



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: _____

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

[illegible]

Name of DOJ Reviewer: _____

Signature of DOJ Reviewer: _____

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 NNDNJ Initial Eligibility Determination is based on the documents provided, which NNDNJ 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 NNDNJ. 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: Whitehorse Lake Chapter Date prepared: 11/23/2022

Chapter's mailing address: HCR 79 Box 4069 phone/email: 505 655-5430 WhitehorseLake@navajochapters.org
Cuba, NM 87013 website (if any): https://whitehorselake.navajochapters.org/

This Form prepared by: Fran George phone/email: 505 726 3310 Fgeorge@navajochapters.org

505 726 3310 Fgeorge@navajochapters.org

CONTACT PERSON'S name and title

CONTACT PERSON'S Info

Title and type of Project: Replacement of Interior Bathroom Plumbing

Chapter President: Art Lee Chavez phone & email: 505 655 5430 WhitehorseLake@navajochapters.org

Chapter Vice-President: Derrick Yazzie phone & email: 505 409 3126 WhitehorseLake@navajochapters.org

Chapter Secretary: Fran George phone & email: 505 7263310 Fgeorgewhitehorselake@navajochapters.org

Chapter Treasurer: Fran George phone & email: 505 726331 0Fgeorgewhitehorselake@navajochapters.org

Chapter Manager or CSC: Dedrick Tolino phone & email: 505 655 5430 WhitehorseLake@navajochapters.org

DCD/Chapter ASO: Myrtis Begay phone & email: 505-786-2092 - msbegay@nndcd.org

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

☐ document attached

Amount of FRF requested: \$90,000 FRF funding period: January 1, 2023 to September 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:

Whitehorse Lake Chapter 15 community members have problems with plumbing problems in their Bathrooms with slow drainage, slow water pressure, poor ventilation causing gas from sewer to bring order into the house and some of the homes have drainage leakage. This is because of the way plumbing was installed 28 years ago. Plumbing clean water piping is under the floor, causing poor drainage, the commode in the homes are small, height is low, sink and bathtubs, have slow drainage.all bathrooms have poor plumbing. The APRA Funds in the amount of \$6,000.00 will replace,bathroom fixtures and repiped waste water and clean water infrastructure for 15 families.

☐ document attached

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

he 15 families live in unsafe living environments, susceptible to infection from COVID 19. older community members are not just struggling with greater health risks but also less likely to and capable of helping themselves. Families use outdoor outhouses, families have to drape or board up bathroom doors to keep orders from seeping throughout the house. this plumbing issues has caused health crisis and suffering

☐ 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, 2025:

January 1, 2023 to September 30, 2026

☐ document attached

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

Whitehorse Lake Chapter will work with home owners and NTUA to do repairs and replacement of plumbing and fixtures. for indoor plumbing

☐ 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 15 homeowners will be responsible for the care and maintenance of waterline and supply to the 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:

218-Other Housing Assistance & 518 water and sewer
The community members would benefit from this project by providing a stable & safe home with proper indoor plumbing.

☐ document attached

Part 3. Additional documents.

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

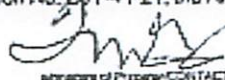
Request Form & Expenditures Report Form
Chapter Resolution

☒ Chapter Resolution attached

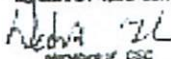
Part 4. Affirmation by Funding Recipient.

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. GUY-41-21, the ARPA, ARPA Regulations, and with all applicable federal and Navajo Nation laws, regulations, and policies:

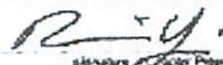
Chapter's
Preparer:


signature of Chapter CONTACT PERSON

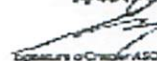
Approved by:


signature of CSC

Approved by:


signature of Chapter President or Vice President

Approved by:


signature of Chapter ASO

Approved to submit
for Review:


signature of Chief Director

FY 2023



**THE NAVAJO NATION
PROGRAM BUDGET SUMMARY**

Page 1 of 4
BUDGET FORM 1

PART I. Business Unit No.: <u>NEW</u>		Program Title: <u>Whitethorse Lake Chapter — Indoor Plumbing</u>		Division/Branch: <u>DCD/Executive Branch</u>	
Prepared By: <u>Dedrick Tolino</u>		(505) 655-5430		Email Address: <u>dtolino@navajochapters.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
NN Fiscal Recovery Funds	1/1/2023 to	90,000.00	100%					
	9/30/26			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	0	90,000	90,000
				7000 Special Transactions				
				8000 Public Assistance				
				9000 Capital Outlay				
				9500 Matching Funds				
				9500 Indirect Cost				
				TOTAL		\$0.00	90,000.00	90,000


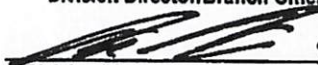
PART IV. POSITIONS AND VEHICLES		(D)	(E)
Total # of Positions Budgeted:			
Total # of Vehicles Budgeted:			

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	
 <u>5-31-23</u> Program Manager's Signature and Date		 <u>6-2-23</u> Division Director / Branch Chief's Signature and Date	

FY 2023

**THE NAVAJO NATION
PROGRAM PERFORMANCE CRITERIA**

Page 2 of 4
BUDGET FORM 2

PART I. PROGRAM INFORMATION:												
Business Unit No.: <u>NEW</u>					Program Name/Title: <u>Whitehorse Lake Chapter ^{Indoor} Plumbing Update</u>							
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:												
<u>Re-construct existing indoor plumbing for "Outdated Bathroom Additions "</u>												
Program Performance Measure/Objective:												
<u>Improve indoor plumbing that are not up to code</u>									9		6	
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.												
James Adakai- Deputy Director					Calvin Castillo- Executive Director							
_____ Program Manager's Printed Name					_____ Division Director/Branch Chief's Printed Name							
 <u>5-31-23</u> Program Manager's Signature and Date					 <u>6.2.23</u> Division Director/Branch Chief's Signature and Date							

FY 2023

**THE NAVAJO NATION
DETAILED BUDGET AND JUSTIFICATION**

Page 3 of 4
BUDGET FORM 4

PART I. PROGRAM INFORMATION:			
Program Name/Title: <u>Whitehorse Lake Chapter Indoor Plumbing</u>		Business Unit No.: <u>New</u>	
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)
6960	Subcontracted Services 6990 - Subcontracted Services Reconstruct plumbing systems for outdated bathroom additions/renovations. Fix/update indoor plumbing systems.	90,000	90,000
TOTAL		90,000	90,000

**THE NAVAJO NATION
PROJECT BUDGET SCHEDULE**

PART I. Business Unit No.: <u>New</u> Project Title: <u>Whitehorse Lake Chapter Indoor Plumbing</u> Project Description: <u>Replace/update bathroom fixtures that are outdated in homes. Reconstruct plumbing systems for bathroom additions.</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														PART II. Project Information Project Type: <u>Indoor Plumbing</u> Planned Start Date: <u>1/1/2023</u> Planned End Date: <u>9/30/2026</u> Project Manager: <u>Dedrick Tolino</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. <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <th colspan="12">FY <u>2023</u></th> <th colspan="12">FY <u>2024</u></th> <th colspan="4" rowspan="2"> Expected Completion Date if project exceeds 8 FY Qtrs. Date <u>9/30/2026</u> </th> </tr> <tr> <th colspan="3">1st Qtr.</th> <th colspan="3">2nd Qtr.</th> <th colspan="3">3rd Qtr.</th> <th colspan="3">4th Qtr.</th> <th colspan="3">1st Qtr.</th> <th colspan="3">2nd Qtr.</th> <th colspan="3">3rd Qtr.</th> <th colspan="3">4th Qtr.</th> </tr> <tr> <td>O</td><td>N</td><td>D</td> <td>J</td><td>F</td><td>M</td> <td>A</td><td>M</td><td>J</td> <td>Jul</td><td>A</td><td>S</td> <td>O</td><td>N</td><td>D</td> <td>J</td><td>F</td><td>M</td> <td>A</td><td>M</td><td>J</td> <td>Jul</td><td>A</td><td>S</td> <td>O</td><td>N</td><td>D</td> <td>J</td><td>F</td><td>M</td> </tr> <tr> <td></td><td></td><td></td> <td>X</td><td>X</td><td>X</td> <td>X</td><td>X</td><td>X</td> <td>X</td><td>X</td><td>X</td> <td>X</td><td>X</td><td>X</td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> </tr> <tr> <td colspan="28" style="height: 400px; vertical-align: top;"> Indoor Plumbing - Replacement </td> </tr> <tr> <td colspan="3">\$</td> <td colspan="3">\$</td> <td colspan="3">\$</td> <td colspan="3">\$</td> <td colspan="3">\$</td> <td colspan="3">\$</td> <td colspan="3">\$</td> <td colspan="3">\$</td> <td colspan="4">PROJECT TOTAL</td> </tr> <tr> <td colspan="3"></td> <td colspan="3">15,000.00</td> <td colspan="3">30,000.00</td> <td colspan="3">30,000.00</td> <td colspan="3">15,000.00</td> <td colspan="3"></td> <td colspan="3"></td> <td colspan="3"></td> <td colspan="4">90,000.00</td> </tr> </table>																												FY <u>2023</u>												FY <u>2024</u>												Expected Completion Date if project exceeds 8 FY Qtrs. Date <u>9/30/2026</u>				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				X	X	X	X	X	X	X	X	X	X	X	X																Indoor Plumbing - Replacement																												\$			\$			\$			\$			\$			\$			\$			\$			PROJECT TOTAL							15,000.00			30,000.00			30,000.00			15,000.00												90,000.00			
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