



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 #: HK0751

Date & Time Received: 02/12/24 at 16:47

Date & Time of Response: 2/26/24 at 17:00

Entity Requesting FRF: Pueblo Pintado Chapter

Title of Project: Pueblo Pintado Chapter House Roof Repair

Administrative Oversight: Division of Community Development

Amount of Funding Requested: \$200,000.00

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

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: Please note we have modified the requested expenditure code from 6.1 (Provision of Government Services) to 2.22 (Strong Healthy Communities: Neighborhood Features that Promote Health and Safety) to be consistent with previously approved projects.

Name of DOJ Reviewer: Navalyn R. Platero

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: 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: Pueblo Pintado Chapter House Roof Repair

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: \$200,000.00 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:

Pueblo Pintado Chapter House built in 1971 for capacity of 60 people per Fire Code. There are 443 Registered Voters for the Pueblo Pintado Chapter. Covid-19 related Supplies and donated food could not be stored in the Chapter House water damages due to roof leaks. Chapter House serves various committee members at any given time, i.e., veteran organization, CLUPC, Indian Health Nutrition training and cooking demonstrations, New Health Center Steering Committee, Food Handlers Training, IIM (Individual Indian Monies) meetins and community receptions. document attached

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

Roof Repair will prevent roding of roof insulation and other material so that Chapter House facility lasts for several more years. A place for community people to gather. 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 Sept. 30, 2026 and/or fully expending funds and completing the

APPENDIX A

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

Repair & Maintenance of the Chapter House Roof
Begin date - 11/1/24 End date: 9/30/24

document attached

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

Chapter Officials, Community Services Coordinator

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 Service Coordinator would be responsible for the PEP Worker during repairs, and maintenance costs would be budgeted annually as preventive maintenance costs.

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.
Roof Repair

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

Approved by: *[Signature]* Approved by: *[Signature]* 01/23/2024
signature of OSC signature of Chapter ABO

Approved to submit for Review: *[Signature]*
signature of DCD 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 Chapter House Roof Repair</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			
ARPA Funds	11/1/24 9/30/26	200,000.00	100%	Fund Type Code	(A) NNC 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	6	\$200,000.00	\$200,000.00
				6500 Contractual Services			
				7000 Special Transactions			
				8000 Public Assistance			
				9000 Capital Outlay			
				9500 Matching Funds			
				9500 Indirect Cost			
				TOTAL		\$200,000.00	\$200,000.00
				PART IV. POSITIONS AND VEHICLES		(D)	(E)
				Total # of Positions Budgeted:			
				Total # of Vehicles Budgeted:			
		TOTAL:	200,000.00 100%				
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>				APPROVED BY: <u>Arbin Mitchell</u>			
Program Manager's Printed Name				Division Director / Branch Chief's Printed Name			
<u>01/23/2024</u>				<u></u>			
Program Manager's Signature and Date				Division Director / Branch Chief's Signature and Date			

**THE NAVAJO NATION
PROGRAM PERFORMANCE CRITERIA**

PART I. PROGRAM INFORMATION:

Business Unit No.: New Program Name/Title: Pueblo Pintado Chapter Roof Repair

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

Plan is to do Chapter roof repair for community members to meet safely.

PART III. PROGRAM PERFORMANCE CRITERIA:

1. Goal Statement:

Program Performance Measure:

Repair Roof - no leaks

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

2. Goal Statement:

Program Performance Measure:

No leaks from the roof to prolong life of Chapter House Roof.

1		1		1		1	
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3. Goal Statement:

Program Performance Measure:

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4. Goal Statement:

Program Performance Measure:

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5. Goal Statement:

Program Performance Measure:

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

Jaron M. Charley, Department Manager II

Program Manager's Printed Name

Jaron M. Charley
01/23/2024

Program Manager's Signature and Date

Arbin Mitchell

Division Director/Branch Chief's Printed Name

Division Director/Branch Chief's Signature and Date

FY 2024

**THE NAVAJO NATION
DETAILED BUDGET AND JUSTIFICATION**

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BUDGET FORM 4

PART I. PROGRAM INFORMATION:			
Program Name/Title: Pueblo Pintado Chapter Roof Repair		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)
6960	Subcontracted Services 6960 - sub contracted Services Chapter House Roof Repair		\$200,000.00
TOTAL		\$200,000.00	\$200,000.00

THE NAVAJO NATION
PROJECT BUDGET SCHEDULE

PART I. Business Unit No.: <u>New</u> Project Title: <u>Pueblo Pintado Chapter West Wall Repair</u> Project Description: <u>Locate Roof Leaks and Repair to stop leaks</u> Check one box: <input checked="" type="checkbox"/> Original Budget <input checked="" type="checkbox"/> Budget Revision <input type="checkbox"/> Budget Reallocation <input type="checkbox"/> Budget Modification															PART II. Project Information Project Type: <u>Repair Services</u> Planned Start Date: <u>11/1/2024</u> Planned End Date: <u>9/30/2026</u> Project Manager: _____															
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. 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																														
PART V.	\$			\$			\$			\$			\$			\$			\$			PROJECT TOTAL								
Expected Quarterly Expenditures																						\$200,000.00								

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