DETAILED BUDGET AND JUSTIFICATION

**Page 3 of 3**  
**BUDGET FORM 4**

[illegible]

# THE NAVAJO NATION PROJECT BUDGET SCHEDULE

Page 1 of 2  
PROJECT FORM

<b>PART I. Business Unit No.:</b> <u>NEW</u> <b>Project Title:</b> <u>ROCK POINT DUMP TRUCK PROJECT</u> <b>Project Description:</b> <u>Purchase dump truck for Rock Point Chapter Community.</u> Check one box: <input checked="" type="checkbox"/> Original Budget <input type="checkbox"/> Budget Revision <input type="checkbox"/> Budget Reallocation <input type="checkbox"/> Budget Modification															<b>PART II. Project Information</b> <b>Project Type:</b> <u>Dump Truck</u> <b>Planned Start Date:</b> <u>6/1/2023</u> <b>Planned End Date:</b> <u>12/13/2026</u> <b>Project Manager:</b> <u>Charlene Kirk</u>																				
<b>PART III.</b> List Project Task separately; such as Plan, Design, Construct, Equip or Furnish.		<b>PART IV. Use Fiscal Year (FY) Quarters to complete the information below. O = Oct.; N = Nov.; D = Dec., etc.</b>																												Expected Completion Date if project exceeds 8 FY Qtrs.					
		FY 2023												FY 2024																					
		1st Qtr.			2nd Qtr.			3rd Qtr.			4th Qtr.			1st Qtr.			2nd Qtr.			3rd Qtr.			4th Qtr.			12/13/2026									
		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				
6/1/23 - 9/30/23 164 Process for purchasing Dump Truck									x	x	x	x	x																						
10/1/23 - 9/30/24 Purchase of dump truck														x	x	x	x	x	x	x	x	x	x	x	x										
10/2/24 - 12/13/26 Closeout paperwork, quality check project, final payments sent out.																																			
<b>PART V.</b> Expected Quarterly Expenditures		\$			\$			\$			\$			\$			\$			\$			\$			PROJECT TOTAL									
														200,000.00												\$200,000.00									

FOR OMB USE ONLY:    Resolution No: \_\_\_\_\_    FMIS Set Up Date: \_\_\_\_\_    Company No: \_\_\_\_\_    OMB Analyst: \_\_\_\_\_