

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

State of West Virginia **Request for Quotation** 09 - Construction

Proc Folder: 431715

Doc Description: Addendum 5- DISTRICT ONE HEADQUARTERS, EQUIPMENT SHOP

Proc Type: Central Purchase Order

Date Issued Solicitation Closes Solicitation No Version 2018-06-13 2018-06-21 CRFQ 0803 DOT1800000093 8 13:30:00

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

W

25305

US

Vendor Name, Address and Telephone Number:

Wiseman Construction Co., Inc.

1616 6th Avenue

Charleston, WV 25387

Ph: (304) 344-1200

Vendor ID: 709050415



FOR	INFORMATION	CONTACT	THE	BUYER

Jessica S Chambers (304) 558-0246

Signature X/

jessica.s.chambers@wv.gov

55-0602314

June 21, 2018 DATE

All offers subject to all terms and conditions contained in this solicitation

Page: 1

FORM ID: WV-PRC-CRFQ-001

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Addendum

Addendum No.05 issued to publish and distribute the attached information to the vendor community.

Request for Quotation

(Construction of Equipment Shop for DOT District One)

The West Virginia Purchasing Division is soliciting bids on behalf of the West Virginia Division of Highways (WVDOH) to establish a one-time contract for construction of the District One Headquarters, Equipment Shop building and associated site work, per the terms and conditions and specifications as attached.

III.Note-from the second second		SHIPTO	
DIVISION OF HIGHWAYS DISTRICT ONE HQ		DIVISION OF HIGHWAYS DISTRICT ONE HQ	`
1340 SMITH ST		1340 SMITH ST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		us	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	DISTRICT ONE HEADQUARTERS, EQUIPMENT SHOP		See	Attached Bid Form	

Comm Code	Manufacturer	Specification	Model #	
72121101				
				- 1

Extended Description:

DISTRICT ONE HEADQUARTERS, EQUIPMENT SHOP CONSTRUCTION PER THE ATTACHED PRICING PAGE

SOLICITATION NUMBER: CRFQ 0803 DOT1800000093 Addendum Number: No.03

The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

ſ	1	Modify bid opening date and time
1	J	Modify specifications of product or service being sought
L	/1	Attachment of vendor questions and responses
ĺ	1	Attachment of pre-bid sign-in sheet
[1	Correction of error
I	ı	Other

Description of Modification to Solicitation:

Applicable Addendum Category:

Addendum issued to publish and distribute the attached documentation to the vendor community.

1. Vendor submitted questions and agency responses

No other Changes.

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

Terms and Conditions:

- 1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
- 2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ATTACHMENT A

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 Contractor's 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 Nat	ne;	seman Construction Co., In	C.
Contractor's Lic	ense No.: WV-	WV000836	
TTI.			

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 iess 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.

Contract Administrator and the initial point of contact for matters relating to this Contract.
A Chen, Vice President
(Name, Title) James C. Linkinoggor, Vice President
(Printed Name and Title) 1616 6th Avenue, Charleston, WV 25387
(Address) (304) 344-1200 / (304) 344-1281
(Phone Number) / (Fax Number) jlink@wisemancorp.com
(email address)
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.
Wiseman Construction Co., Inc.
(Company) Alle Misleum - Im A Wisener, President
(Authorized Signature) (Representative Name, Title)
John A. Wiseman, President
(Printed Name and Title of Anthonian I Demonstration
(Printed Name and Title of Authorized Representative)
June 21, 2018
·
June 21, 2018 (Date)

REQUEST FOR QUOTATION DISTRICT ONE HEADQUARTERS EQUIPMENT SHOP

13.1 Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager:	James C. Linkinoggor			
Telephone Number:	(304) 344-1200			
Fax Number: (304) 344-1281				
Email Address: jlink@	wisemancorp.com			

EXHIBIT A - PRICING PAGE

WVDOH - STATE PROJECT G020-HDQ/-6. 03 DISTRICT ONE EQUIPMENT SHOP

Bidder Name:	Wiseman Construction Co., Inc.
Bidder Address:	4040 046 A Ob -d - d - VAR / 05007
	1616 6th Avenue, Charleston, WV 25387
Bidder Phone No.:	(304) 344-1200
WV Contractors License No.	WV000836
Manual, hereby proposes to	tified as the Bidder, having examined the site and being familiar with the cost of the work and also being familiar with the Specifications/Project furnish all materials, equipment, labor, supplies and transportation to with the Specifications/Project Manual and time set forth in a quality
BASE BID	
The Base Bid shall consist of a indicated in the space below. (labeled Sheet No. G3) "For Add	Il work noted in the Specifications/Project Manual. Base Bid shall be Reference the Summary of Estimated Quantities on plan sheet 5/140 litional Information".
The contract award shall be based	d on the lowest Base Bid.
Total Base Bid: \$ (Short	10, 265, 000. 000 w Amount in Numbers)
Ten N (Show	V Amount in Words)

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 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 a related party to the 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 listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the 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 § 23-2c-2, failure 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

"Related party" means a party, whather an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, 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.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Wiseman Construction Co., Inc.	
Authorized Signature: Muse Authorized Signature:	Date: June 21, 2018
State of West Virginia	
County of Kanawha to-wit:	
Taken, subscribed, and swom to before me this 21st	lay of June 18
My Commission expires October 28	
OFFICIAL SEAL OFFICIAL SEAL NOTARY PUBLIC Jemes C. Unkinoggor 189 Arnoldsburg Rd. Spencer, WV 25278	NOTARY PUBLIC Purchasing Affidavit (Revised 01/19/2018)
My Commission Expires October 28, 2019	

West Virginia Ethics Commission

Disclosure of Interested Parties to Contracts

Contracting business	Wiseman Constr	uction Co., Inc.		
Address:	1616 6th Avenue, Charles	ton, WV 25387		
Contracting busines	s entity's authorized agent:	John A. Wiseman		
Address: _	1616 6th Avenue, Charlest	on, WV 25387		
Number or title of co	ntract:DOT1800000093	WV District One Headqua	arters, Equipment Shop	
Type or description of	of contract; Construction o	f new shop facility		<u> </u>
Governmental agenc	y awarding contract:W	VDOT - Division of Highw	ays	
Names of each inter- entity (attach e	ested Party to the contract additional pages if necessa	KIRWA OR THEORY	nticipated by the contracting	ng business
27	Complete list of interested p	parties to be submitted if le	ow bid, prior to award	
Signature:	s a Supplemental Disclosur	Date Signed:	June 21, 2018	
State of West Virgi	inia ———, Count	orification Kanawha		:
contracting business en made under oath and u	tity listed above, being duly nder the penalty of perjury.	y swom, acknowledges th	ne authorized agent of the nat the Disclosure herein is	being
OFFICIAL S STATE OF WEST NOTARY PU James C. Linki 189 Arnoldsbu Spencer, WV My Commission Expuss C	Viriginia Blig noggor rg Rd. 25278	21st day of Notary Public		2018
To be completed by State				
Date Received by State	Agency:			
Data submitted to Ethics	Commission:			
Governmental agency su	bmitting Disclosure:			



State of West Virginia DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT West Virginia Code §21-1D-5

STATE OF WEST VIRGINIA	Α,
COUNTY OF Kanawha	TO-WIT:
I, John A. Wiseman	, after being first duly sworn, depose and state as follows:
1. I am an employee of	Wiseman Construction Co., Inc.
2. I do hereby attest that	(Company Name) Wiseman Construction Co., Inc.
	(Company Name)
maintains a written plan policy are in compliance	for a drug-free workplace policy and that such plan and with West Virginia Code §21-1D.
The above statements are swo	rn to under the penalty of perjury.
	Printed Name: John A. Wiseman
	Signature: Mul Muslem
	Title: President
	Company Name: Wiseman Construction Co., Inc.
	Date: June 21, 2018
Taken, subscribed and sworn to October By Commission expires	before me this 21st day of June 2018 28, 2019
OFFICIAL SEAL STATE OF WEST VIRIGINIA NOTARY PUBLIC James C. Linkinoggor 189 Ameliasburg Rd. Spencer, MV 25/379 Mv Commission Expense C. Section 53, 2019	(Notary Public)

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 Virginia Purchasing Division at 2019 Washington Street East, Charlesten, WV 25305. For contracts of \$25,000 or less, the vendor should mail the report to the public authority issuing the contract.

Contract Ide	ntification:	
Contract Num	DOT1800000093	
Contract Purp	wvDOH District One Headquarters, E	quipment Shop Construction
Agency Requ	esting Work: WVDOT - Division of Highway	s
		de each of the Items listed below. The vendor primation has been included in the attached report.
21-1D-8	was provided;	ice to the requirements of West Virginia Code §
☐ Name o success	of the laboratory certified by the United States for that performs the drug tests;	Department of Health and Human Services or its
☐ Average	number of employees in connection with the	construction on the public improvement:
Casi Quriu i	I results for the following and and a con-	the number of positive tests and the number of (C) Post-accident; and
endor Contact	Information:	
endor Name:	Wiseman Construction Co., Inc.	Manual 2 4 1 (204) 244 4200
endor Address:	1616 6th Avenue	Vendor Telephone: (304) 344-1200
	Charleston, WV 25387	Vendor Fax: (304) 344-1281 Vendor E-Mail: jlink@wisemancorp.com
Report	t to be provided if low bid and at completion of	contract

BID BOND

	KNOW ALL MEN BY THESE PRES	SENTS, That we, the ι	ındersigned	, <u>Wisema</u>	<u>ın Constru</u>	ction C	ompany, Inc	<u> </u>
of	Charleston	_,WV	, as	s Principal,	and Ohio	Farmers	Insurance (Company
of	Westfield Center ,	OH, a	corporation	organized	and existin	g under t	he laws of the	State of
<u>OH</u>	with its principal office in t	he City of Westfie	ld Center	, as Su	rety, are he	eld and f	irmly bound u	into the State
of Wes	t Virginia, as Obligee, in the penal sui	m of Five Percent of	Amount Bi	d	(\$	5%) for the payn	nent of which,
well an	d truly to be made, we jointly and sev	erally bind ourselves,	our heirs, ac	dministrato	rs, executo	rs, succe	ssors and ass	igns.
	The Condition of the above obliga	ation is such that whe	ereas the P	rincipal ha	s submitted	to the	Purchasing S	Section of the
	ment of Administration a certain bid o			-		enter into	a contract in	writing for
Distric	ct 1 Headquarters Equipment Sho	op - According to Pi	ans and S	pecificati	ons			
	NOW THEREFORE, (a) If said bid shall be rejected	f or						
the agre full forc	(b) If said bid shall be accepted hereto and shall furnish any other leement created by the acceptance of se and effect. It is expressly understoexceed the penal amount of this obligation.	oted and the Principal bonds and insurance r said bid, then this obl bod and agreed that the	equired by t igation shall he liability o	the bid or p I be null an	roposal, and void, other	d shall in erwise th	n all other resp is obligation s	pects perform hall remain in
way im waive n	The Surety, for the value received, paired or affected by any extension otice of any such extension.	hereby stipulates and of the time within whi	agrees that ch the Obli	the obliga gee may a	tions of said	d Surety bid, and	and its bond I said Surety	shall be in no does hereby
	WITNESS, the following signatures	and seals of Principal	and Surety.	. executed	and sealed	by a pro	per officer of	Principal and
Surety,	or by Principal individually if Principal	· ·					2018	•
Principa	al Seal			Wisem	an Constr	uction (Company, In	IC.
•				Ву	he Or	Name of	Principal)	idet
							. Vice Preside ized Agent)	nt, or
				John		ema,	Presiden	+
						(Titl	e)	
Surety S	Seal			Ohio Fa	armers ins	surance	Company	
•					(Name of	Surety)	
			Vineber L	By: 9)	im Lee	ly)	uluk	wisor
			Kimberly J.	VVIIKINSON	i, vvv Kesi	aent Ag	ent Attorne	ev-in-Fact

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.

General Power of Attorney

CERTIFIED COPY

POWER NO. 4752152 06

Westfield Insurance Co. Westfield National Insurance Co. Ohio Farmers Insurance Co.

Westfield Center, Ohio

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint GREGORY T. GORDON, KIMBERLY J. WILKINSON, PATRICIA A. MOYE, JOHN S. LEROSE, JOINTLY OR SEVERALLY

of CHARLESTON and State of WV its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings, or other instruments or contracts of

LIMITATION: THIS POWER OF ATTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.
and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY:

"Be It Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact. may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary."

"Be it Further Resolved, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 20

In Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their National Surety Leader and Senior Executive and their corporate seals to be hereto affixed this 14th day of FEBRUARY A.D., 2018.

Affixed

State of Ohio County of Medina Filmon Management

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

By Dennis P. Baus, National Surety Leader and Senior Executive

On this 14th day of FEBRUARY A.D., 2018, before me personally came Dennis P. Baus to me known, who, being by me duly sworn, did depose and say, that he resides in Wooster, Ohio; that he is National Surety Leader and Senior Executive of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Notarial Seal Affixed

State of Ohio County of Medina

SS.:



David A. Kotnik, Attorney at Law, Notary Public My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

Frank A. Carrino, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this 14th day of

2018 June

Marine Property And the state of t



Frank A. Carrino, Secretary

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.

Addendum Numbers Received:

(Check the box next to each addendum received)

1 x 1	Addendum No. I	[]	Addendum No. 6
[X]	Addendum No. 2	[]	Addendum No. 7
[X]	Addendum No. 3	[j	Addendum No. 8
[X]	Addendum No. 4]]	Addendum No. 9
[X]	Addendum No. 5	[]	Addendum No. 10

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
Authorized Signature

June 21, 2018

Date

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

Revised 6/8/2012



WEST VIRGINIA CONTRACTOR LICENSING BOARD

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV000836

Classification:

GENERAL BUILDING
GENERAL ENGINEERING
MULTIFAMILY
PIPING
PAINTING
MASONRY
CONCRETE

WISEMAN CONSTRUCTION CO INC DBA WISEMAN CONSTRUCTION CO INC 1616 6TH AVE CHARLESTON, WV 25312-2424

Date Issued

Expiration Date

AUGUST 07, 2017

AUGUST 07, 2018

Authorized Company Signature

Chair, West Virginia Contractor

Licensing Board

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where work is being performed. This license number must appear in all advertisements, on all bid submissions and on all fully executed and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/20/2017

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(les) 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 rights to the certificate holder in lieu of such endorsement(s). Richard Higginbotham George H. Friedlander Company PHONE 304-357-4520 FAX (A/C, No): 304-345-8724 1566 Kanawha Blvd. E. E-MAIL ADDRESS: rhigginbotham@friedlandercompany.com Charleston WV 25311 INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Westfield Insurance Companies 24112 **WISC001** INSURED INSURER B: BrickStreet Insurance 12372 Wiseman Construction Co., Inc. INSURER C: 1616 6th Avenue INSURER D : Charleston WV 25387 INSURER E : INSURER F : COVERAGES CERTIFICATE NUMBER: 1962555263 REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD 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, ADDLISUBR POLICY EFF POLICY EXP TYPE OF INSURANCE LIMITS POLICY NUMBER COMMERCIAL GENERAL LIABILITY CMM1886950 10/4/2017 10/4/2018 х \$1,000,000 **EACH OCCURRENCE** DAMAGE TO RENTED CLAIMS-MADE X OCCUR \$500,000 PREMISES (Ex occurrence) MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE \$2,000,000 POLICY X PRO-PRODUCTS - COMPIOP AGG \$2,000,000 OTHER: COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY 10/4/2017 10/4/2018 CMM1886950 \$1,000,000 X ANY AUTO BODILY INJURY (Per person) SCHEDULED OWNED AUTOS ONLY BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) HIRED AUTOS ONLY Х \$ CMM1886950 UMBRELLA LIAB 10/4/2017 10/4/2018 OCCUR **EACH OCCURRENCE** \$5,000,000 EXCESS LIAB CLAIMS-MADE \$5,000,000 AGGREGATE DED X RETENTION \$ NONE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY В WCB1019646 7/1/2017 7/1/2018 X STATUTE ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT \$1,000,000 N/A (Mandatory in NH) E.L. DISEASE - EA EMPLOYES \$1,000,000 If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT 51,000,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more apace is required) WC includes Broad Form Employers Liability, WV 23-4-2 Evidence of Liability and Workers' Compensation Insurance **CERTIFICATE HOLDER** CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. TO WHOM IT MAY CONCERN **AUTHORIZED REPRESENTATIVE**