

REQUEST FOR PROPOSAL

BID DUE DATE: June 20, 2025 (5:00 pm MDST)

DESCRIPTION: Request for proposal for Fleet vehicles

BID NO. 25-05-3683SB

CONTACT PERSON: Raymond Holyan, Department Manager III
Fleet Management Department
Division of General Services
THE NAVAJO NATION
Telephone Number: (928) 871-6662
Fax Number: (928) 871-7038

RETURN ALL RESPONSES TO:

DELIVER TO: THE NAVAJO NATION
Fleet Management Department
Building 2749, Indian Route 100
Window Rock, Arizona 86515
ATTN: Verna S. Yazzie
BID NO. **25-05-3683SB**

OR

MAIL TO: THE NAVAJO NATION
Fleet Management Department
Post Office Box 608
Window Rock, Arizona 86515
ATTN: Verna S. Yazzie
BID NO. **25-05-3683SB**

(Must identify Bid# and Company Name on the outside of a sealed envelope)

Please submit an original, and two extra (2) copies of your bid to be enclosed in One sealed envelope, with the following attachments: 2024 W-9, and NN Debarment form.

Proposals will not be accepted after deadline

No facsimile, electronic or telephone proposals will be accepted

Bid shall include vehicle & upfit pricing into One complete price bid

Navajo Nation Fleet Management Department follows the Navajo Nation Business Opportunity Act.
<https://www.nnooc.org/request-for-proposals/>

A. PURPOSE OF THIS REQUEST FOR PROPOSAL (RFP)

The Navajo Nation Fleet Management Department within the Division of General Services is seeking to purchase Seven (7) Sports Utility Vehicles-Mid Size, the proposed model is a 1LB56 – AWD 4 dr LT w/2LT or Equal. The specification sheet is attached by exhibits (A), please review carefully. All respective auto dealers must be from an authorized and fully certified licensed automotive dealership that meets all the standards and qualifications from the vehicle manufacturers in terms of facilities, equipment, parts, tools and trained technicians to handle all required services. Vehicles must be delivered in a timely manner as bid evaluation will be based on most responsive bid. Bid price shall be F.O.B. (Freight on Board) to Window Rock and to the designated delivery point at Fleet Management Department. Vehicles shall be delivered to the Navajo Nation free from any purchase money or other lien or security interest notwithstanding any applicable Navajo Nation sales Tax. The manufacturer's published warranty for each vehicle shall apply to all vehicles purchased by the Fleet Management Department.

B. CONDITIONS GOVERNING THE PROCUREMENT

Bid price shall be effective on date of award and the availability of funds will determine the number of vehicles to be purchased, and additional Navajo Nation procurement for like-kind and quality of vehicle, also qualified for bid price. Fleet Management personnel will make on-site visits to either manufacturer's/bidder's facilities, as needed, to ensure compliance with specifications are met, or approve any deviations, if necessary.

Time schedule for advertisement and deadline for bid submissions will follow the chart as indicated:

Advertise Request for Proposal	DATE: June 5, 2025
Deadline for RFP Submittals	DATE: June 20, 2025
Official Opening Bid Proposals	DATE: June 23, 2025
Award Bid	DATE: June 25, 2025

The dates on the time schedule are all tentative, any changes will be at the discretion of Fleet Management Department.

The respective bidder must disclose upfit vendor, location, and pricing of all upfit parts and installation fees. Schematics of wiring diagram shall be submitted once bidder is identified. Pricing of the upfit should match the specification/price sheet on all specification exhibits.

A selection criterion will be used to determine an adequate responsive bidder and they are as follows:

Criteria	Weighted Points
Responsiveness/Complete Bid Submission	5 POINTS
Pricing	5 POINTS
Specification	5 POINTS
Vehicle Availability	5 POINTS
Total	POINTS

The respective bidder shall include the Navajo Nation Sales Tax, 6% on all goods and services pertaining to this proposal, Navajo Nation sales tax (6%) [24 NNC § 601 et seq.]. For more information or specific questions regarding the applicable sales tax, please contact the Office of the Navajo Tax Commission, Compliance Department at 928-871-6681.

Fleet reserves the right to reject any and all proposals.

All upfit personnel must be EVT (Emergency Vehicle Technician) certified to perform emergency equipment installation and repairs.

The Navajo Nation Fleet Management will receive, at time of delivery of vehicles, all pertinent documents necessary for titling and licensing vehicles, documents include Manufacturer's Statement of Origin, Odometer statement. Provide schematics of the upfit. Only Fleet Management will be responsible for registering all vehicles through the Navajo Nation Property Management Department.

The Navajo Nation is a sovereign government and all contracts entered because of the RFP shall comply with the Navajo Nation Laws, rules and regulations, Navajo Business Opportunity Act and including the Navajo Preference in Employment Act, and applicable federal law, rules, and regulations.

C. SPECIFICATIONS

See the following attachments (exhibit A – 1LB56 – AWD 4 dr LT w/2LT or equal), the specifications for each class of vehicle and required quantity, including any additional not included in the exhibits. Bid price must meet minimum specification or exceed minimum specifications. Bid must note any exceptions.

FLEET MANAGEMENT DEPARTMENT

Vehicle Acquisition

Bid Number:

2025/2026 Vehicle Specifications

<u>Vehicle Class</u>		<u>Description</u>	<u>Quantity</u>
XVII	2025/2026	1LB56 AWD 4 dr LT w/2LT Mid Size SUV	7
Total:			7

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
 - iii. 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, 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

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.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	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. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> 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 classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b	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 _____ <input type="checkbox"/>	
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	6	City, state, and ZIP code	
	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 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.

Social security number	
<input type="text"/>	<input type="text"/>
or	
Employer identification number	
<input type="text"/>	<input type="text"/>

Part II Certification

Under penalties of perjury, I certify that:

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

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 may 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

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