#### DIVISION OF PUBLIC SAFETY – NAVAJO NATION DEPARTMENT OF FIRE & RESCUE

#### HAZARDOUS MATERIALS EQUIPMENT

#### **INVITATION FOR BID**

BID NO: 25-10-3891DB

BID DUE DATES: October 31, 2025, BY 5:00 PM DST

ANY BIDS RECEIVED AFTER THIS DATE/TIME WILL NOT BE ACCEPTED

DESCRIPTION: DIVISION OF PUBLIC SAFETY – NAVAJO NATION DEPARTMENT OF FIRE

& RESCUE

HAZARDOUS MATERIALS EQUIPMENT

CONTACT PERSON: John Williams, Fire Chief

Division of Public Safety - Department of Fire & Rescue

Email: johnwilliams@navajo-nsn.gov

Phone: (928) 871-6915

MUST IDENTIFY BID# AND COMPANY NAME ON THE OUTSIDE OF ALL SEALED BID PACKAGE/

ENVELOPE (UPS OR FEDEX)

MAIL/DELIVER TO: THE NAVAJO NATION

PURCHASING SERVICES DEPARTMENT ADMINISTRATION BUILDING #1 – 1<sup>ST</sup> FLOOR

WINDOW ROCK BLVD

WINDOW ROCK, ARIZONA 86515 ATTN: PURCHASING SECTION

BID NO: 25-10-3891DB

PLEASE SUBMIT AN **ORIGINAL AND TWO (2) COPIES** OF YOUR BID IN A SEALED ENVELOPE AND CLEARLY MARK ON THE OUTSIDE OF THE ENVELOPE

BID NO: 25-10-3891DB

DIVISION OF PUBLIC SAFETY – NAVAJO NATION DEPARTMENT OF FIRE & RESCUE

HAZARDOUS MATERIALS EQUIPMENT PRIORITY STATUS

#### A. PURPOSE OF THIS INVITATION FOR BID (IFB)

The Navajo Nation Fire & Rescue Service (NNFRS) is requesting bids from vendors to purchase hazardous materials - (supply and equipment) for the entire department. This invitation for bid is intended to solicit bids from prospective qualified vendor(s) on the proposed specification, as identified in Section C.

#### B. CONDITIONAL GOVERNING THE PROCUREMENT

The Navajo Nation Fire and Rescue Service (NNFRS) will comply with all federal and tribal laws and regulations pertaining to the procurement of these items. The NNFRS reserves the right to reject any IFB, in whole or in part. The IFB is not a legal binding agreement, obligation, or contract and any cost incurred by the respondent in preparing, transmitting, presenting, or modifying the IFB shall be the responsibility of the respondent. Indian preference will apply to this IFB as well as vendors who should indicate they are Navajo Nation priority one or two vendors.

## C. SPECIFICATIONS

20	ALTAIR 5X Multigas Detectors w/ calibration gas,	
	probes, re-charging docks	
200	ALTAIR 5X Multigas Detectors replacement	
	sensors per each unit (5 sensors x 2 each) x 20	
	detectors.	
10	Sensit HXG-3 CGI meters w/ probes and	
	calibration gas/tubing	
2	RAE Systems MultiRAE Pro 2/ calibration gas,	
	probes, re-chargable	
2	Ludlum Model 14C-RK Kits	
8	Ortec Radeaglet-R RIID Detectors	
4	AccuRad PRD Personal Radiation Detectors	
2	Agilent Handheld Raman Spectrometers	
1	Thermal Imaging Camera	
12	Drager Tubes - Chlorine	
12	Drager Tubes – Carbon Monoxide	
12	Drager Tubes - Ammonia	

10	Draeger Tube Pump Accuro kit w/ hard sided case		
12	2 Large pH paper test strips 2-10 range – 1" x 9"		
	(tube containers)		
12	BartOvation pH Test Strips 1-14 (tube containers)		
12	Potassium Iodide Starch Oxidizer test strip (tube		
	containers)		
12	Nerve agent test strips (M8 paper) (1 kit of 12)		
1	M256A1 chemical agent detector kits (12 in one		
	kit)		
2	HazCat 2.0 Pro Chemical Identification kits		
2	10 pk box – Pro Strips Biological Warfare Agent		
	Detection Kit – Multi-agent		
4	Confined space ventilation fans		
4	Confined space ducts		
8	DuPont Tychem 10000 Encapsulated Level A –		
	certified to NFPA 1990 (NFPA 1994 Class 2)		
2	Cases of DuPont TyChem 10000 TK128T - (XL)		
2	Cases of DuPont TyChem 10000 TK128T - (2X)		
2	Cases of DuPont TyChem 10000 TK128T - (3X)		
2	Cases of DuPont TyChem 10000 TK128T - (4X)		
2	Boxes of DuPont TyVex (2X)		
8	HazMat Boots – 10 Wide (Tingley) #82330.10		
8	HazMat Boots – 12 Wide (Tingley) #82330.12		
8	HazMat Boots – 13 Wide (Tingley) #32330.13		
1	Dupont Universal Pressure test kit #990810 UV		
9	DQE Standard Decon Shower Systems		
10	Decon shower elevation grids		
8	Decon wands		
1	Large catch pools 50x50		
1	Decon waste enclosed waste tank – 300 gallons		
1	MasCas II Decon Shower Systems 4 stall - w/		
	economy ground tarp, electric water pump, fire		
	hose reducing manifold, flexible wastewater tank,		

	heavy duty privacy screen, single stall conversion	
	kit for MasCas II shower, wasterwater hose, and	
	water supply hose.	
1	Mass decon shower air cooling unit	
1	Portable water heaters for mass decon shower	
1	Mass decon shelter air heating system	
1	Mass decon shower conveyer roller system	
2	Decon shower electric submersible pumps	
10	HY-D mass decontamination - nozzles	
1	DQE Equipment Decon Station System	
9	Task Force Tips DECON/pak	
18	Task Force Tips PRO/pak	
2	3M Scott Ska-Pak AT - Supplied Air Respirators	
	(SAR) 15 min. version – 4500 psi carbon	
1	3M Scott Mobile Air Supply Cart	
20	Air-Purifying Respirators (APR) w/ vapor/gas	
	filters/canisters/cartridges	
20	Powered Air-Purifying Respirators (PAPR) w/	
	mask/hoods	
9	Boxes of Chemical-resistant inner gloves (various	
	sizes)	
8	Type II Hard hats- Grey	
24	Kappler Chem-Tape Chemical Resistant Tape (24	
	rolls)	
1	Certified Clean 2 oz. Clear Glass Sample Jars	
	(24/cs)	
1	Certified Clean 2 oz. Amber Glass Sample Jars	
	(24/cs)	
1	Certified Clean 40 mL Clear Glass Vials (72/cs)	
1	Certified Clan 40 mL Amber Glass Vials (72/cs)	
8	16 pc Emergency Plug and Wedge Kit	
1	104 pc Emergency Plug and Wedge Kit	
2	Overpack 55 gallon drums	

20	Plug n Dike 5 gal. buckets	
10	Plug/leak control kits for liquid/gas/bulk material	
	leaks	
80	10 boxes of absorbent socks – 20 ft. x 8	
3	Emergency Rescue Stretcher Kit - HMH Sked	
	Rescue System with strap kit	
4	Non-sparking shovels	
2	HazMat clean-up push brush/broom	
2	Ampco USA Non-sparking tool kits	
1	Chlorine Institute Emergency Kit A – Cylinder	
	Tank	
1	Chlorine Institute Emergency Kit B – Ton	
	Containers	
1	Chlorine Institute Emergency Kit C – Tank Car	
1	Hi-Vis Heavy Duty Woven Tarp - 40 x 60'	
1	Newson-Gale Hazmat Grounding and Bonding	
	Kit	
1	Propane flare kit – The Dragon Slayer	
1	Hazmat Stinger Kit	
2	E-Z Up Work Cube (Limeade)	
4	LTA Project - AirLight Flash 8 feet lighting towers	
1	LTA Project – AirLight Pro Max 14 feet lighting	
	tower	
4	Kore Kooler Rehab Chairs	
1	Indian Springs Chlorine Kit A – Training Cylinder	
1	Indian Springs Chlorine Kit B – Training End with	
	Wheels	
1	Indian Springs Chlorine Kit C – Tank Car Training	
	Dome	
12	HazCat Refresher Training Kit KTC2002 2.0	
2	M256 Chemical Detection Training Kits	
4	Kappler Zytron 500 Training Suits – ZCS555	
	(LG/XL) (Charcoal)	

4	Kappler Zytron 500 Training Suits – ZCS555	
	(2X/3X) (Charcoal)	
25	NIOSH Pocket Guide to Chemical Hazards	
30	Emergency Response Guidebook ERG – 2024	
	Edition, Spiral Bound	
	Shipping (If Applicable)	
	Sales Tax	
	Grand Total	

BIDS ARE TO BE ON COMPANY LETTERHEAD WITH UNIT PRICE, SUBTOTAL, NAVAJO NATION SALES TAX (6%), SHIPPING, IF APPLICABLE, AND GRAND TOTAL

BIDS MUST INCLUDE NAVAJO NATION CERTIFICATION REGARDING DEBARMENT & SUSPENSION AND W-9 FORMS.

#### 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

Form **W-9**(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

# 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.						
	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the own entity's name on line 2.)	ner's name on line	1, and enter the business/disregarded		
	2	Business name/disregarded entity name, if different from above.				
Print or type. See Specific Instructions on page 3.	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> 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 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.		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		
	3b	Other (see instructions)  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 is box if you have any foreign partners, owners, or beneficiaries. See instructions		code (if any)  (Applies to accounts maintained outside the United States.)		
See	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name a	and address (optional)		
	6	City, state, and ZIP code				
	7	List account number(s) here (optional)				
Par	t I	Taxpayer Identification Number (TIN)				
		ur TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoi	iu <u> </u>	curity number		
reside	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>					
TIN, la	ter.	<b>'</b> .	or Employer	identification number		
Note: Numb	If th	the account is in more than one name, see the instructions for line 1. See also What Name ar To Give the Requester for guidelines on whose number to enter.				
Par	t II	Certification				
Unde	ре	enalties of perjury, I certify that:				
2. I an Ser	n no vice	umber shown on this form is my correct taxpayer identification number (or I am waiting for a ot subject to backup withholding because (a) I am exempt from backup withholding, or (b) I I e (IRS) that I am subject to backup withholding as a result of a failure to report all interest or ger subject to backup withholding; and	have not been no	otified by the Internal Revenue		
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.						
becau	se y	tion instructions. You must cross out item 2 above if you have been notified by the IRS that you you have failed to report all interest and dividends on your tax return. For real estate transaction or abandonment of secured property, cancellation of debt, contributions to an individual retire	ns, item 2 does no	t apply. For mortgage interest paid,		

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.

# **General Instructions**

Signature of

U.S. person

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 <a href="https://www.irs.gov/FormW9">www.irs.gov/FormW9</a>.

## What's New

Sign

Here

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**

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