



# REQUEST FOR QUALIFICATIONS FOR

# PROFESSIONAL ARCHITECT AND ENGINEERING SERVICES Solicitation # 2025-001-077

The Housing Authority of the Cherokee Nation of Oklahoma (HACN) is accepting Request for qualifications (RFQ) from qualified individuals or firms to provide Professional Architect and Engineering Services within the fourteen county Cherokee Nation Reservation (HACN Service Area). Information necessary for submission of qualifications may be picked up at the Housing Authority of the Cherokee Nation, Procurement Department, 1200 W. 4<sup>th</sup> 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 at baylee.scott@hacn.org. A copy of all necessary information is also available at www.cherokeebids.org. under the HACN drop down.

Request for interpretations and all questions must be e-mailed to <u>baylee.scott@hacn.org</u> or hand delivered to 1200 W. 4<sup>th</sup> Street, Tahlequah, Oklahoma 74464 by <u>Tuesday</u>, <u>September 30<sup>th</sup> at 5:00 P.M.</u> to be given consideration. Clarifications and responses will be posted by Friday, October 3, 2025, at 5:00 P.M. to the Cherokee Nation Procurement website.

Request for Qualifications must be received on or before 5:00 p.m., Friday, October 10, 2025, No Request for Qualifications will be accepted after the specified deadline. Request for Qualifications must be clearly marked, "REQUEST FOR QUALIFICATIONS, PROFESSIONAL ARCHITECT AND ENGINEERING SERVICES, DO NOT OPEN." ATTN: BAYLEE SCOTT. All RFQ's must be hand delivered to Housing Authority of the Cherokee Nation, Procurement Department, 1200 W. 4<sup>TH</sup> Street, Tahlequah, Oklahoma 74464. Or mailed to: The Housing Authority of the Cherokee Nation P.O. Box 1007 (USPS Mailing Address) Tahlequah, OK 74465-1007. It is the offeror's responsibility to ensure delivery of RFQ by deadline.

RFQ'S will be accepted from Cherokee, Indian, and Non-Indian Offerors. Tribal and Indian preference 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 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 HACN reserves the right to determine a Request for Qualifications acceptable in terms of meeting RFQ requirements. The HACN reserves the right to accept or reject any and all RFQ'S received and may negotiate with offeror(s) regarding the terms of their RFQ'S or parts thereof. The Housing Authority of the Cherokee Nation reserves the right to award a contract(s) for RFQ'S 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. This will be for a one-year engagement with the option to renew annually for (2) two additional years. Will not exceed three years total.

Debarment, Suspension, Proposed Debarment, and other Responsibility Matters, the bidder certifies to the best of its knowledge and belief that the bidder, the firm or any of its principals are not presently debarred, suspended, proposed for debarment, or declared ineligible for the award of contracts be any Federal agency or Indian Tribe. The bidder will also certify they have not within a three-year period preceding this Request for Qualification, been convicted of or had a civil judgment rendered against them for: Commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, Local, or Tribal) contract or subcontract; violation of Federal or State antitrust statutes relating to the submission of offers; or commissions of embezzlement, theft, forgery, bribery, falsifications or destruction of records, making false statements, and are not presently indicted for, or otherwise criminally or civilly charged by governmental entity with, commission of any of the offenses enumerated in this provision. The bidder certifies they have not, within a three-year period preceding this Request for Qualification, had one or more contracts terminated for default by Federal, State, Local or Tribal agency.

The bidder shall provide immediate written notice to the HACN if, at any time prior to contract award, the bidder learns its certification was erroneous when submitted or has become erroneous by reason of changed circumstances. This certification is a material representation of fact upon which reliance was placed when making award. If it is later determined that bidder knowingly rendered an erroneous certification, in additional to other remedies available to the HACN; the HACN may terminate the contract resulting from this Request for Qualification for default.

It is understood any information submitted to the bidder by the HACN is respect to this RFQ embodies certain proprietary information and is loaned to the bidder on a confidential basis. Any information acquired at the HACN or otherwise relating to processes belonging to the HACN incorporated into this project shall be kept confidential. The bidder agrees not to use in an unauthorized manner or communicate to others any such confidential items without the prior written consent of the HACN and will undertake such measures as are necessary to require its employees and all approved subcontractors to maintain complete confidentiality.

Each bidder must inform themselves fully of the scope of work of this Request for Qualification. Failure to do so will not relieve a successful bidder of his obligation to carry out provisions of a contract resulting from this RFQ. Insofar as possible, the bidder, in performing work under this contract, will employee such methods or means as will not cause any interruption of or interference with the work of the HACN.

HACN is funded on both state and federal levels and holds a tax exempt, government status. Funds are appropriated and approved on an annual basis each fiscal year which begins October 1<sup>st</sup> and end September 30<sup>th</sup>. All Vendors will need to renew their W9 and contracts/agreements will need to renew the purchase order each fiscal year.

## STATEMENT OF WORK OBJECTIVE

The Housing Authority of the Cherokee Nation of Oklahoma is accepting qualifications from individuals and/or firms interested in providing Professional Architect & Engineering Services within the Cherokee Nation Jurisdictional Boundaries (HACN Service Area). We are also widening the statement of work to include an A&E that will assist in residential home design and blueprint development that not only encompasses new home design but will provide a solid set of blueprints for our current home designs. The successful offeror(s) will be required to enter into a contract with the Housing Authority to provide said services and beginning within approximately 30 days of contract signing. This will be for a one-year engagement with the option to renew annually for two additional years. Will not exceed three years total. HACN may award contracts to more than one offeror.

### **SCOPE OF WORK**

The services will consist of evaluation and design services for new and existing house design, evaluation and recommendation of foundation failures and may consist of design and construction services of affordable (single-family and/or multifamily) residential development projects. Services may include, but are not limited to typical A/E services pertaining to:

- Site Planning;
- Structural Engineering;
- Mechanical Engineering;
- Electrical Engineering;
- Plumbing Engineering;
- Septic System Design;
- Water Distribution System Design;
- Civil Engineering;
- General Architecture;
- Geotechnical Analysis;
- Handicap Accessibility Design;
- Landscape Architecture;
- Surveying and evaluation of existing conditions:
- Residential Home Design and Blueprint Development of new and existing HACN design. The projects may be located anywhere within the HACN Service Area, including the following counties:
  - Adair
  - Cherokee
  - Craig
  - Delaware
  - Mayes
  - McIntosh
  - Muskogee
  - Nowata
  - Ottawa
  - Rogers
  - Sequoyah
  - Tulsa
  - Wagoner
  - Washington

### **Additional Instructions to Offerors**

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

The Housing Authority of the Cherokee Nation P.O. Box 1007 (USPS Mailing Address) Tahlequah, OK 74465-1007 Attn: Baylee Scott

- 2. All costs in connection with the preparation and submission of RFQ shall be paid by the offeror.
- 3. It is the intention of this HACN to make this RFQ, the successful offeror's proposal and written correspondence, a part of the contract.
- 4. The Housing Authority of the Cherokee Nation reserves the right to determine a Request for Qualifications acceptable in terms of meeting RFQ requirements. The Housing Authority reserves the right to accept or reject any and all RFQ's received and may negotiate with offerors regarding the terms of their RFQ's or parts thereof. The Housing Authority of the Cherokee Nation reserves the right to award a contract for RFQ's that are in the best interest of the Housing Authority of the Cherokee Nation including but not limited to the total cost and capability of the offeror. The HACN may award contracts to more than one offeror.
- 5. The RFQ shall contain all required attachments, forms and documentation as outlined in the solicitation documents.

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EV	VALUATION FACTORS OFFEROR:
an Of	1 RFQ's will be evaluated individually on their administrative technical merits. Rating factors d their values are as follows:  Teror must provide a general summary of the items asked for below and the names and contact formation of 3 references that may be contacted for references.
1.	Ability to perform the work  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 professional engineering services. 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.	Previous Participation that the offeror has provided services within the Cherokee Nation jurisdictional boundaries.  MAX: 20 points
	Evidence showing offeror has provided professional engineering services within the fourteen-county jurisdictional area of the Cherokee Nation.
3.	
	Provide evidence that the offeror has the necessary credentials to perform professional engineering work in the state of Oklahoma. Provide Staff Profiles, include credentials, experience and role. Provide evidence the offeror has 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, Indian Housing Authorities, and/or Tribally Designated Housing Entities, on previous participation form

sing provided.

5. Time to Completion

MAX: 30 points

Provide attachment on the estimated amount of time to complete all activities for the proposed project. 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 letter (5 points)

Proposal includes current TERO certification or letter as Cherokee owned (10 points)

**Total Points** 

100 points

### TIME TO COMPLETION FORM

We estimate that the amount of time to complete, at minimum from the date of request to be as follows: (provide a summary timeline for work on the project)

Evaluation & design:

Site Planning;		days
Structural Engineering;		days
Mechanical Engineering;		days
Electrical Engineering;		days
Plumbing Engineering;		days
Septic System Design;		days
Water Distribution System Design;		days
Civil Engineering;		_ days
General Architecture;	•	days
Geotechnical Analysis;		days
Handicap Accessibility Design;		days
Landscape Architecture;		_ days
Surveying and evaluation of existing conditions;		days
Evaluation & recommendations for foundation failures (ex.10)		_ days
Design & construction services for residential development projects (ex. 10 lots, water, roads, city sewer plans)		days
Residential Home Design and Blueprint Development (New Design)		days
Residential Home Design and Blueprint Development (Current Home D	esigns)	days
Estimated time to completion is our best estimate under normal circ	umstances.	

### PREPARATION OUTLINE

I.	other	·	proposals to be considered responsive) all f obtaining points during the evaluation
	a.	Preparation Outline (this form)	
	<b>b</b> .	Offeror's RFQ	
	c.	HACN Work History form	
	d.	HUD 2530 Previous Participation C	ertification
	e.	Non-Collusive Affidavit	
п.		offerors must submit with your RFQ, or ollowing preferences:	within 3 days of deadline, to receive the
	a.	Indian Preference - offeror must sub	mit a current TERO Certificate front and back
ш.	Docum	ments the <u>successful offeror</u> will be req	quired to complete and submit.
	a. b. c.	W-9 form (provided by HACN) New Contractors must complete a Vo Provide licenses and Insurances	endor Registration form (provided by HACN)
SPEC:	IAL IN	NSTRUCTIONS	
**Be a packet		d that all responsive proposals will be e	valuated as outlined in this solicitation
		Signati	ure/Title
		Compa	nny Name
		Contac	t Phone Number(g)

# 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 fascinite numbers for all employers, companies and vendor listed. In the disclosure space enter any defaults, assignments or foreclosures.

жу	years work history	Please attach additional sheets as required to suffliciently provide a minnimum of 3 year	th additional sheets as	Please atta
·				
Contractor's current & previous vendors - give address & phone/fax	Disclosures	Amt. & Size of performed/completed - provide begin & Units completion dates	Contract Amt.	Employer/Company Name, Address, Phone/Fax

Previous Participation Certification

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

# US Department of Housing and Urban Development

Office of Housing/Federal Housing Commissioner

IIS Denartment of Agriculture

Co Department of Agricultae	Farmers Home Administration	
INTERIOR I		

Part I to be completed by Controlling Participant(s) of Covered Projects (See instructions) Reason for submission:	rticipant(s) of Covered Projects	For HUD HQ/FmHA use only	
1. Agency name and City where the application is filed		2. Project Name, Project Number, City and Zip Code	and Zip Code
3. Loan or Contract amount \$	4. Number of Units or Beds	5. Section of Act	6. Type of Project (check one)  Bristing  Rehabilitation  Proposed (New)
7. List all proposed Controlling Participants and attach complete organization chart for all organizations showing ownership %	s and attach complete organization chart fo	or all organizations showing ov	mership %
Name and address (Last, First, Middle Initial) of controlling participant(s) proposing to participate	rolling participant(s) proposing to participate	8 Role of Each Principal in Project	lin 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 Pederal Government or of a State Government from doing business with such Department or
- 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;
  - 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).
  - 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 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. 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 Co	Area Code and Tel. No.	

Previous Participation Certification

OMB Approval No. 2502-0118

Schedule A: List of Previous Projects and Section 8 Contracts. Below is a complete list of the controlling participants' previous participation projects and participation history in covered projects as per 24 CFR, part 200 §200.214 and multifamily Housing programs of FmHA, State and local Housing Finance Agencies, if applicable. Note: Read and follow the instruction sheet carefully. Make full disclosure. Add extra sheets if you need more space. Double check for accuracy. If no previous projects, write by your name, "No previous participation, First Experience". (Exp. 01/31/2026)

6. Last MOR rating and Physical Insp. Score and date	
5. Was the Project ever in default during your participation	
Status of loan     (current, defaulted, assigned, foreclosed)	
3.List Participants' Role(s) (indicate dates participated, and if fee or identity of interest participant)	
2. List of previous projects (Project name, project ID and, Govt. agency involved)	
1. Controlling Participants' Name (Last, First)	

Part II- For HUD Internal Processing Only Received and checked by me for accuracy and completens

ACCEIVED BILD CHECKED BY THE BUT ACCURACY AND COMPLICATION APPROVAL OF LEGAL OF LEGAL CHECKED SHEET CHECKING APPROPRIATE BOX.	completeness, recommend app	noval of letel to licaudualiers	and thechig appropriate out.		
Date (mm/dd/yyyy)	Tel No. and area code		No adverse information; form HUD-2530 approval		C. Disclosure or Certification problem
Staff	Processing and Control		recommended.		
			B. Name match in system	D. Other (attach memorandum)	sh memorandum)
Signature of authorized reviewer		Signature of authorized reviewer	ewer	Approved	Date (mm/dd/yyyy)
				No.	

Previous editions are obsolete

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

§ 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 Carefully read these instructions and the applicable regulations. A copy of the regulations published at 24 C.F.R. part 200, subpart H, 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.

by those parties submitting the application. The information requested in this form is used by HUD/USDA to determine if you meet the Purpose: This form provides HUD/USDA FmHA with a certified report of all previous participation in relevant HUD/USDA programs 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.

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

Covered Projects, as such terms are defined in 24 CFR part 200 §200.212, and as further clarified by the Processing Guide (HUD Who Must Sign and File Form HUD-2530: Form HUD-2530 must be completed and signed by all Controlling Participants of 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.

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

accordance with 24 CFR §200.222 and further clarified by the Processing Guide. Request must be made in writing within 30 days from 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 your receipt of the notice of determination.

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

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

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

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

### **NON-COLLUSIVE AFFIDAVIT**

State of
County of
being first duly sworn, deposed and says
that he/she is a partner or officer of the firm of
Signed:
Subscribed and sworn to before me this day of, 20
My commission expires, 20
Notary Public Signature
Commission Number