

**To'Nanees'Dizi Local Government**  
**Community Development Department**



**REQUEST FOR PROPOSALS  
DEMOLITION & CLEANUP SERVICES**

**ITB NO: 01-01-2026**

**DATE ISSUED: January 15, 2026**

## **I. INTRODUCTION**

### **A. PURPOSE**

The To'Nanees'Dizi Local Government ("TNLDG"), requests proposals from qualified Firms to provide 1. abatement (if needed), 2. demolition and 3. cleanup services related to the Community Housing and Infrastructure Department warehouse in Tuba City, AZ for the TNLDG ("Offerors").

The TNLDG is seeking qualified contractors to demolish the old CHID warehouse to make room for a new domestic violence shelter building for the Navajo Nation Division of Child and Family Services (To Be Awarded under a different RFP). The demolition will include 1. CHID warehouse and 2. two small storage structures made of steel panels, wood framing and cinder blocks.

### **B. PROJECT LOCATION:**

1. Tuba City, AZ.
2. GPS Coordinates: 36.130552° N, -111.234787° W
3. Map:



### **C. SCOPE OF WORK**

The Demolition & Cleanup Company ("Contractor") shall provide the services below:

1. The Contractor shall coordinate with the Navajo Utility Authority in regards to the site utilities. Should utility retirement become necessary, the cost shall

be included in the cost proposal.

2. Abate, if necessary, of asbestos and/or lead. Asbestos and lead test results will be provided. Dispose material properly in a certified land fill, receipts from land fill will need to be reported. There will be approximately 6,760 sq ft (Main warehouse) + 878 sq ft (storage 1) + 404 sq ft (storage 2) = 8,042 sq ft of total floor space for demolition.
  - a. Each contractor is responsible to determine for themselves the accuracy of the volume estimates of asbestos and lead containing material in the facility. A copy of the report will be made available to proposers to this ITB.
3. Completely demolish the big warehouse and two small metal storages and adjacent footing, foundations, slabs, and other debris onsite. Approximately 8,042 square feet of floor space. Clean-up of entire site is 126,313 square feet.
4. All material on 126,313 square feet site needs to be removed and including be not limited to, old paint, concrete blocks, fencing (except on westside adjacent to Navajo Tribal Utility Authority), pvc pipes, toilets, wood slabs, broken windows, etc.
5. Ensure that all contractors waste material is removed from the site.
6. At the completion of the project, furnish a project summary and all information and reports that may be required by any authority having jurisdiction to the project owner, Navajo Nation Division of Child and Family Services.

#### **D. QUALIFICATIONS OF OFFEROR**

Offerors should meet the following qualifications:

1. Have a minimum of two years of experience in providing Demolition & Clean-up services as outlined herein.
2. Be licensed to provide the requested abatement services in Arizona & the Navajo Nation, if necessary.
3. Maintain insurance coverage in the following minimum amounts:
  - a. General Liability of \$1 Million per occurrence and \$2 Million in total coverage, and
  - b. Auto Liability with limits no less than \$1M per occurrence
  - c. Workers Compensation Coverage with limits of \$1M/\$1M/\$1M
  - d. Pollution Legal Liability of \$1 Million per occurrence and \$1 Million in total coverage,
  - e. TN DLG must be named as Additional Insured for GL, AL and WC.
  - f. Waiver of Subrogation for all coverage applies.
  - g. Additional requirements from the Navajo Nation's Risk Management Program may apply.

#### **E. SUBMITTALS**

All interested parties shall submit (3) three sets of their proposal and one on a usb jump drive in a sealed envelope to the:

To'Nanees'Dizi Local Government  
220 Main St  
Tuba City, AZ 86045  
Attention: Nelson Cody, Community Development Manager

Please indicate the “ITB No.: 01-01-2026” on the front of the sealed envelope along with the priority status under the Navajo Nation Business Opportunity Act, if applicable.

## **F. SCHEDULE OF ACTIVITIES**

	<b>Activity</b>	<b>Date</b>
1.	<b>RFP Release Date</b>	Thursday January 15, 2026
2.	Job Site Walk Thru (CHID Warehouse-Tuba City, AZ) – <i>Optional (in order to obtain the most accurate pricing, we recommend participating in the walk thru.)</i>	By appointment with Nelson Cody.
3.	Inquiry Period-Questions on this ITB must be submitted via email to <a href="mailto:nelson.c@tcchapter.org">nelson.c@tcchapter.org</a> exceptions after this date.	Monday February 9, 2026 @ 3:00pm
4.	Deadline for submission, ITB Closes - <b>PROPOSALS DUE</b>	Thursday, February 12, 2026 @ 5:00pm
5.	Bid Opening Tuba City Chapter Meeting Room, Tuba City, AZ.	Friday February 13, 2026 @ 9:00am

## **II. RESPONSE FORMAT AND ORGANIZATION**

All proposals must include the following:

### **A. Proposal Organization**

1. The Letter of Transmittal, which shall be considered an integral part of the proposal, shall be signed by the responsible individual(s) who is (are) authorized to bind the Offeror contractually.
2. The proposal must supply names and resumes of key personnel to be assigned to the performance of the responsibilities contemplated by the ITB. Resumes describing the qualifications of all professional personnel, excluding support staff, to be utilized in the performance of this agreement, including all subcontractors who have been identified, must show, at a minimum, the person's name, education, position, and total years and types of experience relevant to the performance of the agreement.
3. The Offeror must submit evidence of appropriate required insurances that will be in force at the inception of the contract and must agree to maintain such coverage throughout the term of any agreement. Such insurance must be in an

amount reasonable for a firm of Contractor's size and financial condition, and shall cover the Offeror, its employees, agents, representatives and subcontractors.

4. A detailed description of Offeror's knowledge and experience with respect to the services to be provided.
5. A list of three (3) references for the Offeror's work.
6. A specific description of the Offeror's proposal for the delivery of the professional services contemplated by this ITB. This proposal may include a work plan, a discussion of the manner in which the personnel will be made available to provide the services and such other information as the Offeror reasonably believes necessary to explain its proposal for meeting the needs of the To'Nanees'Dizi Local Government.

#### **B. Fee and Cost Schedule**

A detailed cost breakout for services required by this RFP. Such fees may be outlined hourly, as a percentage of the cost of any buildout, or otherwise. Offerors must sufficiently explain the details of its cost proposal for each of the services to be provided.

### **III. EVALUATION**

#### **A. Evaluation Point Table/Summary:**

1. Demonstrated Qualifications and Experience	35 Points
2. Technical Capabilities	35 Points
3. Cost Proposal	20 Points
4. Knowledge of similar projects-demolition	10 points
<b>Total Points</b>	<b>100</b>

#### **B. Completed evaluation:**

1. Once the Bids are opened, evaluation will occur.
2. Bids are evaluated based on the above criteria.
3. Once offers are evaluated and compared, an offer may be extended to the successful bidder.
4. The proposed projects is subject to the availability of funds and the ITB may be cancelled at any time.
5. If the proposal is beyond the internally Maximum Feasible Cost, the offeror reserves the right to reissue the ITB.

# W-9

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](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.

Print or type.  
See Specific Instructions on page 3.

1 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.)					
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 on line 1. Check only one of the following seven boxes.					
<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) <small>Note: 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.</small> <input type="checkbox"/> Other (see instructions)					
3b 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					
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. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number							
<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
or							
Employer identification number							
<input type="text"/>	<input type="text"/>	-	<input type="text"/>				

### 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
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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.

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Applicant Name

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Name of individual signing on Applicant's behalf (print)

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Applicant Address

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Title of individual signing on Applicant's behalf

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Applicant Address

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Signature of individual signing on Applicant's behalf

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Applicant Address

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Date