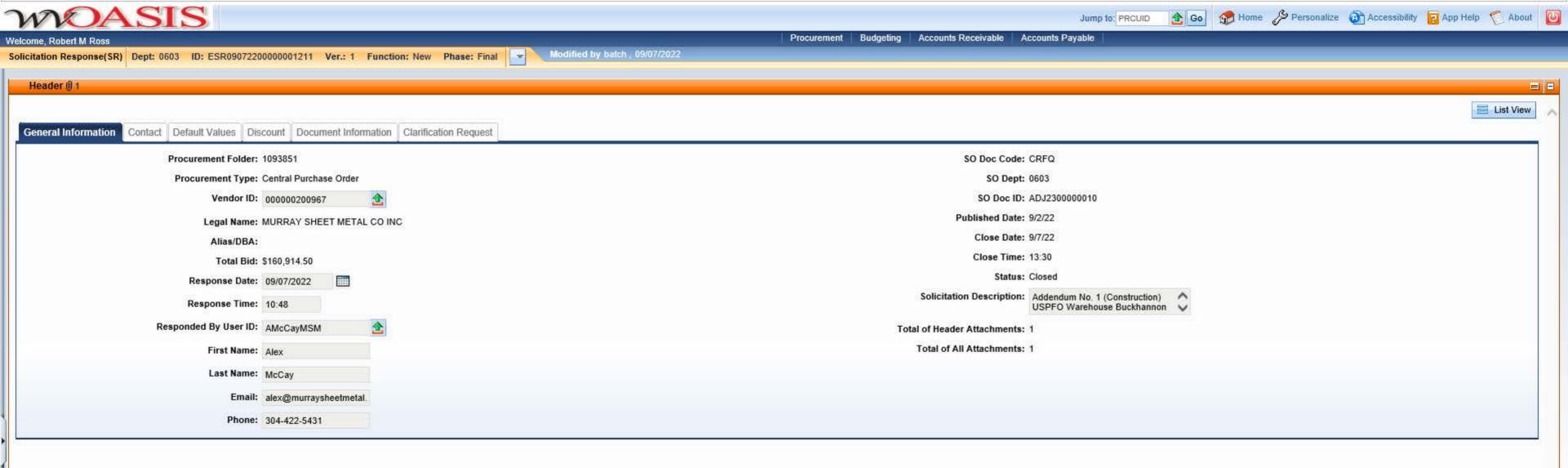
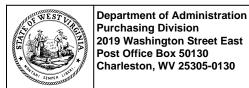


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

Bid Fax: 304-558-3970

The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at *wvOASIS.gov*. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at *WVPurchasing.gov* with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.





State of West Virginia Solicitation Response

Proc Folder: 1093851

Solicitation Description: Addendum No. 1 (Construction) USPFO Warehouse Buckhannon

Proc Type: Central Purchase Order

 Solicitation Closes
 Solicitation Response
 Version

 2022-09-07 13:30
 SR 0603 ESR09072200000001211
 1

VENDOR

000000200967

MURRAY SHEET METAL CO INC

Solicitation Number: CRFQ 0603 ADJ2300000010

Total Bid: 160914.5 **Response Date:** 2022-09-07 **Response Time:** 10:48:32

Comments:

FOR INFORMATION CONTACT THE BUYER

David H Pauline 304-558-0067 david.h.pauline@wv.gov

Vendor Signature X

FEIN# DATE

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

Date Printed: Sep 7, 2022 Page: 1 FORM ID: WV-PRC-SR-001 2020/05

Line Co	omm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
	oof Replacement at USPFO Warehouse				160884.00

Comm Code	Manufacturer	Specification	Model #	
72152601				

Commodity Line Comments: Includes New Ladder at 52" wall.

Extended Description:

Contract Item#1- Labor, materials and all associated costs to remove and dispose of old roof, and to install a new EPDM roofing system or equal.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Decking Repair/Replacement (if necessary)				24.50

Comm Code	Manufacturer	Specification	Model #	
72152601				

Commodity Line Comments:

Extended Description:

Contract Item#2- Decking Repair/Replacement (Only If Needed) provide pricing on a Price Per Square Foot Installed basis.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	Wood Blocking Replacement (if necessary)				6.00

Comm Code	Manufacturer	Specification	Model #	
72152601				

Commodity Line Comments:

Extended Description:

Contract Item#3- Wood Blocking Replacement (Only If Needed) provide pricing on a Price Per Lineal Foot Installed basis.

Agency Purchasing Division
REQ.P.O# ADJ2300000010

BID BOND

	KNOW ALL MEN BY THESE PRES	ENTS, That we, the ur	ndersigned, <u>Mur</u>	ray Sheet Meta	al Co., Inc.
of	Parkersburg	,WV	, as Princ	cipal, and <u>Great</u>	American Insurance Company
of	Cincinnati	OH, a c	corporation organ	ized and existing	g under the laws of the State of
OH	with its principal office In t	he City of Cinc	innati , a	is Surety, are he	eld and firmly bound unto the State
of West	t Virginia, as Obligee, In the penal sur	n of Five Percent of Ar	mount Bid	(\$	5%) for the payment of which,
well and	d truly to be made, we jointly and seve	erally bind ourselves, o	ur heirs, adminis	trators, executor	rs, successors and assigns.
	The Condition of the above obliga	ition is such that whe	reas the Principa	al has submitted	d to the Purchasing Section of the
	ment of Administration a certain bid or			•	_
Roof F	Replacement, USPFO Warehous	e, Buckhannon, WV			
	NOW THEREFORE,				
the agre full forc	(a) If said bid shall be rejected (b) If said bid shall be accept dhereto and shall furnish any other leement created by the acceptance of e and effect. It is expressly understock the penal amount of this obligation.	ted and the Principal bonds and insurance re said bid, then this obli- bod and agreed that the	equired by the big gation shall be n	d or proposal, an ull and void, othe	erwise this obligation shall remain in
way im waive n	The Surety, for the value received, paired or affected by any extension otice of any such extension.				
	WITNESS, the following signatures	and seals of Principal	and Surety, exec	cuted and sealed	by a proper officer of Principal and
Surety,	or by Principal individually if Principal		•		119000000000000000000000000000000000000
Principa	al Seal		Ми	ırray Sheet Me	etal Co., Inc.
1	7/1/2.				Name of Principal)
12	441.		By		8
					President, Vice President, or ly Authorized Agent)
411				ice - President	
	840				(Title)
Surety	CAN INSURA		Gr		Insurance Company
	Was Van			((Name of Surety)
			Ву		mys Selbe
			Tam	my S. Selbe, Licensed \	WV Residen Agent Attorney-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.

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 SIX

No. 0 21746

POWER OF ATTORNEY

KNOW ALL 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.

Name

ANDREW K. TEETER DOUGLAS P. TAYLOR JAIME L. CARPENTER KIMBERLY L. MILES TAMMY S. SELBE JESSICA J. BENTLEY

Address ALL OF CHARLESTON, WEST VIRGINIA Limit of Power ALL \$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 **FEBRUARY** day of 2022

Attest

Assistant Secretary

GREAT AMERICAN INSURANCE COMPAN

Divisional Senior Vice President

Susan a Lohoust

STATE OF OHIO, COUNTY OF HAMILTON - ss:

2ND On this

FEBRUARY

MARK VICARIO (877-377-2405)

day of 2022 , before me personally appeared MARK VICARIO, to me known, being duly swom, 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.



SUSAN A KOHORST **Notary Public** State of Ohio My Comm. Expires May 18, 2025

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

September

2022



Assistant Secretary

CONTRACTOR LICENSE

AUTHORIZED BY THE

West Virginia Contractor Licensing Board

NUMBER:

BOARD

WEST VIRGINIA

CHOA LICENSING

WY000006

CLASSIFICATION:

GENERAL BUILDING
GENERAL ENGINEERING
HEATING, VENTILATING & COOLING
PIPING
PLUMBING
ROOFING

MURRAYS SHEET METAL CO INC DBA MURRAYS SHEET METAL CO INC 3112 NORTH WESTERN PIKE PARKERSBURG, WV 26104

DATE ISSUED

EXPIRATION DATE

JANUARY 22, 2022

JANUARY 22, 2023

Authorized Signature

Chair, West Virginia Contractor Licensing Board



A copy of this license must be readily available for inspection by the Board on every job site where contracting 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 is non-transferable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.

CILMONK



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/24/2021

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 rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT Mark Stewart			
AssuredPartners 340 MacCorkle Ave. SE	PHONE (A/C, No, Ext): (304) 345-8000		345-8014	
Charleston, WV 25314	E-MAIL ADDRESS: lynne.monk@assuredpart			
	INSURER(S) AFFORDING COVERAGE			
	INSURER A : Hartford Fire Insurance (Co.	19682	
INSURED	INSURER B: Travelers Property Casualty Co of America		25674	
Murray Sheet Metal Company, Inc.	INSURER C: Twin City Fire Insurance Co.			
3112 Northwestern Pike	INSURER D :			
Parkersburg, WV 26104-1105	INSURER E :			
	INSURER F:			
COVERAGES CERTIFICATE NUMBER:	REVISI	ON NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED B	ELOW HAVE BEEN ISSUED TO THE INSURED NAM	MED ABOVE FOR THE PO	DLICY PERIO	

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.

NSR LTR		TYPE OF INSURANCE	ADDL S	POLICY NUMBER	POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMIT	S	
Α	Х	CLAIMS-MADE X OCCUR		42UENOE0085	4/1/2021	4/1/2022	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000 300,000
Ī							MED EXP (Any one person)	\$	10,000
							PERSONAL & ADV INJURY	\$	1,000,000
	GEN	LAGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000
		POLICY X PRO-					PRODUCTS - COMP/OP AGG	\$	2,000,000
Α		OTHER:					COMBINED SINGLE LIMIT	\$	4 000 000
^		OMOBILE LIABILITY	1				(Ea accident)	\$	1,000,000
	X	ANY AUTO OWNED SCHEDULED		42UENOE0086	4/1/2021	4/1/2022	BODILY INJURY (Per person)	\$	
-		AUTOS ONLY AUTOS					BODILY INJURY (Per accident)	\$	
-	X	HIRED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$	
n								\$	
В		UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$	9,000,000
	X	EXCESS LIAB CLAIMS-MADE		ZUP10N5285621NF	4/1/2021	4/1/2022	AGGREGATE	\$	9,000,000
		DED X RETENTION \$ 10,000						\$	
C	WOR	KERS COMPENSATION EMPLOYERS' LIABILITY					X PER OTH-		
	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A	42WEOE0084	4/1/2021	4/1/2022	E.L. EACH ACCIDENT	\$	1,000,000
		CER/MEMBER EXCLUDED?	N, A				E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	DESC	describe under CRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	1,000,000
					1				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Evidence of Insurance.

CERTIFICATE HOLDER	CANCELLATION
Murray Sheet Metal Co., Inc. 3112 Northwestern Pike Parkersburg, WV 26104	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
, american a	AUTHORIZED REPRESENTATIVE

.........

CERTIFICATE UOI DED



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

I,	Alex McCay , after being first duly sworn, depose and state as follows:
1.	I am an employee of Murray Sheet Metal Co. Tac.; and, (Company Name)
2.	I do hereby attest that Morray Sheet Metal Co. Inc. (Company Name)
	maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with West Virginia Code §21-1D.
The a	bove statements are sworn to under the penalty of perjury.
	Printed Name: Alex Milay
	Signature: Alwh
	Title: Estimator/Pm
	Company Name: Mu (ay Sheet Metal Co. Inc.
	Date: 9-7-2022
STATE	E OF WEST VIRGINIA,
COUN	TY OF
Taken	, subscribed and sworn to before me this 7th day of September , 2022 .
	mmission expires4/19/2027
(Seal)	Sarah Lucha
	OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA Sarah Tuckor Murray Sheet Metal Co., Inc. 3112 Northwestern Piko Parkersburg WV 26104 My Commission Expires April 19, 2027 (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, 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:
Contract Purpose: Roof Replacement - Buckhannon USPFO Workhouse
Agency Requesting Work: WV National Good / W Porchasing Division
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:
A0
Vendor Name: Murray Sheet Metal Co. Inc. Vendor Telephone: (304) 966-1519
Vendor Address: 3112 Northwestern Pike Vendor Fax: (304) 428-4623
Parkersburg, WV 26104 Vendor E-Mail: alexamorray shout metal.com

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ ADJ2300000010

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)

[]		Addendym No. 1 Pec J 9-2-22	[]	Addendum No. 6
]]	Addendum No. 2	[]	Addendum No. 7
[]	Addendum No. 3	[]	Addendum No. 8
[]	Addendum No. 4	[]	Addendum No. 9
[]	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 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.

Murray Sheet Metal Co. Inc.

Company

Authorized Signature

9-7-22

Date

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

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name: Murray Sheet Metal Co. Inc.						
Check this box if no subcontractors will perform more than \$25,000.00 of work to complete the project.						
Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.					

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.

(Name, Title)					
(Printed Name and Title) Alex Milay Estimator /PM					
(Address) 3112 Northwestern Pike, Parkersburg, WV 26104					
(Phone Number) / (Fax Number) (304) 966-1519 /(304) 428-4623					
(email address) _alex@murraysheetmetal.com					
CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation/Contract 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/Contract 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.					
By signing below, I further certify that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract					
clauses that violate State law; and that pursuant to W. Va. Code 5A-3-63, the entity					
entering into this contract is prohibited from engaging in a boycott against Israel.					
Murray Sheet Metal Co. Inc.					
(Company)					
(Authorized Signature) (Representative Name, Title)					
Alex Milay Estimator 1Pm					
(Printed Name and Title of Authorized Representative) (Date) (304) 966-1519 / (304) 2/18-4/623					
(Phone Number) (Fax Number)					
a lexel murry sheet metal. com					

(Email Address)

EXHIBIT A **RFQ # ADJ230000010**

ALL LABOR, MATERIALS, EQUIPMENT, AND SUPPLIES NECESSARY TO REPLACE EPDM ADHERED ROOFING SYSTEM, AT

UNITED STATES PROPERTY FISCAL OFFICE-WAREHOUSE

50 ARMORY ROAD, BUCKHANNON, WV 26201

BID FORM

The undersigned, hereafter called the Bidder, being familiar with and understanding the bidding documents; and being familiar with the site and all local conditions affecting the Project, hereby proposes to furnish labor, material, equipment, supplies, and transportation to perform the work as described in the bidding documents

BIDDERS COMPANY	NAME: Murray Sheet Metal Co. Inc.						
VENDOR ADDRESS:	3112 Northwestern Pike						
	Parkersburg, WV 26104						
TELEPHONE:	(304) 422-5431						
FAX NUMBER:	(304) 428-4623						
E-MAIL ADDRESS:	alex @murray sheetmetal.com						
WV CONTRACTOR'S LICENSE NO.	W 000006						
CONTRACT OVERALL TOTAL COST:							
One Hundred Sixty Thosand Eight Hundred Eighty Four dollars + \$1100 ce							
(\$/60_,884.ºº) *** (Contract bid to be written in words and numbers.)							
DECKING REPAIR/REPLACEMENT PRICE PER SQUARE FOOT INSTALLED (ONLY If needed to replace due to damage):							
Twenty Four Dollars and Fifty cents							
and the same of th	per sq/ft installed) *** (Unit cost to be written in words and numbers.)						
WOOD BLOCKING, PRICE PER LINEAL FOOT INSTALLED (ONLY If needed to replace due to damage)							
Six Pollors and Zero cents							
\$per In/ft installed) *** (Unit cost to be written in words and numbers.)							

Failure to use this bid form may result in bid disqualification.	
SIGNATURE: Alynn	DATE: <u>9-7-2022</u>
NAME: Alex Milay (Please Print)	
TITLE: Estimator /PM	