

RESOLUTION OF THE  
 NAABIK'ÍYÁTI' STANDING COMMITTEE  
 25<sup>th</sup> NAVAJO NATION COUNCIL -- Second Year, 2024

AN ACTION RELATING TO THE NAABIK'ÍYÁTI' COMMITTEE; AMENDING NABIO-39-23 AND CAU-75-23 AND CJY-57-23 AND CD-67-22, THE NAVAJO NATION FISCAL RECOVERY FUND DELEGATE REGION PROJECT PLAN FOR HONORABLE AMBER KANAZBAH CROTTY'S DELEGATE REGION (CHAPTERS: COVE, TOADLENA/TWO GREY HILLS, RED VALLEY, TOOH HALTSOOI', TSÉ ÁĽNAOZT'I'Í, BECLABITO, GADIIAHI/TO'KOI), TO INCLUDE ADDITIONAL PROJECTS FOR THIS DELEGATE REGION

BE IT ENACTED:

SECTION ONE. AUTHORITY

- A. The Naabik'iyáti' Committee is established as a standing committee of the Navajo Nation Council. 2 N.N.C. § 700(A).
- B. Navajo Nation Council Resolution No. CJN-29-22, as amended by CAU-74-23, mandates that Fiscal Recovery Fund ("NNFRF") Delegate Region Project Plans be approved by two-thirds (2/3) vote of the Naabik'iyáti' Committee members in attendance.
- C. Navajo Nation Council Resolution No. CD-67-22, included and incorporated herein by reference, mandated that amendments to the Navajo Nation Fiscal Recovery Fund Delegate Region Project Plan for Honorable Amber Kanazbah Crotty's Delegate Region (Chapters: Cove, Toadlena/Two Grey Hills, Red Valley, Tooh Haltsooi', (Sheepsprings), Tsé ÁĽnaozt'i'í, Beclabito, Gadiiahi/To'Koi) be approved by a Navajo Nation Council resolution and signed into law by the President of the Navajo Nation pursuant to 2 N.N.C. § 164(A)(17), and 2 N.N.C. §§ 1005 (C)(10), (11), and (12).
- D. Navajo Nation Council Resolution No. CJY-57-23, included and incorporated herein by reference, mandated that amendments to the Navajo Nation Fiscal Recovery Fund Delegate Region Project Plan for Honorable Amber Kanazbah Crotty's Delegate Region (Chapters: Cove, Toadlena/Two Grey Hills, Red Valley, Tooh Haltsooi' (Sheepsprings), Tsé ÁĽnaozt'i'í, Beclabito, Gadiiahi/To'Koi) be approved by a Navajo Nation Council resolution and signed into law by the President of the Navajo Nation pursuant to 2 N.N.C. § 164(A)(17), and 2 N.N.C. §§ 1005 (C)(10), (11), and (12).
- E. Navajo Nation Council Resolution No. CAU-75-23, included and incorporated herein by reference, mandated that amendments to

the Navajo Nation Fiscal Recovery Fund Delegate Region Project Plan for Honorable Amber Kanazbah Crotty's Delegate Region (Chapters: Cove, Toadlena/Two Grey Hills, Red Valley, Tooh Haltsooi' (Sheepsprings), Tsé Áłnaozt'i'í, Beclabito, Gadiiahi/To'Koi) be approved by a Navajo Nation Council resolution and signed into law by the President of the Navajo Nation pursuant to 2 N.N.C. § 164(A)(17), and 2 N.N.C. §§ 1005 (C)(10), (11), and (12).

- F. Navajo Nation Council Resolution No. CAU-74-23, which amended CJN-29-22 and CJY-41-21, included and incorporated herein by reference, delegated the Naabik'íyáti' Committee as the final approval authority for Delegate Region Project Plans funded through Navajo Nation's Fiscal Recovery Funds.
- G. Naabik'íyáti' Committee Resolution No. NABIO-39-23, included and incorporated herein by reference, mandated that amendments to the Navajo Nation Fiscal Recovery Fund Delegate Region Project Plan for Hon. Amber Kanazbah Crotty's Delegate Region (Chapters: Cove, Toadlena/Two Grey Hills, Red Valley, Tooh Haltsooi' (Sheepsprings), Tsé Áłnaozt'i'í, Beclabito, Gadiiahi/To'Koi) be adopted and approved by resolution of the Naabik'íyáti' Committee pursuant to two-thirds (2/3) vote of the Naabik'íyáti' Committee members in attendance.

## SECTION TWO. FINDINGS

- A. Navajo Nation Council Resolution No. CJN-29-22, AN ACTION RELATING TO THE NAABIK'ÍYÁTI' COMMITTEE AND NAVAJO NATION COUNCIL; ALLOCATING \$1,070,298,867 OF NAVAJO NATION FISCAL RECOVERY FUNDS; APPROVING THE NAVAJO NATION FISCAL RECOVERY FUND EXPENDITURE PLANS FOR: CHAPTER AND REGIONAL PROJECTS; PUBLIC SAFETY EMERGENCY COMMUNICATIONS, E911, AND RURAL ADDRESSING PROJECTS; CYBER SECURITY; PUBLIC HEALTH PROJECTS; HARDSHIP ASSISTANCE; WATER AND WASTEWATER PROJECTS; BROADBAND PROJECTS; HOME ELECTRICITY CONNECTION AND ELECTRIC CAPACITY PROJECTS; HOUSING PROJECTS AND MANUFACTURED HOUSING FACILITIES; BATHROOM ADDITION PROJECTS; CONSTRUCTION CONTINGENCY FUNDING; AND REDUCED ADMINISTRATIVE FUNDING, was signed into law by the President of the Navajo Nation on July 15, 2022.
- B. CJN-29-22, as amended by CAU-74-23, Section Three, now states, in part and among other things, that
  - 1. The Navajo Nation hereby approves total funding for the NNFRRF Chapter and Chapter Projects Expenditure Plan from the Navajo Nation Fiscal Recovery Fund in the total amount

of two hundred eleven million two hundred fifty-six thousand one hundred forty-eight dollars (\$211,256,148) to be divided equally between the twenty-four (24) Delegate Regions in the amount of eight million eight hundred two thousand three hundred forty dollars (\$8,802,340) per Delegate Region . . . and allocated through Delegate Region Project Plans approved by two-thirds (2/3) vote of the Naabik'íyáti' Committee members in attendance. . . . See CJN-29-22, as amended by CAU-74-23, Section Three (B).

2. The Delegate Region Project Plan funding will be allocated to the Navajo Nation Central Government, specifically the Division of Community Development or other appropriate Navajo Nation Division or Department, to implement the projects rather than directly to the Chapters. See CJN-29-22, Section Three (D).
  3. The Navajo Nation Central Government, specifically the Division of Community Development or other appropriate Navajo Nation Division or Department, shall manage and administer funds and Delegate Region Project Plans on behalf of Non-LGA-Certified Chapters. The Navajo Nation Central Government may award funding to LGA-Certified Chapters through sub-recipient agreements to implement and manage specific projects, but shall maintain Administrative Oversight over such funding and Delegate Region Project Plans. See CJN-29-22, Section Three (E).
  4. Each Navajo Nation Council delegate shall select Fiscal Recovery Fund eligible projects within their Delegate Region to be funded by the NNFRF Chapter and Regional Projects Expenditure Plan through a Delegate Region Projects Plan. The total cost of projects selected by each Delegate shall not exceed their Delegate Region distribution of eight million eight hundred two thousand three hundred forty dollars (\$8,802,340). See CJN-29-22, Section Three (F).
  5. Each Delegate Region Project shall identify its Administrative Oversight entity and its Oversight Committee(s) and be subject CJY-41-21's NNDOJ initial eligibility determination. See CJN-29-22, Section Three (L) (5) and (L) (6).
- C. The Navajo Nation Council Resolution No. CD-67-22, AN ACTION RELATING TO THE NAABIK'ÍYÁTI' COMMITTEE AND NAVAJO NATION COUNCIL; APPROVING THE NAVAJO NATION FISCAL RECOVERY FUND DELEGATE REGION PROJECT PLAN FOR HONORABLE AMBER KANAZBAH

CROTTY'S DELEGATE REGION (CHAPTERS: COVE, TOADLENA/TWO GREY HILLS, RED VALLEY, TOOH HALTSOOI' (SHEEPSPRINGS), TSÉ ÁLNAOZT'I'Í, BECLABITO, GADIIAHI/TO'KOI), was signed into law by the President of the Navajo Nation on January 6, 2023.

D. CD-67-22, Section Four, states that:

1. Amendments to this legislation or to the Delegate Region Project Plan approved herein shall only be adopted by resolution of the Navajo Nation Council and approval of the President of the Navajo Nation pursuant to 2 N.N.C. § 164(A)(17) and 2 N.N.C. §§ 1005(C)(10), (11), and (12).

E. The Navajo Nation Council Resolution No. CJY-57-23, AN ACTION RELATING TO THE NAABIK'ÍYÁTI' COMMITTEE AND NAVAJO NATION COUNCIL; AMENDING CD-67-22, THE NAVAJO NATION FISCAL RECOVERY FUND DELEGATE REGION PROJECT PLAN FOR HONORABLE AMBER KANAZBAH CROTTY'S DELEGATE REGION (CHAPTERS: COVE, TOADLENA/TWO GREY HILLS, RED VALLEY, TOOH HALTSOOI', (SHEEPSPRINGS), TSÉ ÁLNAOZT'I'Í, BECLABITO, GADIIAHI/TO'KOI), TO INCLUDE ADDITIONAL PROJECTS FOR THIS DELEGATE REGION was signed into law by the President of the Navajo Nation on August 4, 2023.

F. CJY-57-23, Section Four, states that:

1. Amendments to this legislation or to the Delegate Region Project Plan approved herein shall only be adopted by resolution of the Navajo Nation Council and approval of the President of the Navajo Nation pursuant to 2 N.N.C. § 164(A)(17) and 2 N.N.C. §§ 1005(C)(10), (11), and (12).

G. The Navajo Nation Council Resolution No. CAU-75-23, AN ACTION RELATING TO THE NAABIK'ÍYÁTI' COMMITTEE AND NAVAJO NATION COUNCIL; AMENDING CJY-57-23 AND CD-67-22, THE NAVAJO NATION FISCAL RECOVERY FUND DELEGATE REGION PROJECT PLAN FOR HONORABLE AMBER KANAZBAH CROTTY'S DELEGATE REGION (CHAPTERS: COVE, TOADLENA/TWO GREY HILLS, RED VALLEY, TOOH HALTSOOI' (SHEEPSPRINGS), TSÉ ÁLNAOZT'I'Í, BECLABITO, GADIIAHI/TO'KOI), TO REMOVE PROJECTS AND INCLUDE ADDITIONAL PROJECTS FOR THIS DELEGATE REGION was signed into law by the President of the Navajo Nation on August 30, 2023.

H. CAU-75-23, Section Four, states that:

1. Amendments to this legislation or to the Delegate Region Project Plan approved herein shall only be adopted by resolution of the Navajo Nation Council and approval of

the President of the Navajo Nation pursuant to 2 N.N.C. § 164(A)(17) and 2 N.N.C. §§ 1005(C)(10), (11), and (12).

- I. The Navajo Nation Council Resolution No. CAU-74-23, AN ACTION RELATING TO THE NAABIK'ÍYÁTI' COMMITTEE AND NAVAJO NATION COUNCIL; AMENDING COUNCIL RESOLUTIONS CJY-41-21 AND CJN-29-22; DELEGATING THE NAABIK'ÍYÁTI' COMMITTEE AS THE FINAL APPROVAL AUTHORITY FOR DELEGATE REGION PROJECT PLANS FUNDED THROUGH THE NAVAJO NATION'S FISCAL RECOVERY FUNDS was signed into law by the President of the Navajo Nation on September 6, 2023.
- J. CJN-29-22, as amended by CAU-74-23, Section Three, now states, in part and among other things, that
  - 1. The Navajo Nation hereby approves total funding for the NNFRF Chapter and Chapter Projects Expenditure Plan from the Navajo Nation Fiscal Recovery Fund in the total amount of two hundred eleven million two hundred fifty-six thousand one hundred forty-eight dollars (\$211,256,148) to be divided equally between the twenty-four (24) Delegate Regions in the amount of eight million eight hundred two thousand three hundred forty dollars (\$8,802,340) per Delegate Region . . . and allocated through Delegate Region Project Plans approved by two-thirds (2/3) vote of the Naabik'íyáti' Committee members in attendance. . . . See CJN-29-22, as amended by CAU-74-23, Section Three (B).
- K. The Naabik'íyáti' Committee Resolution No. NABIO-39-23, AN ACTION RELATING TO THE NAABIK'ÍYÁTI' COMMITTEE; AMENDING CAU-75-23 AND CJY-57-23 AND CD-67-22, THE NAVAJO NATION FISCAL RECOVERY FUND DELEGATE REGION PROJECT PLAN FOR HONORABLE AMBER KANAZBAH CROTTY'S DELEGATE REGION (CHAPTERS: COVE, TOADLENA/TWO GREY HILLS, RED VALLEY, TOOHALTSOOI' (SHEEPSPRINGS), TSÉ ÁLNAOZT'I'Í , BECLABITO, GADIIAHI/TO'KOI), TO INCLUDE ADDITIONAL PROJECTS FOR THIS DELEGATE REGION was signed into law by the Chairperson of the Naabik'íyáti' Committee on October 17, 2023.
- L. NABIO-39-23, Section Four, states that:
  - 1. Amendments to this legislation or to the Delegate Region Project Plan approved herein shall only be adopted and approved by resolution of the Naabik'íyáti' Committee.
- M. All additional projects listed in the Hon. Amber Kanazbah Crotty's Delegate Region Projects Plan, attached as Exhibit A, have been deemed Fiscal Recovery Fund eligible by NNDOJ. In addition, Hon. Amber Kanazbah Crotty's Delegate Region

Projects Plan does not exceed the amount of \$8,802,340, as set forth in CJN-29-22, Section Three (F).

- N. The Navajo Nation Council hereby finds that it is in the best interest of the Navajo Nation and the Hon. Amber Kanazbah Crotty's Delegate Region Chapters and communities to approve and adopt the additional projects as part of the Navajo Nation Fiscal Recovery Fund Delegate Region Project Plan for Hon. Amber Kanazbah Crotty's Delegate Region (Chapters: Cove, Toadlena/Two Grey Hills, Red Valley, Tooh Haltsooi', Tsé Áłnaozt'i'í', Beclabito, Gadiiahi/To'Koi) as set forth in Exhibit A.

**SECTION THREE. AMENDING NABIO-39-23 AND CAU-75-23 AND CJY-57-23 AND CD-67-22, THE NAVAJO NATION FISCAL RECOVERY FUND DELEGATE REGION PROJECT PLAN FOR HONORABLE AMBER KANAZBAH CROTTY'S DELEGATE REGION (CHAPTERS: COVE, TOADLENA/TWO GREY HILLS, RED VALLEY, TOOHALTSOOI', TSÉ ÁŁNAOZT'I'Í, BECLABITO, GADIIAHI/TO'KOI), TO INCLUDE ADDITIONAL PROJECTS FOR THIS DELEGATE REGION**

- A. The Navajo Nation hereby approves the additional projects as part of the Navajo Nation Fiscal Recovery Fund Delegate Region Project Plan for Hon. Amber Kanazbah Crotty's Delegate Region (Chapters: Cove, Toadlena/Two Grey Hills, Red Valley, Tooh Haltsooi', Tsé Áłnaozt'i'í', Beclabito, Gadiiahi/To'Koi) set forth in Exhibit A.
- B. The Delegate Region Project Plan approved herein shall comply with all applicable provisions of CJY-41-21, CJN-29-22, and BFS-31-21.
- C. Any inconsistencies between this legislation, the Delegate Region Project Plan, and the individual project appendix, shall be resolved in favor of the project appendix reviewed by Department of Justice during their eligibility determination(s).

**SECTION FOUR. AMENDMENTS**

Amendments to this legislation or to the Delegate Region Project Plan approved herein shall only be adopted and approved by resolution of the Naabik'íyáti' Committee.

**SECTION FIVE. EFFECTIVE DATE**


This legislation shall be effective upon its approval pursuant to two-thirds (2/3) vote of the Naabik'íyáti' Committee members in attendance.

**SECTION SIX. SAVING CLAUSE**

If any provision of this legislation is determined invalid by the Navajo Nation Supreme Court, or by a Navajo Nation District Court without appeal to the Navajo Nation Supreme Court, those provisions of this legislation not determined invalid shall remain the law of the Navajo Nation.

**CERTIFICATION**

I, hereby certify that the foregoing resolution was duly considered by the Naabik'íyáti' Committee of the 25<sup>th</sup> Navajo Nation Council at a duly called meeting in Tse Bonito, New Mexico, at which a quorum was present and that the same was passed by a vote of 14 in Favor, and 00 Opposed, on this 18<sup>th</sup> day of January 2024.

  
Honorable Seth Damon, Chairman Pro Tem  
Naabik'íyáti' Committee

Jan 22, 2024  
Date

Motion: Honorable Shaandiin Parrish

Second: Honorable Vince R. James

Chairman Pro Tem Seth Damon not voting

# Exhibit A

## NAVAJO NATION FISCAL RECOVERY FUND DELEGATE REGION PROJECT PLAN

COUNCIL DELEGATE: Hon. Amber Kanazbah Crotty

CHAPTERS: Cove, Toadlena/Two Grey Hills, Red Valley, Tooh Haltsooi' (Sheepsprings), Tse'alnaozt'i'i, Beclabito, Gadiiahi/To'Koi

FUNDING RECIPIENT	SUBRECIPIENT	EXPENDITURE PLAN / PROJECT	ADMIN OVERSIGHT	FRF CATEGORY	DOJ REVIEW #	AMOUNT
		TOTAL AMOUNT APPROPRIATED IN CD-67-22 on January 6, 2023				\$ 1,259,879.00
		TOTAL AMOUNT APPROPRIATED IN CJY-57-23 on August 4, 2023				\$ 884,609.00
		TOTAL AMOUNT APPROPRIATED IN CAU-75-23 on August 30, 2023				\$ 2,364,259.00
		TOTAL AMOUNT APPROPRIATED IN NABIO-39-23 on October 17, 2023				\$ 2,558,140.00
Division of Community Development	*Tooh Haltsooi' Chapter	Tooh Haltsooi' Chapter Bathroom Additions, Renovations & Upgrades Project	Division of Community Development	1.14	HK0676	\$ 100,000.00
Division of Community Development	*Gadiiahi/To'Koi Chapter	Gadiiahi/To'Koi Chapter Purchase of Heavy Equipment and Accessories Project	Division of Community Development	6.1	HK0709	\$ 160,000.00
Division of Community Development	*Gadiiahi/To'Koi Chapter	Gadiiahi/To'Koi Chapter Home Renovations & Repairs Project	Division of Community Development	2.18	HK0716	\$ 750,000.00
		<b>UN-ALLOCATED AMOUNT</b>				<b>\$ 725,453.00</b>
					<b>TOTAL:</b>	<b>\$ 8,802,340.00</b>

\*Per CJN-29-22, Section Three (E), the "Navajo Nation Central Government may award funding to LGA-Certified Chapters through sub-recipient agreements to implement and manage specific projects, but shall maintain Administrative Oversight over such funding and Delegate Region Project Plans."





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 #: HK0676

Date & Time Received: 10/20/23 at 14:52

Date & Time of Response: 10/31/23 at 17:00

Entity Requesting FRF: Sheep Springs Chapter

Title of Project: Bathroom Addition, Renovation + Upgrades

Administrative Oversight: Division of Community Development

Amount of Funding Requested: \$100,000.00

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:
1.14, Other Public Health Services

**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: MacArthur Stant

Signature of DOJ Reviewer: MacArthur Stant

Digitally signed by MacArthur Stant  
Date: 2023.10.31 09:38:02 -0600

**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 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 GOVERNANCE-CERTIFIED CHAPTERS**

**Part 1. Identification of parties.**

Governance-Certified Chapter requesting FRF: Sheep Spring Chapter (Tooh Haltsooi) Date prepared: 6/16/23

Chapter's P.O. Drawer i phone & email: 505-732-5408  
 mailing address: Sheep Spring, New Mexico 87364 website (if any): sheepsprings@navajochapters.org

This Form prepared by: Kevin M. Begay, EM phone/email: 505-732-5408  
Kevin Martin Begay, Executive Manager kmbegay@nnchapters.org  
CONTACT PERSON'S name and title CONTACT PERSON'S info

Title and type of Project: Bathroom Addition, Renovation + Upgrades.

Chapter President: Brian T. Yazzie phone & email: 505-732-5408/yazziebrian2436@gmail.com

Chapter Vice-President: Louise Charley phone & email: 505-302-8007/louisecharley74@gmail.com

Chapter Secretary: Adrienne Joe phone & email: 505-360-5138/ajoe@navajo-nsn.gov

Chapter Treasurer: Adrienne Joe phone & email: \_\_\_\_\_

Chapter Manager or CSC: Kevin M. Begay phone & email: 505-879-1636/kmbegay@nnchapters.org

DCD/Chapter ASO: Elizabeth Washburne phone & email: 505-979-1901/eliza-beth@nndcd.org

List types of Subcontractors or Subrecipients that will be paid with FRF (if known): Navajo Contractors, subcontractors and local laborers  
 document attached

Amount of FRF requested: 100,000.00 FRF funding period: 01/01/2023-9/30/2026  
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:

**Bathroom renovation/upgrades to fund the modernization of bathrooms that were built in the 1960 to the 1980s to meet ADA compliance requirements and to assist, elders with accessible bathrooms. The bathroom renovation/upgrades will include remodel, walk-in shower with safety rails, handicap toilet, bathroom sink, replaces floors-walls-fixtures, upgrade water heater, upgrade plumbing, or purchase prefabricated stand-alone bathrooms, as needed. Community homes that have inefficient bathrooms and who are in need will receive the services based off assessments.**

document attached

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

**The ARPA bathroom renovation/upgrades will provide access to sanitizing, daily hygiene care to mitigate Covid-19 and help eliminate unsanitary conditions.**

document attached

(c) 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:

This project will successfully help community members in need of bathroom renovations, upgrades or completion of current bathroom additions. Construction schedules to be based of the community assessments and current needs. Chapter will obligate the funds no later than September 30, 2024 and will fully expend the funds no later than September 30, 2026.

document attached

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

Sheep Springs Chapter with the assistance of DCD ARPA, NNFRF will be the oversite of the bathroom renovation/upgrade project utilizing PEP workers, as well, as certified contractors hired to complete bathroom renovation.

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 maintenance and operations of the bathroom renovations/upgrades will be the responsibility of the bathroom renovation/upgrade recipients(s) after the 1-year construction warranty has ended.

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:

1.14 Other Public Health Services. Bathroom renovation/upgrade will build healthier community environments.

document attached

**Part 3. Additional documents.**

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

Chapter approved resolution for this project.

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: Kevin M. Beary  
signature of Preparer/CONTACT PERSON


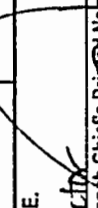
Approved by: Jessie Chapman  
signature of Chapter President (or Vice-President)

Approved by: [Signature]  
signature of Chapter Manager/ CSC

Approved by: [Signature]  
signature of DCD Chapter ASO

Approved to submit for Review: \_\_\_\_\_  
signature of DCD Director

THE NAVAJO NATION  
PROGRAM BUDGET SUMMARY

PART I. Business Unit No.: K-(new)		Program Title: Tooh Hallscoil Council of Naataanii Chapter		Division of Community Development	
Prepared By: Kevin M. Begay		Phone No.: (505) 732-5408		Email Address: sheepsprings@navajochapters.org	
PART II. FUNDING SOURCE(S)		Fiscal Year / Term	Amount	% of Total	
NIN Fiscal Recovery Funds		11/13 - 3/30/16	100,000.00	100%	
PART III. BUDGET SUMMARY					
	Fund Type Code	NINC Original Budget	Approved Budget	Proposed Budget	Difference or Total
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	6	100,000		100,000
9000	Capital Outlay				
9500	Matching Funds				
9500	Indirect Cost				
TOTAL			\$0.00	100,000.00	100,000
PART IV. POSITIONS AND VEHICLES					
Total # of Positions Budgeted:				(D)	(E)
Total # of Vehicles Budgeted:					
PART V. THEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.					
SUBMITTED BY:		APPROVED BY:		AYVA MITCHELL DIRECTOR	
Kevin M. Begay, Chapter Manager		AYVA MITCHELL DIRECTOR		Division Director / Branch Chief's Printed Name	
				Division Director / Branch Chief's Signature and Date	
Program Manager's Printed Name		AYVA MITCHELL DIRECTOR		10/11/2023	
Program Manager's Signature and Date		AYVA MITCHELL DIRECTOR		10/11/2023	

Jaron M. Charley, Department Manager II

PART I. PROGRAM INFORMATION:  
 Business Unit No.: K-(new) Program Name/Title: *Bathroom Additions Renovations and Upg roads*  
 Tooh Hallssooi Council of Naataanii Chapter

PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:  
*Resolution TC-2020-030 Supporting the Fiscal Recovery Fund Request for Project Bathroom Additions.*

PART III. PROGRAM PERFORMANCE CRITERIA:

	1st QTR		2nd QTR		3rd QTR		4th QTR	
	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual
1. Goal Statement: Provide proper sanitation facilities for community members in need. Program Performance Measure/Objective: Assist with bathroom additions for 5 homes.								5
2. Goal Statement:								
3. Goal Statement:								
4. Goal Statement:								
5. Goal Statement:								

1. Goal Statement:  
Provide proper sanitation facilities for community members in need.  
Program Performance Measure/Objective:  
Assist with bathroom additions for 5 homes.

2. Goal Statement:

3. Goal Statement:

4. Goal Statement:

5. Goal Statement:

PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.  
 Kevin M. Begay, Chapter Manager  
 Program Manager's Printed Name: *Kevin M. Begay*  
 Program Manager's Signature and Date: *[Signature]* 10/11/2023  
 Division Director/Branch Chief's Signature and Date: *[Signature]*  
 Division Director/Branch Chief's Printed Name: *Arjan Mutzall, Director*

<b>PART I. PROGRAM INFORMATION:</b> Program Name/Title: <u>Tooh Hailssool Council of Naataanii Chapter</u> Business Unit No.: <u>K-(new)</u>			
<b>PART II. DETAILED BUDGET:</b>			
(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)
8500	Infrastructure (non cap) 8535- Bathroom Additions Provide bathroom additions for families within Tooh Hailssool Chapter community in need.	100,000	100,000
<b>TOTAL</b>		100,000	100,000

THE NAVAJO NATION  
PROJECT BUDGET SCHEDULE

<b>PART I.</b> Business Unit No.: K: (new)		<b>PART II.</b> Project Information														
Project Title: <u>Tooth Hallschool Chapter - Bathroom Addition, Renovations &amp; Upgrades</u>		Project Type: <u>Bathroom Additions</u>														
Project Description: <u>Renovate and repair Bathrooms for Community Members</u>		Planned Start Date: <u>1/1/2023</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		Planned End Date: <u>9/30/2026</u>														
		Project Manager: <u>Tooth Hallschool Chapter</u>														
<b>PART III.</b> List Project Task separately, such as Plan, Design, Construct, Equip or Furnish.																
Field home assessments Planning Design Construction Equip or Furnish (if needed) Close out project - clean up	FY 2023		FY 2024		Date		Expected Completion Date if project exceeds 8 FY Qtrs.									
	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			
	<b>PART V.</b>							PROJECT TOTAL								
Expected Quarterly Expenditures																
\$							\$		100,000.00							

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





P.O. Box Drawer I, Sheepsprings, New Mexico 87364 Phone: (505) 732-5408 Fax: (505) 732-5409

Email: sheepsprings@navajochapters.org

**RESOLUTION OF THE TOOH HALTSOOI COUNCIL OF NAATAANII CHAPTER**

**Supporting the Fiscal Recovery Fund Request for Project Bathroom Additions**

**RESOLUTION TC- 2023.-030**

**Whereas:**

1. Pursuant to 26 N.N.C Section 3 (A) the Tooh Haltsooi Council of Naataanii Chapter is a duly recognized Certified Chapter of the Navajo Nation Government as of August 24, 2007 per TCDCAU-23-07, as listed at 11 N.N.C., part 1 of section 10; and
2. Pursuant to 26 N.N.C., Section 1 (B) the Tooh Haltsooi Council of Naataanii Chapter is vested with the authority to review all matters affecting the community and to make appropriated correction when necessary and make recommendations to the Navajo Nation and other local agencies for appropriate actions; and
3. Pursuant to Title 26, N.N.C., Section 3 (A) of The Navajo Nation Local Governance Act, the Tooh Haltsooi Council of Naataanii Chapter exists as a local unit government, recognized as a political subdivision of the Navajo Nation, authorized to review all matters affecting the community; and
4. The Tooh Haltsooi Council of Naataanii Chapter recognize Community homes that have inefficient bathrooms and who are in need will receive the services based off assessments; and.
5. The Tooh Haltsooi Council of Naataanii Chapter the need for bathroom renovation/upgrades to fund the modernization of bathrooms that were in the 1960 to the 1980 to meet ADA compliance requirements and to assist, elders with acc bathrooms. community members to receive Home Renovations services.

**6. NOW, THEREFORE BE IT RESOLVED THAT:**

The Tooh Haltsooi Council of Naataanii Chapter Hereby Supports the Fiscal Recovery Fund Request for Project Bathroom Additions.

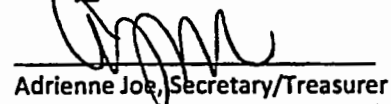
**CERTIFICATION**

We, hereby, certify that the foregoing Resolution was considered by the Tooh Haltsooi Council of Naataanii Chapter at a duly called meeting in Sheep Springs, New Mexico at which a quorum of Chapter Member was present and that the same as passed by a vote of 9 in favor 0, Opposed 1, Abstained on this 19<sup>th</sup> day of MAY, 2023.

Motion by Earnest Smith

  
Louise Charley, Delegate President

Second by Franklin Sandman

  
Adrienne Joe, Secretary/Treasurer

Brian T. Yazzie  
Chapter President

Louise Charley  
Vice President

Adrienne Joe  
Sec./Treasurer

Jimson Bryant  
Grazing Official

Hon. Amber K. Crotty  
Council Delegate

Sheep Springs Chapter  
Housing Discretionary Fund Assistance Program

**CHECKLIST OF REQUIRED DOCUMENTS**

- \_\_\_\_\_ 1. Housing Application
- \_\_\_\_\_ 2. Signed Permission to Enter Premises Form
- \_\_\_\_\_ 3. Signed Release of Information Form
- \_\_\_\_\_ 4. A Map of Property Location
- \_\_\_\_\_ 5. Copy of Social Security Card
- \_\_\_\_\_ 6. Copy of Voter Registration or Verify by Official Voter Registry
- \_\_\_\_\_ 7. Copy of Certificate of Indian Blood
- \_\_\_\_\_ 8. Point System Form Signed
- \_\_\_\_\_ 9. Documentation from other Agencies verifying housing need.  
(Optional)
- \_\_\_\_\_ 10. Proof of Income Verification
- \_\_\_\_\_ 11. Proof of Land ownership:
  - Homesite Lease
  - Land use Permit
  - Grazing Permit
- \_\_\_\_\_ 12. Income Verification

Documents Verified by: \_\_\_\_\_ Date: \_\_\_\_\_

TOOH HALTSOOI COUNCIL OF NAATAANII CHAPTER  
P.O. Drawer 1  
Sheep Springs, NM 87364

Housing Discretionary Fund Assistance Program  
PERMISSION TO ENTER PREMISES

TO THE BUILDING OWNER

Your building is being considered for renovation under the Tooh Haltsooi Council of Naataanii Chapter/  
Housing Discretionary Assistance Program. This program is funded by the Tooh Haltsooi Council of  
Naataanii Chapter, under Housing Discretionary Funds and administered by the Tooh Haltsooi Council of  
Naataanii Chapter.

PERMISSION TO ENTER PREMISES

I, as owner/ authorized agent for the building located at, \_\_\_\_\_  
\_\_\_\_\_ have read and understand the above and hereby grant permission for representative of  
Tooh Haltsooi Council of Naataanii Chapter to enter the premises when I am present for the purposes of  
collecting eligibility documentation from the residents and conducting a work plan which may include an  
assessment for housing renovation.

NAME: \_\_\_\_\_  
Client

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
Chapter Manager

DATE: \_\_\_\_\_

TOOH HALTSOOI COUNCIL OF NAATAANII CHAPTER  
P.O Drawer I  
Sheep Springs, NM 87364

**Housing Discretionary Fund Assistance Program  
AUTHORIZATION FOR RELEASE OF INFORMATION**

I, \_\_\_\_\_, hereby authorize the Tooh Haltsooi Council of Naataanii Chapter Housing Assistance Program to obtain all necessary information for completion of my application for housing assistance including information on my interest on land and household income. I understand and acknowledge this information will be used in determining my eligibility and extent of Housing Assistance through the Tooh Haltsooi Council of Naataanii Chapter or other housing project sources.

SIGNATURE: \_\_\_\_\_  
Applicant

\_\_\_\_\_  
Co-Applicant

\_\_\_\_\_  
Date

TOOH HALTSOOI COUNCIL OF NAATAANII CHAPTER  
P.O. Drawer I  
Sheep Springs, NM 87364

HOUSING DISCRETIONARY FUND ASSISTANCE PROGRAM  
Application

All questions in this application must be answered.

Applicant's Name: _____	Telephone No. _____
Census Number: _____	Work or Msg. _____
Spouse's Name: _____	Work Number: _____
Census Number: _____	
Applicant's Mailing Address: _____	Chapter Enrolled at: _____
City: _____	
State: _____ Zip code: _____	

Type of Residence	
<input type="checkbox"/>	Room
<input type="checkbox"/>	Owner Occupied
<input type="checkbox"/>	Rental Unit
<input type="checkbox"/>	Single Family
<input type="checkbox"/>	Mobile Home
<input type="checkbox"/>	Subsidized Housing
<input type="checkbox"/>	Multiple Dwelling

Type of Primary Heating	
<input type="checkbox"/>	Wood
<input type="checkbox"/>	Coal
<input type="checkbox"/>	Kerosene
<input type="checkbox"/>	Natural Gas
<input type="checkbox"/>	Electric
<input type="checkbox"/>	Propane
<input type="checkbox"/>	Other
Average Monthly Heating Bill (before): \$ _____	
(after): \$ _____	
Cost of B.T.U. saved: _____	
Comments: _____	
_____	
_____	

INCOME VERIFICATION OF HOUSING UNIT						
Name of each household member including self	Age	Sex	Social Security No.	Relationship to Head of Household	Gross Monthly Income	Source of Income

Note: An elderly person is a person 65 years old age or older. Determination whether a resident in the household is handicapped can be made in any if the following (1) They provide a copy of a letter from the Veteran's Administration that is a percentage of disability letter or (2) The Social Security benefit verification letter under section 1e.10 indicates payments are for disability or (3) Written determination from Federal, State, or other agency providing assistance for handicapped Person or (4) The Sub grantee observes a visible handicap.

Tooh Haltsooi Council of Naataanii Chapter Use Only	
Income Guidelines for a household of _____ members is \$ _____.	
On the basis of the above information, this household is: ELIGIBLE / NOT ELIGIBLE.	
Reason for ineligibility: _____	
Intake Worker's Signature: _____	Date: _____

**TYPE OF LABOR TO BE UTILIZED:** Tooh Haltsooi Council of Naataanii Chapter Use only/ projected hours per project

- Public Employment Program (PEP): \_\_\_\_\_
- Client Self-Help: \_\_\_\_\_
- Church Group: \_\_\_\_\_
- Contractor: \_\_\_\_\_
- Other: \_\_\_\_\_

**IF THE APPLICANT IS RENTING, THE TOO H HALT SOOI COUNCIL OF NAATAANII CHAPTER MUST USE PERMISSION FORM AND OWNER AGREEMENT, IF APPLICANT IS HOME OWNER, COMPLETE THE FOLLOWING.**

**HOMEOWNER CERTIFICATION**

I/ We, \_\_\_\_\_, certify that I/ we am/ are the owner's of the property at \_\_\_\_\_ located on the Tooh Haltsooi Council of Naataanii Chapter jurisdiction.

Land ownership can be verified through (CIRCLE ONE): Homesite lease / Land Use Permit / Grazing Permit / Other

**CERTIFICATION**

I, as a Chapter Employee of Tooh Haltsooi Council of Naataanii Chapter and with vested authority of act on community matters, have reviewed the information stated above which is correct to the best of our knowledge and hereby certify this document accordingly on this \_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_.

Chapter Staff's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
NAME AND TITLE

**HOUSING ASSISTANCE APPLICATION**

I, subscribe and affirm, under the penalties of law, that the statements made in this application for Housing Assistance (including statements made in any accompanying papers) have been examined by me and to the best of my knowledge and belief are true and correct. Prior to any construction, I agree to notify the Chapter of any changes in the information in this application. I understand that by signing this application, I consent to any other inquiry to verify of confirm the information I have given.

The potential assistance will have no effect upon my Social Security, public assistance, or any other income I receive. The construction work done will not obligate me financially and no lien or mortgage will be placed on the property, unless false or inaccurate information has been provided to make me ineligible for this assistance. I will be held liable for any injury of damages occurring on my property which is the result of my negligence of malfeasance. I certify that I have given my permission to allow work and monitoring or work on the property listed in this application. I understand that it is the dwelling occupant and/or owner's responsibility to discover and correct unsafe or non-compliant conditions which exist apart from the construction work.

I understand that this application for Housing Assistance does not guarantee that assistance will be granted, but will be used in determining eligibility for the program. Whether or not an eligible applicant will be provided assistance will depend in part upon the applications received, the remaining available funds, and the priorities to be met by the Housing Discretionary Assistance Program.

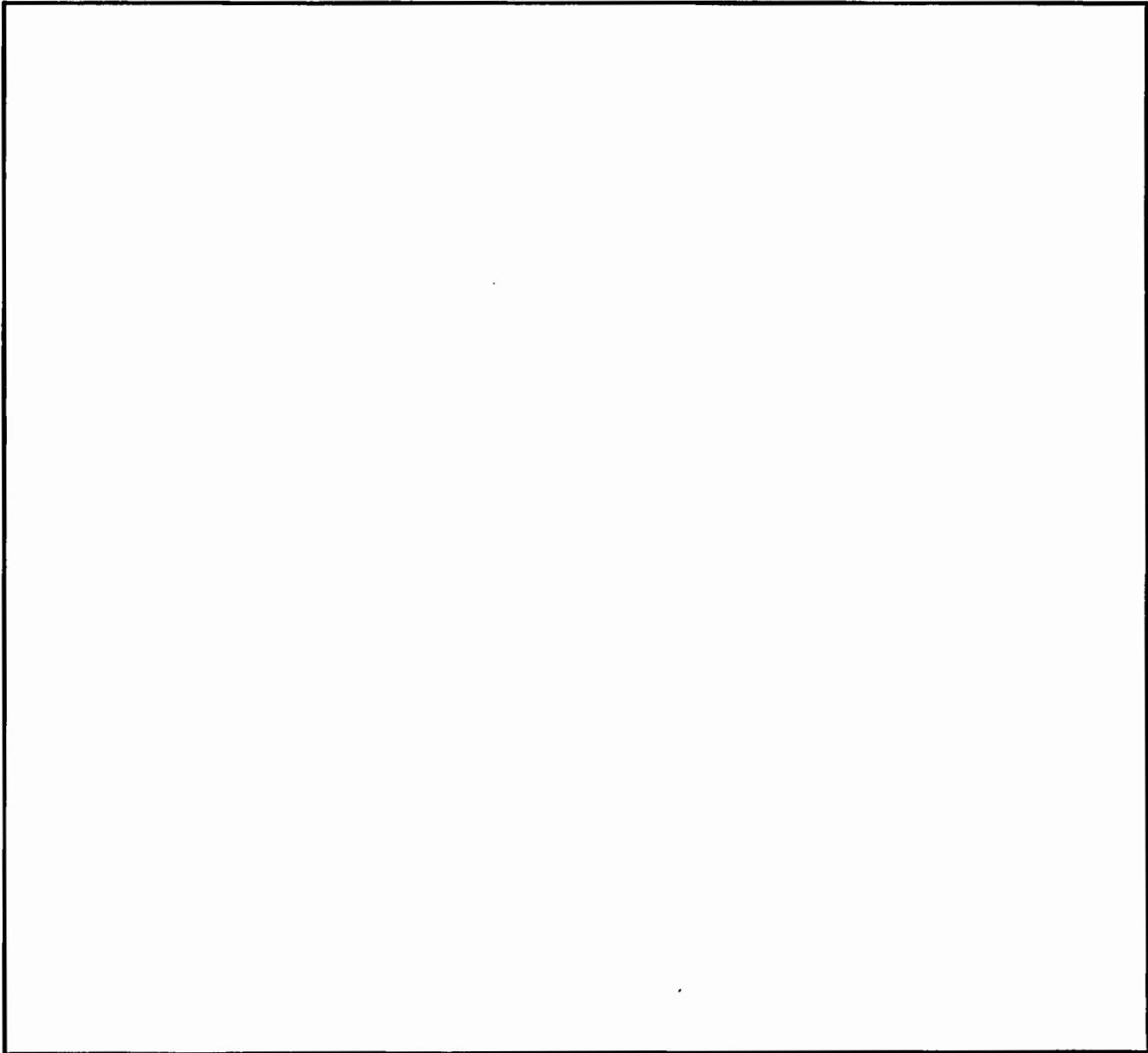
APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICANT'S REPRESENTATIVE: \_\_\_\_\_ DATE: \_\_\_\_\_

TOOH HALTSOOI COUNCIL OF NAATAANII CHAPTER  
P.O. Drawer I  
Sheep Springs, NM 87364

Housing Discretionary Fund Assistance Program

MAP TO PROPERTY  
Project site locations



APPLICANT'S NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

TOOH HALTSOOI COUNCIL OF NAATAANII CHAPTER  
P.O. Drawer I  
Sheep Springs, NM 87364

Housing Discretionary Fund Assistance Program  
Point System Sheet

Applicant's Name: \_\_\_\_\_

Registered Voter for more than 1 year 20 points \_\_\_\_\_  
1 month- 5 months= 10  
6 months and over= 20

Household Income for entire household: 10 points \_\_\_\_\_  
(\$1,000.00 or less income maximum per month)

Family Size 15 points \_\_\_\_\_  
1-3 people= 5  
4-5 people= 10  
Over 5 people= 15

Overcrowded living conditions 10 points \_\_\_\_\_

Unsanitary of unsafe living conditions 15 points \_\_\_\_\_

Elderly, handicapped, or disable 15 points \_\_\_\_\_

Referral from other agencies 15 points \_\_\_\_\_

Got help from the Chapter or other agency (- 10 points) \_\_\_\_\_

POINT STATUS

<input type="checkbox"/>	0-50	Partial Minor Repair/ Renovation Assistance up to \$500.00	
<input type="checkbox"/>	51-80	Partial Minor Repair/ Renovation Assistance up to \$1,000.00	100 TOTAL _____
<input type="checkbox"/>	81-100	Eligible for Major Repair/ Renovation for Materials up to \$2,000.00	

SIGNATURE: \_\_\_\_\_  
Chapter Manager

DATE: \_\_\_\_\_









1841101	Complete																<p>[RECEIVED] - COMPLETE VSL Application [RECEIVED] - Need Board of Ambulance [RECEIVED] - Land Survey Certificate [RECEIVED] - Environmental Review Form [RECEIVED] - Environmental Review Form [RECEIVED] - 31.50 Memory Order - Biological [RECEIVED] - Need Board of Ambulance</p> <p>Board of Ambulance</p>
1841102	Complete																<p>[RECEIVED] - COMPLETE VSL Application [RECEIVED] - Need Board of Ambulance [RECEIVED] - Land Survey Certificate [RECEIVED] - Environmental Review Form [RECEIVED] - Environmental Review Form [RECEIVED] - 31.50 Memory Order - Biological [RECEIVED] - Need Board of Ambulance</p> <p>Board of Ambulance</p>
1841103	Complete																<p>[RECEIVED] - COMPLETE VSL Application [RECEIVED] - Need Board of Ambulance [RECEIVED] - Land Survey Certificate [RECEIVED] - Environmental Review Form [RECEIVED] - Environmental Review Form [RECEIVED] - 31.50 Memory Order - Biological [RECEIVED] - Need Board of Ambulance</p> <p>Board of Ambulance</p>
1841104	Complete																<p>[RECEIVED] - COMPLETE VSL Application [RECEIVED] - Need Board of Ambulance [RECEIVED] - Land Survey Certificate [RECEIVED] - Environmental Review Form [RECEIVED] - Environmental Review Form [RECEIVED] - 31.50 Memory Order - Biological [RECEIVED] - Need Board of Ambulance</p> <p>Board of Ambulance</p>
1841105	Complete																<p>[RECEIVED] - COMPLETE VSL Application [RECEIVED] - Need Board of Ambulance [RECEIVED] - Land Survey Certificate [RECEIVED] - Environmental Review Form [RECEIVED] - Environmental Review Form [RECEIVED] - 31.50 Memory Order - Biological [RECEIVED] - Need Board of Ambulance</p> <p>Board of Ambulance</p>
1841106	Complete																<p>[RECEIVED] - COMPLETE VSL Application [RECEIVED] - Need Board of Ambulance [RECEIVED] - Land Survey Certificate [RECEIVED] - Environmental Review Form [RECEIVED] - Environmental Review Form [RECEIVED] - 31.50 Memory Order - Biological [RECEIVED] - Need Board of Ambulance</p> <p>Board of Ambulance</p>
1841107	Complete																<p>[RECEIVED] - COMPLETE VSL Application [RECEIVED] - Need Board of Ambulance [RECEIVED] - Land Survey Certificate [RECEIVED] - Environmental Review Form [RECEIVED] - Environmental Review Form [RECEIVED] - 31.50 Memory Order - Biological [RECEIVED] - Need Board of Ambulance</p> <p>Board of Ambulance</p>
1841108	Complete																<p>[RECEIVED] - COMPLETE VSL Application [RECEIVED] - Need Board of Ambulance [RECEIVED] - Land Survey Certificate [RECEIVED] - Environmental Review Form [RECEIVED] - Environmental Review Form [RECEIVED] - 31.50 Memory Order - Biological [RECEIVED] - Need Board of Ambulance</p> <p>Board of Ambulance</p>









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 #: HK 0709

Date & Time Received: 12/12/23 at 9:24

Date & Time of Response: 12/18/23 at 17:00

Entity Requesting FRF: Gadii'ahi / To'koi Chapter

Title of Project: Heavy Equipment & Accessories

Administrative Oversight: Division of Community Development

Amount of Funding Requested: \$160,000.00

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:
6.1, Provision of Government Services




**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: Veronica Blackhat, Asst Attorney General, NRU

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: Gad ii'ahi/To'koi Chapter Date prepared: 08/07/23

Chapter's mailing address: PO Box 1318, Shiprock NM 87420 phone/email: (505)635.0620  
website (if any): gadiiahi.navajochapters.org

This Form prepared by: Amber Kanazbah Crotty phone/email: acrotty@navajo-nsn.gov  
Council Delegate

CHAPTER CONTACT PERSON'S name and title

Title and type of Project: Heavy Equipment & Accessories

Chapter President: Harry Descheene phone & email: 505.635.0620, hdescheene@hotmail.com

Chapter Vice-President: Arnold Nelson phone & email: 505.635.0620, acenavajo@yahoo.com

Chapter Secretary: Sylvia Tyler phone & email: 505.635.0620, styler3live@gmail.com

Chapter Treasurer: Sylvia Tyler phone & email: 505.635.0620, styler3live@gmail.com

Chapter Manager or CSC: Lynda Hayes phone & email: 505.635.0620, bylillee1@gmail.com

DCD/Chapter ASO: Danielle Redhouse phone & email: (505)368.1024, dredhouse@nndcd.org

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

document attached

Amount of FRF requested: \$169,000. FRF funding period: 1/1/2023-12/30/2026

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 purchase of the tractor with field accessories, and any possible administrative costs (insurance, maintenance etc.) will be utilized to produce local food to offset any future production limits as experienced during the COVID-19 pandemic. The tractor will assist in offsetting any financial hardships for local farmers caused by the pandemic. Locally farmed produce will improve community members overall health conditions to lower COVID-19 risk and long term affects.

document attached

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

To assist local farmers and the community of Gad ii'ahi/To'koi Chapter in producing local crops, increasing local revenue, and revitalizing the agricultural economy.

document attached

APPENDIX A

(c) 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:

Gad ii'ahi/To'koi Chapter will work the FRF office in purchasing the Tractor and equipment once funds are available.

document attached

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

Gad ii'ahi/To'koi Chapter Coordinator-Lynda Hayes will work with the FRF, DCD and NNOOC to secure the purchase.

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:

Gad ii'ahi/To'koi Chapter will responsible for the upkeep of the tractor and accessories.

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 Gad ii'ahi/To'koi Chapter will utilize the Tractor and accessories to assist community members in farming needs to become healthier and self-sufficient to lower their risk for further health complications.

document attached

**Part 3. Additional documents.**

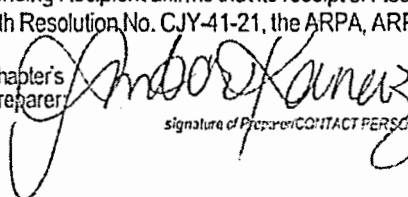
List here all additional supporting documents attached to this FRF Expenditure Plan (or indicate N/A):

Quotes from Watson Tractor included.

**Part 4. Affirmation by Funding Recipient.**

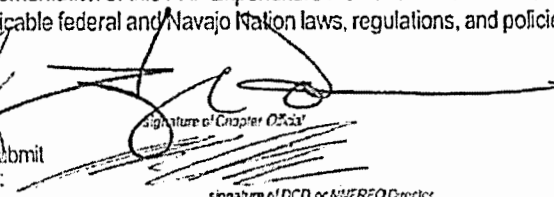
Funding Recipient affirms that its receipt of Fiscal Recovery Funds and the implementation of this FRF Expenditure Plan shall be in accordance with Resolution No. CJY-41-21, the ARPA, ARPA Regulations, and with all applicable federal and Navajo Nation laws, regulations, and policies:

Chapter's  
Preparer

  
signature of Preparer/CONTACT PERSON

Approved By:

Approved to submit  
for Review:

  
signature of Chapter Director

signature of DCD or NINRFODirector

PART I. Business Unit No.: <u>NEW</u>		Program Title: <u>Heavy Equipment &amp; Accessories</u>		Division/Branch: <u>Executive / DCD</u>	
Prepared By: <u>Amber Kanazbah Croffy</u>		Phone No.: <u>505.535.0620</u>		Email Address: <u>acrotty@navajo-nsn.gov</u>	
PART II. FUNDING SOURCE(S)		PART III. BUDGET SUMMARY		Fund Type Code	
Fiscal Year / Term: <u>1/1/2023 - 12/31/2026</u> Amount: <u>169,000.00</u> % of Total: <u>100%</u>		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 9500 Matching Funds 9500 Indirect Cost		(A) NNC Approved Original Budget (B) Proposed Budget (C) Difference or Total	
TOTAL: <u>169,000.00</u>		TOTAL: <u>169,000.00</u>		TOTAL: <u>169,000.00</u>	
PART IV. POSITIONS AND VEHICLES		Total # of Positions Budgeted: <u>0</u>		Total # of Vehicles Budgeted: <u>0</u>	
PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.					
SUBMITTED BY: <u>Patricia D. Begay</u> Patricia Begay, Program Manager (D)		APPROVED BY: <u>Calvin Castillo</u> Calvin Castillo, Director		Division Director / Branch Chief's Printed Name	
Program Manager's Printed Name		Division Director / Branch Chief's Signature and Date		<u>8/17/2023</u> Division Director / Branch Chief's Signature and Date	

PART I. PROGRAM INFORMATION:

Business Unit No.: NEW Program Name/Title: Gad-ii'ahii/To'kai / Heavy Equipment & Accessories

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

To purchase heavy duty equipment for community use to mitigate Covid.

PART III. PROGRAM PERFORMANCE CRITERIA:

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

1. Goal Statement: Purchase Tractor and Accessories

Program Performance Measure/Objective:

Improve Community Members Health, Local Agriculture Economy & decrease at-risk health complications.

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.

Patricia Beqay, Program Manager (D)

Program Manager's Printed Name

Patricia D Beqay 08/07/2023

Program Manager's Signature and Date

Calvin Castillo, Director

Division Director/Branch Chief's Printed Name

[Signature] 8/7/2023

Division Director/Branch Chief's Signature and Date

PART I. PROGRAM INFORMATION:			
Program Name/Title: <u>Gadil'a hi / To'Kai / Heavy Equipment &amp; Accessories</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)
6500	Contractual Services 6980- Purchase of Heavy Equipment Tractor and Accessories	160,000	160,000
<b>TOTAL</b>		<b>160,000</b>	<b>160,000</b>

**THE NAVAJO NATION  
PROJECT BUDGET SCHEDULE**

<b>PART I. Business Unit No.:</b> NEW	<b>PART II. Project Information</b>
<b>Project Title:</b> Gadil'ah/To'kol Chapter - Heavy Equipment & Accessories	<b>Project Type:</b> Equipment
<b>Project Description:</b> To purchase heavy equipment and accessories for chapter and community	<b>Planned Start Date:</b> 1/1/2023
	<b>Planned End Date:</b> 12/30/2026
	<b>Project Manager:</b> Lynda Hayes
<b>Check one box:</b> <input checked="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 2023						FY 2024							
	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	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	A M J	Jul A S		
11/23 - 1/31/23 Gather quotes RFB on equipment purchase	X	X X	X X										12/30/2026	
10/1/26 - 12/13/26 Closeout paperwork, quality check project, final payments sent out.						X	X X	X X	X X	X X	X X	X X		
<b>PART V.</b>	-												<b>PROJECT TOTAL</b>	
Expected Quarterly Expenditures			\$ 160,000.00					\$					\$ 160,000.00	

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

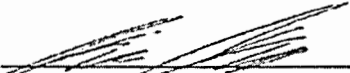


**The Navajo Nation** **DR. BUU NYGREN** *PRESIDENT*  
**Yideeskáadi Nitsáhákees** **RICHELLE MONTOYA** *VICE PRESIDENT*

DCDA-M23087

**MEMORANDUM**

**TO :** DCD Departments and Programs  
All Concerned

**FROM :**   
Calvin Castillo, Division Director  
Division of Community Development

**DATE :** July 21, 2023

**SUBJECT :** Delegation of Authority for Administrative Service Centers

Effective today, Ms. Patricia D. Begay is delegated the authority as the Department Manager II for the Administrative Services Centers. She is responsible for managing and overseeing the department. This delegation is effective until further notice.

Your assistance and cooperation is appreciated.

**ACKNOWLEDGEMENT:**



Patricia D. Begay, Senior Programs and Projects Specialist  
Administrative Service Centers  
Division of Community Development

c





1380 San Juan Blvd Farmington, NM 87401  
T: (505) 327-5012 F: (505) 325-1317 www.watsontractor.net

QUOTATION

To: Gadiiahi Chapter House  
Po Box 1318  
Shiprock, NM 87420

Date: 8-2-2023  
FOB: Watson Tractor  
Delivery Date: In Stock

Attention: Mr. Ronney Dec & Delegate Amber Crotty (Quotation Void After 10 Days)

---

1 Each New Holland Hayliner 25 Twine Baler Equipped With 75" Pickup & 156 Tines,  
8-Twine Ball Capacity, 75 HP Requirement. Bale  $\frac{1}{4}$  Turn Attachment. Spring Tension.  
Plus All Standard Equipment.

Purchase Price:

\$ 42,500.00

Warranty:

12 Months Full Factory Warranty, FOB Our Watson Facility.

  
By: Daran Tyson

Accepted By: Ronney Dec

Order Accepted By: Watson Tractor, Inc.



1380 San Juan Blvd  
Farmington, NM 87401  
T: (505) 327-5012  
F: (505) 325-1317  
www.watsontractor.net

QUOTATION

To: Gadiiahi Chapter  
Po Box 1318  
Shiprock, NM 87420

Date: 08-02-2023  
FOB: Watson Farmington  
Delivery Date: In Stock  
(Quotation Void After 10 Days)

Attn: Mr. Ronney Dee & Delegate Amber Crotty

---

1 Each New 2023 New Holland Workmaster 75 T4A Tractor Equipped With Fully Heated & Pressurized Cab With A/C, Stereo, Deluxe Air Ride Seat. 4 x 4, 75 HP, 11.2 x 24 6PR Front Tires, 16.9-30 Rear Tires, 12 x 12 Transmission With Power Shuttle, 4-110 Lb. Rear Wheel Weights, Ground Level 3 Point Control Option, Front Loader With Universal Coupler, 72" HD Bucket, Flexible 3 Point Ends, Limited Slip Front Axle, 540 RPM PTO, Rear Differential Lock, 2 External Mirrors, Full Light & Instrumentation Package. Plus All Standard Equipment.

Governmental Purchase Price:

\$ 60,000.00

Warranty:

24 Months or 2,000 Hours Factory Full Machine Warranty. And An Additional 36 Months Or 3,000 Hours Powertrain Plus Hydraulics Extended Warranty, Whichever Occurs First. FOB Our Watson Facility.

  
By: Daran Tyson

Accepted By: Ronney Dee

Order Accepted By: Watson Tractor



1380 San Juan Blvd Farmington, NM 87401  
T: (505) 327-5012 F: (505) 325-1317 www.watsontractor.net

### QUOTATION

To: Gadiiahi Chapter House  
Po Box 1318  
Shiprock, NM 87420

Date: 8-2-2023  
FOB: Watson Tractor  
Delivery Date: 3-4 Weeks ARO

Attention: Mr. Ronney Dee & Delegate Amber Crotty (Quotation Void After 10 Days)

---

1 Each New 2023 Kasco 8' 3 Pt. HAYMASTER Min. Till Seed Drill Equipped  
With Cat. I & II Hitch, 6" Spacing. Plus All Standard Equipment.

Governmental Purchase Price: \$ 20,000.00

1 Each New Cole 4 Row Corn Planter, Plus All Standard Equipment.

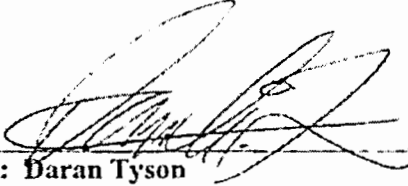
Governmental Purchase Price: \$ 20,000.00

1 Each New Cimarron 3 Pt. 55 Gallon Sprayer. Plus All Standard Equipment.

Governmental Purchase Price: \$ 3,000.00

Warranty:

12 Months Full Factory Warranty, FOB Our Watson Facility.

  
By: Daran Tyson

Accepted By: Ronney Dee

Order Accepted By: Watson Tractor, Inc.



**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 #: HK 0716

Date & Time Received: 12/13/23 at 09:39

Date & Time of Response: 12-19-23 at 1600

Entity Requesting FRF: Gad ii'ahi/To'koi Chapter

Title of Project: Home Renovations & Repairs

Administrative Oversight: Division of Community Development

Amount of Funding Requested: \$750,000

**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: \_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

Name of DOJ Reviewer: Lorenzo Curley

Signature of DOJ Reviewer: *Lorenzo Curley*

**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 I, 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: Gad ii'ahi/To'koi Chapter Date prepared: 08/07/23

Chapter's mailing address: PO Box 1318, Shiprock NM 87420 phone/email: (505)635.0620  
website (if any): gadiiahi.navajochapters.org

This Form prepared by: Amber Kanazbah Crotty phone/email: acrotty@navajo-nsn.gov  
Council Delegate

*CHAPTER CONTACT PERSON'S name and title*

Title and type of Project: Home Renovations & Repairs

Chapter President: Harry Descheene phone & email: 505.635.0620, hdescheene@hotmail.com

Chapter Vice-President: Arnold Nelson phone & email: 505.635.0620, acenavajo@yahoo.com

Chapter Secretary: Sylvia Tyler phone & email: 505.635.0620, styler3live@gmail.com

Chapter Treasurer: Sylvia Tyler phone & email: 505.635.0620, styler3live@gmail.com

Chapter Manager or CSC: Lynda Hayes phone & email: 505.635.0620, bylillee1@gmail.com

DCD/Chapter ASO: Danielle Redhouse phone & email: (505)368.1024, dredhouse@nndcd.org

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

document attached

Amount of FRF requested: \$750,000.00 FRF funding period: 1/1/2023-12/30/2026  
*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 Home Renovation & Repair project will assist 25-30 local community members in the Gad ii'ahi/To'koi Chapter depending on the needs. Each home will be assessed and evaluated to determine the type of work needed. It may include exterior repair and or replacement of Roofs, Walls, Windows, Doors, Painting, etc. Interior work may include ceiling, walls, floors, doors, electrical, plumbing, kitchen, kitchen appliances, heating stoves, and or ADA accessibility- based on needs interior/exterior.

document attached

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

To assist community members of Gad ii'ahi/To'koi Chapter who live in substandard and or damaged homes by improving their quality of lives, improving their homes, and providing a safe/sanitary home for community members.

document attached

**APPENDIX A**

(c) 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:

Gad ii'ahi/To'koi Chapter will work the assigned IDIQ firm, and contractors to complete the project.

document attached

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

Gad ii'ahi/To'koi Chapter Coordinator-Lynda Hayes will work with the FRF, DCD, IDIQ Firm, and contractors

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 upkeep and maintenance of their 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:

2.18; Housing Support: To assist community members living in substandard and or damaged homes by improving their quality of lives, improving their homes, and providing a safe/sanitary home for community members.

document attached

**Part 3. Additional documents.**

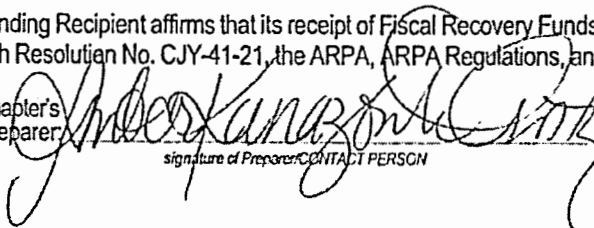
List here all additional supporting documents attached to this FRF Expenditure Plan (or indicate N/A):

Housing Assesment Form-

**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 Preparer: CONTACT PERSON

Approved by:



Approved to submit for Review:

  
Signature of Chapter Coordinator

signature of DCD or NNFRFO Director

<b>PART I.</b> Business Unit No.: <u>NEW</u>		Program Title: <u>Home Renovations &amp; Repairs</u>		Division/Branch: <u>Gad il'lah/To'kol Chapter</u>	
Prepared By: <u>Amber Kanabath Crotty</u>		Phone No.: <u>505.635.0620</u>		Email Address: <u>acrotty@navajo-nsn.gov</u>	
PART II. FUNDING SOURCE(S)	Fiscal Year /Term	Amount	% of Total	PART III. BUDGET SUMMARY	
11/2023-9/30/2026	11/2023-9/30/2026	750,000.00	100%	Fund Type Code	(A) Approved Original Budget
					(B) Proposed Budget
					(C) Difference or Total
				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	750,000
				7000 Special Transactions	
				8000 Public Assistance	
				9000 Capital Outlay	
				9500 Matching Funds	
				9500 Indirect Cost	
				<b>TOTAL</b>	<b>750,000.00</b>
					<b>750,000</b>
				<b>PART IV. POSITIONS AND VEHICLES</b>	
				(D)	(E)
				Total # of Positions Budgeted:	0
				Total # of Vehicles Budgeted:	0
<b>PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.</b>					
<b>SUBMITTED BY:</b>		<b>APPROVED BY:</b>			
<u>Patricia Begay</u> Program Manager's Printed Name		<u>Calvin Castillo</u> Director		<u>Calvin Castillo</u> Division Director / Branch Chief's Printed Name	
<u>Patricia D Boyan</u> Program Manager's Signature and Date		<u>08/07/2023</u>		<u>8/7/2023</u> Division Director / Branch Chief's Signature and Date	



<b>PART I. PROGRAM INFORMATION:</b>		<b>Home Renovations &amp; Repairs</b>							
Business Unit No.:	NEW	Program Name/Title:							
<b>PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:</b>									
<b>PART III. PROGRAM PERFORMANCE CRITERIA:</b>									
1. Goal Statement: Assist 25-30 community members of Gad Il'ah/To'kol Chapter in home renovations and repairs		1st QTR		2nd QTR		3rd QTR		4th QTR	
		Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual
				10		10		10	
Program Performance Measure/Objective: Improve Community Members Well-Being, homes, health and sanitation.									
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:									
<b>PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.</b>									
		Patricia Begay, Program Manager (D)		Calvin Castillo, Director		Division Director/Branch Chief's Printed Name			
						8/7/2023		Division Director/Branch Chief's Signature and Date	
		08/07/2023							
		Program Manager's Signature and Date		Program Manager's Printed Name		Division Director/Branch Chief's Signature and Date			

PART I. PROGRAM INFORMATION:			
Program Name/Title: _____		Business Unit No.: _____	
		NEW	
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	Contractual Services 6980- Home Renovations & Repairs for Gad I'ah/To'kol Chapter Community Members	750,000	750,000
<b>TOTAL</b>		<b>750,000</b>	<b>750,000</b>

# Gad ii'ahi/To'koi Chapter Community Assessment- 2023

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	Yes	No	Comments
<i>Land Use Permit</i>			
<i>Do you irrigate for the farm?</i>			
<i>Do you plant on the farm?</i>			
<i>Livestock (Horses, Cattle, Sheep, Etc.)</i>			
<i>Haul Water for Livestock? From Where?</i>			
<i>Grazing Permit?</i>			
<i>Is the Grazing Permit valid?</i>			
<i>Current Tally Count:</i>			
<i>Home Site Lease for Current home?</i>			

**Household Information**

**Do you have a copy of the homesite lease?**

<b>Name:</b>	<b>Gender:</b>	<b>Age:</b>	<b>In School:</b>	<b>Grade Level Completed:</b>	<b>Tribe Affiliation:</b>	<b>Attend Which School:</b>	<b>Registered Voter:</b>	<b>Disabled:</b>	<b>Veteran:</b>	<b>Employed:</b>

**Additional**

**Living Conditions**

**Heating Conditions**

How do you heat your home:

	<b>Yes</b>	<b>No</b>
<b>Electric</b>		
<b>Water</b>		
<b>Internet</b>		
<b>Septic Tank</b>		
<b>Cistern</b>		
<b>Solar</b>		

Does your home have the following utilities:

	<b>Yes</b>	<b>No</b>
<b>Firewood Stove</b>		
<b>Coal Stove</b>		
<b>Stove Pellet Stove</b>		
<b>Propane</b>		

Do you or your family have the following:

Do you have any of the following:

	<b>Yes</b>	<b>No</b>	<b>Comments</b>

<i>Family Cemetery- Legally Withdrawn?</i>			
<i>Home Garden</i>			
<i>Family Emergency Plan &amp; Supplies</i>			
<i>Good Cell Service</i>			
<i>Cabin in the Mountains</i>			
<i>Do you participate In Chapter Meetings?</i>			
<i>Do you know what the Chapter Subcommittees are?</i>			

**(3) recommendations of services that you feel are most needed in this community and why are they needed:**

- 

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**Official Use Below:**

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Interviewer: \_\_\_\_\_

Date: \_\_\_\_\_




**The Navajo Nation** **DR. BUU NYGREN** *PRESIDENT*  
**Yideeskáądi Nitsáhákees** **RICHELLE MONTOYA** *VICE PRESIDENT*

DCDA-M23087

**MEMORANDUM**

**TO :** DCD Departments and Programs  
All Concerned

**FROM :**   
Calvin Castillo, Division Director  
Division of Community Development

**DATE :** July 21, 2023

**SUBJECT :** Delegation of Authority for Administrative Service Centers

Effective today, Ms. Patricia D. Begay is delegated the authority as the Department Manager II for the Administrative Services Centers. She is responsible for managing and overseeing the department. This delegation is effective until further notice.

Your assistance and cooperation is appreciated.

**ACKNOWLEDGEMENT:**



Patricia D. Begay, Senior Programs and Projects Specialist  
Administrative Service Centers  
Division of Community Development

c

NAVAJO NATION

296

1/18/2024

Naa'bik'iyati' Committee Special Meeting

Amd# to Amd#

New Business: Item A. (MAIN)

PASSED

MOT Parrish, S

Consent Agenda - #'s:

SEC James, V

0001-24, 0013-24, 0011-24

Yeas : 14

Nays : 0

Excused : 4

Not Voting : 5

Yea : 14

Arviso, S

Crotty, A

Johnson, C

Simonson, G

Begay, H

Curley, C

Nez, A

Slater, C

Begay, N

Daniels, H

Parrish, S

Yanito, C

Charles-Newton, E

James, V

Nay : 0

Excused : 4

Simpson, D

Aseret, L

Nez, R

Notah, N

Not Voting : 5

Claw, S

Tolth, G

Tso, O

Yazzie, C

Jesus, B

Presiding Speaker: Damon, S