



NAVAJO NATION DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

DOREEN N. MCPAUL
Attorney General

KIMBERLY A. DUTCHER
Deputy Attorney General

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

RFS/HK Review #: HK0250

Date & Time Received: 12/2/2022 16:04

Date & Time of Response: 9 December, 2022; 1:59 pm

Entity Requesting FRF: Indian Wells Chapter

Title of Project: Housing renovations

Administrative Oversight: Division of Community Development

Amount of Funding Requested: \$1,760,468

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: 2.18, Housing Support:
Other Housing Assistance

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: Adjua Adjei-Danso

Signature of DOJ Reviewer:  _____

Disclaimers: An NNDOJ Initial Eligibility Determination will be 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: Indian Wells Chapter Date prepared: 8/22/22

Chapter's mailing address: P.O. Box 3049 Indian Wells, Az. 86031 phone/email: 928-654-3289/3280 website (if any): indianwells@navajochapters.org

This Form prepared by: Sherry Dick phone/email: 928-654-3280
Community Services Coordinator sherry.dick@nnchapters.org
CONTACT PERSON'S name and title CONTACT PERSON'S info

Title and type of Project: Housing renovation, modernization & weatherization

Chapter President: Ricky Nelson phone & email: 928-606-7375 iwricknelson@gmail.com

Chapter Vice-President: Loren Silver phone & email: 928-241-1673 silverspur68@gmail.com

Chapter Secretary: Linda Nelson phone & email: 928-225-9820 lindanelson@navajochapters.org

Chapter Treasurer: Linda Nelson phone & email: 928-225-9820 lindanelson@navajochapters.org

Chapter Manager or CSC: Sherry Dick phone & email: 928-654-3280 sherry.dick@nnchapters.org

DCD/Chapter ASO: Eunice Begay, SPPS phone & email: 928-654-3933 ejbegay@nndcd.org

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

Amount of FRF requested: 1,760,468.00 FRF funding period: Notice to Proceed 10/01/2022 - 9/30/2026
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 Indian Wells Chapter is requesting \$1.7 M to assist community members with housing renovation and repairs to provide stable and healthy home for those in need. Stable and healthy homes can help to combat COVID-19 pandemic and future mass diseases. Families living in multi-generational, elderly, disabled, young families and economic disadvantage family homes and to provide individuals with sanitary infrastructures to help combat COVID-19 pandemic and any future mass diseases. Home renovations will include but not limited to the following: Roof repair/replacement, Exterior wall repair/replacement, floor repair/replacement, windows & door repair/replacement, purchase & installation of HVAC units for alternative heating/cooling sources. document attached

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

This project will benefit the needs of the Indian Wells community by providing stable and standardized living quarters. Indian Wells Chapter strives to provide assistance to members who have limited economic opportunities during COVID-19 pandemic, stable housing will improve the living conditions of families that in the multi-generational homes and provide more sanitary conditions. 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

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

Local electricians, plumbers, skilled carpenters, and laborers will be hired. Homes assessment of 50 community members are completed. Advertisement for contractor(s): February 2023 to Aug. 2023, Procurement: August 2023 to March 2024, Construction: September 2023 to September 2026. Purchasing building materials in bulk and the supply chain could be challenging.

document attached

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

Division of Community Development
Indian Wells Chapter

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:

Homeowners will be responsible for the operation and maintenance of the renovated homes.

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:

Project: 2.18 - Housing Support; Other housing assistance
Providing families, that are living in a sub-standard conditions, renovations to their homes to improve their living conditions of multi-generational families, the elders, disable, young families, and economic disadvantage individuals. Assisting families with alternative heating/cooling sources to eliminate the spread of COVID-19.

document attached

Part 3. Additional documents.

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

Chapter Resolution: IWC-22-61
Navajo Nation OMB Forms: 1,2,& 4

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: Approved by:
Signature of Preparer/CONTACT PERSON Signature of Chapter President (or Vice-President)

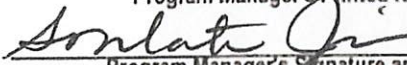
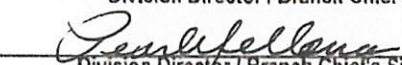
Approved by: Approved by:
Signature of SSC Signature of Chapter ASO

Approved to submit for Review: 8/24/2022
Signature of DCD Director

FY _____

**THE NAVAJO NATION
PROGRAM BUDGET SUMMARY**

Page ___ of ___
BUDGET FORM 1

PART I. Business Unit No.: <u> New </u>		Program Title: <u> </u>		ARPA Fund		Division/Branch: <u> </u>		
Prepared By: <u> Sherry Dick </u>		Phone No.: <u> 928-654-3289/3280 </u>		Email Address: <u> sherry.dick@nnchapters.org </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
ARPA Funds	10/1/2022-9/30/26	1,760,468.00	100%	2001 Personnel Expenses		408,969	408,969	0
				3000 Travel Expenses				
				3500 Meeting Expenses				
				4000 Supplies		75,453	75,453	
				5000 Lease and Rental		100,000	100,000	
				5500 Communications and Utilities				
				6000 Repairs and Maintenance				0
				6500 Contractual Services				
				7000 Special Transactions				
				8000 Public Assistance		1,176,046	1,176,046	
				9000 Capital Outlay				
				9500 Matching Funds				
				9500 Indirect Cost				
				TOTAL		\$1,760,468.00	1,760,468.00	0
				PART IV. POSITIONS AND VEHICLES		(D)	(E)	
				Total # of Positions Budgeted:				
				Total # of Vehicles Budgeted:				
		TOTAL:	\$1,760,468.00	100%				
PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.								
SUBMITTED BY: <u> Sonlatsa Jim-Martin, DMII </u>			APPROVED BY: <u> Dr. Pearl Yellowman, Division 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					

**THE NAVAJO NATION
PROGRAM PERFORMANCE CRITERIA**

FY _____

PART I. PROGRAM INFORMATION:

Business Unit No.: _____ New _____ Program Name/Title: _____ ARPA Funds _____

PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:
CJN-29-22 Navajo Fiscal Recovery Fund on the Navajo Nation

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 renovate, modernize and weatherized homes								
Program Performance Measure/Objective: Provide home improved to 100 livable homes within the Indian Wells community	25		25		25		25	
2. Goal Statement: _____								
Program Performance Measure/Objective: _____								
3. Goal Statement: _____								
Program Performance Measure/Objective: _____								
4. Goal Statement: _____								
Program Performance Measure/Objective: _____								
5. Goal Statement: _____								
Program Performance Measure/Objective: _____								

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

<p>Sontalsa Jim-Martin, Department Manager II</p> <p>_____ Program Manager's Printed Name</p> <p><i>Sontalsa Jim-Martin</i> 08/06/2022 _____ Program Manager's Signature and Date</p>	<p>Dr. Pearl Yellowman, Division Director</p> <p>_____ Division Director/Branch Chief's Printed Name</p> <p><i>Pearl Yellowman</i> 8.30.22 _____ Division Director/Branch Chief's Signature and Date</p>
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FY _____

**THE NAVAJO NATION
DETAILED BUDGET AND JUSTIFICATION**

Page ___ of ___
BUDGET FORM 4

PART I. PROGRAM INFORMATION:				
Program Name/Title: _____		ARPA Fund	Business Unit No.: _____ New	
PART II. DETAILED BUDGET:				
(A)	(B)		(C)	(U)
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)
6	Temporary			
7	2320 Person - Temp F/T	Skilled Carpenters = 4 @ \$22.00 p/hr x 1200	105,600	
		Laborers = 16 @\$14.00 p/hr x 1200 hrs	268,800	
7	2912 FICA	\$374,400. x 6.2%	22,213	
7	2914 - Medicare	\$374,400. x 1.45%	5,429	
7	2951 - SUTA	\$374,400. x 1.15%	4,308	
6	2960 - Worker's Comp	\$374,400 / \$100 x 0.70	2,621	
6	Operating Supplies			
7	4130 - General Operating Supplies	75,463.00	75,463	
6	Equipment/Supplies			
7	5370 - Equipment Rental	100,000.00	100,000	
6	Infrastructure (non-cap)			
7	8510 - Housing Const Materials	1,000,000.00	1,000,000	
6	Infrastructure (non cap)			
7	8560 - Infrastructure Contingency (non cap)	176,046.00	176,046	
TOTAL			1,760,478	

**THE NAVAJO NATION
PROJECT BUDGET SCHEDULE**

PART I. Business Unit No.: <u>New</u> Project Title: <u>ARPA Funds</u> Project Description: <u>Housing renovation, modernization and weathenzation</u>	PART II. Project Information Project Type: <u>ARPA Funds</u> Planned Start Date: <u>10/1/2022</u> Planned End Date: <u>09/30/2026</u> Project Manager: _____
Check one box: <input checked="" type="checkbox"/> Original Budget <input type="checkbox"/> Budget Revision <input type="checkbox"/> Budget Reallocation <input type="checkbox"/> Budget Modification	

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.												
	FY _____								FY _____								Date _____												
	1st Qtr.	2nd Qtr.			3rd Qtr.			4th Qtr.			1st Qtr.	2nd Qtr.			3rd Qtr.			4th Qtr.			O	N	D	J	F	M			
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
PART V. Expected Quarterly Expenditures																\$	\$	\$	\$	\$	\$	\$	\$	PROJECT TOTAL					

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

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Appendix J



INDIAN WELLS CHAPTER OF THE NAVAJO NATION

Ricky Nelson
President
Loren Silver
Vice President
Linda Nelson
Secretary/Treasurer
Keaton Clark
Grazing Official

RESOLUTION OF INDIAN WELLS CHAPTER

REQUESTING, ACCEPTING, AND APPROVING CJN-29-22, AMERICAN RESCUE PLAN ACT (ARPA) FUNDING IN THE AMOUNT OF \$1,760,468.00 FOR INDIAN WELLS CHAPTER TO BE UTILIZE FOR HOME RENOVATIONS, MODERNIZATIONS, AND WEATHERIZATIONS

RESOLUTION # IWC-22-61

WHEREAS:

1. The Indian Wells Chapter is a recognized Chapter of the Navajo Nation and recognized as a local governmental entity vested with certain authority and responsibilities to consider and act on matters of local concern that are in the best interest of health, safety and welfare of the Chapter membership and residents; and
2. Pursuant to 26 NNC, Navajo Nation Local Governance Act (LGA), the Navajo Nation Council delegates Chapters governmental authority with respect to local matters consistent with Navajo Nation Laws including customs and traditions to make decisions over local matter and to govern with responsibility and accountability to the local citizens; and
3. Indian Wells Chapter appreciates the 24TH Navajo Nation Council, Office of President, and Vice President in passing and signing Legislation CJN-29-22: American Rescue Plan Act; and
4. Indian Wells community members have requested expenditure for housing renovations, modernizations, weatherization of multi-generational, elderly, disabled, young families and economic disadvantage community member homes; and
5. Indian Wells Chapter will utilize these funds to hire local skilled carpenters, Public Employment Program (PEP) laborers, professional services, purchase materials and equipment for this renovation projects; and
6. Indian Wells Chapter recognizes the need for these home renovations to combat Covid 19 and improve substandard living conditions for the multi-generational, elderly, disabled, young families and economic disadvantage homes; and

NOW, THEREFORE BE IT RESOLVED THAT:

Indian Wells Chapter requests, accepts and approves Legislation CJN-29-22, American Rescue Plan Act funding in the amount of \$1,760,468.00 for 2.18 Housing Support; Other Housing assistance and 3.3 Public Sector Workforce; Other in providing Home Renovations for Indian Wells community members to be utilized for home renovations, modernizations, and weatherization.

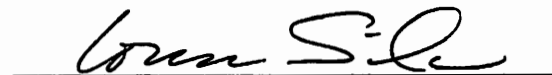
CERTIFICATION

We, hereby certify that the foregoing resolution was duly considered by the Indian Wells Chapter at Indian Wells, Navajo Nation, Arizona at a duly called meeting where a quorum was present and the same passed by a vote of 14 in favor, 1 opposed and 2 abstained on this 21st day of August 2022.

Motion: George John Second: Mary Ann Begay



Ricky Nelson, President



Loren Silver, Vice President



Linda Nelson, Secretary/Treasurer