

Purchasing Divison 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

#### State of West Virginia Request for Quotation

	Proc Folder: 404212		
	Doc Description: HVAC	Equipment Maintenance & Repair Service	
	Proc Type: Central Maste	er Agreement	
Oate Issued	Solicitation Closes	Solisitation No	Version
2018-01-05	2018-01-30 13:30:00	CRFQ 0708 ABC1800000007	1

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

VENDOR	
Vendor Name, Address and Telephone Number:	

01/29/18 15:45:31 D. Purchasina Division

FOR INFORMATION CONTACT THE BUYER  Jessica S Chambers (304) 558-0246 jessica.s.chambers@wv.gov	
Signature X Serve of County FEIN \$ 55-0436919  All offers subject to all terms and conditions contained in this solicitation	DATE 1-26-18

Page: 1

FORM ID: WV-PRC-CRFQ-001

## Request for Quotation - HVAC Maintenance

#### EXHIBIT A - PRICING PAGE

Preventive Maintenance Per Quarter

Quarterly Charge Quarters **Total Yearly Cost** \$4,750.00 \$19,000.00 (A) HVAC Maintenance: Hourly Labor Rate x Estimated Hours = HVAC Maintenance Labor Cost \$95,00 800 \$68,000.00 (B) Filter Change: Hourly Labor Rate x Estimated Hours = Filter Change Labor Cost 100 \$5.700.00 (C) Weekday/Overtime Rate x Estimated Hours = Weekday Overtime \$127.50 15 = \$1912.50 (D) Weekend/Holiday Rate x Estimated Hours = Weekend/Holiday OT Cost \$127.50 \$1275,00 (E) 10 Estimated Parts Cost X Multiplier = **Total Parts Cost** 20%=1.20 10%=1.10 5%= 1.05 \$10,000.00 1.30 = \$13,000.00 (F)

(A+B+C+D+E+F) TOTAL BID AMOUNT: \$ 108,887,50

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<sup>\*</sup>Total Bid Amount for comparative purposes is calculated by adding A+B+C+D+E+F with the understanding that the resulting contract will be open end based on quarterly rates, hourly rates and parts mark-up proposed by the vendor.

## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

(Ch	eck th	e bo	x next to each addendun	n receive	d)	
	D	Ø	Addendum No. 1	1	]	Addendum No. 6
	]	]	Addendum No. 2	[	]	Addendum No. 7
	[	]	Addendum No. 3	[	]	Addendum No. 8
	Į	]	Addendum No. 4	ſ	]	Addendum No. 9
	[	]	Addendum No. 5	ſ	1	Addendum No. 10

Addendum Numbers Received:

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Company

Land Vand

Authorized Signature

1-26-18

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

Revised 6/8/2012

## ADDITIONAL TERMS AND CONDITIONS (Construction Contracts Only)

1. CONTRACTOR'S LICENSE: West Virginia Code § 21-11-2 requires that all persons desiring to perform contracting work in this state be licensed. The West Virginia Contractors Licensing Board is empowered to issue the contractor's license. Applications for a contractor's license may be made by contacting the West Virginia Division of Labor. West Virginia Code § 21-11-11 requires any prospective Vendor to include the contractor's license number on its bid. If an apparent low bidder fails to submit a license number in accordance with this section, the Purchasing Division will promptly request by telephone and electronic mail that the low bidder and the second low bidder provide the license number within one business day of the request. Failure of the bidder to provide the license number within one business day of receiving the request shall result in disqualification of the bid. Vendors should include a contractor's license number in the space provided below.

Contractor's Name:	Muson	and Barn	The r	IRA	Marca		R	T.,
Contractor's License	No.: WV-	014549		7077	1. IUSON	oura	Darry.	MIC.

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a contract award document.

- 2. DRUG-FREE WORKPLACE AFFIDAVIT: W. Va. Code § 21-1D-5 provides that any solicitation for a public improvement contract requires each Vendor that submits a bid for the work to submit an affidavit that the Vendor has a written plan for a drug-free workplace policy. If the affidavit is not submitted with the bid submission, the Purchasing Division shall promptly request by telephone and electronic mail that the low bidder and second low bidder provide the affidavit within one business day of the request. Failure to submit the affidavit within one business day of receiving the request shall result in disqualification of the bid. To comply with this law, Vendor should complete the enclosed drug-free workplace affidavit and submit the same with its bid. Failure to submit the signed and notarized drugfree workplace affidavit or a similar affidavit that fully complies with the requirements of the applicable code, within one business day of being requested to do so shall result in disqualification of Vendor's bid. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.
- 2.1. DRUG-FREE WORKPLACE POLICY: Pursuant to W. Va. Code § 21-1D-4, Vendor and its subcontractors must implement and maintain a written drug-free workplace policy that complies with said article. The awarding public authority shall cancel this contract if: (1) Vendor fails to implement and maintain a written drug-free workplace policy described in the preceding paragraph, (2) Vendor fails to provide information regarding implementation of its drug-free workplace policy at the request of the public authority; or (3) Vendor provides to the public authority false information regarding the contractor's drug-free workplace policy.

Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.

## Subcontractor List Submission (Construction Contracts Only)

	ctors will perform more than \$25,000.00 of work to complete the
Ontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.

Revised 12/12/2017

Attach additional pages if necessary

**DESIGNATED CONTACT:** Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

The same of the sa
(Name, Title) Director of Service
(Name, Title)
(Printed Name and Title)  30   Smiley Drive, St. Albans, WV 25177  (Address)
(Printed Name and Title)
301 Smiles Drive St. Albans WV 25177
(Address)
(304) 755-0781 (304) 755-4011)
(Phone Number) / (Fax Number)
(email address)
•

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

(Authorized Signature) (Representative Name, Title)  Dan S Duncan President (Printed Name and Title of Authorized Representative)  (Date)  (304) 755-078/ (Phone Number) (Fax Number)	Mason and Barry Inc	
(Printed Name and Title of Authorized Representative)  (Date)  (304) 755-0781  (304) 755-4010	(Company)	-
(Printed Name and Title of Authorized Representative)  (Date)  (304) 755-0781  (304) 755-4010		
(Printed Name and Title of Authorized Representative)  (Date)  (304) 755-0781  (304) 755-4010	Cha / Twen	
(Printed Name and Title of Authorized Representative)  (Date)  (304) 755-078/  (304) 755-4010	(Authorized Signature) (Representative Name, Title)	
(Printed Name and Title of Authorized Representative)  (Date)  (304) 755-078/  (304) 755-4010	DANS DUNCAN PROCEDO. A	
(Date) (304) 755-0781 (304) 755-4010	(Printed Name and Title of Authorized Representative)	_
(304) 755-0781 (304) 755-4210	topiconium voj	
(304) 755-0781 (304) 755-4210		
	(Date)	_
	(304) 700 0701	
(Phone Number) (Fax Number)		
	Phone Number) (Fax Number)	-

Revised 12/12/2017

## Request for Quotation - HVAC Maintenance

## EXHIBIT A - PRICING PAGE

Preventive Maintenance Per Quarter

Quarterly Charge Quarters **Total Yearly Cost** \$19,000.00 (A) **HVAC Maintenance:** Hourly Labor Rate x Estimated Hours = HVAC Maintenance Labor Cost \$85.00 800 \$68,000.00 (B) Filter Change: Hourly Labor Rate x Estimated Hours = Filter Change Labor Cost 100 \$5,700.00 (C) Weekday/Overtime Rate x Estimated Hours = Weekday Overtime \$127.50 15 \$ 1912.50 (D) Weekend/Holiday Rate x Estimated Hours = Weekend/Holiday OT Cost \$127,50 10 \$1275.00 (E) Estimated Parts Cost Multiplier = **Total Parts Cost** 20%=1.20 10%=1.10 5%= 1.05 \$10,000.00 1.30 \$ 13,000.00 (F)

(A+B+C+D+E+F) TOTAL BID AMOUNT: \$ 108,887,50

**□** (€ 5) i) ii

<sup>\*</sup>Total Bid Amount for comparative purposes is calculated by adding A+B+C+D+E+F with the understanding that the resulting contract will be open end based on quarterly rates, hourly rates and parts mark-up proposed by the vendor.

#### **BID BOND**

KNOW ALL MEN BY THESE PRESENTS, That we, the ur	ndersigned, Mason & Barry, Inc.
of St. Albans , WV	, as Principal, and Merchants Bonding Company (Mutual)
of Des Moines IA a c	corporation organized and existing under the laws of the State of
<u>IA</u> with its principal office in the City of <u>Des N</u>	loines, as Surety, are held and firmly bound unto the State
of West Virginia, as Obligee, in the penal sum of Five Percent of A	
well and truly to be made, we jointly and severally bind ourselves, o	
,	Horo, Carrier of Ca
The Condition of the above obligation is such that when	reas the Principal has submitted to the Purchasing Section of the
Department of Administration a certain bid or proposal, attached he	
HVAC Equipment Maintenance & Repair Service - CRFQ (	
Specifications	7 00 ABC 1000000007 - According to Plans &
Орозполно	
NOW THEREFORE,	
(a) If said bid shall be rejected, or	
(b) If said bid shall be accepted and the Principal	shall enter into a contract in accordance with the bid or proposal
the agreement created by the accentance of said bid, then this oblid	equired by the bid or proposal, and shall in all other respects perform gation shall be null and void, otherwise this obligation shall remain in
full force and effect. It is expressly understood and agreed that the	e liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of this obligation as herein stated.	
The Durch for the code and the last to the	
way impaired or affected by any extension of the time within white	agrees that the obligations of said Surety and its bond shall be in no th the Obligee may accept such bid, and said Surety does hereby
waive notice of any such extension.	the damped that, develope outsit bill, this can carry good holds,
MUTAPOO AL- S-Handamatana de la companya del companya de la companya de la companya del companya de la companya	
	and Surety, executed and sealed by a proper officer of Principal and
Surety, or by Principal Individually if Principal is an individual, this	30th day of January , 2018 .
Principal Seal	Mason & Barry, Inc
	(Name of Principal)
	By da anea
	(Must be President, Vice President, or Duly Authorized Agent)
	Ddiy Adrionzed Agent)
	Trement
	(Title)
Overland.	Marchania Banding Company (Market)
Surety Seal	Merchants Bonding Company (Mutual)  (Name of Surety)
	(Idama or oritaria)
de	I have hear
	By: Tataca A. Mayo
	Patricia A. Moye, WV Resident Agent Attorney-in-Fect

IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.



Know All Persons By These Presents, that MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., both being corporations of the State of lowa (herein collectively called the "Companies") do hereby make, constitute and appoint, individually,

Gregory T Gordon, Kimberly J Wilkinson; Patricia A Moye

their true and lawful Attomey(s)-in-Fact, to sign its name as surety(ies) and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

This Power-of-Attorney is granted and is signed and sealed by facsimile under and by authority of the following By-Laws adopted by the Board of Directors of Merchants Bonding Company (Mutual) on April 23, 2011 and amended August 14, 2015 and adopted by the Board of Directors of Merchants National Bonding, Inc., on October 16, 2015.

"The President, Secretary, Treasurer, or any Assistant Treasurer or any Assistant Secretary or any Vice President shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof."

"The signature of any authorized officer and the seal of the Company may be affixed by facsimile or electronic transmission to any Power of Attorney or Certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligations of the Company, and such signature and seal when so used shall have the same force and effect as though manually fixed."

In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and aut hority hereby given to the Attorney-in-Fact Includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation, it is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.

In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner-Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

In Witness Whereof, the Companies have caused this instrument to be signed and sealed this 6th

h dayof

April

2017

, 2018

110N4 NE CO RPOA 2003 1933

MERCHANTS BONDING COMPANY (MUTUAL) MERCHANTS NATIONAL BONDING, INC.

Demoidant

STATE OF IOWA COUNTY OF DALLAS ss.

On this this 6th day of April 2017, before me appeared Larry Taylor, to me personally known, who being by me duly swom did say that he is President of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC.; and that the seals affixed to the foregoing instrument are the Corporate Seals of the Companies, and that the said instrument was signed and sealed in behalf of the Companies by authority of their respective Boards of Directors.



ALICIA K. GRAM
Commission Number 767430
My Commission Expires
April 1, 2020

Notary Public

(Expiration of notary's commission does not invalidate this instrument)

I, William Warner, Jr., Secretary of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., do hereby certify that the above and foregoing is a true and correct copy of the POWER-OF-ATTORNEY executed by said Companies, which is still in full force and effect and has not been amended or revoked.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the Companies on this 30th day of January

POA 0018 (3/17)

#### 18MASONBAR

#### ACORD.

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/26/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

this certificate does not confer any rights to the certificate holder						
BB&T-Carson Insurance Services 300 Summers Street, Suite #650 Charleston, WV 25301	PAME: Pam Nasby  PHONE (A/C, No, Ext): 304-340-6967 (A/C, No): 88875  E-MAIL ADDRESS: Pnasby@bbandt.com					
304 346-0806	INSURER(S) AFFORDING COVERAGE	NAIC #				
	INSURER A : Westfield Insurance Company	24112				
NSURED Mason & Barry Inc	INSURER B :					
MBI Services, Inc.	INSURER C:					
301 Smiley Drive	INSURER D :					
St Albans, WV 25177	INSURER E :					
Ot Albulis, 117 2017	INSURER F:					
COVERAGES CERTIFICATE NUMBER:	REVISION NUMBER:					
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELL	OW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE P	OLICY PERIOD				

J c	INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.							
INSF	R STEE OF WALLET	ADDL	SUBR		POLICY EFF			
		INSR	WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	Limit	S
Α	X COMMERCIAL GENERAL LIABILITY			CMM5114784	02/01/2018	02/01/2019		\$1,000,000
	CLAIMS-MADE X OCCUR		1		!	!	DAMAGE TO RENTED PREMISES (Ea occurrence)	s 500,000
	X PD Ded:1,000				ľ		MED EXP (Any one person)	<b>\$5,000</b>
							PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				]	1	GENERAL AGGREGATE	s 2,000,000
l	POLICY X PRO-				1		PRODUCTS - COMP/OP AGG	s 2,000,000
L	OTHER:	L						\$
Α	AUTOMOBILE LIABILITY		!	CMM5114784	02/01/2018	02/01/2019	COMBINED SINGLE LIMIT (Es accident)	\$1,000,000
1	X ANY AUTO					! i	BODILY INJURY (Per person)	\$
l	OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
<u> </u>	X Drive Oth Car							\$
Α	X UMBRELLA LIAB X OCCUR			CMM5114784	02/01/2018	02/01/2019	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	s5,000,000
	DED X RETENTION \$0							\$
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			WCP7901057	09/30/2017	09/30/2018	X PER OTH-	
	ANY PROPRIETOR/PARTNER/EXECUTIVE:	N/A	ł	Includes	WV Broad	Form	E.L. EACH ACCIDENT	s1,000,000
	(Mandatory in NH) If yes, describe under			Employers	Liability	Sectioin	E.L. DISEASE - EA EMPLOYEE	\$1,000,000
_	DESCRIPTION OF OPERATIONS below			23-4-2(d)(2)(ii)	of WV Code	9	E.L. DISEASE - POLICY LIMIT	\$1,000,000
							· —	
	1 .							
		i				- {		
DES	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)							

\*\* Workers Comp Information \*\*

Other States Coverage

Proprietors/Partners/Executive Officers/Members Excluded: Dan Duncan, Officer; Jeanne Duncan, Officer Bert Grimm. Officer

Evidence of Insurance

CERTIFICATE HOLDER	CANCELLATION
Department of Administration Purchasing Division 2019 Washington Street, East	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Charleston, WV 25305	AUTHORIZED REPRESENTATIVE
1	Deri & Dodice

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#### STATE OF WEST VIRGINIA Purchasing Division

## PURCHASING AFFIDAVIT

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL OTHER CONTRACTS: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

**EXCEPTION:** The prohibition fisted above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Ve. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has provisions of such plan or agreement.

#### DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-20-2, fallure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business: association or other entity whatscever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that; (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

### WITHESS THE FOLLOWING SIGNATURE:

My Commission Expires Jan. 31, 2021

anna tradition de la company de la compa

Vendor's Name: Mason and Barry	Inc
Authorized Signature:	Date: 1=26=2018
State of WV	Date: X6 X0 8
County of <u>futnam</u> , to-wit:	
Taken, subscribed, and sworn to before me this 26 da	By of TANKOW 19
My Commission expires 1/31	=y of
AFGINGE ALL SHEPE HUMANUM HUMANUM HUMANUM Official Seal Notary Public, State of Weat Virginia	NOTARY PUBLIC B. Gall Jurner
B. Jill Turner Mason & Barry, Inc 301 Smiley Drive St. Albans, WV 25177	Purchasing Affidavit (Revised 07/07/2017)



# State of West Virginia DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT West Virginia Code §21-10-5

STATE OF WEST VERGINIA.		
COUNTY OF Putnam TO-WIT:		
I, Dan S Dun(an after being first duly sworn, depose and state as follows:		
1. I am an employee of Mason and Barry, Inc ; and,		
2. I do hereby attest that Mason and Berry Inc. (Company Name)		
maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with <b>West Virginia Code</b> §21-1D.		
The above statements are sworn to under the penalty of perjury.		
Printed Name; Dan 5 Duncan		
Signature:		
Title: President		
Company Name:		
Date:		
Taken, subscribed and sworn to before me this 26 day of January 2002		
By Commission expires 131 2021		
(Seal)  Official Seal  Notary Public, State of West Virginia  B. Jill Turner  Mason & Barry, Inc  301 Smiley Drive  St. Albans, WV 25177  My Commission Expires Jan. 31, 2021		

Rev. July 7, 2017

#### State of West Virginia Purchasing Division

## CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

In accordance with West Virginia Code § 21-1D-7b, no less than once per year, or upon completion of the project, every contractor shall provide a certified report to the public authority which let the contract. That report must include each of the items identified below in the Required Report Content section.

<u>Instructions</u>: Vendor should complete this coversheet, attach it to the required report, and submit it to the appropriate location as follows: For contracts more than \$25,000, the report should be mailed to the West Orless, the vendor should mail the report to the public authority issuing the contract.

<u> </u>
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6m