



Housing Authority of the Cherokee Nation
1500 Hensley Drive
P.O. Box 1007
Tahlequah, OK 74465-1007
Phone 918-456-5482



REQUEST FOR PROPOSALS LAND SURVEYING 2025-001-069

The Housing Authority of the Cherokee Nation of Oklahoma (HACN) is accepting proposals from qualified individuals or firms to provide Land Surveying within the Cherokee Nation Reservation Boundaries (HACN Service Area). Information necessary for submission of proposals may be picked up at the Housing Authority of the Cherokee Nation, Procurement Department, 1200 W. 4th Street, Tahlequah, Oklahoma between the hours of 8:00 a.m. to 5:00 p.m., Monday through Friday. Or you may call Baylee Scott at 1-539-635-0469, if you would like to request that a packet be mailed to you. You may also request an e-mail copy from: Baylee Scott baylee.scott@hacn.org or Brandon Hamilton brandon.hamilton@hacn.org. A copy of all necessary information is also available on www.cherokeebids.org.

Proposals may be mailed to the Housing Authority of the Cherokee Nation of Oklahoma, P.O. Box 1007, Tahlequah, Oklahoma, 74465-1007, Attn: Baylee Scott, Procurement Department or hand delivered to 1200 W. 4th Street., Tahlequah, Oklahoma 74464. Proposals must be received on or before **September 19, 2025 at 5 PM.** No proposal will be accepted after the specified deadline. Proposals must be clearly marked, **"PROPOSAL - QUALIFICATIONS, LAND SURVEYING, DO NOT OPEN."** It is the offeror's responsibility to ensure delivery by **September 19, 2025 at 5 PM.**

Proposals will be accepted from Tribal, Indian, and Non-Indian Offerors. Tribal and Indian preferences will be given ONLY to offerors who provide current certification from the Tribal Employment Rights Office (TERO) located at the Cherokee Nation of Oklahoma, P. O. Box 948, Tahlequah, Oklahoma, 74465 - telephone number (918) 453-5000. Failure to submit the TERO certification with the proposal, or within three (3) days of the deadline, may result in denial of Indian Preference. This contract is subject to Section 7(b) of the Indian Self-Determination and Education Assistance Act, which requires in part that to the greatest extent feasible, preference in the award of contracts and subcontracts shall be given to Indian Organizations and Indian Owned Economic Enterprises.

The Housing Authority of the Cherokee Nation reserves the right to determine a proposal acceptable in terms of meeting RFP requirements. The HACN reserves the right to accept or reject any and all proposals received and may negotiate with offeror(s) regarding the terms of their proposals or parts thereof. The Housing Authority of the Cherokee Nation reserves the right to award a contract(s) for proposals that are in the best interest of the HACN, including but not limited to the total cost and capability of the offeror. The HACN may award contracts to more than one offeror.

STATEMENT OF WORK

OBJECTIVE

The Housing Authority of the Cherokee Nation of Oklahoma is soliciting proposals from individuals and/or firms interested in providing Land Surveying for the Housing Authority. The successful offeror(s) will be required to enter into a contract with the Housing Authority of the Cherokee Nation to provide said services and beginning within approximately 1 day of contract signing. This will be for a one-year engagement with the option to renew annually for two additional years.

SCOPE OF WORK

The contract for Land Surveying shall be for a period not to exceed one (1) year. If it is determined to be in the best interest of the HACN, this contract may be extended annually for two additional 1-year periods but will not exceed a period of three (3) years total. Each extension must be in written form as a contract extension.

The Contractor will be required to provide the following:

- Land Surveying Services (including, but not limited to, Boundary Survey, Easement Survey, and Mortgage Inspection Survey).
- Sites may be located in:
 - rural un-platted areas
 - rural platted areas
 - platted subdivisions
 - cities and towns
- Sites may be located within every county of the Cherokee Nation Reservation Boundaries (HACN Service Area), to include:
 - Adair
 - Cherokee
 - Craig
 - Delaware
 - Mayes
 - McIntosh
 - Muskogee
 - Nowata
 - Ottawa
 - Rogers
 - Sequoyah
 - Tulsa
 - Wagoner
 - Washington

PROPOSAL EVALUATION

Each responsive proposal will be individually evaluated on the information and documentation provided in the proposal in accordance with the evaluation factors contained in this RFP. Proposals will be evaluated on the firm's administrative technical merits, qualifications, experience, ability to meet required schedules, prices and Tribal/Indian Preference. After scores have been completed, negotiations will be conducted as deemed necessary by the HACN.

Additional Instructions to Offerors

1. Offerors must submit an original and two copies of their qualifications to:

The Housing Authority of the Cherokee Nation
ATTN: Baylee Scott
P.O. Box 1007
Tahlequah, OK 74465

Or they may be hand delivered to:
1200 W. 4th Street
Tahlequah, OK 74464

2. All costs in connection with the preparation and submission of proposals shall be paid by the offeror.
3. It is the intention of the HACN to make this RFP, the successful offeror's proposal, and any written correspondence a part of the contract.
4. The Housing Authority of the Cherokee Nation reserves the right to determine a proposal acceptable in terms of meeting RFP requirements. The Housing Authority reserves the right to accept or reject any and all proposals received and may negotiate with offerors regarding the terms of their proposals, final contract, or parts thereof. The Housing Authority of the Cherokee Nation reserves the right to award a contract for proposals that are in the best interest of the Housing Authority of the Cherokee Nation.
5. The proposal shall contain all required attachments, forms and documentation as outlined in the solicitation documents.

EVALUATION FACTORS

All proposals will be evaluated individually on their administrative technical merits.

Offeror must provide a general summary of the items requested below and the names and contact information of 3 references that may be contacted for references.

Rating factors and their values are as follows:

- 1. Ability to perform the work** **MAX: 10 points** _____
Evidence of the individual or firm's ability to perform the work as indicated by profiles of the principals, the staff's professional and technical competence and experience related to land surveying matters. To obtain the maximum points, the offeror should provide evidence they specialize and are registered to perform such work within the State of Oklahoma.
- 2. Experience** **MAX: 20 points** _____
Evidence showing offeror has provided land surveying services within the fourteen county jurisdictional area of the Cherokee Nation.
- 3. Credentials and insurance** **MAX: 10 points** _____
Evidence that the offeror has the necessary credentials to perform land surveying work in the state of Oklahoma. Provide proof of Errors and Omission/Liability insurance.
- 4. Previous participation with Indian Housing Authorities or Indian Tribes.** **MAX: 15 points** _____
Documentation provided to show previous participation with Indian Tribes or Indian Housing Authorities.
- 5. Time to Completion** **MAX: 30 points** _____
Provide attachment on the estimated amount of time to complete a request for land surveying activities for each county listed on attached sheet; this document will become part of the contract. Failure to meet expected timelines will result in the HACN contracting with the next best offeror for services.
- 6. Tribal / Indian Preference** **MAX: 15 points** _____
Proposal includes current TERO certification or other confirmation that the business is eligible for Indian Preference.

Total Points **100 points**

ESTIMATED COMPLETION TIMES

We estimate that the amount of time to complete services, at minimum, from the date of request to be as follows:

Adair County	_____ days
Cherokee County	_____ days
Craig County	_____ days
Delaware County	_____ days
Mayes County	_____ days
McIntosh County	_____ days
Muskogee County	_____ days
Nowata County	_____ days
Ottawa County	_____ days
Rogers County	_____ days
Sequoyah County	_____ days
Tulsa County	_____ days
Wagoner County	_____ days
Washington County	_____ days

Estimated time to completion may vary based on the number of requests received. However, this is our best estimate under normal circumstances.

PREPARATION OUTLINE

- I. Attachments *(these must be submitted with proposals to be considered responsive) all other documents required for the purpose of obtaining points during the evaluation process are the responsibility of the offeror.*
 - a. Preparation Outline (This form)
 - b. Offeror's Proposal (Original and 2 copies)
 - c. HACN Work History form and HUD 2530 Previous Participation
 - d. Non-Collusive Affidavit
- III. To receive Indian preference, offerors must submit with the proposal, or within 3 days of deadline:
 - a. Indian Preference - a current TERO Certificate or letter as Cherokee Owned
- III. Documents the successful offeror will be required to complete and submit:
 - a. W-9 form (provided by HACN)
 - b. New contractors must complete a Vendor Registration form (provided by HACN)

SPECIAL INSTRUCTIONS

****Be advised that all responsive proposals will be evaluated as outlined in this solicitation packet.**

Authorized Signature/Title

Company Name

Contact Phone Number(s)

Date

Housing Authority of the Cherokee Nation

PREVIOUS WORK HISTORY FORM

NOTE: This form is a required submission from each bidder/offeror and is the HACN's documentation to determine responsible bidders/offerors. In the spaces below complete all information requested, providing all telephone number's and any available facsimile numbers for all employers, companies and vendor listed. In the disclosure space enter any defaults, assignments or foreclosures.

Employer/Company Name, Address, Phone/Fax	Contract Amount	Amt. & Size of Units	Describe type of work performed/completed - provide begin & completion dates	Disclosures	Contractor's current & previous vendors - give address & phone/fax
Please attach additional sheets as required to sufficiently provide a minimum of 3 years work history					

US Department of Housing and Urban Development
Office of Housing/Federal Housing Commissioner**US Department of Agriculture**
Farmers Home Administration**Part I to be completed by Controlling Participant(s) of Covered Projects**

(See instructions)

Reason for submission:

1. Agency name and City where the application is filed

3. Loan or Contract amount \$

4. Number of Units or Beds

5. Section of Act

6. Type of Project (check one)
☐ Existing ☐ Rehabilitation ☐ Proposed (New)

2. Project Name, Project Number, City and Zip Code

For HUD HQ/FmHA use only**7. List all proposed Controlling Participants and attach complete organization chart for all organizations showing ownership %**

Name and address (Last, First, Middle Initial) of controlling participant(s) proposing to participate

8 Role of Each Principal in Project

9. SSN or IRS Employer Number (TIN)

1. Schedule A contains a listing, for the last ten years, of every project assisted or insured by HUD, USDA FmHA and/or State and local government housing finance agencies in which the controlling participant(s) have participated or are now participating.

2. For the period beginning 10 years prior to the date of this certification, and except as shown on the certification:

a. No mortgage on a project listed has ever been in default, assigned to the Government or foreclosed, nor has it received mortgage relief from the mortgagee;

b. The controlling participants have no defaults or noncompliance under any Conventional Contract or Turnkey Contract of Sale in connection with a public housing project;

c. There are no known unresolved findings as a result of HUD audits, management reviews or other Governmental investigations concerning the controlling participants or their projects;

d. There has not been a suspension or termination of payments under any HUD assistance contract due to the controlling participant's fault or negligence;

e. The controlling participants have not been convicted of a felony and are not presently the subject of a complaint or indictment charging a felony. (A felony is defined as any offense punishable by imprisonment for a term exceeding one year, but does not include any offense classified as a misdemeanor under the laws of a State and punishable by imprisonment of two years or less);

f. The controlling participants have not been suspended, debarred or otherwise restricted by any Department or Agency of the Federal Government or of a State Government from doing business with such Department or Agency;

g. The controlling participants have not defaulted on an obligation covered by a surety or performance bond and have not been the subject of a claim under an employee fidelity bond;

3. All the names of the controlling participants who propose to participate in this project are listed above.

4. None of the controlling participants is a HUD/FmHA employee or a member of a HUD/FmHA employee's immediate household as defined in Standards of Ethical Conduct for Employees of the Executive Branch in 5 C.F.R. Part 2635 (57 FR 35006) and HUD's Standard of Conduct in 24 C.F.R. Part 0 and USDA's Standard of Conduct in 7 C.F.R. Part 0 Subpart B.

5. None of the controlling participants is a participant in an assisted or insured project as of this date on which construction has stopped for a period in excess of 20 days or which has been substantially completed for more than 90 days and documents for closing, including final cost certification, have not been filed with HUD or FmHA.

6. None of the controlling participants have been found by HUD or FmHA to be in noncompliance with any applicable fair housing and civil rights requirements in 24 CFR 5.105(a). (If any controlling participants have been found to be in noncompliance with any requirements, attach a signed statement explaining the relevant facts, circumstances, and resolution, if any).

7. None of the controlling participants is a Member of Congress or a Resident Commissioner nor otherwise prohibited or limited by law from contracting with the Government of the United States of America.

8. Statements above (if any) to which the controlling participant(s) cannot certify have been deleted by striking through the words with a pen, and the controlling participant(s) have initialed each deletion (if any) and have attached a true and accurate signed statement (if applicable) to explain the facts and circumstances.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. §3729, 3802).

Name of Controlling Participant**Signature of Controlling Participant****Certification Date (mm/dd/yyyy)****Area Code and Tel. No.****This form prepared by (print name)****Area Code and Tel. No.**

OMB Approval No. 2502-0118
(Exp. 01/31/2026)

1. Controlling Participants' Name (Last, First)	2. List of previous projects (Project name, project ID and, Govt. agency involved)	3. List Participants' Role(s) (indicate dates participated, and if fee or identity of interest participant)	4. Status of loan (current, defaulted, assigned, foreclosed)	5. Was the Project ever in default during your participation Yes No If yes, explain	6. Last MOR rating and Physical Insp. Score and date

Received and checked by me for accuracy and completeness; recommend approval or refer to Headquarters after checking appropriate box.

Previous editions are obsolete

Instructions for Completing the Previous Participation Certificate, form HUD-2530

Carefully read these instructions and the applicable regulations. A copy of the regulations published at 24 C.F.R. part 200, subpart H, § 200.210-200.222 can be obtained on-line at www.gpo.gov and from the Account Executive at any HUD Office. Type or print neatly in ink when filling out this form. Incomplete form will be returned to the applicant.

Attach extra sheets as you need them. Be sure to indicate "Continued on Attachments" wherever appropriate. Sign each additional page that you attach if it refers to you or your record. **Carefully read the certification before you sign it.** Any questions regarding the form or how to complete it can be answered by your HUD Account Executive.

Purpose: This form provides HUD/USDA FmHA with a certified report of all previous participation in relevant HUD/USDA programs by those parties submitting the application. The information requested in this form is used by HUD/USDA to determine if you meet the standards established to ensure that all controlling participants in HUD/USDA projects will honor their legal, financial and contractual obligations and are of acceptable risks from the underwriting standpoint of an insurer, lender or governmental agency. HUD requires that you certify and submit your record of previous participation, in relevant projects, by completing and signing this form, before your participation can be approved.

HUD approval of your certification is a necessary precondition for your participation in the project and in the capacity that you propose. If you do not file this certification, do not furnish the information requested accurately, or do not meet established standards, HUD will not approve your certification.

Note that approval of your certification does not obligate HUD to approve your project application, and it does not satisfy all other HUD program requirements relative to your qualifications.

Who Must Sign and File Form HUD-2530: Form HUD-2530 must be completed and signed by all Controlling Participants of Covered Projects, as such terms are defined in 24 CFR part 200 §200.212, and as further clarified by the Processing Guide (HUD notice H 2016-15) referenced in 24 CFR §200.210(b) and available on the HUD website at: http://portal.hud.gov/hudportal/HUD?src=/program_offices/housing/mfh/prevparticipation.

Where and When Form HUD-2530 Must Be Filed: The original of this form must be submitted to the HUD Office where your project application will be processed at the same time you file your initial project application. This form must be filed with applications for projects listed in 24 CFR §200.214 and for the Triggering Events listed at 24 CFR §200.218.

Review of Adverse Determination: If approval of your participation in a HUD project is denied, withheld, or conditionally granted on the basis of your record of previous participation, you will be notified by the HUD Office. You may request reconsideration in accordance with 24 CFR §200.222 and further clarified by the Processing Guide. Request must be made in writing within 30 days from your receipt of the notice of determination.

The Department of Housing and Urban Development (HUD) is authorized to collect this information by law 42 U.S.C. 3535(d) and by regulation at 24 CFR 200.210. This information is needed so that principals applying to participate in multifamily programs can become HUD-approved controlling participants. The information you provide will enable HUD to evaluate your record with respect to established standards of performance, responsibility and eligibility. Without prior approval, a controlling participant may not participate in a proposed or existing multifamily or healthcare project. HUD uses this information to evaluate whether or not controlling participants pose an unsatisfactory underwriting risk. The information is used to evaluate the potential controlling participants and approve only individuals and organizations that will honor their legal, financial and contractual obligations.

Privacy Act Statement: The Housing and Community Development Act of 1987, 42 U.S.C. 3543 requires persons applying for a Federally-insured or guaranteed loan to furnish his/her Social Security Number (SSN). HUD must have your SSN for identification of your records. HUD may use your SSN for automated processing of your records and to make requests for information about you and your previous records with other public agencies and private sector sources. HUD may disclose certain information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as required and permitted by law. You must provide all of the information requested in this application, including your SSN. Failure to provide any of the information will result in your disapproval of participation in this HUD program. APPS SORN could be accessed in Federal Register / Vol. 81, No. 146 / Friday, July 29, 2016 / Notices ([Docket No. FR-5921-N-10] Implementation of the Privacy Act of 1974, as Amended; Amended System of Records Notice, Active Partners Performance System).

PRA Statement: The public reporting burden is estimated at 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Reports Management Officer, Paperwork Reduction Project, to the Office of Information Technology, US. Department of Housing and Urban Development, Washington, DC 20410-3600. When providing comments, please refer to OMB Approval No. 2502-0118. HUD may not conduct and sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid control number.

The collection is authorized by 12 U.S.C 1702-1715z; 42 U.S.C. 3535(d). HUD form 2530 is created to collect information as mandated by 24 CFR Part 200. The HUD-2530 form is used to protect HUD's Multifamily Housing and Healthcare programs by comprehensively assessing industry participants' risk. It is the Department's policy that participants in its housing programs honor their legal, financial, and contractual obligations. Accordingly, uniform standards are established for approvals, disapprovals, or withholding actions on principals in projects, based upon their past performances as well as other relevant information. Respondents such as owners, management agents, master tenants, general contractors, and nursing home operators are subject to review. The information on this form needs to be collected by the Department to evaluate participants' previous performance and compliance with contracts, regulations, and directives.

NON-COLLUSIVE AFFIDAVIT

STATE OF _____

COUNTY OF _____

_____, being duly sworn, deposed and says: that he/she is

a partner or officer of the firm of _____,

the party making the foregoing proposal, that such proposal is genuine and not collusive or sham; that said offeror has not colluded, conspired, connived, or agreed, directly or indirectly with any offeror or person, to put in a sham bid or to refrain from bidding, and has not in any manner directly or indirectly, sought by agreement or collusion or communication or conference with any person to fix the bid price of affiant or any other offeror, or to fix overhead, profit, or cost element of said bid price, or that of any other offeror, or to secure any advantage against the Housing Authority of the Cherokee Nation, or any person interested in the proposed contract; and that all statements in said proposal are true.

Signed _____

(Name of offeror, if an individual)

(Name of partner, if a partnership)

(Name of officer, if a corporation)

Subscribed and sworn to before me this _____ day of _____, 20____.

My commission expires _____, 20_____.

Notary Public Signature: _____

Commission Number: _____