

# The Navajo NationDR.BUU NYGREN PRESIDENTYideeskáadi NitsáhákeesRICHELLE MONTOYA VICE PRESIDENT

# RFP # 25-05-3668GC

Request for Proposals

Generator replacement, removal and install of old natural gas lines, gas regulators, old electrical wires

### **Project Title:**

The Navajo Nation Department of Corrections - Chinle Youth Corrections Center is requesting for proposals for a generator replacement. Project includes removal and install of old natural gas lines, gas regulators, old electrical wires and commissioning a new generator at the Chinle Youth Corrections center.

### Proposal:

All interested and qualified parties are invited to review the RFP on <u>www.nnooc.org</u> or request for copies by contacting Gerald Benally, Delegated Corrections Lieutenant at (928) 674-2291 or <u>grbenally@navajo-nsn.gov</u> or Geraldson Brown, Building Maintenance Supervisor at (928) 674-2365 or <u>gbrown@navajo-nsn.gov</u>. There will be an on-site walk thru on May 15, 2025 at 10:00 a.m.

### Proposal Due Date:

Proposals due on June 6, 2025 by 3:00 p.m. Costs are to be submitted in a separate sealed envelope and late proposals will not be accepted.

LATE PROPOSALS WILL NOT BE ACCEPTED

All parties responding to this bid are instructed to submit three (3) proposals to the following address:

The Navajo Nation Department of Corrections Attention: Geraldson Brown, Building Maintenance Supervisor P.O. Box 1756 Chinle, Arizona 86503

Responses to this bid shall be sent in a sealed envelope, including a return address, and clearly marked on the outside of the envelope the following:

#### RFP # 25-05-3668GC

NDOC - Chinle District Generator replacement DO NOT OPEN-BID PROPOSAL

#### GENERAL INFORMATION AND GUIDELINES FOR THIS RFP

Request for Proposals

Generator replacement, removal and install of old natural gas lines, gas regulators, old electrical wires

### • DESCRIPTION OF THE ORGANIZATION

The Navajo Nation Department of Corrections (NDOC) Chinle District is a Detention facility for youth offenders. The facility's generator is in need of a replacement which includes removing the old equipment, removal of old natural gas lines, gas regulators, and old electrical wires and installing a brand new generator and fully commissioning it for operations.

# • SCOPE OF THE CONTRACT

NDOC Chinle District, intends to enter a professional service contract with (1) one responsible, qualified and independent building Contractor to provide work as described at Chinle, Arizona.

### • **RESPONDENT REQUIREMENTS**

The respondent will furnish all requested (required) information as specified in the RFP. All respondents must have the capabilities listed herein, including sufficient detailed information with regard to experience and expertise in meeting the following requirements.

- A legitimate and credible vendor with a minimum of 5 years of experience and a history with providing building repairs with an emphasis for plumbing, electrical and carpentry trades.
- The Navajo Business Opportunity Act 5 NNC § 201, 205 will apply.
- All workmanship and materials shall comply with applicable Safety Codes.
- A detailed scope of work, project timeline and drawings of all work.

#### • SCOPE OF WORK

NDOC Chinle District, is seeking a building Contractor that can provide and conduct all of the following services:

- Remove the old equipment
- Remove old natural gas lines, gas regulators, and old electrical wires.
- Installation of a one BlueStar power system Industrial open until Diesel Generator Set rated at 130kW and fully commissioning it for operations.
- Provide warranty service on all applicable products and services.
- Meet a stringent schedule to meet the needs of the Chinle District Corrections' facility.
- Site Work: The contractor will furnish all equipment, materials and manpower for the labor that is needed to complete the site work relating to the project.
- Demolition: The Contractor will demolish and dispose of all materials relating to the deconstruction/replacement of the existing fixtures required to complete repairs. Materials will be reused, recycled or disposed of as applicable.

- Installation: The Contractor will furnish all labor and materials necessary to complete the installation of the generator.
- Clean up: The contractor will be responsible for all construction related clean up and debris disposal. The Contractor will also isolate work areas to minimize impact to non-work-related spaces: however, some dust and debris propagation should be expected.
- Training: The Contractor will provide training to staff on preventive maintenance of new equipment.

### • PROPOSAL CONTENT AND REQUIRED INFORMATION

Please utilize the outline described below with 5 copies.

- Organization letter expressing your interest and a brief description of your proposed services. (DO NOT reveal or make reference to the cost in this letter).
- Costs are to be submitted in a separate sealed envelope. (Detailed breakdown of costs: Materials, Labor, and other applicable costs: Navajo Nation Tax 6%).
- Organization qualifications and similar project experience on the Navajo Nation. Include project site(s), and site contact information, and credentials of persons assigned to this project.
- Scope of Work inspection and repair methodology
- Product Specification including cut sheets.
- Design (detailed plans).
- Project Schedule.
- Copies of licenses, certifications, insurance certifications, Performance Bond, Recent Revised IRS W-9 form (March 2024), Navajo Nation Debarment & Suspension Form, and Navajo Nation USDOJ Debarment Suspension Form.
- Compliance: Any proposal that does not adhere to this format and does not address each specification, requirement, or scope of work as outlined, may be deemed non-responsive and rejected on that basis.

#### EVALUATION PROCESS

- Evaluation Criteria
  - Qualifications, credentials, and 5-years work experience on the Navajo Nation. This includes the capabilities to provide all requested services. (20 points)
  - Recommended Solution (10 points)
  - Scope of Work (15 points)
  - Quality of products, ability to install (15 points)
  - Warranty services. (15 points)
  - Project Schedule. (15 points)
  - Price (10 points)
- Applicable Federal Requirements (25 CFR 900, OMB Circular A-87, GSA qualified vendor, etc.)
- NDOC Chinle District reserves the right to interview respondents if deemed necessary due to tied scores or other legitimate matters. This may entail a presentation from the respondent for clarification and/or details on products or

other requirements. The presentation will be scheduled to be presented in Chinle, Arizona (if necessary). It is the intention to award one (1) professional services contract to one vendor to provide all services as specified.

#### • TYPE OF CONTRACT

The Navajo Nation will utilize a standard Professional Services Contract for the procurement of goods and services for this project.

### • TAX

All appropriate taxes should be included in cost of services including the 6% Navajo Sales Tax.

### • TERM

The Navajo Nation will not relinquish any of its sovereignty rights.

#### • COMPLIANCE WITH LAWS AND REGULATIONS

The successful Vendor shall comply with all Federal, Tribal, State and Local Laws, regulations and Navajo Nation rules and policies pertaining to work under our charge, and shall, at its expense, procure any permits that may be required.

### • PERIOD OF PERFORMANCE

The period of the performance will be determined and negotiated based on the scheduled proposed by the respondent and the contract implementation date.

# • TECHNICAL DIRECTION

The point of contact is Geraldson Brown, Maintenance Supervisor <u>gbrown@navajo-nsn.gov</u> and Gerald Benally, (D) Corrections Lieutenant <u>grbenally@navajo-nsn.gov</u>

# • PAYMENT AND SUBMISSION OF INVOICES

The Navajo Nation Professional Service Contract will describe this section.

#### • **RIGHTS**

The Navajo Nation reserves the right to reject any and all proposals, in whole or part based on the requirements set forth in this RFP.

#### • AGREEMENTS TERMS AND CONDITIONS

The Navajo Nation Professional Services Contract will provide all the legal and contractual obligations, terms, and requirements of this project.

#### • OTHER

See attachments.

#### Exhibit A IRS forms W-9 (2024 version)

Before you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.    Before you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.    1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)     2 Business name/disregarded entity name, if different from above.     3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.     individual/sole proprietor     C corporation S corporation     Buttlet     C corporation     Buttlet     C corporation     D corporation     C corporation     C corporation     C corporation     C corporation     D corporation     D corporation     C corporation     C corporation     C corporation     D corporation <th colspan="2">Form <b>W-9</b> (Rev. March 2024) Department of the Treasury</th> <th colspan="2">Request for Taxpayer Identification Number and Certification Go to www.irs.gov/FormW9 for instructions and the latest information.</th> <th>Give form to the requester. Do not send to the IRS.</th>	Form <b>W-9</b> (Rev. March 2024) Department of the Treasury		Request for Taxpayer Identification Number and Certification Go to www.irs.gov/FormW9 for instructions and the latest information.		Give form to the requester. Do not send to the IRS.	
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30       Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.       4       Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):         1       Individual/sole proprietor       C corporation       Partnership       Trust/estate         1       Individual/sole proprietor       C corporation, S = S corporation, P = Partnership       Trust/estate         1       LLC. Enter the tax classification of the cut, used is a disregarded entity. A disregarded entity should instead check the appropriate code (C, S, or P) for the tax classification of the LLC, uses it is a disregarded entity. A disregarded entity should instead check the appropriate code (G any)       Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (f any)         30       If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions       (Applies to accounts maintained outside the United States.)         6       City, state, and ZIP code       7       List account number(s) here (optional)       Exemption from Sole proprietor, or disregarded entity, see the instructions for Part I, later. For other <ul> <li>accial security number</li> <li>accial security number</li> <li>accial security number</li> <li>accial security number</li> <li>accial security number</li></ul>	Delor	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded				
View of the spherophase boxes.     A decision of the Camporation of the entry/individual windse name is entered of time 1. Clear is the spherophase boxes.     A decision of the spherophase boxes and in the entry space, enter the appropriate code (C, S, or P) for the tax     Compliance Act (PATCA) reporting     Code (if any)     Exemption from Foreign Account Tax     Compliance Act (PATCA) reporting     Code (if any)     Applies to accounts maintained     outside the United States.)     Address (number, street, and apt. or suite no.). See instructions.     A decision of the spherophase box.     A decision of the spherophase box.     The spherophase box.     The spherophase box.     The Taxpayer Identification Number (TIN)     A decision on the spherophase box.     The Taxpayer Identification number (EIN).     For undividuals, this is generally your social security number (SSN).     How the spherophase box.     The spherophase box.     The spherophase box.     The spherophase box has an under the name given on line 1 to avoid     backup withholding.     For individuals, this is generally your social security number (SSN).     How to get an     Thy, later.     Note: If the account is in more than one name, see the instructions for Piart I.     Secial security number     Certification     Address for guidelines on whose number to enter.     Part II     Certification	Print or type. See <b>Specific Instructions</b> on page 3.	2 Business name/disregarded entity name, if different from above.				
		only one of the following seven boxes.         Individual/sole proprietor       C corporation       S corporation       Partnership       Trust/estate         LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)       Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax			certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)	
		box for the tax classification of its owner.			Compliance Act (FATCA) reporting	
		and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check				
7 List account number(s) here (optional)         Part I Taxpayer Identification Number (TIN)         Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entify, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN, later.       Social security number         Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.       Employer identification number         Part II       Certification		5 Address (numbe	r, street, and apt. or suite no.). See instructions.	Requester's name	and address (optional)	
Part I       Taxpayer Identification Number (TIN)         Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later.       Social security number (DV = 0 + 0)         Image: Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.       Social security number of Content in the proprietor of the proprise of the proprietor of the propr		6 City, state, and	ZIP code			
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Enter your TIN In the appropriate box. The TIN provided must marine given on line T to avoid     ackup withholding. For individuals, this is generally your social security number (SSN). However, for a     resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other     entities, it is your employer identification number (EIN). If you do not have a number, see How to get a     TIN, later.     Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.     Part II     Certification	Par	tl Taxpaye	er Identification Number (TIN)			
Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.         Part II       Certification	Enter your TIN in the appropriate box. The TIN provided must match the name given on line T to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i> or					
	Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.					
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1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and

3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person

#### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

#### What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners were by be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

#### Purpose of Form

Date

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

Cat. No. 10231X

Form W-9 (Rev. 3-2024)

#### Exhibit B Navajo Nation Debarment and Suspension

#### NAVAJO NATION CERTIFICATION Regarding Debarment, Suspension, and Contracting Eligibility

- 1. Applicant entity acknowledges that to the best of its knowledge that the Applicant entity, either in its present form or in any identifiable capacity, has not, in accordance with 12 N.N.C. § 361:
  - A. Been convicted of the commission of criminal offenses incident to obtaining or attempting to obtain a public or private contract or subcontract, or in the performance of any such contract or subcontract;
  - B. Been convicted of embezzlement, theft, forgery, bribery, falsification or destruction of records, receiving stolen property, or other offenses indicating a lack of business integrity or honesty, which currently, seriously, and directly affect responsibility as a Navajo Nation contractor;
  - C. Been convicted under antitrust statutes arising out of the submission of bids or proposals;
  - D. Violated contract provisions, including:
    - i. Deliberate failure, without good cause, to perform in accordance with the contract specifications or within the time limit provided in the contract,
    - ii. A recent record of failure to perform or of unsatisfactory performance with the terms of any contract, or
  - Any other cause so serious and compelling as to affect responsibility as a Navajo Nation contractor, including debarment by another governmental entity.
- 2. Applicant acknowledges that if the Navajo Nation determines that the executed Certification provided herein is untrue or not wholly accurate, it shall be grounds for the Navajo Nation to terminate the contract and pursue other legal remedies, at the Navajo Nation's discretion.
- 3. Applicant certifies to the best of its knowledge that it is eligible to do business with the

Navajo Nation Debarment, Suspension, and Eligibility Form – NNDOJ/TFU.14Jul22 Page 1 of 2

Navajo Nation, in its present form or in any other identifiable capacity, pursuant to 12 N.N.C. § 1501 and 5 N.N.C. § 301. Applicant also acknowledges that per 12 N.N.C. § 1505, it will not be eligible to contract with the Navajo Nation if deemed ineligible by the appropriate department or entity of the Navajo Nation which receives the Applicant's request for consideration for a business opportunity.

Applicant Name	Name of individual signing on Applicant's behalf (print)
Applicant Address	Title of individual signing on Applicant's behalf
Applicant Address	Signature of individual signing on Applicant's behalf
Applicant Address	Date

Navajo Nation Debarment, Suspension, and Eligibility Form – NNDOJ/TFU.14Jul22 Page 2 of 2