

THE NAVAJO NATION  
LEGISLATIVE BRANCH  
INTERNET PUBLIC REVIEW PUBLICATION



LEGISLATION NO: \_0209-22\_

SPONSOR: Thomas Walker, Jr.

**TITLE: An Action Relating to Resources and Development; Approving the CARES Act Indian Housing Block Grant Amendment No. Two for Fiscal Year 2020**

*Date posted:* November 02, 2022 at 8:26PM

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**LEGISLATIVE SUMMARY SHEET**  
**Tracking No. 0209-22**

**DATE:** October 21, 2022

**TITLE OF RESOLUTION:** PROPOSED STANDING COMMITTEE RESOLUTION; AN ACTION RELATING TO RESOURCES AND DEVELOPMENT; AN ACTION RELATING TO RESOURCES AND DEVELOPMENT; APPROVING THE CARES ACT INDIAN HOUSING BLOCK GRANT AMENDMENT NO. TWO FOR FISCAL YEAR 2020

**PURPOSE:** This legislation, if approved, will approve the CARES Act Indian Housing Block Grant Amendment No. Two (2) Fiscal Year 2020.

**This written summary does not address recommended amendments as may be provided by the standing committee. The Office of Legislative Counsel requests each committee member to review the proposed resolution in detail.**

5-DAY BILL HOLD PERIOD: Johnson  
Website Posting Time/Date: \_\_\_\_\_  
Posting End Date: 11-06-22  
Eligible for Action: 11-07-22

PROPOSED STANDING COMMITTEE RESOLUTION  
24<sup>th</sup> NAVAJO NATION COUNCIL –Fourth Year, 2022

INTRODUCED BY

\_\_\_\_\_  
(Sponsor)



TRACKING NO. 0209-22

AN ACTION

RELATING TO RESOURCES AND DEVELOPMENT; APPROVING THE CARES  
ACT INDIAN HOUSING BLOCK GRANT AMENDMENT NO. TWO FOR FISCAL  
YEAR 2020

**BE IT ENACTED:**

**Section One. Authority**

- A. The Resources and Development Committee is a Standing Committee of the Navajo Nation Council. 2 N.N.C. §500(A).
- B. The Resources and Development Committee is the Standing Committee of the Navajo Nation Council with the authority to grant final approval for the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA) Indian Housing Plan. 2 N.N.C. §501(B)(2)(b).

**Section Two. Findings**

- A. The Coronavirus Aid, Relief, and Economic Security Act or the CARES Act, Public Law No. 116-136, was signed into law on March 27, 2020. The CARES Act responds to the COVID-19 outbreak and its impact on the economy, public health, state and local governments, individuals, and businesses.

- 1 B. Resources and Development Committee Resolution RDCS-20-22 approved the  
2 CARES Act Indian Housing Block Grant Amendment No. One for Fiscal Year  
3 2020.
- 4 C. The Navajo Housing Authority Board of Commissioners Resolution NHA-5120-  
5 2022, attached as **Exhibit 1**, requests the Resources and Development Committee  
6 approve Amendment No. Two to the Fiscal Year 2020 CARES Act COVID-19  
7 Indian Housing Plan Indian Housing Block Grant.
- 8 D. The Navajo Housing Authority Board of Commissioners Resolution NHA-5120-  
9 2022, attached as **Exhibit 1**, at Whereas Paragraph 9, states that “The NHA Board  
10 in their emergency response to the COVID-19 pandemic hereby further amends the  
11 FY 2020 CARES Act IHP to include new activities to address the Navajo Nation  
12 President’s announcement of an emergency situation on the Navajo Nation  
13 whereby many families are experiencing high volume of inability to make utility  
14 payments due to illness, loss of family income earners, and lack of employment to  
15 cover basic necessities including electricity, natural gas, propane, war and waste  
16 water as result of the continued spread of the COVID-19 virus and its variants  
17 across the Nation, and that such funds be made immediately available to address  
18 the situation.”
- 19 E. The Navajo Housing Authority Board of Commissioners Resolution NHA-5120-  
20 2022, attached as **Exhibit 1**, at Resolved Clause C states: “The Board of  
21 Commissioners hereby approves and directs the NHA Chief Executive Officer and  
22 NHA management to make available the reallocation of previous CARES IHP  
23 activities the amount of Ten Million Dollars (\$10,000,000) to support the utility  
24 payment emergency under the allocated CARES Act IHP-IHBG budget in  
25 accordance with Amendment No. 02 to the FY 2020 CARES Act Indian Housing  
26 Plan, attached hereto as Exhibit A.”

27 **Section Three. Approval**

- 28 A. The Navajo Nation hereby approves an amendment to the Fiscal Year 2020 Navajo  
29 Nation Housing Plan for the NAHASDA Indian Housing Block Grant funding. The  
30 amendment is contained in Navajo Housing Authority Board of Commissioners

1 Resolution No.NHA-5120-2022 “Amending Resolution NHA-50-73-2021 through  
2 Approval of Amendment No. 02 to the Fiscal Year 2020 CARES Act COVID-19  
3 Indian Housing Plan Indian Housing Block Grant by Adding New Emergency  
4 Eligible Housing Activities Beneficial to Prevent and Respond to the COVID-19  
5 Pandemic, which is attached hereto as **Exhibit 1**.

- 6 B. The Navajo Nation hereby approves the submission of **Exhibit 1**, the amended  
7 Navajo Nation Indian Housing Plan, CARES Act COVID-19 Indian Housing Plan  
8 Indian Housing Block Grant Amendment No. Two (2), by the Navajo Housing  
9 Authority on behalf of the Navajo Nation.  
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RESOLUTION NHA-5120-2022

RESOLUTION OF THE BOARD OF COMMISSIONERS  
OF THE NAVAJO HOUSING AUTHORITY



Amending Resolution NHA-5073-2021 through Approval of Amendment No. 02 to the Fiscal Year 2020 CARES Act COVID-19 Indian Housing Plan Indian Housing Block Grant by Adding New Emergency Eligible Housing Activities Beneficial to Prevent and Respond to the COVID-19 Pandemic

WHEREAS:

1. Pursuant to 6 N.N.C. §§ 604, 605, and 616(b)(9) & (b)(14), the NHA Board of Commissioners is empowered with authority to remedy unsafe and unsanitary housing conditions that are injurious to the public health, safety and morals; manage the affairs of the NHA and obligate funding reserves to enhance the living conditions of the Navajo People; take such further actions as are commonly engaged by corporate bodies of this character as the Board may deem necessary and desirable to effectuate NHA's purposes; and

2. On October 26, 1996, the U.S. Congress enacted the Native American Housing Assistance and Self-Determination Act of 1996 (“NAHASDA”), Public Law 104-330, 25 U.S.C. §§ 4101 *et seq.*, to reorganize the housing assistance provided to Native Americans formerly provided under the Housing Act of 1937 by the U.S. Department of Housing and Urban Development (“HUD”). NAHASDA provides housing assistance that recognizes the rights of Indian self-determination and self-governance with a single block grant program that shifts responsibility for oversight and monitoring to the Tribally Designated Housing Entity (“TDHE”); and

3. Pursuant to 24 C.F.R. § 1000.202, NHA as the Navajo Nation’s TDHE, is an eligible recipient of NAHASDA Block Grants; and

4. The Navajo Nation has been in a Public Health State of Emergency since March 11, 2020 due to COVID-19. It assembled a COVID-19 Preparedness Team to monitor, plan, prepare and coordinate precautionary efforts to address the COVID-19. A Health Command Operations Center was also established within the Department of Health, which is made up of five function areas including Command, Operations, Planning, Logistics and Finance/Administration. Navajo Housing Authority has set upon Incident Command to ensure NHA can continue its critical mission and operations during this Public Health State of Emergency; and

5. The Coronavirus Aid, Relief, and Economic Security Act (“CARES Act”) was passed into law on March 27, 2020, to "cover or reimburse allowable costs to prevent, prepare for, and respond to coronavirus that are incurred by a recipient, including for costs incurred prior to the date of enactment of this Act."; and

6. NHA was allocated and received CARES Act IHBG funds in the amount of \$22,333,177.00 on June 5, 2020 and pursuant to Resolution NHA-4963-2020 dated April 17, 2020 (hereinafter referred to as "Resolution NHA-4963-2020"), the NHA Board of Commissioners approved an amendment to NHA's FY 2020 Indian Housing Plan (the "Amended FY 2020 IHP") to (i) provide for the implementation of NHA's program activities related to the preparation, prevention and response to the Nation's COVID-19 pandemic relief effort; (ii) approve the inclusion in NHA's Amended FY 2020 IHP, of an additional CARES Act IHBG budget in the total amount of \$22,333,177.00 for such purposes; and

7. The NHA Board amended the FY 2020 CARES Act Indian Housing Plan in March 2022, pursuant to Resolution NHA-5073-2021, to add new eligible activities including housing rehabilitation assistance, upgrade and improvement to HVAC system to improve ventilation to all NHA office buildings, and IT technology and prevention outreach services which are essential to prevent and respond to COVID-19 while maintaining the operation and services of NHA; and

8. The NHA Executive Management has determined again it is in the best interest of the NHA to further amend the FY 2020 CARES Act Indian Housing Plan by reducing and deleting certain program activity budgets, adding new eligible activities with new budget allocations; and

9. The NHA Board in their emergency response to the COVID-19 pandemic hereby further amends the FY 2020 CARES Act IHP to include new activities to address the Navajo Nation President's announcement of an emergency situation on the Navajo Nation whereby many families are experiencing high volume of inability to make utility payments due to illness, loss of family income earners, and lack of employment to cover basic necessities including electricity, natural gas, propane, water and waste water as result of the continued spread of the COVID-19 virus and its variants across the Nation, and that such funds be made immediately available to address the situation.

**NOW, THEREFORE, BE IT RESOLVED:**

A. The Board of Commissioners hereby amends Resolution NHA-5073-2021 pursuant to this Resolution, which further amends the Fiscal Year 2020 CARES Act Indian Housing Plan by adding an emergency activity described above related to serving the Navajo Nation families and activities beneficial to prevent and respond to COVID-19.

B. The NHA Board of Commissioners hereby authorizes NHA's Chief Executive Officer to secure, review and obtain approval by the Resources and Development Committee of the Navajo Nation Council for Amendment No. 02 to the FY 2020 CARES Act IHP and to secure the Navajo Nation President's signature thereto, in compliance with NAHASDA, prior to its submission to HUD.

C. The Board of Commissioners hereby approves and directs the NHA Chief Executive Officer and NHA management to make available the reallocation of previous CARES IHP activities in the amount of Ten Million Dollars (\$10,000,000) to support the utility payment

emergency under the allocated CARES Act IHP-IHBG budget in accordance with Amendment No. 02 to the FY 2020 CARES Act Indian Housing Plan, attached hereto as Exhibit "A".

**CERTIFICATION**

Commissioner David N. Sloan moved that the foregoing Resolution NHA-5120-2022 be adopted and this was seconded by Commissioner Tammy E. Yazzie.

Same was passed by the following vote:

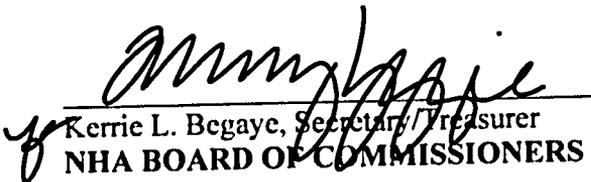
AYES: 2      NAYS: 0      ABSTAINED: 0

The Secretary, thereupon, declared said motion carried and said Resolution NHA-5120-2022 was adopted this 23rd day of September, 2022.



David Sloan, Chairperson  
NHA BOARD OF COMMISSIONERS

ATTEST:



Kerrie L. Begaye, Secretary/Treasurer  
NHA BOARD OF COMMISSIONERS

RESPECTIVE CHIEF: NG for AC  
LEGAL REVIEW: aj for DG  
CHIEF EXECUTIVE OFFICER: aj for MC

RESOLUTION NHA-5073-2021

RESOLUTION OF THE BOARD OF COMMISSIONERS OF  
THE NAVAJO HOUSING AUTHORITY

Amending Resolution NHA-4963-2020 through Approval of an Amendment  
No. 01 to the Fiscal Year 2020 CARES Act COVID-19 Indian Housing Plan  
Indian Housing Block Grant by Adding New Eligible Housing Activities  
Beneficial to Prevent and Respond to COVID-19.

WHEREAS:

1. Pursuant to 6 N.N.C. §§ 604, 605, and 616(b)(9) & (b)(14), the NHA Board of Commissioners is empowered with authority to remedy unsafe and unsanitary housing conditions that are injurious to the public health, safety and morals; manage the affairs of the NHA and obligate funding reserves to enhance the living conditions of the Navajo People; take such further actions as are commonly engaged by corporate bodies of this character as the Board may deem necessary and desirable to effectuate NHA's purposes; and

2. On October 26, 1996, the U.S. Congress enacted the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA), Public Law 104-330, 25 U.S.C. §§ 4101 *et seq.*, to reorganize the housing assistance provided to Native Americans formerly provided under the Housing Act of 1937 by the U.S. Department of Housing and Urban Development (HUD). NAHASDA provides housing assistance that recognizes the rights of Indian self-determination and self-governance with a single block grant program that shifts responsibility for oversight and monitoring to the Tribally Designated Housing Entity (TDHE); and

3. Pursuant to 24 C.F.R. § 1000.202, NHA as the Navajo Nation's TDHE, is an eligible recipient of NAHASDA Block Grants; and

4. The Navajo Nation has been in a Public Health State of Emergency since March 11, 2020 due to COVID-19. It assembled a COVID-19 Preparedness Team to monitor, plan, prepare and coordinate precautionary efforts to address the COVID-19. A Health Command Operations Center was also established within the Department of Health, which is made up of five function areas including Command, Operations, Planning, Logistics and Finance/Administration. Navajo Housing Authority has set upon Incident Command to ensure NHA can continue its critical mission and operations during this Public Health State of Emergency; and

5. The Coronavirus Aid, Relief, and Economic Security Act (CARES Act) was passed into law on March 27, 2020, to "cover or reimburse allowable costs to prevent, prepare for, and respond to coronavirus that are incurred by a recipient, including for costs incurred prior to the date of enactment of this Act."; and

**RESOLUTION NHA-5073-2021**

**March 24, 2022**

**Page 2**

6. NHA was allocated and received CARES Act IHBG funds in the amount of \$22,333,177.00 on June 5, 2020 and pursuant to Resolution NHA-4963-2020 dated April 17, 2020 (hereinafter referred to as "Resolution NHA-4963-2020"), the NHA Board of Commissioners approved an amendment to NHA's FY 2020 Indian Housing Plan (the "Amended FY 2020 IHP") to (i) provide for the implementation of NHA's program activities related to the preparation, prevention and response to the Nation's COVID-19 pandemic relief effort; (ii) approve the inclusion in NHA's Amended FY 2020 IHP, of an additional CARES Act IHBG budget in the total amount of \$22,333,177.00 for such purposes; and

7. In FY 2022, the NHA Executive Management has determined that an amendment to the use of NHA's CARES Act IHBG funds was necessary to add new eligible activities including housing rehabilitation assistance, upgrade and improvement to HVAC systems to improve ventilation to all NHA office buildings, and IT technology and prevention outreach services, all of which are essential to prevent and respond to the COVID-19 pandemic while maintaining the operation and services of NHA; and

8. The NHA Board of Commissioners has determined it is in the best interest of the NHA to amend (i) the Amended FY 2020 IHP for the purpose of reducing and deleting certain program activities from NHA's CARES Act IHBG budget, adding new eligible activities to such budget and allocating new budget costs related thereto to the unused balance of NHA's CARES Act IHBG funds for the purpose of preventing and responding to the COVID-19 pandemic by making such funds available promptly while providing for the orderly administration thereof; and (ii) Resolution NHA-4963-2020 for the purpose set forth herein.

**NOW, THEREFORE, BE IT RESOLVED:**

A. The Board of Commissioners hereby amends Resolution NHA-4963-2020 to approve and include as amendment number one (1) to NHA's CARES Act IHBG Budget contained in NHA's Amended FY 2020 IHP, as set forth in Exhibit "A" attached hereto (hereinafter "Amendment No. 1"), for the purpose of (1) the addition of new eligible activities to NHA's CARES Act IHBG Budget that are beneficial to prevent and respond to the COVID-19 pandemic; and (2) amending NHA's CARES Act IHBG Budget as set forth in Amendment No. 1 for purposes of (i) adding such new eligible activities to such budget, (ii) reallocating budget costs of such new eligible activities to the unused balance of NHA's CARES Act IHBG funds, and (iii) approving the use of such funds and making such funds available from the unused balance of NHA's CARES Act IHBG funds for such purposes.

B. The NHA Board of Commissioners hereby directs and authorizes NHA's Chief Executive Officer to secure, review and obtain approval by the Resources and Development Committee of the Navajo Nation Council for Amendment No. 1 to the NHA's Amended FY 2020 IHP and to secure the Navajo Nation President's signature thereto, in compliance with NAHASDA, prior to its submission to HUD.

C. The Board of Commissioners hereby approves and directs the NHA's Chief Executive Officer and NHA management to make available such funds necessary from NHA's unused balance of CARES Act IHBG funds from the CARES Act IHBG budget contained in NHA's Amended FY 2020 IHP in accordance with the added eligible activities and related costs thereto as set forth in Amendment No. 1 to NHA's CARES Act IHBG Budget contained in NHA's Amended FY 2020 IHP.

**CERTIFICATION**

Commissioner Tammy E. Yazzie moved that the foregoing Resolution NHA-5073-2021 be adopted and this was seconded by Commissioner David N. Sloan.

Same was passed by the following vote:

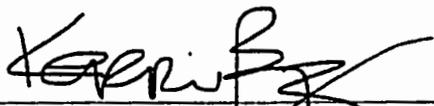
AYES: 3      NAYS: 0      ABSTAINED: 0

The Secretary, thereupon, declared said motion carried and said Resolution NHA-5073-2021 was adopted this 24th day of March, 2022.



David Sloan, Chairperson  
NHA BOARD OF COMMISSIONERS

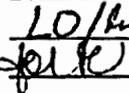
ATTEST:



Kerrie L. Begaye, Secretary/Treasurer  
NHA BOARD OF COMMISSIONERS

RESPECTIVE CHIEF: 

LEGAL REVIEW: LO/ky

CHIEF EXECUTIVE OFFICER: 

**SECTION 1: COVER PAGE**

(1) Grant Number:   
 (2) Recipient Program Year:   
 (3) Federal Fiscal Year:

- IHBG-CARES
- (4) Initial Plan (Complete this Section then proceed to Section 2) or an Amended IHP
- (6) Annual Performance Report (Complete items 27-30 and proceed to Section 3)
- (7) Tribe
- (8) TDHE

(9) Name of Recipient:

(10) Contact Person:

(11) Telephone Number with Area Code (999) 999-9999 :

(12) Mailing Address:

(13) City:

(14) State:

(15) Zip Code (99999 or 99999-9999):

(16) Fax Number with Area Code (if available) (999) 999-9999 :

(17) Email Address (if available):

(18) If TDHE, List Tribes Below:

(19) Tax Identification Number:

(20) DUNS Number:

(21) CCR/SAM Expiration Date (MM/DD/YYYY):

(22) IHBG-CARES Amount:

Date Started Preparing for COVID-19

(23) Name of Authorized IHP Submitter:

(24) Title of Authorized IHP Submitter:

Chief Executive Officer

(25) Signature of Authorized IHP Submitter:

*Curtley 4/4/22*

(26) IHP Submission Date(MM/DD/YYYY) :

(27) Name of Authorized APR Submitter:

(28) Title of Authorized APR Submitter:

(29) Signature of Authorized APR Submitter:

(30) APR Submission Date (MM/DD/YYYY):

**Certification:** The information contained in this document is accurate and reflects the activities actually planned or accomplished during the program year. Activities planned and accomplished are eligible under applicable statutes and regulations.

**Warning:** If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosure of information, including intentional disclosure, is subject to a civil money penalty not to exceed \$10,000 for each violation.

**APR: REPORTING ON PROGRAM YEAR PROGRESS**

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year. (NAHASDA § 404(b))

**Program Descriptions**

1.1. Program Name and Unique Identifier:

Unique Identifier COVID-19 Respond

COVID-19 Respond - 1 - Emergency Health Services: Testing, Cleaning Supplies and PPE's for Low-Income Indian Households

1.2. Program Description (This should be the description of the planned program.):

The NHA Emergency Health Service will target activities to prevent, and respond to the COVID-19 pandemic on the Navajo Nation. NHA goal and objective is to assist NHA 1937 Housing Act and NAHASDA eligible residents on the Navajo Nation in partnership with local communities, resident organizations, and the Navajo Nation government.

1. Acquire a Firm to provide testing kits and testing service for NHA employees, sub-recipients, and residents to prevent the spread of COVID-19
2. Acquire and provide Personal Protection Equipment for housing providers, housing residents, and employee. The types of PPEs will include facial masks, gloves, testing gear for protective gowns/suits, foot booties, hand

sanitizers, goggles and respirators if necessary.

3. Acquire On-Call Bio Cleaning service and supplies for NHA facilities and public rental/homeownership housing.

1.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

1.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):

To prepare, prevent and respond to COVID-19.

1.5 Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

[Redacted]

Describe Other Actual Outcome (Only if you selected "Other" above.):

[Redacted]

1.6 Who Will Be Assisted (Describe the types of households that will be assisted under the program.):

Low-income Indian Households  Non-low income Indian Households  Non-Indian Households

All low-income families residing in NHA owned and operated units and all other low-income families in the community including elderly, veterans, homelessness.

1.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

The NHA has approximately 4244 public units at 181 development site with a household members of 25,485 living in 1937 Housing Act and NAHASDA units. Furthermore, NHA has approximately 3478 homeownership units across Navajo Nation which house over 24,406 family members. Overall, under the Housing Service program NHA will provide service to approximately 49,889 individuals at 7,722 individual NHA housing locations.

1.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

[Redacted]

1.9: Planned and Actual Outputs for 12-Month Program Year

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
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5000

APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
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[Redacted]

1.10: APR: *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

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**Program Description**

**2.1. Program Name and Unique Identifier:**

Unique Identifier COVID-19 Respond

COVID-19 Respond - 3 - Emergency Support to Nursing/Group Homes

**2.2. Program Description** (This should be the description of the planned program.):

The NHA will provide financial support for continued operation of eligible transitional and group homes for the on-going health and safety of our Elderly Navajo tribal members in an effort to prepare, prevent and respond to COVID-19.

1. The elderly facilities are experiencing an increase in operations cost due to quarantine of clients who have left the facility and taken to their routine dialysis treatment and/or medical appointments off-site, which will require the individual to isolate in a different facilities and/or in a different part of facility for 14 days during their evaluation. The continued operations support will cover staffing, daily meals, and facilities operations for a. Ganado Elderly Group Home, b. Chinle Assisted Living and Nursing Home and c. Kaibeto Creek Assisted Living

**2.3. Eligible Activity Number** (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

**2.4. Intended Outcome Number** (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

**Describe Other Intended Outcome** (Only if you selected "Other" above):

To prepare, prevent and respond to COVID-19.

**2.5. Actual Outcome Number** (In the APR identify the actual outcome from the Outcome list.):

**Describe Other Actual Outcome** (Only if you selected "Other" above.):

**2.6 Who Will Be Assisted** (Describe the types of households that will be assisted under the program.):

Low-income Indian Households  Non-low income Indian Households  Non-Indian Households

Low income Indian Households.

**2.7. Types and Level of Assistance** (Describe the types and the level of assistance that will be provided to each household, as applicable.):

Assistance to low income elderly individuals at no costs or charge.

**2.8. APR:** Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 100.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs

**2.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
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250

APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
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**2.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

3.1. Program Name and Unique Identifier:

Unique Identifier COVID-19 Respond

COVID-19 Respond - 6 - Emergency Operation and Maintenance of NAHASDA-Assisted Housing Units

3.2. Program Description (This should be the description of the planned program.):

Provide Operations & Maintenance Relief for eligible housing sub-recipient tenants, who have been impacted by employment layoff or loss of employment which effect providing service to housing organization. NHA will assist sub-recipient with 50% of their monthly O & M cost for a period of seven (7) Months (June 01, 2020 to December 31, 2020)

3.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

3.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):

To prevent, prepare and respond to COVID-19, and to avoid spread of the virus.

3.5. Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

[Redacted]

Describe Other Actual Outcome (Only if you selected "Other" above.):

[Redacted]

3.6. Who Will Be Assisted (Describe the types of households that will be assisted under the program.):

- [X] Low-income Indian Households [ ] Non-low income Indian Households [ ] Non-Indian Households

Low-income eligible families.

3.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

NHA will assist sub-recipient with 50% of their monthly O & M cost for a period of seven (7) Months (June 01, 2020 to December 31, 2020)

3.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 100.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

[Redacted]

**3.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
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35

APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
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**3.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

4.1. Program Name and Unique Identifier:

Unique Identifier COVID-19 Prevention

COVID-19 Prevention - 7 - Emergency Temporary Housing for Low-Income Indian Households

4.2. Program Description (This should be the description of the planned program.):

NHA will provide with rental of hotel rooms and purchase and delivery of meals to temporarily house at-risk, low-income elderly and Tribal members to prevent spread of COVID-19. NHA will pay directly to third party for the rental of the rooms.

4.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

4.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):

To prevent, prepare and respond to COVID-19.

4.5 Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

[Redacted]

Describe Other Actual Outcome (Only if you selected "Other" above.):

[Redacted]

4.6 Who Will Be Assisted (Describe the types of households that will be assisted under the program.):

- [X] Low-income Indian Households [ ] Non-low income Indian Households [ ] Non-Indian Households

Low-income Indian families.

4.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

The level and type of assistance will to serve all low-income elderly, Veterans and Tribal members at 100% of the cost of the hotels for five months.

4.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

[Redacted]

**4.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program:

Planned Number of Households To Be Served in Year Under this Program

Planned Number of Acres To Be Purchased in Year Under this Program

50

APR: Actual Number of Units Completed in Program Year

APR: Actual Number of Households Served in Program Year

APR: Actual Number of Acres Purchased in Program Year

**4.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

5.1. Program Name and Unique Identifier:

Unique Identifier COVID-19 Prevention

COVID-19 Prevention - 8 - Emergency Temporary Housing for Non-Low Income Indian Households

5.2. Program Description (This should be the description of the planned program.):

The NHA Temporary Housing assistance will provide short term temporary housing assistance payment for individuals housed in hotels or motel which require them to be quarantine during the 14 day monitoring period. Furthermore, additional days for quarantine may be require if individual test positive after the (14) day monitoring period. The temporary quarantine for individuals to hinder the spread of virus within Navajo tribal communities. The NHA will pay directly to third party operator/owner for rental of rooms.

5.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

5.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):

To prevent, prepare and respond to COVID-19.

5.5 Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

[Redacted]

Describe Other Actual Outcome (Only if you selected "Other" above.):

[Redacted]

5.6 Who Will Be Assisted (Describe the types of households that will be assisted under the program.):

- Low-income Indian Households Non-low income Indian Households Non-Indian Households

Non-low income Indian households

5.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

The NHA will assist the following individuals: non-low-income, for minimum of 14 days to 30 days for treatment and monitoring of virus. All rental cost will be paid at 100% for duration of treatment and monitoring.

5.8: APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 100.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

[Redacted]

**5.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program

Planned Number of Households To Be Served in Year Under this Program

Planned Number of Acres To Be Purchased in Year Under this Program

450

APR: Actual Number of Units Completed in Program Year

APR: Actual Number of Households Served in Program Year

APR: Actual Number of Acres Purchased in Program Year

**5.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

6.1. Program Name and Unique Identifier:

Unique Identifier COVID-19 Respond

COVID-19 Respond - 10 - Emergency Health Services: Testing, Cleaning Supplies and PPE's for Non-Low Income Indian Households

6.2. Program Description (This should be the description of the planned program.):

The NHA Emergency Health Service will target activities to prevent, and respond to the COVID-19 on the Navajo Nation. NHA goal and objective is assist NHA 1937 Housing Act and NAHASDA residents on the Navajo Nation, in partnership with local communities, resident organization, and Navajo Nation government.
1. Acquire a Firm to provide testing kits and testing service for NHA employees, sub-recipients, and residents to prevent the spread of COVID-19
2. Acquire and provide Personal Protection Equipment for housing providers, housing residents, and employee. The types of PPEs will include facial masks, gloves, testing gear for protective gowns/suits, foot booties, goggles and respirators if necessary.
3. Acquire On-Call Bio Cleaning service and supplies for NHA facilities and public rental/homeownership housing.

6.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

6.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):

To prepare, prevent and respond to COVID-19 and to promote the safety of residents, communities and housing staff.

6.5. Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

[Redacted]

Describe Other Actual Outcome (Only if you selected "Other" above.):

[Redacted]

6.6 Who Will Be Assisted (Describe the types of households that will be assisted under the program.):

- Low-income Indian Households Non-low income Indian Households Non-Indian Households

Non-low income Indian Households

6.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

The type and level of assistance will be extension to non-low income households residing in NHA housing and on and off Navajo reservation.

6.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs

[Redacted]

**6.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
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250

APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
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[Redacted]

**6.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

[Redacted]

**Program Descriptions**

**7.1. Program Name and Unique Identifier:**

Unique Identifier COVID-19 Respond

COVID-19 Respond - 12 - Emergency Temporary Rental Assistance for Non-Low Income Indian Households

**7.2. Program Description** (This should be the description of the planned program.):

NHA will provide temporary rental to COVID-19 impacted families living on or off the Navajo Reservation in private rental market units.

**7.3. Eligible Activity Number** (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

**7.4. Intended Outcome Number** (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

**Describe Other Intended Outcome** (Only if you selected "Other" above):

To prepare, prevent and respond to COVID-19.

**7.5 Actual Outcome Number** (In the APR identify the actual outcome from the Outcome list.):

[Redacted]

**Describe Other Actual Outcome** (Only if you selected "Other" above.):

[Redacted]

**7.6 Who Will Be Assisted** (Describe the types of households that will be assisted under the program.):

Low-income Indian Households  Non-low income Indian Households  Non-Indian Households

Non-low income Indian Households

**7.7. Types and Level of Assistance** (Describe the types and the level of assistance that will be provided to each household, as applicable.):

NHA will pay directly to property owners on behalf on non-low income families at 100% of cost of all income levels for two months.

**7.8. APR:** Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

[Redacted]

**7.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program

Planned Number of Households To Be Served in Year Under this Program

Planned Number of Acres To Be Purchased in Year Under this Program

10

APR: Actual Number of Units Completed in Program Year

APR: Actual Number of Households Served in Program Year

APR: Actual Number of Acres Purchased in Program Year

**7.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

**Program Description**

**8.1. Program Name and Unique Identifier:**

Unique Identifier COVID-19 Prevention

COVID-19 Prevention - 13 - Housing Services for Shelter-In-Place for Low -Income Indian Households

**8.2. Program Description** (This should be the description of the planned program.):

The NHA will provide a variety of COVID-19 related housing services to NHA residents and sub-recipients, and other tribal members and families within Navajo Nation community to prevent the spread of the COVID-19. Activities will include delivery of meals, food, water, medical prescriptions to shelter-in-place families.

**8.3. Eligible Activity Number** (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

**8.4. Intended Outcome Number** (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

**Describe Other Intended Outcome** (Only if you selected "Other" above):

To prepare, prevent and respond to COVID-19.

**8.5 Actual Outcome Number** (In the APR identify the actual outcome from the Outcome list.):

[Redacted]

**Describe Other Actual Outcome** (Only if you selected "Other" above.):

[Redacted]

**8.6 Who Will Be Assisted** (Describe the types of households that will be assisted under the program.):

- Low-income Indian Households     Non-low income Indian Households     Non-Indian Households

Low-income Indian Households.

**8.7. Types and Level of Assistance** (Describe the types and the level of assistance that will be provided to each household, as applicable.):

The level of assistance will include NHA residents and sub-recipients, and other tribal members and families within Navajo Nation communities.

**8.8. APR:** Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs:

[Redacted]

**8.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
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20

APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
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**8.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

**Program Description**

**9.1. Program Name and Unique Identifier:**

Unique Identifier COVID-19 Respond

COVID-19 Respond - 16 - Improvements to Facilities Ventilation of NHA Office Buildings

**9.2. Program Description** (This should be the description of the planned program.):

Installation of HVAC filtration and UV lighting within all NHA buildings to provide clean and safe ventilation to employees who provide housing to low income families.

**9.3. Eligible Activity Number** (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

**9.4. Intended Outcome Number** (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(10) Improve energy efficiency

**Describe Other Intended Outcome** (Only if you selected "Other" above):

**9.5 Actual Outcome Number** (In the APR identify the actual outcome from the Outcome list.):

**Describe Other Actual Outcome** (Only if you selected "Other" above.):

**9.6 Who Will Be Assisted** (Describe the types of households that will be assisted under the program.):

Low-income Indian Households  Non-low income Indian Households  Non-Indian Households

NHA Employees providing housing to low income families.

**9.7. Types and Level of Assistance** (Describe the types and the level of assistance that will be provided to each household, as applicable.):

Type of assistance is to provide a healthy, safe and energy efficient environment for employees to work while providing services to low income families.

**9.8. APR:** Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

**9.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program	Planned Number of Households To Be Served in Year Under this Program	Planned Number of Acres To Be Purchased in Year Under this Program
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400

APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
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**9.10: APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))**

**Program Descriptions**

**10.1. Program Name and Unique Identifier:**

Unique Identifier COVID-19 Respond

COVID-19 Respond - 17 - Rehabilitation and Renovation of NAHASDA Public Rental Units

**10.2. Program Description** (This should be the description of the planned program.):

Rehabilitate and Renovate delapidated public rental units at Kayenta Sandstone Housing to increase housing availability for low income families in response to COVID-17 and the new variant.

**10.3. Eligible Activity Number** (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(5) Rehabilitation of Rental Housing [202(2)]

**10.4. Intended Outcome Number** (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(5) Address homelessness

**Describe Other Intended Outcome** (Only if you selected "Other" above):

**10.5 Actual Outcome Number** (In the APR identify the actual outcome from the Outcome list.):

**Describe Other Actual Outcome** (Only if you selected "Other" above.):

**10.6 Who Will Be Assisted** (Describe the types of households that will be assisted under the program.):

Low-income Indian Households  Non-low income Indian Households  Non-Indian Households

Low-income eligible families.

**10.7. Types and Level of Assistance** (Describe the types and the level of assistance that will be provided to each household, as applicable.):

The type and level of assistance to address high wait list of low income families across Navajo Nation seeking affordable housing. Public rental policy will be applied to serve up to 30% of income level.

**10.8. APR:** Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

**10.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program

Planned Number of Households To Be Served in Year Under this Program

Planned Number of Acres To Be Purchased in Year Under this Program

200

APR: Actual Number of Units Completed in Program Year	APR: Actual Number of Households Served in Program Year	APR: Actual Number of Acres Purchased in Program Year
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**10.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

**Program Descriptions**

**11.1. Program Name and Unique Identifier:**

Unique Identifier COVID-19 Respond

COVID-19 Respond - 18 - Emergency Response, Communication and Outreach to Prevent and Reduce COVID-19 for Low-income Families

**11.2. Program Description** (This should be the description of the planned program.):

1. IT equipment, laptops, printers, scanners and softward/hardware and telecommunication to maintain operation and carryout eligible activities, projects and programs; and 2. Risk Management and Safety Activities: Outreach to all NHA tenants regarding safety and prevention of COVID-19 virus.

**11.3. Eligible Activity Number** (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(18) Other Housing Services [202(3)]

**11.4. Intended Outcome Number** (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(6) Assist affordable housing for low income households

**Describe Other Intended Outcome** (Only if you selected "Other" above):

**11.5 Actual Outcome Number** (In the APR identify the actual outcome from the Outcome list.):

**Describe Other Actual Outcome** (Only if you selected "Other" above.):

**11.6 Who Will Be Assisted** (Describe the types of households that will be assisted under the program.):

Low-income Indian Households  Non-low income Indian Households  Non-Indian Households

Eligible low-income families

**11.7. Types and Level of Assistance** (Describe the types and the level of assistance that will be provided to each household, as applicable.):

Types of assistance will be to upgrade communication technology for NHA programs to maintain services and operation, and outreach to low income families residing in NHA public rentals and homeownership units about prevention and spread of COVID 19 virus.

**11.8. APR:** Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs.

**11.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program

Planned Number of Households To Be Served in Year Under this Program

Planned Number of Acres To Be Purchased in Year Under this Program

3000

APR: Actual Number of Units Completed in Program Year

APR: Actual Number of Households Served in Program Year

APR: Actual Number of Acres Purchased in Program Year

**11.10: APR:** *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

12.1. Program Name and Unique Identifier:

Unique Identifier COVID-19 Respond

COVID-19 Respond - 19 - Rehabilitation Assistance to Homeownership Units

12.2. Program Description (This should be the description of the planned program.):

Rehabilitation and renovation of homeownership units for the Navajo Nation low-income Veterans.

12.3. Eligible Activity Number (Select one activity from the Eligible Activity list. For any activity involving housing units as the output measure (excluding operations and maintenance), do not combine homeownership and rental housing in one activity, so that when housing units are reported in the APR they are correctly identified as homeownership or rental.):

(26) Other COVID-19 Activities Authorized by Waivers or Alternate Requirements

12.4. Intended Outcome Number (Select one outcome from the Outcome list. Each program can have only one outcome. If more than one outcome applies, create a separate program for each outcome.):

(12) Other - must provide description in boxes 1.4 (IHP) and 1.5 (APR) below

Describe Other Intended Outcome (Only if you selected "Other" above):

To prevent, prepare and respond to COVID-19.

12.5. Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

[Redacted]

Describe Other Actual Outcome (Only if you selected "Other" above.):

[Redacted]

12.6 Who Will Be Assisted (Describe the types of households that will be assisted under the program.):

- [X] Low-income Indian Households [ ] Non-low income Indian Households [ ] Non-Indian Households

Low-income Indian Households

12.7. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.):

The level and type of assistance will be to serve Navajo Veterans with renovation and/re rehabilitation of existing homes up to \$30,000.00 per home.

12.8. APR: Describe the accomplishments for the APR in the 12-month program year. In accordance with 24 CFR § 1000.512(b)(3), provide an analysis and explanation of cost overruns or high unit costs

[Redacted]

**12.9: Planned and Actual Outputs for 12-Month Program Year**

Planned Number of Units to be Completed in Year Under this Program

Planned Number of Households To Be Served in Year Under this Program

Planned Number of Acres To Be Purchased in Year Under this Program

10

APR: Actual Number of Units Completed in Program Year

APR: Actual Number of Households Served in Program Year

APR: Actual Number of Acres Purchased in Program Year

**12.10: APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))**

**SECTION 5: BUDGETS**

NAHASDA §§ 102(b)(2)(C), 404(b)

(1) Sources of Funding (NAHASDA § 102(b)(2)(C)(i), (404(b)) (Complete the non-shaded portions of the chart below to describe your estimated or anticipated sources of funding for the 12-month program year. APR Actual Sources of Funding – Please complete the shaded portions of the chart below to describe your actual funds received. Only report on funds actually received and under a grant agreement or other binding commitment during the 12-month program year.)

SOURCE	IHP					APR					
	(A) Estimated amount on hand at beginning of program year	(B) Estimated amount to be received during 12-month program year	(C) Estimated total sources of funds (A+B)	(D) Estimated funds to be expended during 12-month program year	(E) Estimated unexpended funds remaining at end of program year (C-D)	(F) Actual amount on hand at beginning of program year	(G) Actual amount received during 12-month program year	(H) Actual total sources of funding (F+G)	(I) Actual funds expended during 12-month program year	(J) Actual unexpended funds remaining at end of 12-month program year (H - I)	(K) Actual unexpended funds obligated but not expended at end of 12-month program year
IHBG-CARES Funds		\$22,333,177	\$22,333,177	\$22,333,177	\$0			\$0		\$0	

TOTAL	\$0	\$22,335,777	\$22,335,777	\$22,335,777	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL Columns C & H, 2 through 10			\$5					\$0												

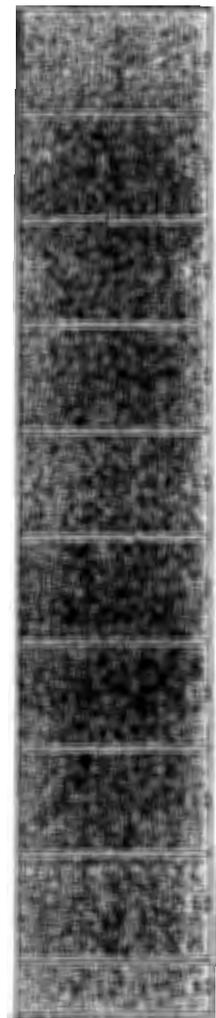
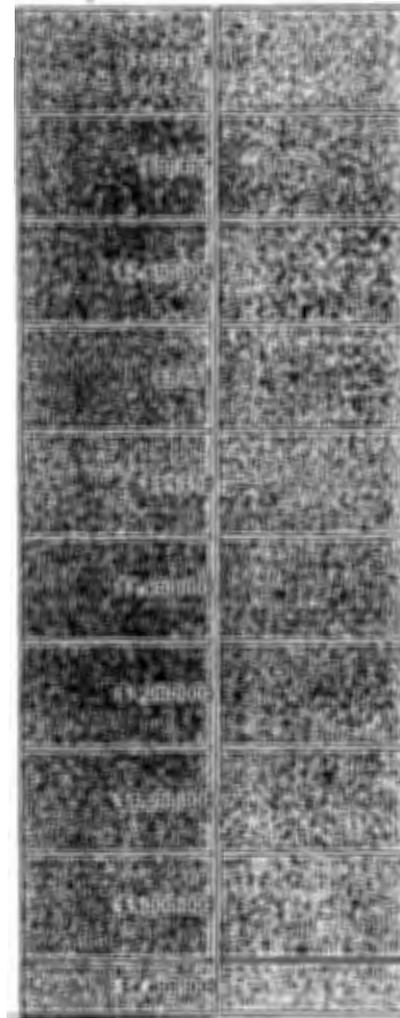
**Notes:**

- a. For the IHP, fill in columns A, B, C, D, and E (non-shaded columns). For the APR, fill in columns F, G, H, I, J, and K (shaded columns).
- b. Total of Column D should match the total of Column N from the Uses of Funding table below.
- c. Total of Column I should match the Total of Column Q from the Uses of Funding table below.
- d. For the IHP, describe any estimated leverage in Line 3 below (Estimated Sources or Uses of Funding). For the APR, describe actual leverage in Line 4 below.

(2) Uses of Funding (NAHASDA § 102(b)(2)(C)(ii)) (Note that the budget should not exceed the total funds on hand (Column C) and insert as many rows as needed to include all the programs identified in Section 3. Actual expenditures in the APR section are for the 12-month program year)

PROGRAM NAME	IHP			APR		
	(L) Prior and current year IHBG (only) funds to be expended in 12-month program year	(M) Total all other funds to be expended in 12-month program year	(N) Total funds to be expended in 12-month program year (L+M)	(O) Total IHBG (only) funds expended in 12-month program year	(P) Total all other funds expended in 12-month program year	(Q) Total funds expended in 12-month program year (O+P)
COVID-19 Respond - 1 - Emergency Health Services: Testing, Cleaning Supplies and PPE's for Low-Income	\$3,550,000					
COVID-19 Respond - 3 - Emergency Support to Nursing/Group Homes	\$467,835					
COVID-19 Respond - 6 - Emergency Operation and Maintenance of NAHASDA-Assisted Housing Units	\$1,250,000					

COVID-19 Prevention - 7 - Emergency Temporary Housing for Low-Income Indian Households	\$123,418
COVID-19 Prevention - 8 - Emergency Temporary Housing for Non-Low Income Indian Households	\$20,657
COVID-19 Respond - 10 - Emergency Health Services: Testing, Cleaning Supplies and PPE's for Non-Low	\$2,450,000
COVID-19 Respond - 12 - Emergency Temporary Rental Assistance for Non-Low Income Indian Households	\$3,751
COVID-19 Prevention - 13 - Housing Services for Shelter-In-Place for Low-Income Indian Households	\$51,516
COVID-19 Respond - 16 - Improvements to Facilities Ventilation of NHA Office Buildings	\$2,450,000
COVID-19 Respond - 17 - Rehabilitation and Renovation of NAHASDA Public Rental Units	\$1,250,000
COVID-19 Respond - 18 - Emergency Response, Communication and Outreach to Prevent and Reduce COVID-19 for	\$5,250,000
COVID-19 Respond - 19 - Rehabilitation Assistance to Homeownership Units	\$1,000,000
Planning and Administration	\$4,466,000



TOTAL

\$22,333,177	\$0	\$22,333,177	\$0	\$0	\$0
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Notes:

- a. Total of Column L cannot exceed the IHBG funds from Column C, Row 1 from the Sources of Funding table in Line 1 above.
- b. Total of Column M cannot exceed the total from Column C, Rows 2-10 from the Sources of Funding table in Line 1 above.
- c. Total of Column O cannot exceed total IHBG funds received in Column H, Row 1 from the Sources of Funding table in Line 1 above.
- d. Total of Column P cannot exceed total of Column H, Rows 2-10 of the Sources of Funding table in Line 1 above.
- e. Total of Column Q should equal total of Column I of the Sources of Funding table in Line 1 above.

(3) Estimated Sources or Uses of Funding (NAHASDA § 102(b)(2)(C)). (Provide any additional information about the estimated sources or uses of funding, including leverage (if any). You must provide the relevant information for any planned loan repayment listed in the Uses of Funding table on the previous page. This planned loan repayment can be associated with Title VI or with private or tribal funding that is used for an eligible activity described in an IHP that has been determined to be in compliance by HUD. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan):

(4) APR (NAHASDA § 404(b)) (Enter any additional information about the actual sources or uses of funding, including leverage (if any). You must provide the relevant information for any actual loan repayment listed in the Uses of Funding table on the previous page. The text must describe which loan was repaid and the NAHASDA-eligible activity and program associated with this loan.):

**SECTION 7: INDIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE**

NAHASDA § 102(b)(2)(D)

By signing the IHP, the recipient certifies its compliance with Title II of the Civil Rights Act of 1968 (25 USC Part 1301 et seq.), and ensures that the recipient has all appropriate policies and procedures in place to operate its planned programs. The recipient should not assert that it has the appropriate policies and procedures in place if these documents do not exist in its files, as this will be one of the items verified during any HUD monitoring review.

**(1) In accordance with applicable statutes, the recipient certifies that:**

It will comply with Title II of the Civil Rights Act of 1968 in carrying out this Act, to the extent that such title is applicable, and other applicable federal statutes.

Yes  No

**(2) In accordance with 24 CFR 1000.328, the recipient receiving less than \$200,000 under FCAS certifies that:**

There are households within its jurisdiction at or below 80 percent of median income.

Yes  No  Not Applicable

**(3) The following certifications will only apply where applicable based on program activities.**

a. It will maintain adequate insurance coverage for housing units that are owned and operated or assisted with grant amounts provided under NAHASDA, in compliance with such requirements as may be established by HUD;

Yes  No  Not Applicable

b. Policies are in effect and are available for review by HUD and the public governing the eligibility, admission, and occupancy of families for housing assisted with grant amounts provided under NAHASDA;

Yes  No  Not Applicable

c. Policies are in effect and are available for review by HUD and the public governing rents charged, including the methods by which such rents or homebuyer payments are determined, for housing assisted with grant amounts provided under NAHASDA; and

Yes  No  Not Applicable

d. Policies are in effect and are available for review by HUD and the public governing the management and maintenance of housing assisted with grant amounts provided under NAHASDA.

Yes  No  Not Applicable

**SECTION 8: IHP TRIBAL CERTIFICATION**  
 NAHASDA § 102(c)

This certification is used when a Tribally Designated Housing Entity (TDHE) prepares the IHP or IHP amendment on behalf of a tribe.

This certification must be executed by the recognized tribal government covered under the IHP.

- (1) The recognized tribal government of the grant beneficiary certifies that:
- (2)  It had an opportunity to review the IHP or IHP amendment and has authorized the submission of the IHP by the TDHE; or
- (3)  It has delegated to such TDHE the authority to submit an IHP or IHP amendment on behalf of the Tribe without prior review by the Tribe.

(4) Tribe:	Navajo Nation
(5) Authorized Official's Name and Title:	Jonathan Nez, President
(6) Authorized Official's Signature:	
(7) Date (MM/DD/YYYY):	

**SECTION 9: TRIBAL WAGE RATE CERTIFICATION**

NAHASDA §§ 102(b)(2)(D)(vi), 104(b)

By signing the IHP, you certify whether you will use tribally determined wages, Davis-Bacon wages, or HUD determined wages. Check only the applicable box below.

- (1)  You will use tribally determined wage rates when required for IHBG-assisted construction or maintenance activities. The Tribe has appropriate laws and regulations in place in order for it to determine and distribute prevailing wages.
- (2)  You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance activities.
- (3)  You will use Davis-Bacon and/or HUD determined wage rates when required for IHBG-assisted construction except for the activities described below.

(4) If you checked the box in Line 3, list the other activities that will be using tribally determined wage rates:

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**SECTION 12: AUDITS**

24 CFR § 1000.544

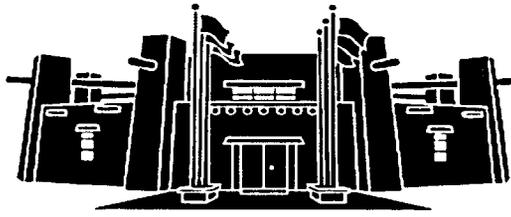
This section is used to indicate whether a financial audit based on the Single Audit Act and 2 CFR Part 200 Subpart F is required, based on a review of your financial records.

Did you expend \$750,000 or more in total Federal awards during the APR reporting period?

Yes  No

If Yes, an audit is required to be submitted to the Federal Audit Clearinghouse and your Area Office of Native American Programs.

If No, an audit is not required.



## MEMORANDUM

TO: Honorable Thomas Walker, Jr.  
Cameron, Coalmine Canyon, Birdsprings, Leupp, Tolani Lake Chapters

FROM: Mariana Kahn  
Mariana Kahn, Attorney  
Office of Legislative Counsel

DATE: October 21, 2022

SUBJECT: PROPOSED STANDING COMMITTEE RESOLUTION; AN ACTION RELATING TO RESOURCES AND DEVELOPMENT; AN ACTION RELATING TO RESOURCES AND DEVELOPMENT; APPROVING THE CARES ACT INDIAN HOUSING BLOCK GRANT AMENDMENT NO. TWO FOR FISCAL YEAR 2020

Pursuant to your request, attached is the above-referenced proposed resolution and associated legislative summary sheet. Based on existing law the resolution as drafted is legally sufficient. However, as with all legislation, it is subject to review by the courts in the event of a challenge.

The Office of Legislative Council confirms the appropriate standing committee(s) reviews based on the standing committees' powers outlined in 2 N.N.C. §§ 301, 401, 501, 601 and 701. Nevertheless, "the Speaker of the Navajo Nation Council shall introduce [the proposed resolution] into the legislative process by assigning it to the respective oversight committee(s) of the Navajo Nation Council having authority over the matters for proper consideration." 2 N.N.C. § 164(A)(5).

Please review the proposed resolution to ensure it is drafted to your satisfaction. If this proposed resolution is acceptable to you, please sign it where it indicates "Prime Sponsor", and submit it to the Office of Legislative Services for the assignment of a tracking number and referral to the Speaker. If the proposed resolution is unacceptable to you, or if you have further questions, please contact me at the Office of Legislative Counsel and advise me of changes you would like made to the proposed resolution. You may contact me at (928) 871-7166.