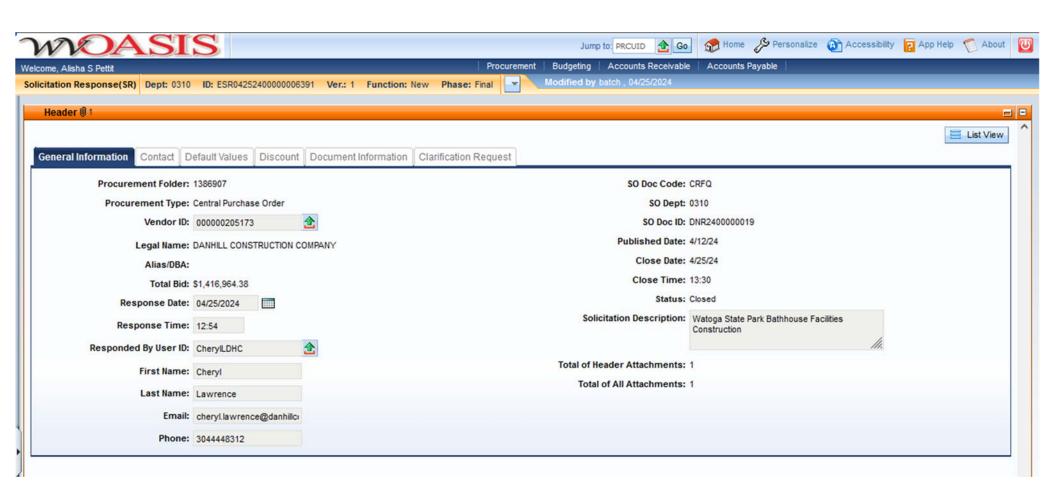
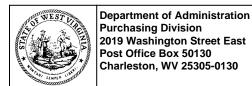


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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: 1386907

Solicitation Description: Watoga State Park Bathhouse Facilities Construction

Proc Type: Central Purchase Order

 Solicitation Closes
 Solicitation Response
 Version

 2024-04-25 13:30
 SR 0310 ESR04252400000006391
 1

VENDOR

000000205173

DANHILL CONSTRUCTION COMPANY

Solicitation Number: CRFQ 0310 DNR2400000019

Total Bid: 1416964.379999999888241291046 **Response Date:** 2024-04-25 **Response Time:** 12:54:27

Comments:

FOR INFORMATION CONTACT THE BUYER

Joseph E Hager III (304) 558-2306 joseph.e.hageriii@wv.gov

Vendor Signature X FEIN# DATE

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

 Date Printed:
 Apr 25, 2024
 Page: 1
 FORM ID: WV-PRC-SR-001 2020/05

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Building and Facility Construction and Maintenance Services				1416964.38

Comm Code	Manufacturer	Specification	Model #	
72100000				

Commodity Line Comments: Bid docs attached

Extended Description:

Includes construction and renovation of bathhouse/restroom facilities and ADA upgrades.

Date Printed: Apr 25, 2024 Page: 2 FORM ID: WV-PRC-SR-001 2020/05

EXHIBIT A - PRICING PAGE

WV DNR Parks Section

Watoga State Park Bathhouse/Restroom Improvements

Name of Vendor:	Danhill Construction Company
Address of Vendor:	P.O. Box 685 Gauley Bridge, WV 25085
Phone Number of Vendor:	(304) 632-1600
WV Contractors License No.	WV- 001196

We, the undersigned, having examined the site and being familiar with the local conditions affecting the cost of the work and also being familiar with the general conditions to bidders, drawings, and specifications, hereby proposes to furnish all materials, equipment, and labor to complete all work in a workmanlike manner, as described in the Bidding documents.

"A" Base Bid

The Base Bid shall consist of all the work described in the Bidding Documents including the Plans, Project Manual, and any addendums not identified as an additive alternate.

Total Base Bid:

Lump sum for all labor, materials, and equipment necessary for a complete project.

Written in numbers.

Total Base Bid: "A"

Lump sum for all labor, materials, and equipment necessary for a complete project.

Written in words.

\$1,416,964.38

One Million, Four Hundred Sixteen Thousand, Nine Hundred Sixty-four dollars and Thirty-eight cents **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.

(Printed Name and Title) Robert D. Hill, President
(Address) P.O. Box 685, Gauley Bridge, WV 25085
(Phone Number) / (Fax Number) (304) 663-5761 (304) 632-1501
(email address) Dan.Hill@danhillconstruction.com
(Ciliali address)

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 this bid or offer was made without prior understanding, agreement, or connection with any entity submitting a bid or offer for the same material, supplies, equipment or services; that this bid or offer is in all respects fair and without collusion or fraud; that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; 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.

Danhill Construction Company
(Company) Robert D. Hill
(Signature of Authorized Representative)
Robert D. Hill, President 4/24/2024
(Printed Name and Title of Authorized Representative) (Date) (304) 663-5761 (304) 632-1501
(Phone Number) (Fax Number)
Dan.Hill@danhillconstruction.com

(Email Address)

BID BOND

of	Westfield Center ,	ОН			Farmers Insurance Compa g under the laws of the State of	
ОН	with its principal office				The state of the s	
of Wes	t Virginia, as Obligee, in the penal	-			5%) for the payment of v	
	d truly to be made, we jointly and			,		
	The Condition of the above ob	oligation is such that	at whereas the Pri	incipal has submitted	to the Purchasing Section	of the
Depart	ment of Administration a certain bi	id or proposal, attac	hed hereto and ma	ide a part hereof, to e	nter into a contract in writing f	or
Bathh	ouse/Toilet Building Renovation	ons Watoga State	Park Marlinton	W - According to I	Plans and Specifications	
		********************************	1035************************************	30(pdatte-4), to-441130000000000000000000000000000000000	**************************************	
	NOW THEREFORE,					
	(a) If said bid shall be reject		ll1 -t1	!=!= =	and an analysis of the state of	
attache	(b) If said bid shall be ac ed hereto and shall furnish any oth				ccordance with the bid or products and shall in all other respects pe	
the agr	reement created by the acceptance	e of said bid, then th	his obligation shall	be null and void, other	erwise this obligation shall rem	nain ir
	ce and effect. It is expressly under exceed the penal amount of this of			the Surety for any a	nd all claims hereunder shall,	in no
Overit,	oncode the penal amount of this of	ongation do netelli s	olulou.			
		ad barabu atinulata	ond paroon that	the obligations of said	d Surety and its bond shall be	
	The Surety, for the value receive	ed, nereby supulate	es and agrees mat	and obligations of oan		in no
	paired or affected by any extensi					
	paired or affected by any extensionatice of any such extension.	ion of the time with	nin which the Oblig	gee may accept such	bid, and said Surety does h	ereby
waive r	paired or affected by any extension notice of any such extension. WITNESS, the following signatu	ion of the time with	nin which the Oblig incipal and Surety,	gee may accept such	bid, and said Surety does h	ereby
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waive r Surety	paired or affected by any extension of the control of any such extension. WITNESS, the following signature, or by Principal individually if Principal Seal	ion of the time with	nin which the Oblig incipal and Surety, I, this 25th day	executed and sealed of April Danhill Construct By Color (Must be P Dul Robert D. Hill Ohio Farmers Ins	tion Company Name of Principal) Tresident, Vice President, or ly Authorized Agent President (Title) Surance Company Name of Surety) Resident Agent Altorney in Fa	ereby
Surety Surety	paired or affected by any extension of the following signature or by Principal individually if Principal Seal	ion of the time with	nin which the Oblig incipal and Surety, I, this 25th day	executed and sealed of April Danhill Construct By Color (Must be P Dul Robert D. Hill Ohio Farmers Ins	tion Company Name of Principal) Tresident, Vice President, or ly Authorized Agent President (Title) Surance Company Name of Surety) Resident Agent Altorney in Fa	ereb
Surety Surety	paired or affected by any extension of the control of any such extension. WITNESS, the following signature, or by Principal individually if Principal Seal	ion of the time with	nin which the Oblig incipal and Surety, I, this25thday	executed and sealed of April Danhill Construct By Color (Must be P Dul Robert D. Hill Ohio Farmers Ins	tion Company Name of Principal President, Vice President, or ly Authorized Agent) President (Title) Surance Company Name of Surety) Resident Agent Authorized Agent	al and
Surety Surety	paired or affected by any extension of the following signature or by Principal individually if Principal Seal	ion of the time with	nin which the Oblig incipal and Surety, I, this25thday	executed and sealed of April Danhill Construct By Color (Must be P Dul Robert D. Hill Ohio Farmers Ins	tion Company Name of Principal) Tresident, Vice President, or ly Authorized Agent President (Title) Surance Company Name of Surety) Resident Agent Altorney in Fa	al and

General Power of Attorney POWER NO. 4752152 06

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

CERTIFIED COPY

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, JEREMY B. STANLEY, TERRI L. DODRILL,

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 suretyship in any penal limit.

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

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

"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, 2000).

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 03rd day of OCTOBER A.D., 2022

Corporate HSURANC Seals Affixed

State of Ohio County of Medina

ATIONAL INS The state of the s

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

By: Gary W. Stumper, National Surety Leader and Senior Executive

On this 03rd day of OCTOBER A.D., 2022, before me personally came Gary W. Stumper to me known, who, being by me duly sworn, did depose and say, that he resides in Medina, OH; 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.:

SS.:

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

I, 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 Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this 25th day of A.D., 2024 April

The state of the s



Frank A. Carrino, Secretary

BPOAC2 (combined) (03-22)

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.

necessary revisions to my proposar, plans and/or specification, etc.
Addendum Numbers Received: (Check the box next to each addendum received)
Addendum No. 1 Addendum No. 6 Addendum No. 2 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 any verbal representation made or assumed to be made during any ora 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.
Danhill Construction Company
Company
Robert D. Hill
Authorized Signature
April 25, 2024
Date
NOTE: This addendum acknowledgement should be submitted with the bid to expedite

Revised 8/24/2023

document processing.

REQUEST FOR QUOTATION Watoga State Park Bathhouse/Restroom Upgrades

- **9. SUBSTITUTIONS:** Any substitution requests must be submitted in accordance with the official question and answer period described in the INSTRUCTIONS TO VENDORS SUBMITTING BIDS, Paragraph 4. Vendor Question Deadline.
- 10. FACILITIES ACCESS: Performance of Contract Services may require access cards and/or keys to gain entrance to Agency's facilities. In the event that access cards and/or keys are required:
 - **10.1.** Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
 - **10.2.** Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
 - **10.3.** Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
 - **10.4.** Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
 - 10.5. Vendor shall inform all staff of Agency's security protocol and procedures.

11. MISCELLANEOUS:

11.1. 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 Manag	er: Luke Begovich
Telephone Numb	oer: (304) 951-3096
Fax Number: _	(304) 632-1501
Email Address:	Luke.Begovich@danhillconstruction.com



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

Ι, _	Robert D. Hill	, after being first duly sworn, depose and state as follows:
1.	I am an employee of _	Danhill Construction Company; and, (Company Name)
2.	I do hereby attest that	Danhill Construction Company (Company Name)
		n for a drug-free workplace policy and that such plan and e with West Virginia Code §21-1D.
The	e above statements are sw	orn to under the penalty of perjury.
		Printed Name: Robert D. Hill
		Signature: Robert D. Half
		Title: President
		Company Name: Danhill Construction Company
		Date: April 25, 2024
ST	ATE OF WEST VIRGINIA,	
СО	UNTY OFFayette	, TO-WIT:
Tak	ken, subscribed and sworn	to before me this <u>25</u> day of <u>April</u> , <u>2024</u> .
Ву	Commission expiresJu	ly 27, 2026
(Se	OFFICIAL S NOTARY PU STATE OF WEST Cheryl Lynn La Danhill Constr 9033 Midland Trail, Glen I My Commission Expire	BLIC VIRGINIA wrence ruction Ferris, WV 25090

ACORD...

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/29/2023

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

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

PRODUCER	CONTACT NAME:	
McGriff Insurance Services LLC	PHONE (A/C, No, Ext): 304 346-0806	FAX (A/C, No):
300 Summers Street, Suite #650	E-MAIL ADDRESS: CertificatesVAWV@mcgriff.com	
Charleston, WV 25301	INSURER(S) AFFORDING COVERAGE	GE NAIC#
304 346-0806	INSURER A: Westfield National Insurance Compan	y 24120
INSURED	INSURER B : Brickstreet Mutual Insurance Compan	ny 12372
Danhill Construction Company	INSURER C:	
P O Box 685	INSURER D :	
Gauley Bridge, WV 25085	INSURER E :	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 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.

	ACLUSIONS AND CONDITIONS OF SUCH					BY PAID CLAI	1013.	
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	X COMMERCIAL GENERAL LIABILITY	X	X	TRA0548113	07/01/2023	07/01/2024		\$2,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$500,000
	X XCU Included						MED EXP (Any one person)	\$5,000
	X Contractual Liab.						PERSONAL & ADV INJURY	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	POLICY X PRO-						PRODUCTS - COMP/OP AGG	\$2,000,000
	OTHER:							\$
Α	AUTOMOBILE LIABILITY	Х	Х	TRA0548113	07/01/2023	07/01/2024	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
1	X ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								\$
Α	X UMBRELLA LIAB X OCCUR			TRA0548113	07/01/2023	07/01/2024	EACH OCCURRENCE	\$7,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$7,000,000
	DED X RETENTION \$0							\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		Х	WCB1008781	07/01/2023	07/01/2024	X PER STATUTE OTH-	
	AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A		Includes	Employers	Liability	E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)	11.7		Broad	Form	Section	E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below			23-4-2	of WV	Code	E.L. DISEASE - POLICY LIMIT	\$1,000,000
Α	3rd Party Crime			TRA0548113	07/01/2023	07/01/2024	\$100,000 Limit	
-		-						

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

** Workers Comp Information **

Voluntary Compensation; Other States Coverage

Proprietors/Partners/Executive Officers/Members Excluded:

Robert Hill, President

Rebecca Hill, Secretary/Treasurer

(See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

Danhill Construction Company P O Box 685 Gauley Bridge, WV 25085 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Greeny 6. Stanly

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	DESCRIPTIONS (Continued from Page 1)	
Evidence of Coverage		
Evidence of Coverage		