

HEALTH EDUCATION/DIVISION OF PUBLIC HEALTH SERVICES & HIV PREVENTION
PROGRAM/NAVAJO INFECTIOUS DISEASES CONTROL & PREVENTION PROGRAM

NAVAJO DEPARTMENT OF HEALTH

REQUEST FOR PROPOSAL

DESCRIPTION: Host for Annual Meeting

BID NO: 18-10-1945LE

BID DUE DATE: November 9, 2018, 5:00 p.m.

CONTACT PERSON: Philene S. Herrera, Health Program Manager
Health Education Program
Navajo Department of Health
Administration Building #2, Building #2296, First Floor
Window Rock Blvd.
P.O. Box 1390
Window Rock, Arizona 86515

RETURN ALL RESPONSES TO:

DELIVER TO: Lorita Etsitty, Buyer
Navajo Nation Purchasing Section
Administration Building #1
Window Rock, Blvd.
Window Rock, Arizona 86515

OR

MAIL TO: Lorita Etsitty, Buyer
Navajo Nation Purchasing Section
P.O. Box 3150
Window Rock, Arizona 86515

Must identify Bid # and Company Name on the outside of all sealed envelope/package

Please submit an original and three (3) copies of your sealed bid

SECTION 1 – OVERVIEW

Purpose: The Navajo Health Education and HIV Prevention Program from herein referred to as HEP is searching for a venue in the Albuquerque, New Mexico and metropolitan area that will be able to host the Health Education and HIV Prevention Program Annual Staff Meeting the week of December 17-21, 2018.

Requirements:

Lodging: HEP requires the vendor to block off 30-35 rooms; 15 single and 15-20 double occupancy. Lodging will not be part of the contract cost, as staff will pay out of pocket. Therefore, HEP requests the vendor offer rooms at the allowable Government rate. Dates of lodging are December 17 (check-in) thru December 21 (check-out).

Meeting Space: HEP is requiring 3 conference rooms with comfortable space/seating, the larger conference room for a 35 people, a smaller room for 10 people, and a banquet room for the evening of December 19, 2018 to accommodate 35-40 attendees. The larger or both conference rooms will need to be set up in a U-shape with a head table and podium for presentations. Each room will require audio/visual equipment i.e. cordless microphone, whiteboard/easel, screen, and available wifi.

Refreshments: HEP is requiring that the vendor be able to provide snacks/refreshments for both conference rooms at 10am and 3pm, respectively. The program will need to be able to choose from a variety of options. It also requested daily water service for each room.

Banquet: HEP will host a banquet on the night of Wednesday, December 19, 2018 and the program is requesting to choose from a banquet style menu. We are requesting the vendor be able to provide a Christmas Tree and Christmas themed decorations, in addition to:

- 6 round tables of 6-8, enough to seat 35-40 people
- Available table for gifts, preferably near the Christmas Tree
- Enough room space for team building activities

Agenda:

Day 1: December 18, 2018

8-5p General Staff Meeting (35-40 attendees)

10-10:20a Break (snacks/refreshments)

11:45a-1p Lunch (on own)

3-3:20p Break (snacks/refreshments)

8-5p OS Meeting (small conference room)

10-10:20a Break (snacks/refreshments)

11:45a-1p Lunch (on own)

3-3:20p Break (snacks/refreshments)

Day 2: December 19, 2018

8-5p Sr. HE, HE, HET Meeting (large conference room)

10-10:20a Break (snacks/refreshments)

11:45a-1p Lunch (on own)

3-3:20p Break (snacks/refreshments)

8-5p OS Meeting (small conference room)

10-10:20a Break (snacks/refreshments)

11:45a-1p Lunch (on own)

3-3:20p Break (snacks/refreshments)

Evening of December 19, 2018

6:30-9p Staff Banquet (banquet room)

*Team building activities and opening of gifts

Day 3: December 20, 2018

8-5p General Staff Meeting (35-40 attendees)

10-10:20a Break (snacks/refreshments)

11:45a-1p Lunch (on own)

3-3:20p Break (snacks /refreshments)

SECTION 2 – PROPOSAL REQUIREMENTS AND SELECTION

Proposal submission:

Proposal(s) must be submitted in a sealed envelope clearly marked:

- “DO NOT OPEN RFP #18-10-1945LE – HEP ANNUAL MEETING Proposal.
- The name of the contractor submitting the proposal shall be written legibly and shown on the outside of the sealed envelope. Please include the contractor’s address.

Proposal standards: The contractor shall submit one (1) original and four (4) identical copies of their RFP proposal for the evaluation committee members. Appearance of the proposal is important and professionalism in the proposal presentation should not be neglected. The proposal standards are as follows:

- The RFP proposal may not exceed 10 single-side pages (maximum 8 ½” x 11”) with a minimum of 10 pt. type.
- Pages that have photos, maps, graphs and/or various informative visual illustrations and/or exhibits will be counted toward the maximum number of pages.
- The following is not included in the 10-page limit; Cover Letter on Company letterhead.
- RFP submittals should be plastic or metal spiral-bound only. Please do not submit RFP proposals in loose-leaf 3-ring binder, these will be considered non-responsive and will be un-rated.

Submissions exceeding the 10-page limit or any resumes exceeding the page limit will be considered non-responsive and will be un-rated.

In a separate sealed envelope clearly marked as “**FEE PROPOSAL**”, the contractor shall provide a proposed Contract Billing Rate schedule. The proposed Contract Billing Rates shall be an hourly rate fee schedule by position for work to be provided by each of the contractors that comprise the “consultant team,” to be opened by HEP after the RFP proposals have been reviewed and ranked.

Proposal Review Process:

- Receipt of proposals will be verified on the due date specified. Navajo Nation Department of Health (NNDOH) will screen and evaluate proposals received in accordance to the following criteria. Proposals which fail this check will be considered non-responsive and will be un-rated.
- Proposal is reviewed by the required deadline date and time.

- Proposal meets the proposal submission requirements set forth above under Section 2.

Proposal Evaluation:

- HEP will rate the proposals based on total points awarded and the top three qualified contractors with the highest rating and ranking will be determined as most responsive. HEP reserves the right to either interview the top three qualified contractors or directly select the best qualified contractor.

Award of Contract:

- HEP will retain services of the top rated and ranked contractor. Upon selection, the contractor will be notified. Questions regarding the submitted Contract Billing Rates will be addressed during this time. Failure to address any questions adequately by the contractor shall result in cancellation of the offer. However, this cancellation will not negatively affect the other two qualified contractors. HEP will offer the contact to the next highest rated and ranked contractor.
- HEP will issue a Notice to Proceed to the contractor upon execution of the contract. No work shall be performed by the contractor until such notice is given by HEP. HEP is not liable for any cost incurred by the contractor prior to issuance of a signed contract award.

The Navajo Nation Business Opportunity Act and Navajo Preference Act:

- The Navajo Nation Business Opportunity Act and Navajo Preference Act shall apply to this RFP. Prospective bidders are encouraged to familiarize themselves with these provisions. Complete bidding under the Navajo Nation Business Opportunity Act shall be utilized in the selection of the Contractor.
- The Navajo Nation reserves the right to waive any formalities or irregularities in the Request for Proposals and/or to reject any or all bids; to the sole judge of the suitability of the materials offered and to award a contract for the furnishing of services it deems to be in the best interest of the Navajo Nation.

SECTION 3 – RATING SYSTEM ON EVALUATION CRITERIA

- Each proposal will be evaluated and rated as follows:

COMPONENTS	SCORING
a. Organization of RFP	15 points
b. Letter of Interest	15 points
c. Scope of Work	20 points
TOTAL POINTS	50 points

- d. Navajo Preference (Priority #1) 3 points
- e. Navajo Preference (Priority #2) 2 points

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p>2 Business name/disregarded entity name, if different from above</p> <hr/> <p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p>6 City, state, and ZIP code</p> <hr/> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p> <hr/>

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. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
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Part II Certification

Under penalties of perjury, I certify that:

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	<p>Signature of U.S. person ▶ _____</p>	<p>Date ▶ _____</p>
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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.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

