

**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: 592511

Doc Description: Addendum No. 1 Bldg. 23 Elevator Jack and Controls

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation	n No		Version	
2019-06-28	2019-07-03 13:30:00	CRFQ	0211	GSD1900000035	2	

BID RECEIVING LOCATION

**BID CLERK** 

**DEPARTMENT OF ADMINISTRATION** 

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

VENDOR

Vendor Name, Address and Telephone Number:

RECEIVED

2019 JUL -3 AH 9: 23

WW PURCHASING DIVISION

FOR INFORMATION CONTACT THE BUYER

Melissa Pettrey (304) 558-0094

melissa.k.pettrey@wv.gov

Signature X

FEIN# 45 - 5200236

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

Page: 1

FORM ID: WV-PRC-CRFQ-001

#### ADDITIONAL INFORMATION:

#### Addendum No. 1

Addendum No. 1 is issued to publish and distribute the attached information to the vendor community.

Request For Quotation

The West Virginia Purchasing Division is soliciting bids on behalf of the agency the WV Department of Administration, General Services Division to establish a contract for the

removal and replacement of the existing hydraulic cylinder and elevator controls on the single passenger elevator in Building 23, located at 407 Neville Street Beckley, WV 25801, including returning the elevator to an operable state per the bid requirements, specifications, terms and conditions attached to this solicitation.

INVOICE TO		SHIP TO			
DEPARTMENT OF ADMI			DEPARTMENT OF ADMINISTRATION GENERAL SERVICES DIVISION BLDG 23		
112 CALIFORNIA AVENU	JE, 5TH FLOOR	407 NEVILLE ST			
CHARLESTON	WV25305	BECKLEY	WV 25801		
US		us			

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Elevator installation maintenance and repair service	1.00000	EA		

Comm Code	Manufacturer	Specification	Model #	
72154010				

#### **Extended Description:**

Elevator installation maintenance and repair service

	Document Phase	Document Description	Page 3
GSD1900000035	Final	Addendum No. 1 Bldg. 23 Elevator Jack and	of 3
		Controls	

## ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

# REQUEST FOR QUOTATION Building 23 Elevator Repairs

# EXHIBIT A - Pricing Page

Base Bid (Commodity Line 1 in wvOasis): All inclusive, lump-sum bid to provide removal and replacement of Building 23 Elevator Hydraulic Jack and elevator controls replacement.

Lump Sum = \$ 49,882 . (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 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:	West	Virginia	Elevator.	LCC	
Contractor's License No	o.: WV	104	19746		

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 drug-free 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.

**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.

C_3	Manawer
(Name, Title) Brek	Bunuyer
(Printed Name and Title)	
_ DO 150x 57	Amma WV 15005
(Address) 34-881-1383	, 361-381-4444
(Phone Number) / (Fax Number)	T) armail . Com
(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.

(0	Company) Just Virginia Fleverbr, LLC.
_	Manager .
(1	Authorized Signature) (Representative Name, Title)
_	Printed Name and Title of Authorized Representative)
Œ	7/2/19 Date)
(P	384-881-1383 34-381-4444

# REQUEST FOR QUOTATION Building 23 Elevator Repairs

- 11.2. Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
- 11.3. Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
- 11.4. Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
- 11.5. Vendor shall inform all staff of Agency's security protocol and procedures.

### 12. MISCELLANEOUS:

12.1. 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:	Vistin Bozell
Telephone Number:	34-881-1383
Fax Number:	34-381-4494
Email Address:	Welevator agnail an



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

STATE OF WEST VIRGINIA,
COUNTY OF KANAWAA TO-WIT:
I, <u>CHASTOPHER BRAKE</u> after being first duly sworn, depose and state as follows:
1. I am an employee of WEST WINIA ELEUARDA; and, (Company Name)
2. I do hereby attest that WEST VIRGINIA EXEVADE (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:CNRISTOPNER BRIDLET
Signature:
Title: MEMBER
Company Name: WV FLOR VATOR
Date: <u>9-3-19</u>
Taken, subscribed and sworn to before me this $3^{rol}$ day of $Tuly$ $2019$ .
By Commission expires <u>CIF/11/2073</u>
(Seal)
OFFICIAL SEAL (Notaty Public) NOTARY PUBLIC



## 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 Identification:
Contract Number: 03/1 650/900000635
Contract Purpose: 600 23 SACK and commune
Agency Requesting Work:
Required Report Content: The attached report must include each of the items listed below. The vendor should check each box as an indication that the required information has been included in the attached report.
☐ Information indicating the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided;
□ Name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;
Average number of employees in connection with the construction on the public improvement;
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 Information:
Vendor Name: <u>UV ELEVATOR</u> Vendor Telephone: <u>304-881-7383</u>
Vendor Address:         Po Box 57         Vendor Fax:         3-1 - 3-1 - 4-4-4           ABAR UI 25005         Vendor E-Mail:         William RD 6/William

# 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: WF57 WRGINIA	**************************************
Authorized Signature:	Date:
State of West Virginia	
County of Kangwha to-wit	10
Taken, subscribed, and swom to before me this 310 day of	20_19.
My Commission expires	$\Lambda$
AFFIX SEAL HERE NOTARY PUBL	LIC Stephen Mos

Purchasing Affidavit (Revised 01/19/2018)

OFFICIAL SEAL
NOTARY PUBLIC
STATE OF WEST VIRIGINIA
Stephanie N. Daw
3501 MacCorkle Ave SE
Charleston, WV 25304
My Commission Expires July 11, 2023

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: GSD1900000035

**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.

(Cnec	K U	ie be	ox next to each addendum rec	eive	4)	
	D	Ą	Addendum No. 1	[	]	Addendum No. 6
	[	]	Addendum No. 2	I	]	Addendum No. 7
	ſ	]	Addendum No. 3	Ţ	]	Addendum No. 8
	I	]	Addendum No. 4	I	1	Addendum No. 9

Addendum Numbers Received:

Addendum No. 5

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that 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.

Addendum No. 10

Company

Authorized Signature

4/2/19
Date

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

## **BID BOND**

	KNOW ALL MEN BY THESE PRE	ESENTS, That we, the u	indersigned,	West Virg	inia Ele	vator, LLC
of	Amma		, as	Principal, a	nd The (	Cincinnati Insurance Company
of	Cincinnati,	<u>OH</u> , a	corporation	organized a	nd existin	ng under the laws of the State of
ОН	with its principal office in	the City of Cinc	innati	, as Sure	ety, are h	eld and firmly bound unto the State
of West	Virginia, as Obligee, in the penal s	um of Five Percent of	Amount Bio		_(\$	5% for the payment of which,
well and	truly to be made, we jointly and se	everally bind ourselves,	our heirs, ad	ministrators	, executo	ors, successors and assigns.
_	•			-		d to the Purchasing Section of the
•	nent of Administration a certain bid 3 Elevator Jack and Controls				-	
Blug. Z	3 Elevator Jack and Controls	- CRFQ 0211 GSD18	00000035	- Accordin	ig to Pia	ins & specifications
						<del></del>
	NOW THEREFORE,					
	(a) If anial hid about he valuate					
	<ul><li>(a) If said bid shall be rejected</li><li>(b) If said bid shall be access</li></ul>	epted and the Principal	shall enter	into a contr	ract in a	ccordance with the bid or proposal
						nd shall in all other respects perform erwise this obligation shall remain in
full force	and effect. It is expressly unders	tood and agreed that ti	ne liability of	the Surety	for any a	and all claims hereunder shall, in no
event, ex	xceed the penal amount of this obli	gation as herein stated.				
	The Surety, for the value received	, hereby stipulates and	agrees that	the obligation	ons of sai	id Surety and its bond shall be in no
	aired or affected by any extension tice of any such extension.	of the time within whi	ch the Oblig	ee may acc	cept such	h bid, and said Surety does hereby
WEIVE IIC	doe of any door exemple.					
		<u>-                                    </u>			nd sealed	d by a proper officer of Principal and
Surety, c	or by Principal individually if Princip	al is an individual, this_	3rd day	of	July	2019
				10/+1//-	-i-i- Fi	avatas II C
Principal	Seal			vvest vir		evator, LLC (Name of Principal)
				6		
			<u> </u>	By(N	Viust be F	President, Vice President, or
						ly Authorized Agent)
				Dustin Bo	ozek	Managing Member
						(Title)
Cumb C	ACKES CITY OF THE PARTY OF THE			The Cinc	innati In	surance Company
Surety S				11.0 011.0		Name of Surety)
	CARTURA				)	1 1
E	40			By:	ats.	1. M/m.0
100	SEAL WEST		Pa	tricia A. Moy	e, WV Re	esident Agent Attorney-in act

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.

#### THE CINCINNATI INSURANCE COMPANY

Fairfield, Ohio

#### **POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That THE CINCINNATI INSURANCE COMPANY, a corporation organized under the laws of the State of Ohio, and having its principal office in the City of Fairfield, Ohio, does hereby constitute and appoint

Gregory T. Gordon; Patricia A. Moye and/or Kimberly Wilkinson

of Charleston, West Virginia its true and lawful Attorney(s)-in-Fact to sign, execute, seal and deliver on its behalf as Surety, and as its act and deed, any and all bonds, policies, undertakings, or other like instruments, as follows:

Any such obligations in the United States, up to

Fifty Million and No/100 Dollars (\$50,000,000.00).

This appointment is made under and by authority of the following resolution passed by the Board of Directors of said Company at a meeting held in the principal office of the Company, a quorum being present and voting, on the 6th day of December, 1958, which resolution is still in effect:

"RESOLVED, that the President or any Vice President be hereby authorized, and empowered to appoint Attorneys-in-Fact of the Company to execute any and all bonds, policies, undertakings, or other like instruments on behalf of the Corporation, and may authorize any officer or any such Attorney-in-Fact to affix the corporate scal; and may with or without cause modify or revoke any such appointment or authority. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company."

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company at a meeting duly called and held on the 7th day of December, 1973.

"RESOLVED, that the signature of the President or a Vice President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Secretary or Assistant Secretary and the seal of the Company may be affixed by facsimile to any certificate of any such power and any such power of certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certified by certificate so executed and sealed shall, with respect to any bond or undertaking to which it is attached, continue to be valid and binding on the Company."

IN WITNESS WHEREOF, THE CINCINNATI INSURANCE COMPANY has caused these presents to be scaled with its corporate scal, duly attested by its Vice President this 8th day of March, 2017.

STATE OF OHIO

STATE OF OHIO ) ss: COUNTY OF BUTLER ) THE CINCINNATI INSURANCE COMPANY

Vice President

On this 8th day of March, 2017, before me came the above-named Vice President of THE CINCINNATI INSURANCE COMPANY, to me personally known to be the officer described herein, and acknowledged that the seal affixed to the preceding instrument is the corporate seal of said Company and the corporate seal and the signature of the officer were duly affixed and subscribed to said instrument by the authority and direction of said corporation.

MARK J. HULLER, Attorney at Law NOTARY PUBLIC - STATE OF OHIO My commission has no expiration date. Section 147.03 O.R.C.

Justice undersigned Secretary or Assistant Secretary of THE CINCINNATI INSURANCE COMPANY, hereby certify that the above is a true and correct copy of the Original Power of Attorney issued by said Company, and do hereby further certify that the said Power of Attorney is still in true force and effect.

VEN under my hand and seal of said Company at Fairfield, Ohio.

ard day of

July

2019

Secretary

BN-1005 (3/17)