

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

**EIGHTY (80) PPE FULL STRUCTURAL FIREFIGHTING TURNOUT GEAR**

INVITATION FOR BID

**BID NO: 22-10-2896KS**

BID DUE DATES: **NOVEMBER 18, 2022 BY 5:00 PM DST**  
ANY BIDS RECEIVED AFTER THIS DATE/TIME WILL NOT BE ACCEPTED

DESCRIPTION: DIVISION OF PUBLIC SAFETY – DEPARTMENT OF FIRE & RESCUE  
**EIGHTY (80) PPE FULL STRUCTURAL FIREFIGHTING TURNOUT GEAR**

CONTACT PERSON: Larry Chee, Fire Chief  
Division of Public Safety - Department of Fire & Rescue  
Email: [larrychee@navajo-nsn.gov](mailto:larrychee@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: 22-10-2896KS

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: 22-10-2896KS**

**DIVISION OF PUBLIC SAFETY – DEPARTMENT OF FIRE & RESCUE**  
**EIGHTY (80) PPE FULL STRUCUTRAL FIREFIGHTING TURNOUT GEAR**

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

The Navajo Nation Fire & Rescue Service is requesting bids from vendors to purchase eighty (80) full turnout PPE for firefighters. 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**

80	Modern Fire Helmets w/ Shield		
80	Particulate Blocking Turnout Coats		
80	Particulate Blocking Bunker Pants		
80	Particulate Blocking Nomex Hoods		
80	Structural Leather Structural Fire Boots with pull straps		
80	Particulate Blocking Structural Fire Gloves		
80	Helmet lights for Modern Fire Helmets		
80	Structural Firefighting Rechargeable Dual-Angle Flashlights		
80	Structural Firefighting Glove Holders		
	<b>Shipping (If Applicable)</b>		
	<b>Sales Tax</b>		
	<b>Grand Total</b>		

**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.**



# Request for Taxpayer Identification Number and Certification

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

▶ **Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.**

Print or type. See Specific Instructions on page 3.	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	<b>2</b> Business name/disregarded entity name, if different from above	
	<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<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	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> 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 <b>not</b> 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.	Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see instructions) ▶ _____	<small>(Applies to accounts maintained outside the U.S.)</small>
	<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.

**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.

<b>Social security number</b>								
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<b>or</b>								
<b>Employer identification number</b>								
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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.

<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).

### 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.*

**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