NEW MEXICO AGING SERVICES

AGING AND LONG-TERM SERVICES DEPARTMENT

FY 27 Capital Outlay Application Training Manual

The Aging and Long-Term Services Department (ALTSD) is pleased to provide this manual to outline the FY27 Capital Outlay Application System in Bonfire (Euna).

This manual is divided into four sections:

    I.   BONFIRE REGISTRATION FOR APPLICANTS

    II.   APPLICATION LOGIN AND INFORMATION

    III.   COMPLETING YOUR SUBMISSION

    IV.   CHECKLIST FOR APPLICATION UPLOADS

Instructions with specific screenshots from the application are provided for each step in the process.

COB will be providing online trainings using Teams. All trainings will be recorded and available on: https://aging.nm.gov/for-our-partners/capital-outlay

For questions, contact Tasha Martinez, Capital Outlay Bureau Chief, tasha.martinez@altsd.nm.gov

I. BONFIRE REGISTRATION FOR APPLICANTS

The following are step by step instructions to create your Bonfire account to apply for the 2027 ALTSD Capital Outlay Application cycle opening **November 3, 2025.**

Step 1:
Go to altsdnm.bonfirehub.com
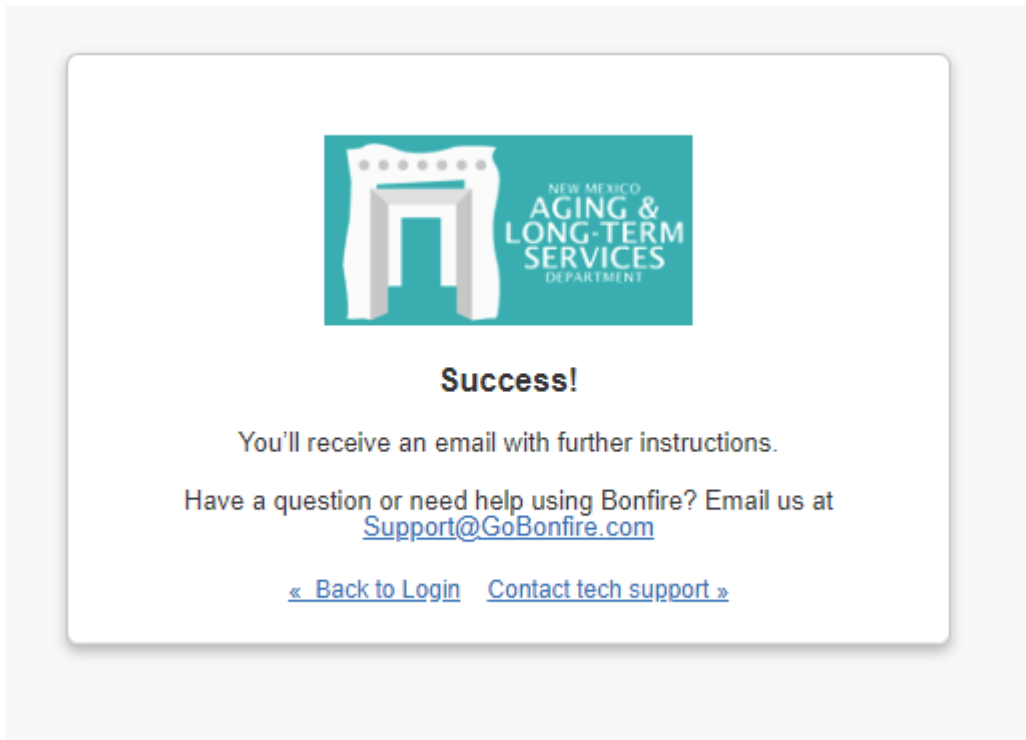Click on "Register" on the upper right-hand corner
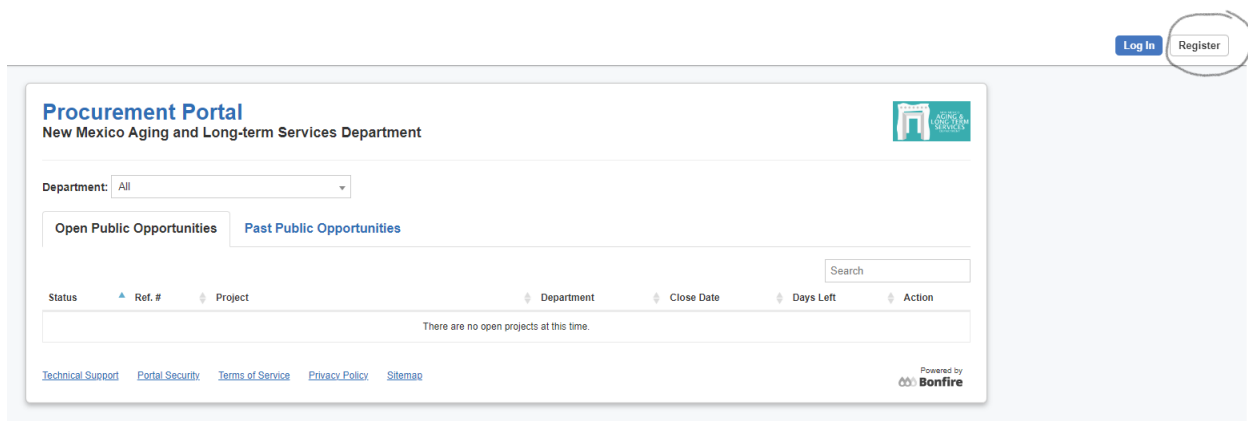
Complete the information

Organization Name is **not** the Senior Center but the City/County/Tribe/Pueblo/Nation or other

Use the first/last name and email that has the authority to apply for the 2027 ALTSD Capital Outlay application. Click "Create account"

The email registered will receive an email (check junk/spam if you do not see it within a few minutes).

Click on "Complete your registration" blue button on the lower left corner
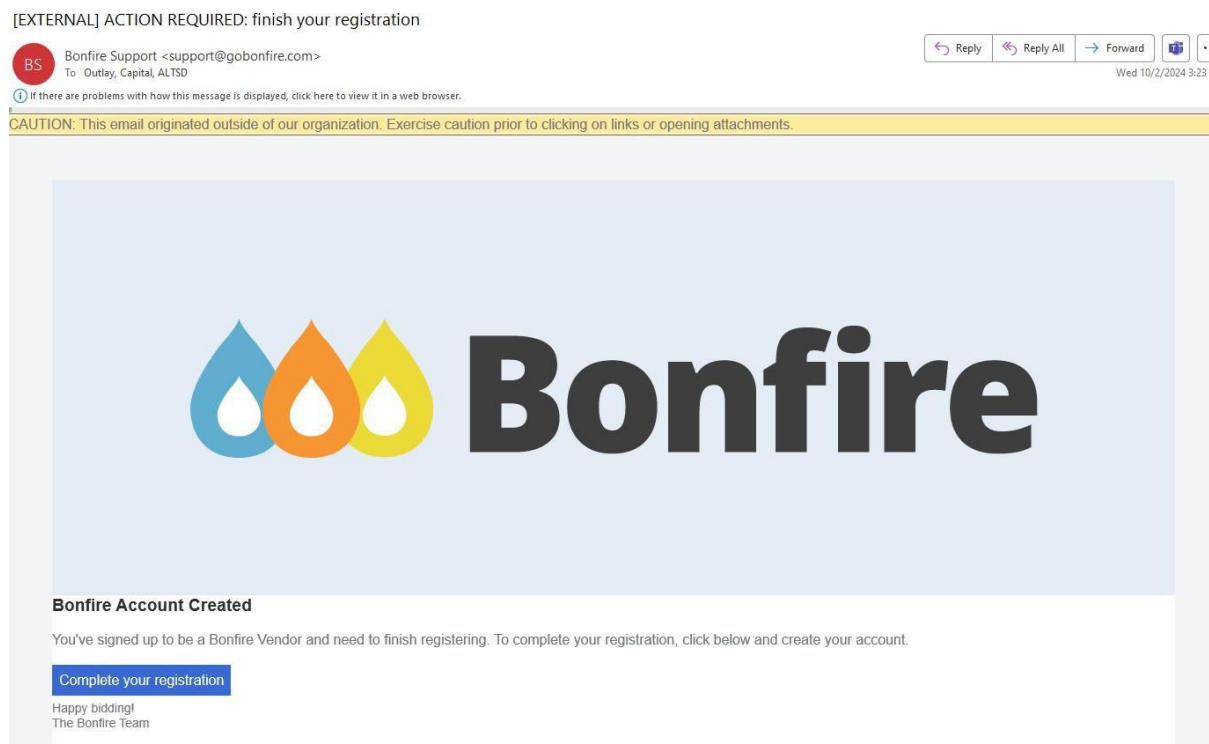
Create a password

Complete Account Setup

✉ capital.outlay@altsd.nm.gov

First Name *

Capital

Last Name *

Outlay

Password *

Confirm Password *

Continue

Hit continue

Next steps will identify your company (i.e.
Municipality/County/Tribe/Pueblo/Nation or other)

Your Bonfire registration is not complete! You must create or join a company.

🔥 Bonfire

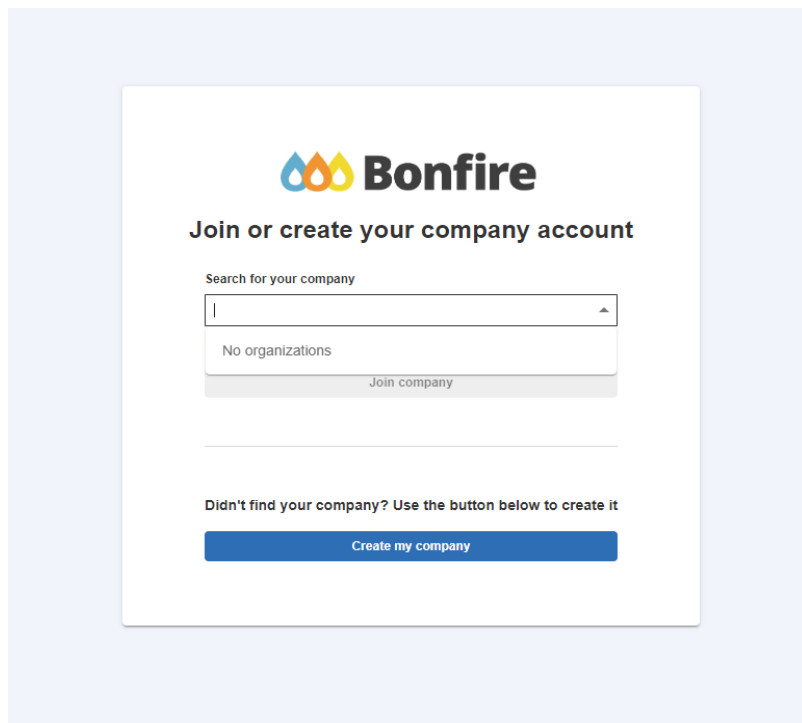**Join or create your company account**

Search for your company

⌄

Learn more about joining a company

Join company

Didn't find your company? Use the button below to create it

Create my company

Click on "Search for your company" in the drop-down box If you find your company, click on "Join Company"

IF you **DO NOT** find your company, click on "Create my company"

Complete the form, the red * are required

Click "Save and Next"

Let's get started

We want to get to know your business so we can provide a better experience, and the most relevant opportunities.

You can always change your answers later.

Business Name*

ALTSD Capital Outlay

Business Description*

e.g. I own a small landscape company in the greater Chicago area. We specialize in hardscaping and retaining walls

Phone Number*

Address Line 1*

Address Line 2

Address Line 3

Address Line 4

City*

State / Province*

Postal / Zip Code*

Country*

Specific Country

Save and Next

This next section needs to be completed.
Submit answers that are relevant to your department.

Tell us about your business

You can always change your answers later.

How many employees at your company? *

[▼]

What is your role? *

[▼]

Contact First Name *   Contact Last Name *

[Capital   ]   [Outlay   ]

Business Email *

[capital.outlay@altsd.nm.gov   ]

< Back   Save and Next

Click "Save and Next"

Click the drop-down arrow for

United States

Click on New Mexico

Which location(s) do you serve?

This will help us recommend opportunities in your area.

Adding or removing any selections will update your recommended opportunities

Selecting more locations will widen your service area to give you more results. If you select no specific regions, you will be matched with projects from all regions.

Search

> ☐ Canada
∨ ☐ United States
   ☐ Nation-wide opportunities
   ☐ Alabama
   ☐ Alaska
   ☐ Arizona
   ☐ Arkansas

Reset

Final Steps

Step 1:

Accept the Privacy Policy and Terms of Service

Registration

In addition to creating your account, you need to provide the following information. Please complete all of the steps below.

❌ Step 1: Account Confirmation

❌ Step 2: Account Information

ℹ️ Optional: Commodity Codes

✅ Optional: Premium Vendor

❌ Registration Complete
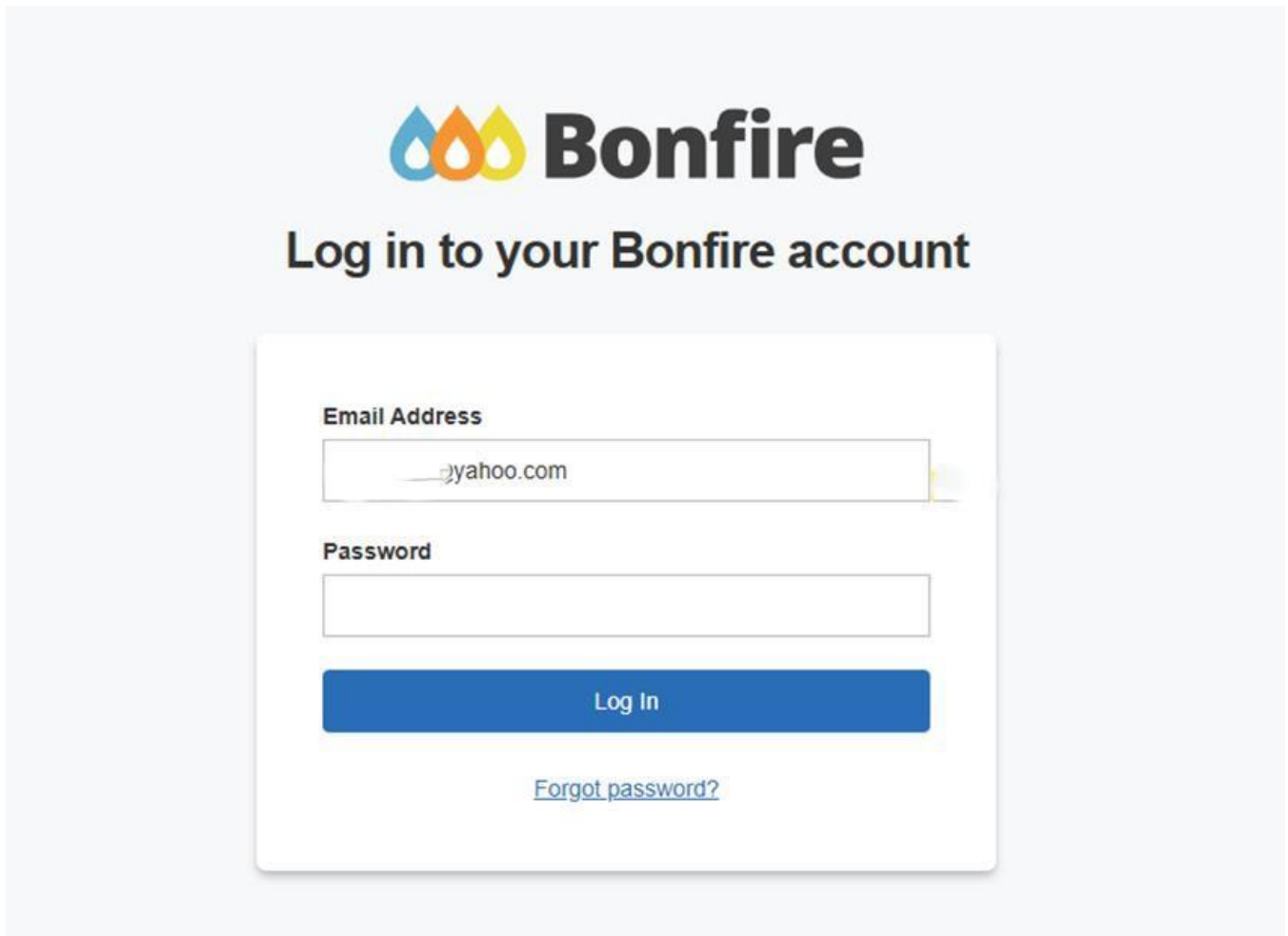
Your account with the email address capital.outlay@altsd.nm.gov has been confirmed!

Bonfire's Privacy Policy and Terms of Service were updated on Sep 7, 2020.

☑️ I accept the Privacy Policy and Vendor and Submission Portal Terms of Service.

Save and continue to Step 2: Account Information »

Step 2:

Under "Select Your Vendor Types" click on the + next to Capital Outlay

Opportunities Click "Save, Next"

Step 3: Select Capital Outlay Opportunities

Press "Continue to Optional: Commodity Codes"

Step 4 : Commodity Codes

NOTHING NEEDS TO BE COMPLETED

Click "Continue to premium vendors"

Step 5: Premium Vendor

Click on "Continue to registration completed

Congratulations!

You have successfully registered with Bonfire. You will use this login when completing your FY26 ALTSD Capital Outlay Application when it opens on **November 3, 2025 – February 3, 2025**

II.   APPLICATION LOG IN AND INFORMATION

The following are instructions to apply for the FY27 ALTSD Capital Outlay

application cycle. Log in to your Bonfire account

On your dashboard, you will go to Portal and under the "My Opportunities" tab you will see the application listing for each application type.

On the far right, click on View Opportunity
The page will refresh and you will see the project details for the specific application type you are viewing.

Continuing on the page will be important dates:

Important Events:

Search: [ ]

Status	Event Name	Location	Description	Dates	Mandatory
ONGOING	Questions Due Date	Online Portal	The Q and A Period for this Opportunity is Ongoing	Never	N/A
UPCOMING	Open Date	Online Portal	Posting date for the Opportunity	Nov 4th 2025, 8:00 AM MST	N/A
UPCOMING	Close Date	Online Portal	Deadline for Submissions	Feb 4th 2026, 11:30 PM MST	N/A

This is a listing of the Requested Information that will need to be completed for **each** application and **each** senior center.

Requested Information:
Listed below are the documents and information needed to complete your submission:

Name	Type	# Files	Requirement	Instructions	Actions
Applicant Name	Data Type: Text	N/A	REQUIRED		
Applicant Title	Data Type: Text	N/A	REQUIRED		
Applicant Email Address	Data Type: Text	N/A	REQUIRED		
Applicant Address	Data Type: Text	N/A	REQUIRED		
Facility Name (one per submission). Must match the Facility Name outlined in the Eligible Names spreadsheet in Supporting Documentation	Data Type: Text	N/A	REQUIRED / UNIQUE PER ALTERNATE		
Facility Contact Name	Data Type: Text	N/A	REQUIRED / UNIQUE PER ALTERNATE		
Facility Phone Number	Data Type: Text	N/A	REQUIRED / UNIQUE PER ALTERNATE		
Facility Ownership (City, County, Town, Village, Tribe, Pueblo, Nation)	Data Type: Text	N/A	REQUIRED		
Is facility managed by a non-profit, is an agreement in place	Data Type: Yes/No	N/A	REQUIRED / UNIQUE PER ALTERNATE		
What sources of funding were used to construct or improve the facility within the last 5 years? (include funding source, amount and date in answer)	Data Type: Text	N/A	REQUIRED / UNIQUE PER ALTERNATE		
What repairs, improvements have been made to the facility and when? (Examples are roof replacement, structural, floor, HVAC, parking lot, etc,)	Data Type: Text	N/A	REQUIRED / UNIQUE PER ALTERNATE		
What is the square footage of the Senior Facility	Data Type: Text	N/A	REQUIRED / UNIQUE PER ALTERNATE		
Is the facility sufficient in size; based on service(s) provided?	Data Type: Text	N/A	REQUIRED / UNIQUE PER ALTERNATE		
History - Provide a brief history and general description of the facility	Data Type: Text	N/A	REQUIRED / UNIQUE PER ALTERNATE		

Question	Data Type		Requirement
What is the current condition of the facility and supporting infrastructure?	Data Type: Text	N/A	REQUIRED UNIQUE PER ALTERNATE
How many seniors attend the facility daily (average)?	Data Type: Number	N/A	REQUIRED UNIQUE PER ALTERNATE
Does the local government provide operating staff?	Data Type: Yes/No	N/A	REQUIRED UNIQUE PER ALTERNATE
If No to the previous question, please explain.	Data Type: Text	N/A	OPTIONAL UNIQUE PER ALTERNATE
List ALL sources of program funding and the status of each source. (examples AAA, Local, In-Kind, Grant Funding, Other)	Data Type: Text	N/A	REQUIRED UNIQUE PER ALTERNATE
Have you met with your fiscal agent to plan procurement if this project is approved?	Data Type: Yes/No	N/A	REQUIRED UNIQUE PER ALTERNATE
If answer is No to previous question, please explain	Data Type: Text	N/A	OPTIONAL UNIQUE PER ALTERNATE
If a project manager is available, will one be assigned to this project to ensure timely completion of the project.	Data Type: Yes/No	N/A	REQUIRED UNIQUE PER ALTERNATE
If No to the prior question, please explain.	Data Type: Text	N/A	OPTIONAL UNIQUE PER ALTERNATE
Is staff prepared to comply with all reporting requirements identified in the Capital Outlay Grant Agreement.	Data Type: Yes/No	N/A	REQUIRED UNIQUE PER ALTERNATE
If No to previous question, explain	Data Type: Text	N/A	OPTIONAL UNIQUE PER ALTERNATE

Below are the Required Documents necessary to complete your application.

You will need to download the Question Set for **each** application type. Step by step instructions will be in the next section.

Required Documents

Name	Type	# Files	Requirement	Instructions	Actions
Question Set: Meals & Equipment (Q-28DK)	Questionnaire: Excel (.xlsx)	1	REQUIRED UNIQUE PER ALTERNATE	You will need to fill out the provided Response Template for this Questionnaire.	Download
Certifying Letter	File Type: PDF (.pdf)	Multiple	REQUIRED UNIQUE PER ALTERNATE		
ICIP	File Type: PDF (.pdf)	Multiple	REQUIRED UNIQUE PER ALTERNATE		
Budget Identifying Ongoing Maintenance	File Type: PDF (.pdf)	Multiple	REQUIRED UNIQUE PER ALTERNATE		
Applicable Quotes/Cost Estimates for Application Type	File Type: PDF (.pdf)	Multiple	REQUIRED UNIQUE PER ALTERNATE		

If there are any changes to the application or questions, this is where they will be visible.

✉ Messages

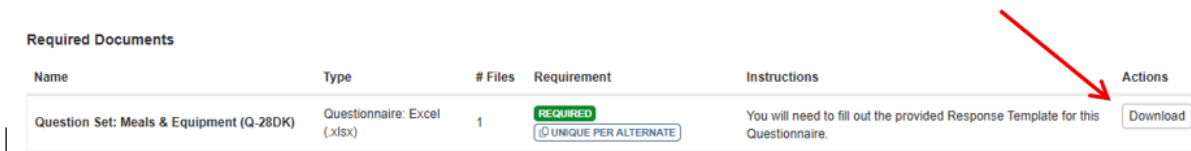**Public Notices (0)**   **Vendor Discussions (0)**

There is currently nothing to display here.   Create a new Public Notice
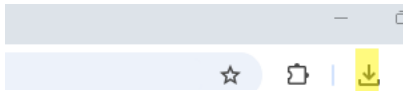
First Step

Download Question Set:

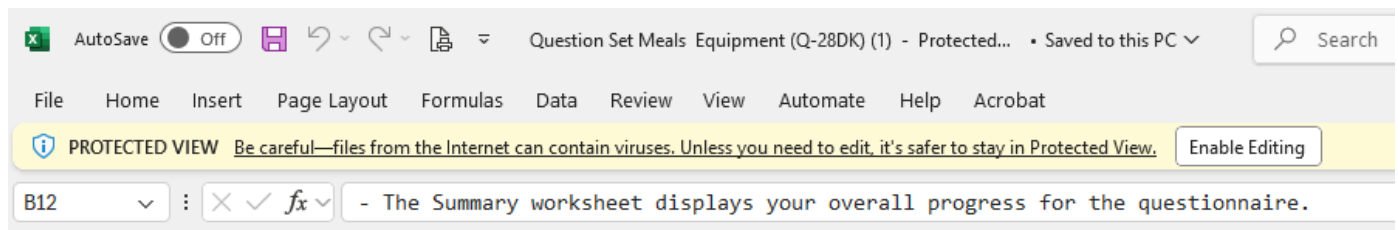1) Download the Question Set for **each** application type.

Download the file at the top right-hand corner of your computer, click on and download

Open the spreadsheet and select "Enable Editing."

Save the Question Set in an easily accessible folder.

Use the following naming convention for the file: "Application Type - Facility Name – Grantee" (example Meals & Equipment - Senior Center 1 – City of Las Vegas).

If submitting for multiple senior centers, complete the Question Set for **each** senior center separately. Be sure to start with the original downloaded Question Set each time to ensure the questions remain accurate and ulatlered for every senior center.

Compile the Required Documents for each senior center application and save them with the same naming convention "Required Document - Facility Name" (example ICIP - Senior Center 1 – City of Las Vegas) is in the designated folder mentioned above. in the folder.

Worksheet 1: Instructions for the Question Set

Worksheet 2: Summary, this will provide the progress on answering questions. It will show the completion percentage and identify any errors.

Summary

Question Set	Questions	% Complete	Progress	Error?
1	13	100.00%		Complete: no errors
Total	13	100.00%		

Worksheet 3: 1

These are the questions you will need to answer, save, and upload when submitting your application. Be sure to review each question carefully before responding. For questions that will be scored, the available points will be indicated.

You must complete the Question Set for each senior center and for each application type.

III.   SUBMITTING YOUR APPLICATION(S)

This section provides step-by-step guidance to help you complete your application(s). At the end of this manual, there is a checklist you can download, and print designed to assist you in gathering the necessary documents for each application.

Prepare Your Submission: Select your Vendor Profile from the dropdown and click "Prepare Your Submission"

If this is the first time you are submitting using Bonfire (Euna), review the video just to the right of "Prepare Your Submission."

Click on Prepare Your Submission

The following page will open:

This section identifies the contact information entered when the vendor profile was created.

Complete Your Submission
New Mexico Aging and Long-term Services Department Back to Opportunity

Q **Project Details**

Official Time: **Sep 8th 2025, 10:16 AM MDT**
Closing Time: **Sep 9th 2025, 12:00 AM MDT**

14 hours
Remaining

Project:	Capital Outlay 2027 Application - TEST
Ref. #:	ALTSD CO - Meals and Equipment
Organization:	ALTSD
First Name:	Tasha
Last Name:	Martinez
Email:	tasha.martinez@altsd.nm.gov

Edit Contact Info

Provide Submission Information:

Answer each question, you will need to Save after completing for **each question**

STEP 1: PROVIDE SUBMISSION INFORMATION

Click Upload File to add a requested document. Please note the type and number of files allowed for each requested document. The maximum file size accepted is 1000 I
Click Edit to enter a data or text answer.

● **Applicant Name**
REQUIRED Data Type : Text

Save Cancel

Tasha Martinez

Max Length: 2000 characters, 1986 remaining

When viewing the question below, you will see some have "unique per alternate." This means that if you are applying for multiple senior centers under one application type, you must provide a unique response, or the name of each senior center, and the relevant information for that senior center.

Next to each question, you will see a color indicator:
- Red means the question has not been answered and saved
- Green means the question has been answered and saved
- Yellow means the question is optional (if you do answer an optional question, you will need to save it before proceeding).

If you are submitting applications for multiple senior centers under any of the following application types – Planning & Design, New Construction, Renovation/Code Compliance/New Addition, Meals and Equipment, or Vehicles and Equipment – you must complete these questions for each center.

If your application is for only one senior center, this requirement does not apply.

Uploading Required Documents

When uploading required documents, a red dot indicates a missing document.
A Green dot means the document has been uploaded successfully, and you can see the file name and file type.

Below is a visual summary showing all documents that have been uploaded.
This feature helps you verify that the correct documents are uploaded for the right senior center application.

Before reaching the final step, be sure to:
- Save each question after answering it
- Upload all required documents
- Check the box confirming, "I understand that I can't change any of the submission details or documents once the project closes."
- Click the "Submit & Finalize My Submission" button

STEP 2: SUBMIT & FINALIZE

☑ I understand that I can't change any of the submission details or documents once the project closes.

SUBMIT & FINALIZE MY SUBMISSION

If you are unable to submit, scroll up the page and find any red dots 🔴 indicating incomplete sections. Complete those sections until all indicators turn green 🟢

The page will refresh, and you will see a Submission Receipt

Submission Receipt
New Mexico Aging and Long-term Services Department

🔍 **Project Details**

SUBMISSION COMPLETE!

Your submission has been finalized. Please see below for your confirmation details.

Confirmation Details

|	
Project:	Capital Outlay 2027 Application - TEST
Ref. #:	ALTSD CO - Meals and Equipment
Submission Time:	Sep 08, 2025 1:37 PM MDT
Name:	Tasha Martinez
Email:	tasha.martinez@altsd.nm.gov
Organization:	ALTSD
Requested Documents:	**Certifying Letter - Required** J2024_-_Review_Budget_Detail.pdf **ICIP - Required** J2024_-_Review_Budget_Detail.pdf **Budget Identifying Ongoing Maintenance - Required** J2024_-_Review_Budget_Detail.pdf **Applicable Quotes/Cost Estimates for Application Type - Required** J2024_-_Review_Budget_Detail.pdf
Requested Questionnaires:	**Question Set: Meals & Equipment (Q-69AV) - Required** Question_Set_Meals_Equipment_SC1.xlsx
Requested Data:	**Applicant Name - Required** Tasha Martinez

This shows all the answers to questions, and allows you to download all the files.

You will also receive an email confirmation to the email listed when the vendor profile was created.

If you are submitting multiple Work in Progress submissions, this section will remind you to complete that submission.

Don't forget!

NOTE: You have another Work-in-Progress submission for this project that needs to be completed.

Return to Portal Listing »

IF after reviewing the submission page you identify that you attached, or answered incorrectly, click on the "Click here to un-submit your submission" and

Need to Revise Your Submission?

Click here to un-submit your submission. Note that only submissions that have been finalized and submitted will be considered.

You will be asked to verify that you want to un-submit and be taken back to the submission page to edit any answers or change any documents. Once finalized, go back to section III. Submitting Your Application.

V.   CHECKLIST FOR APPLICATION UPLOADS

Use the following checklists to ensure that you have uploaded all required documents to the ALTSD COB portal prior to application submission. You may print out and check off the checklists prior to submission.

Planning and Design Application Checklist

Document Uploaded	Document Type
	Planning and Design Question Set
	ICIP
	Certifying Letter
	Budget commitment for ongoing maintenance and repair
	Applicable quotes/cost estimates
	Optional items (photos, renderings, etc.)

New Construction Application Checklist

Document Uploaded	Document Type
	New Construction Question Set
	ICIP
	Certifying Letter
	Applicable quotes/cost estimates
	Budget commitment for ongoing maintenance and repair
	Planning & Design completed (schematics, master plan, blueprints)
	Optional items (photos, renderings, etc.)

Renovation/Code Compliance/Addition Application Checklist

Document Uploaded	Document Type
	Renovation/Code Compliance/Addition Question Set
	ICIP
	Certifying Letter
	Applicable quotes/cost estimates
	Budget commitment for ongoing maintenance and repair
	Planning & Design completed (schematics, master plan, blueprints)
	Optional items (photos, renderings, etc.)

Vehicles and Equipment Application Checklist

Document Uploaded	Document Type
	Vehicles and Equipment Question Set
	Quotes or cost estimates related to project oversight
	ICIP
	Certifying Letter
	Applicable quotes/cost estimates
	Budget commitment for ongoing maintenance and repair
	Optional items (photos, renderings, etc.)

Meals and Equipment Application Checklist

Document Uploaded	Document Type
	Meals and Equipment Question Set
	ICIP
	Certifying Letter
	Budget commitment for ongoing maintenance and repair
	Applicable quotes/cost estimates
	Optional items (photos, renderings, etc.)