

**NAVAJO DEPARTMENT OF HEALTH**  
**Navajo WIC Nutrition Program**  
**Request for Proposals**  
**Re-Bid**

**Bid Number: Re-Bid 24-103489GC**

This invitation for a bid is a Competitive Sealed Bid procurement for goods and includes the following:

- A. Name of Project:** 2025 Sierra 2500 HD SLE 2WD 6.6L V8 Gas Engine, Standard Bed (Window Rock Administration)
- B. Instruction and information for bid submission (requirements).**

**A) Summary**

- **Standard Vehicle Price**
- **6.6L V8 gas engine**
- **Passenger capacity: 6**
- **Transmission: Allison\*10-speed automatic transmission**

**B)Exterior**

- **Summit White**

**C)Wheels**

- **18LT275/70R18E all-terrain, Blackwall tires**
- **18" Machined aluminum wheels with dark grey metallic accents**

**D)Interior**

- **40/20/40 split-bench front seat with under-seat storage**
- **Heated steering wheel**
- **Jet Black, cloth seat trim**
- **Heated driver and front outboard passenger seats**
- **10-way power driver seat with power lumbar**
- **Hitch ball mount (adjustable cushion with 2-inch and 2 5/16-inch ball)**
- **SLE value package (PDU)**
  - **13.4" diagonal GMC premium infotainment system**
  - **Allison 10-speed automatic transmission**
  - **Manual tilt and telescoping steering column**
  - **3.73 rear axle ration**
  - **Standard pickup bed**
  - **10,850 lbs. GVWR**
  - **Theft-deterrent unauthorized entry system**
  - **Spray on bedliner**
  - **120-volt power outlet**
  - **Smoke Amber LED roof marker lamps**

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- **Rear winder defogger**
- **Dual zone automatic climate control**
- **Remote start**
- **Cargo tie-downs (set of 4)**
- **Front and rear black molded splash guards**

**1. Supplier qualification**

- a. Company profile to include priority number as listed on the Navajo Business Opportunity Act Source List of Certified Navajo Business for current month. **If not listed**, please indicate “Not listed in **NBOA** source list”. Any questions can be directed to **(928) 871-6544**.
- b. Contractor/vendor will provide competitive bid to include delivery.
- c. Contractor/vendor will comply with all industry standards.
- d. Contractor/vendor will provide **an adequate timeframe from start to finish for the** completion of the item specified on the bid.
- e. Contractor/vendor must comply **with all Federal and State regulations**.
- f. Successful bidder must provide the following to the Navajo WIC Nutrition Program, or the bid package will be considered non-responsive:
  - Current W-9
  - Signed Navajo Nation Debarment form (will be sent from **Navajo WIC Nutrition Program**)

**2. Time and date deadline for submission of bids**

A minimum of five working days after the date of invitation to **bid is closing date**.

- a. Date and time to submit to Bid: January 17, 2025 by 5:00 p.m.
- b. Late proposals will not be accepted
- c. The Navajo WIC Nutrition Program reserves the right to **reject any or all proposals and waive informalities and minor irregularities** in the proposals received.

**3. Bid to be submitted to:**

- a. All responses to this request for proposals may **be returned** in a **sealed envelope**.

The Navajo Department of Health  
Navajo WIC Nutrition Program  
P. O. Box 1390  
Attention: Edith M. Snyder, Administrative Services Officer  
Building #2296 (Administrative Building#2)  
Window Rock, AZ 86515

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- b. Bids may be in person or mailed. If mailed, it must be post-marked by the closing date 5:00 p.m. The envelope must be clearly marked on the outside with the following:

**Re-Bid# 24-103489GC**

DO NOT OPEN (to be opened by Navajo WIC Nutrition Program)

**c. Form in which the bid is to be delivered**

- Six (6) copies of the bid: one original and five copies
- Print on white

**4. Date, time, and location of bid opening:**

- a. Date: January 6, 2025  
b. Time: 8:00 a.m.  
c. Location: Administration Building #2  
Building No. 2296  
Navajo Department of Health, Conference Room East  
Window Rock, AZ 86515  
d. The Bid Opening shall comply with the procedures **as described in Navajo Nation**

Procurement Rules and Regulations Section III.F.1. to 7: (928) 871-7362 or Navajo Nation Purchasing Department at (928) 871-6316.

**C. Delivery or performance schedule**

- a. Start of project date: March 1, 2025  
b. Completion of project date: April 1, 2025  
c. Cost  
-Reasonable cost of 2025 Sierra 2500 HD SLE 2WD  
-Navajo Nation tax : 6%

**D. Inspection requirement**

- a. Project may be inspected by the Navajo WIC Nutrition Program at the time of completion of project. The inspection may be from Monday to Friday, 8am to 12 pm 1 pm to 5 pm

**E. Acceptance requirements**

Project may be tested by the Navajo WIC Nutrition Program.

**F. Contract terms and conditions:**

**a. Warranty**

- I. Provide a standard warranty from the manufacturer
- Maintenance visit (as applicable)
  - Bumper-to-bumper warranty 3 yrs./36,000 miles
  - Corrosion Protection 3 yrs./36,000 miles; rust through 6 yrs./100,000 miles

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- Extended warranty; Powertrain/drivetrain warranty 5 yrs./100,000 miles
  - Roadside assistance program 5 yrs./100,000 miles
- ii. Provide assurance on warranty work performance.
- b. Bonding
- c. Other Security Requirements
- d. Type of Contract
- The Navajo Nation will use the standard Professional Services Agreement for the Procurement of goods and services for this project.

**G. Instructions to bidders**

- a. Visibly mark status as a vendor certified under the Navajo Nation Business Opportunity Act on the outside of the bid packet including Priority 1 and 2.
- b. Visibly mark as “Proprietary” each part of the bid which is proprietary information.

**H. Notification to bidders**

- a. The Navajo Nation is not bound to enter a contract under the invitation for Bids and may issue a subsequent invitation for Bids for the same Goods.
- b. The Navajo Nation is a sovereign government, and all contracts entered because of the invitation for Bids shall comply with Navajo Nation law, rules, and regulations, including but not limited to the Navajo Preference in Employment Act and applicable federal laws, rules, and regulations.

**Procurement specification-Scope of Work.**

- a. **Physical, functional, and performance descriptions.**  
**The contractor shall provide the Navajo WIC Nutrition Program with fair competitive pricing. The contractor should ensure that a service contract for maintenance is also considered. The maintenance contract will coincide with the Navajo Nation fiscal year beginning October 1<sup>st</sup> and ending September 30<sup>th</sup>. The delivery cost will be included in the request for bid.**
- b. **Navajo WIC Program shall be contacted should the contractor/vendor submitting the bid need additional information or wishes to make modifications to the specifications for the item specified for bid.**

**J. Other(s)**

- a. Evaluation Procedures and Criteria
- I. A review committee will review the proposals received in accordance with the general criteria used herein. The committee may request oral presentations by the contractor/vendor, as necessary.
- ii. All proposals must be endorsed by the official having authority to bind the proposal to execute the contract.
- b. Project Completion date:**
- i. This project shall be completed by April 1, 2025.

## Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://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.

<b>Print or type. See Specific Instructions on page 3.</b>	<b>1</b>	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.)			
	<b>2</b>	Business name/disregarded entity name, if different from above.			
	<b>3a</b>	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.		<b>4 Exemptions</b> (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) _____  <i>(Applies to accounts maintained outside the United States.)</i>	
	<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) . . . . . _____ <b>Note:</b> 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) _____				
	<b>3b</b>		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"/>		
	<b>5</b>	Address (number, street, and apt. or suite no.). See instructions.		Requester's name and address (optional)	
	<b>6</b>	City, state, and ZIP code			
<b>7</b>	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.

<b>Social security number</b>								
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**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.

### 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.

<b>Sign Here</b>	Signature of U.S. person	Date
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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](http://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

**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