

Navajo Nation Department of Dine Education
Shiprock Dine Youth



REQUEST FOR PROPOSALS

RE-RFP # 24-01-3226LE

New Heavy Duty Full-size 15 Passenger Van Purchase for Shiprock Dine Youth

Issued: March 05, 2024

Submittal Deadline:
Friday, March 29, 2024, at 4:00 p.m.

to

PHYSICAL ADDRESS:
Shiprock Youth Complex
9009 S. US Highway 491
Shiprock, New Mexico 87420

MAILING ADDRESS:
Shiprock Dine Youth
P.O. Box 3257
Shiprock, New Mexico 87420

Attn: Jonathan Tso, Program Supervisor III

**NAVAJO NATION, DEPARTMENT OF DINE' EDUCATION
Dine Youth - Shiprock Agency**

New Heavy Duty Full-size 15 Passenger Van Purchase – Shiprock Youth Complex, New Mexico

RE-RFP NO: 24 – 01-3226LE

PROPOSAL DUE DATE: March 29, 2024, 4:00 PM MDT

DESCRIPTION: Shiprock Dine Youth is seeking proposals from qualified vendors to provide bids for the purchase of One (1) New Heavy Duty 15-Passenger Van.

CONTACT PERSON: Jonathan Tso, Program Supervisor III
Phone: 505-368-1125/1126
Email: jonathantso@nndode.org

~ RETURN PROPOSALS CLEARLY MARKED ~

“DO NOT OPEN” R E - RFP # 24 -01-3226LE – Shiprock Dine Youth New Van Purchase – New Mexico

PLEASE INCLUDE YOUR COMPANY NAME AND ADDRESS ON THE PROPOSAL PACKAGE

PROPOSAL & BID SUBMITTAL DEADLINE AND RELEVANT INFORMATION:

All proposals and bids delivery using UPS or Federal Express must be physically submitted to:

PHYSICAL ADDRESS: Shiprock Youth Complex
9009 S. US Highway 491
Shiprock, New Mexico 87420
ATTN: Jonathan Tso, Program Supervisor III

MAILING ADDRESS: Shiprock Dine Youth
P.O. Box 3257
Shiprock, New Mexico 87420
ATTN: Jonathan Tso, Program Supervisor III

SECTION I

PURPOSE:

Shiprock Dine Youth is seeking proposals from qualified firms and/or individuals to provide bids for the purchase of One (1) New Heavy Duty full size 15-Passenger Van without lift.

RESPONDENT REQUIREMENTS:

All respondents must have, as a minimum, the capabilities listed herein, and the bid proposals submitted must reflect in detail the inclusion of these services as well as the **additional forms required in Section II**. Respondent should also provide technical information of delivery of vehicle required in this RFP.

SPECIFICATIONS & SCOPE OF WORK:

- Description: New Heavy Duty full size 15- Passenger Van Specifications
- Quantity: One (1)
- Specifications: These are preferred specifications, but we may consider variances.
- Description: Heavy Duty 15 Passenger Full-Size Van. 2- or 4-Wheel Drive. Minimum $\frac{3}{4}$ ton
- Engine: Gasoline powered, minimum 3.7L V6.
- Capacity: 15-passenger
- Transmission: Heavy Duty minimum 6- speed automatic transmission with overdrive.
- Brakes: 4-wheel disc w/ABS
- Alternator: 12 volt, minimum 150-220 amp – Heavy Duty preferred
- Fuel System: Minimum of 25-gallon tank capacity

EXTERIOR:

- 3.73 Non-Limited Slip Axle
- Medium Roof LWB
- Power Steering: Hydraulic Power Rack-and-Pinion
- Prefer White (Blue or Black may be considered if not available)
- Rear View Camera
- Suspension - Heavy Duty Front Axle
- Tires/wheels: All season radial tires, Full size Spare Tire/Steel Wheel

INTERIOR:

- 15-Passenger Seats Vinyl Upholstery (Cloth may be considered if not available)
- Air Conditioning
- Assist Handles - A-Pillar
- Assist Handles - B-Pillar
- Daytime headlights
- Floor mats
- Locking Glove Box
- Power windows and power door locks.
- PowerPoint - 12V (Front)
- Rear Window Defogger
- Rubber / Vinyl Floor Covering (carpet may be considered if not available)
- Tan, or Black
- Tilt steering wheel and cruise control.

SAFETY/SECURITY:

- 3 Point Safety Belts System
- Airbags Front, Side & Safety System
- Back Up Alarm

WARRANTY:

- 3Yr/36,000 Bumper / Bumper
- 5Yr/60,000 Powertrain
- 5Yr/60,000 Roadside Assistance

OPTIONAL EQUIPMENT:

- 2 Additional Keys
- Anti-Theft System
- Cruise Control
- Extended Length Running Boards
- Post-Crash Alert System
- Privacy Glass
- Remote Start
- Reverse Sensing System
- Tire Pressure Monitor System
- Trailer Towing Package w/ Trailer Wiring

NOTES:

Proposed prices must be “all-inclusive” – this includes, but is not limited to; all equipment, materials, labor, expenses, warranty, delivery of new unit to Shiprock Youth Complex, Shiprock, NM.

Bidders may propose more than one manufacturer, model, size, etc.

Explain the standard warranty and any optional warranties available including prices.

Include pictures and/or brochures of the actual unit(s) being bid.

Indicate time required for delivery.

Payments

- A. Present detailed information for the identified goods and services, inclusive of Navajo Nation sales tax (6%) [24 NNC § 201 et seq.]. The Navajo Nation will not pay any other tax associated with these goods and/or service purchases.
- B. If you have specific questions regarding the applicability of this tax, please contact the Office of the Navajo Tax Commission, Compliance Department at 928-871-6681.
- C. Payment by Shiprock Dine Youth for the identified goods and services will only be made after the identified goods and services have been delivered and accepted by authorized Shiprock Dine Youth Representatives This includes all pertinent documents, including invoice and acceptance of the vehicle according to specifications.
- D. The Navajo Nation requires that all its vendors have a Department of Treasury Internal Revenue Service Form W-9 on file to accommodate payment. Itemized billings shall be submitted upon completion containing information specified and as described in the specification and scope of work.

Delivery of the vehicle shall be coordinated with Shiprock Dine Youth Program Supervisor, Jonathan Tso, jonathantso@nndode.org phone number 505-368-1125.

RFP Submittal Deadline:

All RFP’s must be received/ mailed / or physically delivered by March 29, 2024, at 4:00 pm. and must be mailed or physically delivered to:

Shiprock Dine Youth,
Attention: Jonathan Tso
Post Office Box 3257
Shiprock, New Mexico 87420

Courier Service/Delivery to:
Shiprock Youth Complex
Attention: Jonathan Tso
9009 S. US Highway 491
Shiprock, New Mexico 87420

SECTION II

A. The following documents are mandatory and must be submitted with Proposal:

1. Navajo Nation Certification Regarding Debarment & Suspension (Attached)
2. Federal Form Tax W-9
3. Licensed, bonded, and current General Liability Insurance.
4. EFT Direct Deposit Form

B. Proposal Format:

1. Respondent(s) must indicate if they are priority one or two vendor with the Navajo Nation.
2. All proposals must be typewritten on standard 8-1/2 X 11 paper and placed within a binder with tabs delineating each section. Larger paper is permissible for charts, maps, or the like.
3. An original RFP response and three (3) copies must be provided in a sealed envelope.
4. The proposal must be organized and indexed in the following format:
 - a. A letter of Transmittal
 - b. Statement of Qualifications
 - c. Proposal on Contract approach
 - d. Proposed Cost **(Sealed in Separate Envelope)**
5. Each proposal must be accompanied by a letter of transmittal. The letter of transmittal must:
 - a. Provide background on company:
 - b. Identify the name of the person responding to the RFP:
 - c. Identify the name, title, and telephone numbers of person authorized to negotiate on behalf of the organization(s):
 - d. Identify the names, files, and telephone numbers of person to be contact for clarification:
 - e. Explicitly indicate acceptance of the conditions governing this procurement:
 - f. Be signed by the person responding to the RFP; and
 - g. Acknowledge receipt of any and all amendments to the RFP.
6. The respondent must submit a statement of qualifications to include:
 - a. A resume.
 - b. Number of years of experience working with Navajo Nation government or other government entities.
 - c. Provide three (3) references. Each reference must include the name, address, and telephone number of a contact person who can describe, in some detail, the quality, quantity, and substance of services provided.
 - d. The respondent must provide a Certificate of Liability Insurance.
7. Respondent must provide proposal on contract approach.
 - a. Provide in detail how they would accomplish the objectives described in the scope of work.
 - b. Provide number of employees in the company/organization.
 - c. Provide Resume & Credentials for each Employee including Certificates, Diploma and/or Degrees.

- C. **REJECTION OF PROPOSALS:** The Navajo Nation reserves the right to waive any informalities or irregularities in the RFP or reject any or all proposals whenever such rejection is deemed in the best interest of the Navajo Nation.
- D. **PROCUREMENT OF RFP:** This procurement shall be conducted in accordance with all applicable Navajo Nation laws and regulations including the Navajo Business Opportunity Act. All applicable rules, regulations, and laws shall also be followed. Prospective Vendors shall familiarize themselves with Navajo Nation regulations prior to submitting responses to this RFP and may request a copy of Navajo Nation procurement regulations from the Program Supervisor at any time up to the Deadline for Proposals.
- E. **INQUIRIES:** Any inquiries regarding this RFP should be submitted in writing to Jonathan Tso, Program Supervisor III. Only written responses to questions will be considered official. All questions will be directed to Jonathan Tso, at (505) 368-1125. Email jonathantso@nndode.org. Questions regarding this procurement will be accepted until 5:00 p.m. March 28, 2024
- F. **AMENDED PROPOSALS:** A respondent may submit an amended proposal before the deadline for receipt of proposals. Such amended proposals must be a complete replacement for a previously submitted proposal and must be clearly identified in the transmittal letter.
- G. **PROPOSAL SUBMISSION:** Proposal must be received on or before 4:00 p.m. (MDT) March 29, 2024. Respondents who are mailing their proposals should allow sufficient time for mail delivery to ensure receipt by the date specified. If mailed, it is recommended that proposals be sent by certified mail to the address indicated on the cover sheet of the RFP. Late proposals will not be accepted.
- H. **REJECTION OF PROPOSALS:** Shiprock Dine Youth reserves the right to reject any and all proposals. This RFP may be canceled at any time and all proposals may be rejected in whole or in part when the Dine Youth Department Manager determines it is in the best interest of the Navajo Nation.
- I. **PROPRIETARY INFORMATION:** Any restriction on the use of data contained within any proposals must be clearly stated in the proposal. Proprietary information submitted in response to this RFP will be handled in accordance with applicable purchasing procedures. Each page of the proprietary material must be labeled or identified with the word “proprietary” or “confidential”.
- J. **RESPONSE MATERIAL OWNERSHIP:** All material submitted regarding this RFP shall become property of the Navajo Nation and will not be returned to the respondent. Responses received will be retained by Shiprock Dine Youth and may be reviewed by any person after final selection has been made. Shiprock Dine Youth has the right to use any or all system ideas presented in reply to this RFP. Disqualification or non-selection of a respondent or proposal does not eliminate this right.
- K. **INCURRING COSTS:** Any cost(s) incurred by the respondent in preparing, transmitting, presenting, or modifying the proposal or material for this RFP shall be the responsibility of the respondent.
- L. **SUFFICIENT APPROPRIATION:** A contract awarded as a result of this RFP is contingent upon the availability of funds. A contract may be terminated or reduced in scope if sufficient funds do not exist. Sending written notice to the Vendor shall affect such termination or reduction in scope. The Dine Youth Department Manager’s decision to terminate or reduce the scope due to insufficient appropriations shall be accepted as final by the Vendor.

M. EVALUATION PROCEDURES AND SELECTION CRITERIA.

1. An evaluation team will evaluate the proposals received in accordance with the general criteria used herein. Respondents should be prepared to provide any additional information the team feels necessary for the fair evaluation of proposals.
2. Failure of a respondent to provide any information requested in the RFP may result in disqualification of the proposal. All proposals must be endorsed with the signature of a responsible official having the authority to bind the respondent to the execution of a contract.
3. The sole objective of the review team will be to select the respondent who is most responsive to the needs of Dine Youth, Shiprock Youth Complex. The specifications in this RFP represent the minimum performance necessary for a response. Based on the evaluation criteria established in this RFP, the review team will select and recommend the respondent who best meets this objective. If there is only one responsive bid, the Dine Youth Department Manager may elect to evaluate the RFP solely.
4. Evaluation Criteria: The following criteria will be used by a review committee in the selection process for the contract award.

Initial Point Criteria:

- | | |
|--|-------------|
| a. Presentation of Response | 1-20 points |
| • Completeness | |
| • Clarity of Presentation | |
| • Organization of Presentation | |
| • Understanding Shiprock Dine Youth Objectives | |
| b. Statement of Qualifications | 1-20 points |
| • List of three (3) Client References | |
| c. Technical Requirements | 1-20 points |
| • Project description Projected accomplishments. | |
| d. Project Management | 1-20 points |
| • Project Management Experience | |
| • Schedule/Project Plan | |
| • Staffing | |
| ○ Related Experience | |
| ○ Education – Credentials | |
| e. Cost of Service | 1-20 points |

Total possible points = 100

- N. **STANDARD CONTRACT:** The Navajo Nation reserves the right to incorporate standard contract provision into any contract negotiations as a result of a proposal submitted in response to the RFP.
1. Contractor shall comply with Federal Awards Guidelines:
 - a. §200.330-Reporting on real property.
 - b. §200.331-Subrecipient and contactor determinations.
 - c. §200.338-Restrictions on public access to records.

- O. **TAX:** All appropriate taxes should be included in the cost of services including the Navajo Sales Tax. All work performed within the territorial jurisdiction of the Navajo Nation is subject to the Navajo Sales Tax of 6% (24 N.N.C. Section 601 et. seq.)

- P. **SOVEREIGNTY:** The Navajo Nation will not relinquish any of its sovereignty rights.

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

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

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

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

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.

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

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.

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 FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

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

Social security number										
				-			-			
or										
Employer identification number										
				-						

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	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.

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-INT (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.

EFT - Direct Deposit form

(FAX OR XEROX COPIES ARE NOT ACCEPTABLE)

THE NAVAJO NATION

DR BUU NYGREN **PRESIDENT**

RICHELLE MONTOYA **VICE PRESIDENT**



Navajo Nation
Office of the Controller
Accounts Payable

PO Box 1660
Window Rock AZ 86515

Phone 928-810-8539
Fax 928-871-6026

Dear Client,

The Navajo Nation Office of the Controller Accounts Payable Section is announcing and offering electronic payments in lieu of check payments. The Electronic Funds Transfer (EFT) is fast, secure, low-cost and convenient.

The Office of the Controller invites you to enroll in the EFT payment program. To enroll, complete the EFT form and return the original signed form **and** bank information per page 2 to the Accounts Payable section.

If you have questions, contact the Accounts Payable Section.

Thank you,

I hereby authorize the Navajo Nation to setup and initiate Electronic Funds Transfer (EFT) credit amounts for invoice payments to the primary bank account listed.

I acknowledge that the origination of EFT transactions must comply with the provisions of U.S. law. This authorization will remain in effect until I have cancelled in a written statement.

I certify that I am an authorized representative/member of Company Name:

Financial Bank Name: _____

Financial Bank Address: _____

Select Only One: Checking account Savings account

Bank Routing Number: _____

Bank Account Number: _____

Email Address for Deposit Notification: _____

Tax Identification Number (SS or EIN): _____

Mailing Address: _____

Contact Telephone Number: _____

Business Home Cellular

Read and initial beside each of the following to confirm understand the EFT Direct Deposit Policy & Procedures regarding the enrollment. Will not be process without acknowledgement.

____ I understand that it is **my responsibility to verify that payments have been credited to my bank account** and that the Navajo Nation assumes no liability for overdrafts for any reasons on my bank account.

____ I understand that a bank account in my name will be setup for EFT direct deposit. Partial direct deposits for two or more bank accounts will not be permitted.

____ I am responsible to **notify the Office of the Controller Accounts Payable Section immediately before** any payment is made of changes or cancellation to my bank account. If I do not notify Accounts Payable Section, I understand that this will result in a Reject Item which will delay the retrieval of payment three to five business days for a reissue.

____ I have attached a blank voided check, a bank direct deposit form or bank letter that certify bank information. It is my understanding this EFT form will be confidential.

____ If I do not follow the procedures outlined, I release the Office of the Controller Accounts Payable Section from any and all liabilities.

ATTACH VOIDED BLANK CHECK OR BANK DIRECT DEPOSIT INFORMATION FORM

DEPOSIT SLIP/TICKETS WILL NOT BE ACCEPTED

Do not staple check, use scotch tape to attach

A voided check or bank direct deposit information form will confirm the account numbers provided. Occasionally, find bank account numbers are incorrect, incomplete and/or handwritten information is not legible.

⑆000000000⑆ 0000000000⑆ 000
Routing Number Account Number

Print Name

Company/Business Title

Signature

Date

FOR ACCOUNTS PAYABLE / OOC USE ONLY

AB# _____

SETUP

PAYMENT INSTRUMENT, TELEPHONE,
EMAIL, BANK NUMBERS, ATTACHMENT

UPDATE

INITIAL _____ DATE _____