Exhibit A Pricing Page - Revised for Addendurn 1

	DESCRIPTION	UNIT OF MEASURE	UNIT PRICE	ESTIMATED QTY	EXTENDED COST
001	Demolition and Removal of Single and Multiple Story Foundational Structures (Public, Private, Commercial) and Non-Foundational Structures (Trailers, Modulars, etc.)	Square Foot	4.18	120,000	e 5
002	Removal of Personal Property Debris (Structures that have been previously demolished but not removed).	Cubic Yard	15.00	75	\$ 501,600.00
003	Removal of Municiple Waste and Woody and Vegetative Debris.	Cubic Yard	15.00	20	\$ 1,125.00
004	Filling in of Basements and Crawlspaces.	Cubic Yard	4.50	20,000	\$ 90,000,00
005	Draining, Removal, and Backfilling of Septic Tanks	Per Tank	450.00	40	\$ 26,000,00
006	Sealing, Filling In, and/or Capping Underground Wells	Per Well	600.00	40	
007	Removal of External Propane or Fuel Oil Tanks	Per Tank	300.00	40	,,
800	Inspection, Sampling, Testing, and Documentation of Asbestos Containing Materials of all Standing Structures.	Per Structure	572.00	120	10,000,08
009	Inspection, Sampling, Teating, and Documentation of Asbestos Containing Materials of Personal Property Debris (Structures that have been previously demolished).	Per Structure	165.00		\$ 68,640,00
210	Removal, Containment, and Transportation of Asbestos Containing Materials to an approved and properly licensed sanitary landfill, Line Item Includes Personal Property Debris.	Square Foot	2.50		12,315.00
011	Inspection, Sampling, Testing, and Documentation of Hazardous Materials.	Per Structure	287.00	120	\$ 7,500.00
12	Removal, Containment, and Transportation of Hazardous Materials to an approved and	Per Structure	521.00		5 34,440,00 6 62,520.00

estimated quantities.

RECEIVED

2018 AUG -7 PM 12: 07

WW PURCHASING DIVISION

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.

Michael McCalliste President
(Name, Title)
Michael L. McCallister, President/Owner
(Printed Name and Title)
1608 Virginia Ave. W., Huntington, Wv25704
(Address)
Office (681)204-5366 Cell (304) 633-3776
(Phone Number) / (Fax Number)
mike@csiwv.net
(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.

Custom Services Industries (Company)
Michael McCallate, President
(Authorized Signature) (Representative Name, Title)
Michael L. McCallister, President/Owner
(Printed Name and Title of Authorized Representative)
August 7, 2018
(Date)
Office (681) 204-5366 Cell (304) 633-3776
(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0307 DEV190000008

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 rece	ived)
Addendum No. 1 Addendum No. 2 Addendum No. 3 Addendum No. 4 Addendum No. 5	☐ Addendum No. 6 ☐ Addendum No. 7 ☐ Addendum No. 8 ☐ Addendum No. 9 ☐ Addendum No. 10
I further understand that any verbal represen discussion held between Vendor's represente	pt of addenda may be cause for rejection of this bid. tation made or assumed to be made during any oral atives and any state personnel is not binding. Only to the specifications by an official addendum is
Custom Services Industries Company	
Authorized Signature	
August 7, 2018 Date	
NOTE: This addendum asknowledgement sh	and be automitted with the hid to sundite

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

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, Charleston, WV 25305. For contracts of \$25,000 or less, the vendor should mail the report to the public authority issuing the contract.

Contract Identifica	ation:						
Contract Number:	CRFQ 0307	DEV190000000	3				
Contract Purpose:	Demolition	and Removal o	of Debris - R	egion 4			
Agency Requesting	g Work:						
Required Report C should check each	content: The attaction box as an indication	hed report must inclination that the required in	ide each of the item formation has been	s listed below. The included in the atta	e vendor ached report.		
☐ Information 21-1D-5 was	☐ Information indicating the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided;						
☐ Name of the successor th	□ Name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;						
☐ Average num	Average number of employees in connection with the construction on the public improvement;						
negative test	Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.						
Vendor Contact Inf	ormation:						
Vendor Name: Cus	tom Services	Industries	Vendor Teler	ohone: (681)	2045366		
/endor Address:	1608 Virginia	a Avenue W.	Vendor Fax:	(681) 204-5	366		
H	intington, W	7 25704		il: <u>mike@csiwv</u>			



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

SIATE OF WEST VIRGINIA,	
COUNTY OF Cabell	_, TO-WIT:
I, Michael L. McCalliste	Tafter being first duly sworn, depose and state as follows:
 I am an employee of <u>Cus</u> 	stom Services Industries ; and,
	(Company Name)
2. I do hereby attest that _C	Custom Services Industries
	(Company Name)
maintains a written plan f policy are in compliance w	or a drug-free workplace policy and that such plan and with West Virginia Code §21-1D.
The above statements are sworn	to under the penalty of perjury.
	Printed Name:Michael L. McCallister
	Signature: Michael McCallint
	Title: President / Owner
	Company Name: Custom Services Industries
	Date: August 7, 2018
Taken, subscribed and sworn to b	efore me this 7774 day of AUGUST , 20/8
By Commission expires 10/10,	
(Seal) OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA Lynne 8. Messedows R. 3 Roz 75 THIS AFE STATE MUST SERVER STATE OF THE STAT	Symme B. Meaclows (Notary Public)
WITH WY CODE PROVISIONS:	METTED WITH THE BID IN ORDER TO COMPLY PAILURE TO INCLUDE THE AFFIDAVIT WITH THE
as sume resulting distillation and the control of 	ILICATION OF THE PARTY

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 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 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: Custom Services Indu	stries
Authorized Signature: Michael McCal	Date: August 7, 2018
State of W	
County of CABELL to-wit:	
Taken, subscribed, and swom to before me this 777/	day of AUGUST , 2018
My Commission expires 10 / 10	
AFFIX SEAL HERE	NOTARY PUBLIC Sypne B. Meadows



Purchasing Affidavit (Revised 01/19/2018)

BID BOND

	KNOW ALL MEN BY THESE PRESENTS, That we, the undersign		rsigned,	d, Custom Services Industries, LLC			
	_ of Huntington	, <u>W</u> e	est Virginia		, as Principa	l, and Gre	at American Insurance Co.
	of Cincinnati	, Ohio	, a corp	oration o	organized and	existing und	der the laws of the State of
Ohio	with its princi	pal office in the Cit	y of Cincinnati		, as Surety,	are held a	nd firmly bound unto the State) for the payment of which,
of West	Virginia, as Obligee, in t	the penal sum of <u></u>	ive percent of bid	٠.	(<u>\$ 5% of bi</u>	d) for the payment of which,
well and	truly to be made, we joi	intly and severally	bind ourselves, our h	neirs, adı	ministrators, ex	ecutors, su	accessors and assigns.
	The Condition of the	above obligation is	s such that whereas	the Pri	incipal has sub	mitted to	the Purchasing Section of the
-	nent of Administration a 0307 DEV190000000				•	of, to enter	into a contract in writing for
the agre- full force	(b) If said bid shall hereto and shall furnis ement created by the ac	h any other bonds cceptance of said b ssly understood ar	and insurance requir old, then this obligation and agreed that the list	red by th on shall	ne bid or propos be null and void	sal, and sh d, otherwis	lance with the bid or proposal all in all other respects perform se this obligation shall remain in Il claims hereunder shall, in no
way imp		y extension of the					rety and its bond shall be in no , and said Surety does hereby
	WITNESS, the following	g signatures and s	eals of Principal and	Surety,	executed and	sealed by	a proper officer of Principal and
Surety, c	or by Principal individual	ly if Principal is an	individual, this 7th	_day of	August		, _{20_} 18
Principal	Seal				By Rich	(Nan	dustries, LLC ne of Principal) dent, Vice President, or othorized Agent)
					Vice	Pres	(Title)
Surety S	eal				Great Ame		ırance Company ne of Surety)
					amai	rda Atto	College orney-in-Fact

Amanda Colley

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.

GREAT AMERICAN INSURANCE COMPANY®

Administrative Office: 301 E 4TH STREET ● CINCINNATI, OHIO 45202 ● 513-369-5000 ● FAX 513-723-2740

The number of persons authorized by this power of attorney is not more than FIVE

No. 0 20932

POWER OF ATTORNEY

KNOWALL MEN BY THESE PRESENTS: That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

THOMAS H. BOTTOMS, JR. CLARENCE C. MASSEY J. MICHAEL WELLMAN DAVID B. LUCAS AMANDA COLLEY

Attest

Address HUNTINGTON, WEST VIRGINIA HUNTINGTON, WEST VIRGINIA ASHLAND, KENTUCKY ASHLAND, KENTUCKY HUNTINGTON, WEST VIRGINIA

Limit of Power AL L \$100,000,000

This Power of Attorney revokes all previous powers issued on behalf of the attorney(s)-in-fact named above. IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate

officers and its corporate seal hereunto affixed this

day of **APRIL**

GREAT AMERICAN INSURANCE COMPAN

Assistant Secretary

Divisional Senior Vice President

STATE OF OHIO, COUNTY OF HAMILTON - SS:

On this 16TH day of

APRIL

DAVID C. KITCHIN (877-377-2405)

2018 , before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.



My Commission Expires 05-18-2020

Susan a Lohoust

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisonal Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATION

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this

7th

day of

August

