



**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 0761

**Date & Time Received:** 03/08/24 at 11:17

**Date & Time of Response:** March 21, 2024 at 10:30 a.m.

**Entity Requesting FRF:** Pueblo Pintado Chapter

**Title of Project:** Repair & Renovate Kitchen Wall Behind the Stove and Install New Grease Trap

**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:** 2.22, Strong Healthy Communities: Neighborhood Features that Promote Health and Safety



**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: Pueblo Pintado Date prepared: 11/16/23  
Chapter's mailing address: HCR 79, Box 3026 phone/email: 505-655-3221  
Cuba, New Mexico 87013 website (if any): pueblopintado@navajochapters.org  
This Form prepared by: Janice Arthur phone/email: jarthur@nnchapters.org  
Coordinator  
CONTACT PERSON'S name and title CONTACT PERSON'S info

Title and type of Project: Repair & Renovate Kitchen Wall behind the Stove and Install New Grease Trap  
Chapter President: Erlene Henderson phone & email: 505-655-3221 pueblopintado@navajochapters.org  
Chapter Vice-President: Donald Chee phone & email: 505-655-3221 pueblopintado@navajochapters.org  
Chapter Secretary: Cheryl Chavez phone & email: 505-655-3221 pueblopintado@navajochapters.org  
Chapter Treasurer: Cheryl Chavez phone & email: 505-655-3221 pueblopintado@navajochapters.org  
Chapter Manager or CSC: Janice Arthur phone & email: 505-655-3221 pueblopintado@navajochapters.org  
DCD/Chapter ASO: \_\_\_\_\_ phone & email: \_\_\_\_\_

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

Amount of FRF requested: \$100,000.00 FRF funding period: November 1, 2024 - 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:

Replace the wall with sheetrock or plywood behind the stove that is currently covered with grease/oil from frying food. The wall supports cabinet structures. The grease trap is planned for installation under the sink to keep it simple to maintain without incurring large maintenance cost. Chapter has 443 voters and several committee members who would need a facility that is large for meetings and gatherings. A working kitchen in the immediate area of the Chapter House will prevent cross contamination of food due to not washing hands. To mitigate covid-19, Kitchen equipment will be cleaned regularly using disinfectant products and counter tops wash with disinfectant and rinse with clean water during food preparation to keep food safe.  document attached

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

Project will equip community volunteers to serve food to customers during food sales and other community gatherings for food handlers training.  document attached

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

**APPENDIX A**

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

Begin date: 11-01-2024 end date: 09-30-2026  
Repair of Kitchen Wall (behind the stove) and install a new grease trap (according to P&P) and preventive maintenance (P/M) schedules.

document attached

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

Chapter Officials and Community Services Coordinator and work with PEP Labors to make repairs and installation of equipment.

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:

Chapter Officials and Community Services Coordinator. Operations and Maintenance cost will be included on the Chapter's annual budget preventive maintenance cost for grease trap.

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:

EC 27 - Revenue Replacement

6.1 - Provision of Government Services.

Repair and Renovate Kitchen Wall behind the stove and install new Grease Trap.

document attached

**Part 3. Additional documents.**

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

Chapter Resolution attached

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

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

Chapter's Preparer: [Signature]  
Signature of Preparer/CONTRACT PERSON

Approved by: [Signature]  
signature of Chapter President (or Vice-President)

Approved by: [Signature]  
signature of CSC

Approved by: [Signature]  
signature of Chapter ASG

Approved to submit for Review: [Signature]  
signature of TCD Director

FY 2024

THE NAVAJO NATION  
PROGRAM BUDGET SUMMARY

Page 1 of 4  
BUDGET FORM 1

PART I. Business Unit No.: <u>New</u> Program Title: <u>Pueblo Pintado Repairs/Renovate Kitchen Wall</u> Division/Branch: <u>Division of Community Development</u>	
Prepared By: <u>Janice Arthur, CSC</u> Phone No.: <u>505-655-3221</u> Email Address: <u>jarthur@nnchapters.org</u>	

  

PART II. FUNDING SOURCE(S)	Fiscal Year /Term	Amount	% of Total	PART III. BUDGET SUMMARY	Fund Type Code	(A) NNC Approved Original Budget	(B) Proposed Budget	(C) Difference or Total
ARPA Funds	11/1/24-9/30/26	100,000.00	100%	2001 Personnel Expenses				
				3000 Travel Expenses				
				3500 Meeting Expenses				
				4000 Supplies				
				5000 Lease and Rental				
				5500 Communications and Utilities				
				6000 Repairs and Maintenance	6		\$100,000.00	\$100,000.00
				6500 Contractual Services				
				7000 Special Transactions				
				8000 Public Assistance				
				9000 Capital Outlay				
				9500 Matching Funds				
				9500 Indirect Cost				
				TOTAL			\$100,000.00	\$100,000.00
TOTAL: 100,000.00 100%				PART IV. POSITIONS AND VEHICLES		(D)	(E)	
				Total # of Positions Budgeted:				
				Total # of Vehicles Budgeted:				

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

SUBMITTED BY: <u>Jaron M. Charley, Department Manager II</u> Program Manager's Printed Name <u>[Signature]</u> 01/23/2024 Program Manager's Signature and Date	APPROVED BY: <u>Arbin Mitchell</u> Division Director / Branch Chief's Printed Name <u>[Signature]</u> Division Director / Branch Chief's Signature and Date
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**THE NAVAJO NATION  
PROGRAM PERFORMANCE CRITERIA**

<b>PART I. PROGRAM INFORMATION:</b>								
Business Unit No.: <u>          New          </u>			Program Name/Title: <u>          Pueblo Pintado Repair/Renovate Kitchen Wall          </u>					
<b>PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:</b>								
Pueblo Pintado Repair/Renovate Kitchen Wall & install grease trap.								
<b>PART III. PROGRAM PERFORMANCE CRITERIA:</b>								
	1st QTR		2nd QTR		3rd QTR		4th QTR	
	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual
1. Goal Statement:								
Program Performance Measure:								
Repair/Renovate kitchen wall & make it ready for use	1		1		1		1	
2. Goal Statement:								
Program Performance Measure:								
Install Grease Trap properly and useable	1		1		1		1	
3. Goal Statement:								
Program Performance Measure:								
4. Goal Statement:								
Program Performance Measure:								
5. Goal Statement:								
Program Performance Measure:								
<b>PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.</b>								
Jaron M. Charley, Department Manager II				Arbin Mitchell				
_____ Program Manager's Printed Name				_____ Division Director/Branch Chief's Printed Name				
_____ Program Manager's Signature and Date				_____ Division Director/Branch Chief's Signature and Date				
01/23/2024								

FY 2024

**THE NAVAJO NATION  
DETAILED BUDGET AND JUSTIFICATION**

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BUDGET FORM 4

PART I. PROGRAM INFORMATION:			
Program Name/Title: <u>Pueblo Pintado Chapter Kitchen Wall and install grease trap</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 6960 - Sub contracted Services Chapter House Kitchen Repair/Renovation of Wall behind the stove and install grease trap.		\$100,000.00
<b>TOTAL</b>		\$100,000.00	\$100,000.00

THE NAVAJO NATION  
PROJECT BUDGET SCHEDULE

<b>PART I.</b> Business Unit No.: <u>New</u> Project Title: <u>Pueblo Pintado Chapter Repair/Renovate Kitchen Wall and install grease trap</u> Project Description: <u>Repair/renovate kitchen wall behind the stove and install grease trap</u> Check one box: <input checked="" type="checkbox"/> Original Budget <input type="checkbox"/> Budget Revision <input type="checkbox"/> Budget Reallocation <input type="checkbox"/> Budget Modification										<b>PART II.</b> Project Information Project Type: <u>Repair Services</u> Planned Start Date: <u>11/1/24</u> Planned End Date: <u>9/30/26</u> Project Manager: <u>Chapter Staff</u>																					
<b>PART III.</b> List Project Task separately; such as Plan, Design, Construct, Equip or Furnish.	<b>PART IV.</b> Use Fiscal Year (FY) Quarters to complete the information below. O = Oct.; N = Nov.; D = Dec., etc.																		Expected Completion Date if project exceeds 8 FY Qtrs. Date: <u>9/30/26</u>												
	FY 2024									FY 2025																					
	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	
Purchase Process (Get quotes based on specification)																															
Project Implementation Construction/renovation																															
Close-Out																															
<b>PART V.</b>	\$			\$			\$			\$			\$			\$			\$												
Expected Quarterly Expenditures																						PROJECT TOTAL									
																						\$100,000.00									

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