# REQUEST FOR PROPOSALS TPO Roofing and Gutter System Maintenance and Repair Services

PROPOSAL BID #: 24-09-3476LE

Navajo Special Diabetes Program (NSDP) requests proposals from firms interested in providing services to the Thermoplastic Membrane Roofing Manufactures (TPO) and Gutter Roofing Repair Services on Crownpoint Wellness Center Facility. NSDP intends to seek and obtain professional services by a reputable provider to perform necessary professional maintenance and repair on multiple penetrations of the roof covering and gutter system on Navajo Nation-owned facility, located in Crownpoint, New Mexico within the Navajo Reservation.

Proposers are recommended to visit facility site within and perform a comprehensive assessment of the facility locations prior to submitting a response. The successful proposers will be responsible for providing labor, supervision, materials, equipment, transportation, service, and the shop facilities necessary to perform high quality work. Proposers may provide an explanation itemizing the extent of their repair service procedure and practices. NSDP intends to award a contract to the proposer that can establish a contractual relationship with a qualified proposer that can best provide the NSDP with quality roofing maintenance and repair services as further described in this RFP.

The proposal format shall include: (1) a narrative outlining the project approach, qualifications, and current workload and capability; (2) a list of past projects completed on the Navajo Nation; (3) a list of three references and phone numbers from recent clients; and (4) copy of License and Insurance Certifications (if available).

The contract will be awarded to the proposer who submits the best proposal in terms of: (1) services; (2) experience; (3) credentials; (4) project budget and (5) implementation plan and schedules.

Four copies of the proposal shall be submitted in a <u>sealed envelope</u> labeled "TPO ROOFING & GUTTER SYSTEM REPAIR SERVICES" - DO NOT OPEN," to Attn: Lorita Etsitty, Buyer, Navajo Nation Purchasing Service, Administration Building # 1, Window Rock Blvd., Window Rock, Arizona, or mailed to P.O. Box 9000, Window Rock, Arizona 86515. Bid documents and supplemental information regarding the project will be available online <u>www.nnooc.org</u> link: Purchasing. If any questions regarding this RFP call 928-871-6532 or email: rcomb4224@gmail.com

The Navajo Nation reserves the right to reject all proposals not within projected budget and may elect to award the contract not solely on the bid amount but the bidders' qualification. The due date for proposal October 18, 2024, 5:00 p.m.

Date: October 8, 2024

Sherylene M. Yazzie, Executive Director

Knyhene &

Navajo Department of Health/NSDP

#### **REQUEST FOR PROPOSALS**

# TPO Roofing and Gutter System Maintenance and Repair Services PROPOSAL BID #: 24-09-3476LE

#### PURPOSE:

Navajo Special Diabetes Program (NSDP) intends to seek and obtain maintenance and repair services on Crownpoint Wellness Center's Thermoplastic Membrane Roofing (TPO) and Gutter System Repair Services by a reputable provider to perform necessary professional services to a Navajo Nation-owned facilities, located within the Navajo Reservation. The purpose of repairing a penetrated TPO roofing and gutter system are to prevent water from entering the building and causing further damage.

### PROPOSAL SUBMITTAL REQUIREMENTS:

To be considered, each bidder must submit a response to this Request for Proposal (RFP) and respond to the SELECTION CRITERIA identifying your understanding of the services requested. The proposal must be signed, in ink, by an official authorized to bind the bidder to its provision.

Proposals must be marked as "TPO ROOFING MAINTENANCE AND GUTTER SYSTEM REPAIR SERVICES" and must be received by 5:00 p.m., October 18, 2024. The bidder is responsible for the timely receipt of their proposal by the Navajo Nation Purchasing Service Department. Bid documents and supplemental information regarding the project will be available online @ <a href="www.nnooc.org">www.nnooc.org</a> link: Purchasing. Late or faxed proposals will not be considered.

Bidders who intend to submit proposals will be required to visit the facility listed within and perform a comprehensive assessment of the facilities prior to submitting a response. This will provide an opportunity for the bidder(s) to ask any questions of the proposal and receive clarity of the intent of the proposal through mutual understanding.

# **OBJECTIVE AND SCOPE:**

NSDP wishes to secure timely, consistent, and cost-effective maintenance and repair services, from one contractor, to ensure clean and safe facilities for employees and persons doing business with the contractor. The contractor shall repair the roof covering and gutter system at designated facility site on the Navajo Reservation.

#### SCOPE OF SERVICES:

The scope of work for repairing a TPO roof covering may include:

- · Cleaning: Clean the damaged area
- Priming: Apply a TPO seam primer to the cleaned area
- Patching: Cut a TPO membrane patch that is slightly larger than the damaged area and apply it
- Heat welding: Heat weld the seams
- Seam rolling: Roll the seams
- Checking for leaks: Check for leaks

Other work that may be included in the scope of work for roof repairs includes:

- Repair minor gutter/downspout failures and conduct inspections of gutters, and visible issues with roofing and areas not seen from the ground.
- Adjust gutters as necessary to allow for proper drainage and prevent gutter overflows as needed.
- Comply with all safety as needed to satisfy current city, state, and federal regulations.
- Dispose of all trash and debris generated by the work.

- Furnish all labor, transportation and disposal services, permits, insurance, and equipment.
- Install a safety barrier around the designated work area to prevent unauthorized people from entering the work area.
- The contractor will be responsible for damage incurred to the property as a result of the cleaning process. Provide a site-specific fall prevention plan upon request.
- Use appropriate ladders equipped with stabilizers or tied off.
- Daily cleanup shall be required.

The Contractor shall maintain or have readily available parts and properly trained personnel to support the equipment at the Contractor's cost throughout the duration of the contract. If required, the Contractor shall provide only TPO and Gutter System materials that are new and have the same quality and brand name as that being replaced. Substitutions will be permitted only with prior authorization of the Program Manager or their designated representative.

Please include travel rates, personal expenses and other applicable fees. NSDP shall fully expect the successful bidder to completely satisfy contract performance requirements.

NSDP reserves the right to request the contractor supply invoices from suppliers showing the contractor costs. All repair services, if required, shall be conducted in full compliance with all specified standards in a manner equal to or better than the normal safety and security procedures and standards established by NSDP.

At no time shall NSDP facilities or its occupants be placed in jeopardy.

- Work shall be done with a minimum amount of disruption to the diabetes prevention activities.
- Remove and legally dispose of all waste generated by the work
- Remove all unused material brought on site by the bidder.

#### **SELECTION CRITERIA:**

Responses to this RFP will be evaluated based upon the following factors as presented to the bid proposals: Capability, Qualifications and References – (30%)

- The written proposal should indicate the ability of the contractor to meet the terms of the RFP.
- The written proposal should indicate the competence of personnel whom the bidder intends to assign to the project.
- Qualifications will be measured by training and experience, with reference to work experience in facilities of equal or greater size to that described in the RFP.
- Emphasis will be placed upon the qualifications of bidder's project manager.

# Method of Approach – (20%)

• This factor will be judged based upon the Work Plan provided in the Proposal.

### Price - (50%)

• This factor will be based on the total firm cost with breakdown of labor cost, expense cost and supplies/materials cost of the services per site location.

# QUESTIONS:

Questions should be directed to: Radeanna Comb, Delegated Program Manager Navajo Special Diabetes Program P O Box 3748 Window Rock, Arizona 86515 Email: Radeanna.Comb@navajo-nsn.gov

Telephone: 928-871-6532

Fax: 928-871-6543

#### SUMMARY:

This RFP is designed to allow qualified service providers to demonstrate their capability of providing TPO Roofing repair services to NSDP.

• Three copies of completed proposals must be received, including the full fixed Cost of service no later than 5:00 p.m. on October 18, 2024.

Proposals must be addressed in the following manner:

Attn: Lorita Etsitty, Buyer PROPOSAL BID #: 24-09-3476LE

Navajo Nation Purchasing Services
Administration Building #1, Window Rock Blvd., Window Rock, Arizona, or mailed to P.O. Box 9000, Window Rock, Arizona 86515.

Format: Proposals should be 8 1/2 inches x 11 inches, bound in a single document and organized in sections following the other specified under contents.

#### OTHER CONSIDERATIONS:

NSDP reserves the right to reject all proposals. This Request for Proposals does not commit NSDP to award a contract, pay any costs incurred in the preparation of proposals, or to procure or contract for supplies or services.

NSDP reserves the right to negotiate with any qualified source or to cancel, in part of or in its entirety, this Request for Proposals, if it is in the best interest of NSDP to do so. NSDP may require the selected bidders to participate in negotiations, and submit such price, technical or other revisions of the proposal that may result from negotiations.

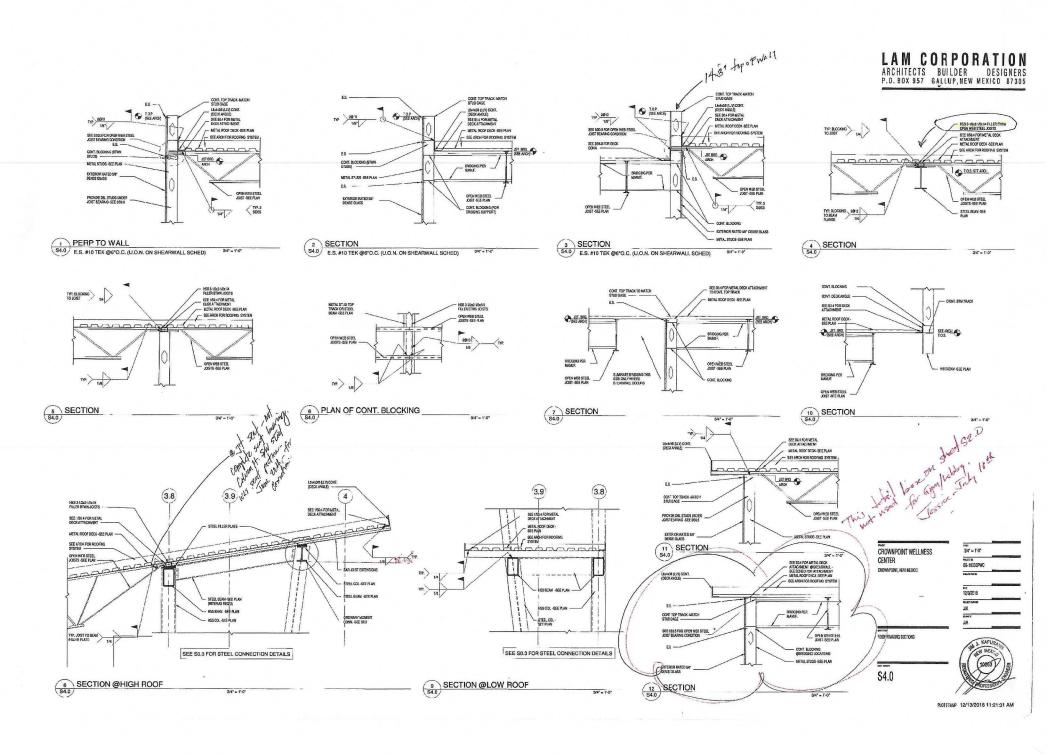
NSDP's obligation under any contract is contingent upon the availability of funds to pay for contract services. Processing of Payments – The payment procedures established by OOC / Division of Finance shall be adhered to and are to begin whenever Goods or Services are delivered and accepted.

The Navajo Nation is a sovereign government, and all contracts entered because of the RFP shall comply with all Navajo Nation laws, rules and regulations, including the Navajo Preference in Employment Act and Navajo Nation Procurement Rules and Regulations. The Navajo Nation will not waive its sovereignty status.

### REQUIRED DOCUMENTATION

The Bidder is responsible for submitting all required documentation, including the following attachments:

- 1. Navajo Nation Suspension & Debarment Form
- 2. W-9 Form
- 3. TPO Product Information
- 4. Gutter System Information





Quality You Can Trust...From North America's Largest Roofing Manfacturer!™

# **EVERGUARD NOTICE OF AWARD CONFIRMATION**

Status: Guarantee Issued

Status as of: 04/28/20

Issue Date: 03/24/20

Type of Guarantee: EVERGUARD DIAMOND PLEDGE 20

GAF Guarantee No:G2019-00012386

1. BUILDING NAME, ADDRESS, PHONE:

**CROWNPOINT WELLNESS CENTER** 

**NAVAJO ROUTE 9 CROWNPOINT, NM 87313**  2. ROOFING CONTRACTOR'S NAME, ADDRESS, PHONE:

JMC CONSTRUCTION LLC 3555 Rio Grande Blvd NW Albuquerque, NM, 87107

Contact: JONATHAN ABEITA

Phone: 505-350-4203 Email: jmcabeita@gmail.com

3. BUILDING OWNER'S NAME, ADDRESS, PHONE:

BUREAU OF INDIAN AFFAIRS NAVAJO NATION

**NAVAJO ROUTE 9** 

4. SPECIFIER'S NAME, ADDRESS, PHONE:

CROWNPOINT, NM 87313

Building Description - Usage, Height, etc.:

Usage: MEDICAL/HEALTHCARE

Height: 22

# of Buildings: 1

Length: 142 Roof Access: ROOF HATCH Width: 108

**Project Details:** 

Start Date: 07/29/19

AIS Project #: AD0034477

Compl. Date: 02/24/20 **Total Squares:** Project Type: NEW CONSTRUCTION

**Test Cuts Completed:** 

No

Specification #: TFANI60 Roof Slope: 1/4"

Moisture Scan Completed:

Deck Type: Steel Thickness:

Steel: Indicate Gauge Multiple Deck: No

Insulation:

Insulation Supplied by GAF: Layer 1: Product Type: EnergyGuard Polyiso

Insulation

Thickness: 3.3"

Insulation Size: 4'x8'

Attachment: Loose Laid

Layer 2: Product Type: Layer 3: Product Type: EnergyGuard HD

EnergyGuard Polyiso

Thickness: Thickness: 1/2" Field: 16

Insulation Size: 4'x8' Insulation Size: 4'x8'

Perimeter: 24

Insulation Adhesive:

Attachment: Loose Laid Attachment: Mechanical Fastened Corner: 32

Roof Assembly:

EVERGUARD TPO 60 MIL Membrane Type:

Fastner: Drill-Tec #14

**Fully Adhered:** 

Type: EverGuard #1121 Bondi

# **GAF GUARANTEED CONTRACTOR:**

Please verify the information above is correct. Changes made after the guarantee has been issued are subject to a fee. Remember, only material manufactured or marketed by GAF are eligible for guarantee.

3.3"

Territory Manager: Troy Stodard/Gilberto Contrera

# We require the following information before issuance of your guarantee:

- \* FINAL INSPECTION REPORT
- \* FINAL INSPECTION RATING

For final inspection please call:	GAF Field Services: 888-532-5767
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Statement of Account:

יייי דומותוור

**Project Balance:** 

\$0.00



# "Quality You Can Trust Since 1886... From North America's Largest Roofing Manufacturer"

Guarantee Services 1361 Alps Road Building 11-1 Wayne, NJ 07470 (800) 766-3411, Option 2

# **MAINTENANCE CHECKLIST**

Why Do Roof Maintenance?	V V V V	ranure to maintain the root may r	esult of n	fe of your investment and lower the life cycle cost of your roof in deterioration of the roofing system roper maintenance are not covered by your GAF Guarantee arantee cancellation
GAF 10-Point Maintenance Program	1.	Maintain Records	Ÿ	Keep a file of all records relating to this roof; include:  o GAF guarantee o inspection reports o repairs and maintenance bills o original construction drawings and specifications and invoices
(Note: this program is	2.	Conduct Routine Inspections	<b>V</b>	At least twice per year - typically in the spring and fall Use the Scheduled Maintenance Checklists booklet included with your quarantee
(Note: this program is intended to address common conditions found	3.	Inspect After Severe Weather	1	Always inspect the roof for damage after severe weather such as hailstorms, heavy rains, high winds, etc.
on most buildings)	4.	Repair Correctly	1	All roofing repairs must be performed by a GAF Approved, Master, or Master Select Roofing Contractor, including repairs for non-guaranteed conditions  Make repairs with GAF materials, following our current repair guidelines for the type and quality of roof installed
	5.	Keep Roof Clean/Debris Free	✓ ✓	Always remove debris from roofsuch as:  o leaves, branches, dirt, rocks, bottles, o debris and trash from other trades, etc.  Keep gutters, downspouts, drains, scuppers, and the surrounding roof areas clean to ensure proper drainage
	6.	Keep Metal in Good Condition	~	Examine all metal flashings, counterflashings, expansion joints, and pitch pockets for  o rust o detachment or damage o deteriorated sealant  Reattach loose metalwork, replace sealant as necessary; repair metal as necessary; and prepare and paint any rusted metal
	7.	Keep Masonry in Good Condition	·	Examine masonry walls and copings for:  o cracks and bad mortar joints o deteriorated sealant o loose masonry/coping stones o indications of water absorption  Repair all such conditions to prevent water infiltration
	8.	Maintain Rooftop Equipment	✓	Examine rooftop equipment for any problems that may allow water infiltration — equipment can include  o air conditioners, vents, and duct work  o equipment stands or screens o skylights o satellite dishes, antennas  Eliminate any spillage of coolant, oils, grease, etc. and repair roof membrane if affected.
	9.	Maintain Roof Coating	1	Examine protective coatings and recoat any cracked, flaked, blistered or worn areas with a compatible GAF roof coating
	10.	Minimize Rooftop Traffic	1	Minimize rooftop traffic by limiting access to necessary personnel only Maintain a roof access log so that you can ascertain who has been on the roof in the event of damage to the roof from other trades
What Are Your Other Responsibilities?	✓ ✓	Report any deficiencies in the GAF	ular t roof	e special maintenancethe Building Owner must ensure that the building is adequate and appropriate.  systemwithin 30 days for possible guarantee coverage for deficiencies in the GAF roof materials or related installation to:
		GAF Materials Corporation Guarantee Services 1361 Alps Road, Building Wayne, NJ 07470 (800) 766-3411, Option 2 E-mail: GuaranteeLeak@	11-2	
	1	IMPORTANT NOTE: Repair all I	eaks	promptly to avoid adverse effects, including mold growth.

# 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:
    - 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.

Belore	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the centity's name on line 2.)	owner's na	ame c	n line	1, an	d ent	ter the	busine	ess/disr	regarded
Print or type. See Specific Instructions on page 3.	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 only <b>one</b> of the following seven boxes.  Individual/sole proprietor	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)								
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tar and you are providing this form to a partnership, trust, or estate in which you have an ownership this box if you have any foreign partners, owners, or beneficiaries. See instructions			(Applies to accounts maintained outside the United States.)						
	5	Address (number, street, and apt. or suite no.). See instructions.	Reques	lequester's name and address (optional)							
	6	City, state, and ZIP code									
	7	7 List account number(s) here (optional)									
Par	t I	Taxpayer Identification Number (TIN)			-						
	-	r TIN in the appropriate box. The TIN provided must match the name given on line 1 to a	oid/	Soc	ial se	curity	nun	nber			
backu reside	p w	vithholding. For individuals, this is generally your social security number (SSN). However, alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	for a	or		_			-[		
TIN, la	ater				plove	r iden	tifica	ation n	umbe	r	
<b>Note:</b> If the account is in more than one name, see the instructions for line 1. See also <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.						-					
Par	t II	Certification									
	-	nalties of perjury, I certify that:									
2. I an Ser	n no vice	mber shown on this form is my correct taxpayer identification number (or I am waiting for of subject to backup withholding because (a) I am exempt from backup withholding, or (b) a (IRS) that I am subject to backup withholding as a result of a failure to report all interest ger subject to backup withholding; and	) I have r	not b	een n	otifie	d by	the li	nterna		
3. I an	n a	U.S. citizen or other U.S. person (defined below); and									
4. The	FA	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is cor	rect.							
becau acquis	se :	tion instructions. You must cross out item 2 above if you have been notified by the IRS that 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 rent interest and dividends, you are not required to sign the certification, but you must provide y	ons, item tirement	n 2 de arrar	oes n igeme	ot ap ent (IF	ply. F RA), a	For mo and, g	ortgaç enera	je intei Ily, pa	est paid, ments
Sign		Signature of U.S. person	Date								
0		New line 3h has h	noon add	t hat	o this	form	Δf	flowr-t	roug	h entit	v ie

# **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



# The Navajo Nation Dr. Buu Nygren President

Yideeską adi Nitsahakees RICHELLE MONTOYA VICE PRESIDENT

# **MEMORANDUM**

TO

ALL CONCERNED

FROM:

Navajo Department of Health

DATE:

July 29, 2024

SUBJECT:

Standing Delegation of Authority

Effective immediately, the personnel listed below in the order of succession will have delegated interim authority to handle routine duties and responsibilities for the Navajo Department of Health (NDOH) during my absence from office.

This delegation will be for administrative purposes only and authorizes staff delegated to execute all documents pertaining to routine duties and responsibilities, in addition to attending all requested meetings, etc. However, this delegation will not include any major decisions related to personnel, contract negotiations, or fiscal matters that will require my personal attention.

Your assistance and cooperation will be appreciated. If you should have any questions, please contact me at (928) 871-6350 or email: SheryleneM. Yazzie@navajo-nsn.gov.

ACKNOWLEDGEMENT

Marlinda Littleman, H SA DALTO

Curtis Briscoe, Program Supervisor, BCCP

Michele Morris, Legislative Analyst, NDOH

Dorthene Edison, Sr. Management Analyst, NDOH

Cc: Patrick Sandoval, Chief of Staff, OPVP

Post Office Box 7440 • Window Rock, Arizona 86515 • Phone: 1928/871.7000.