



THE NAVAJO NATION
Capital Projects Management Department
Division of Community Development

APPLICATION FOR SERVICES

TODAY'S DATE: _____

AGENCY: _____

TYPE OF PROJECT:

- Chapter House, Multi-Purpose, Senior Center, Preschool, NN Facilities, Powerline Ext., Sewer Lagoon, Waterline, Sewerline, Housewiring, Bathroom Addition, Other

PURPOSE:

RECEIVED DATE: _____
Approved: _____
Disapproved: _____
ASSIGNED TO: _____
OFFICE USE ONLY

_____ hereby request for technical assistance
SPONSORSHIP/CHAPTER/DEPARTMENT/PROGRAM

for the following areas:

- Project Evaluation, Schematic Design, Cost Estimation, Construction Drawings, Specification Development, Design Development, Contract Development, Negotiation, Evaluation of Contract Proposals, Meeting Attendance, Inspection, Other

MAILING

ADDRESS:

NAME OF ORGANIZATION
CONTACT PERSON/TITLE
ADDRESS
CITY STATE ZIP CODE
PHONE: FAX NUMBER:
E-MAIL ADDRESS:

CHECKLIST OF PROJECT REQUIREMENTS:

Do you have the following?

Funding Appropriations

- Source: CP/TIF, AML, NAAA, Gaming Business Unit:
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- Land Withdrawal/Land Designation, Chapter Approval/Resolution, Environmental Review/Compliance, Off. of Environmental Health (IHS) Assessment, Cultural Resource Compliance Form, Biological Clearance Form, Easement/Right-of-Way, Land Use, Cost Estimate, Geotechnical Survey, Site Analysis, Scope of Work/Background Information, Utility Assessment, Other, Building Data, Square Foot (Size), Electrical Service Cost, Project Budget, Feasibility Studies

PLEASE ATTACH A DETAILED LETTER FOR SERVICES REQUESTED AND A CHAPTER RESOLUTION THAT INDICATES THE NEED AND PRIORITY OF THE PROPOSED PROJECT AND IN ACCORDANCE WITH THE LOCAL LAND-USE PLAN AND SEND TO:

Capital Projects Management Department, Post Office Box 610, Window Rock, Arizona 86515