01/14

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FSCONST



FREDEKING/STAFFORD CONSTRUCTION COMPANY

203 INDUSTRIAL STREET • P. O. BOX 1232
PRINCETON, WV 24740
PHONE: 304-425-2534 • FAX: 304-487-5750
www.fredekingstafford.com
WV Lic. 011017 VA Lic. 2705 060859A

FAX COVER SHEET

TO: Department of Admin stration, Purchasing Division

2019 Washington Stire it: East

Charleston, West Virgi iia 25305-0130

VENDOR NAME: Fredeking Stafford Construction Co.

204 Ind.:: rial Street/PO Box 1232 Princetor West Virginia 24740

VENDOR CUSTOMER COLIE 000000207450

BUYER: Larry D. McDonne

SOLICITATION NO.: CRFQ () 32 DCH2400000004

BID OPENING DATE: Janua y 24, 2024

BID OPENING TIME: 1:30 F W EST

FAX NUMBER: 304-558-39 ()

PRINCIPAL CONTACT:

VENDOR CONTACT PHONE

VENDOR SIGNATURE:

FEIN#: 55-0710162

WY PURCHASING

12:21 MA TO NAL 4202

BECEINED

SECTION 00 41 13 - MULTIPLE PRIME - BID FORM - CONTRACT 1

TO: WV Purchasirig [please reference CRFQ 0432 DCH2400000004)

BIDDERS:

Having examined the sla and all plans, specifications and all regulations attached and all addenda for the construction of the Ren vations/Repairs to the Bramwell Depot for the WV Department of Arts, Culture and History as preparia by E. T. Boggess, Architect, Inc., 101 Rockledge Avenue, Princeton, West Virginia 24740. We (or submit the following proposal:

MUPTIPLE PRIME: BENERAL CONSTRUCTION (CONTRACT 1)

TIME OF COMPLETIO &

We (or I) propose to full lish all labor and materials and do all work complete as called for in the plans and specifications for the entirety of the above-named project and all related work in ____300 consecutive calendar d lvs.

GENERAL CONSTITUCTION BASE BID - FOR THE SUM OF:

BASE BID: Two lundred Fifty One Thousand Dollars (\$ 251,000.00)

LINE ITEMS: (Incline and as part of Base Bld)

Line item No. 1: The le is an unknown amount of existing roof sheathing and wood soffit material that has reclived water damage and will need to be replaced as part of the work. For bidding purposes, contractor to remove approximately 1,080 sf of material (soffit and roof sheathing each) and replace with similar materials, look and thickness, and paint to match adjacent. The removal and replacement of the soffit and sheathing material to be provided in line item lost #1.

Twenty Mine Triousand Five Hundred

Line item No. 2: Co irractor to include cost to repair/ replace and paint 250 if of siding material. (Demo areas of sidir 3 material that have been damaged and/or showing deterioration, replace with similar product/ naterial. Paint to match adjacent.

Fourteen Thousand Two Hundred Dollars (\$ 14,200.00)

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SECTION 00 41 13 - MULTIPLE PRIME - BID FORM - CONTRACT 1

extensions ends. (De	ractor to include cost to repair/ replace and p no areas of rafter extensions only to exterior showing deterioration. A structural plate @ s it.)	of bearing point, that have
Eleven Thousic (Written)	ed Four Hundred	Dollars(\$ 11,400.00
Line Item No. 4: Cor penetrations and dorn	ractor to include cost to remove and re-caulk lers for a watertight construction seal.	around all existing roofing
Five Thousas (Written)	d Three Hundred	Dollars(\$ 5,300.00)
ALTERNATES (Relia	to Specification Section 01 23 00)	
clean, prep exterior to beams, soffit areas, v	the amount to ADD to the base bid to provide a receive new paint. Paint all exposed wood are now frames and divided lites and doors. Alteerior, other than the metal roof.	as, siding, trim, exposed ratters,
ADD X Fifty Four (Written)	Thousand	_Dollars(\$ 54,000.00)
the removal of and in	he amount to ADD to the base bid to provide all lallation of a new snap lock standing seam meta statent with the existing roof make-up. The new and A6.3.	I root per the specifications. Root
One Hundred (Written)	Fifty One Thousand Seven Hundre	Dollars(\$ 15(,700,00)
Alternate 3: Indicate the removal of and re	the amount to ADD to the base bid to provide a stallation of the existing standing seam roof as p	I labor and materials required for art of the remediation process.
ADD (Written)	Bid	Dollars (\$ No Bid

Jan 24 2024 12:23pm

04/01/2013 20:54 3044875750

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SECTION 00 41 13 - MULTIPLE PRIME - BID FORM - CONTRACT 1

plans and specifications	acknowledges the receipt of and in the preparation of this Bld: receipt of Addendum may be car	d use of the following Addenda issued to the
Addendum No. 1, date d	12 15 2023	Addendum No. 2, dated 12/28/2023
Addendum No. 3, dated	1 05 2024	Addendum No. 4, dated 1 12 202 +
Addendum No. 5, datec		Addendum No. 6, dated
SUBMISSION OF ISI	78 1	
Respectfully submitted	ils	anciary (month), 2024.
By: Fradelen 50:2 (Name of bidding fi	ta d Tanh Co. Address n or corporation)	s: 204 Industrial St.
By: (Signature)	m /	Princeton U.V. 24740
By: Tade Fri:6 (Type or Print Nair	Phone	304-425-2534
Title: Practol-15 (Owner/Partner/ 13	Email: sident/ Vice President)	sacktredeling gmail. Tor
Federal ID No.: 55	0710162	

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A DDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ DCH24*04

Instructions: Please at mowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledge and form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: In reby acknowledge receipt of the following addenda and have made the necessary revisions to v y proposal, plans and/or specification, etc.

Addendum Numbers] seeived: (Check the box next to such addendum rec	eivec	i)	
[Addendt in No. 1	[]	Addendum No. 6
[Adden:h m No. 2	[]	Addendum No. 7
[] Adden: t m No. 3	[1	Addendum No. 8
[Addend m No. 4]	J	Addendum No. 9
[] Addend m No. 5	[]	Addendum No. 10

I understand that failur 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 vorticing and added to the specifications by an official addendum is binding.

Fredeking	Stafford	Construction	Co
	Company		
() O X J	in		
	Authorized	Signature	
1/24/2024			_
	Date		

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

Revised 6/8/2012

CONTRACTOR LICENS

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West Virginia Contractor Licensing Board

JMBER

ASSIFICATION:

NERAL BUILDING

FREDEKING STAFFORD CNSTRCTN CO DBA FREDEKING STAFFORD CHSTRCTN CO PO BOX 1232. PRINCETON, WV 24740

DATE ISSUED

EXPIRATION DATE

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 adventsements, 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,

3044875750

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Fredeking-Stafford Construction, Inc. P.O. Box 1232 Princeton WW 24740

CE RTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/24/2023

REPRESENTATIVE OR PRODUCER, AN THE CERTIFICATE HOLDER.

Georga H. Friedlander Company 1566 Kanawha Blvd. E. Charleston WV 25311 INSURED

THIS CERTIFICATE IS ISSUED AS A M . ITER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIN ILY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSIL MANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED

IMPORTANT: If the certificate holder is in ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject 1 the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights :: he certificate holder in lieu of such endorsement(s).

	NAME: Jeff O'Delt			
	PHONE [A/C No. Ext): 304-357-4520 FAX [A/C, No.]: 304-		45-8724	
	E-MAIL ADDRESS: jeffodell@friedlandercompany.com			
	INSURER(8) AFFORDING CO	VERAGE	NAIC#	
	INSURER A: Westfield Insurance	_0.0	24112	
FRESOO1	INSURER B : Encova Insurance	27	12372	
	INSURER C:			
	INSURER D :	-		
	INSURER E :		¥	
	INSURER F :		1011011110	

REVISION NUMBER:

COVERAGES

CEIII FICATE NUMBER: 56053807

THIS IS TO CERTIFY THAT THE POLICIE: F INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY RISE LIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY RITAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS.

E	KCLUSIO	NS AND CONDITIONS OF SUCH F	DUCK	S. LIMITS SHOWN MAY HAVE BE	EN REDUCED BY	PAID CLAIMS		
INSR		TYPE OF INSURANCE	IDUSUI	POLICY NUMBER	(MM/DDYYYY)	POLICY EXP	LUMIT	5
A		MERCIAL GENERAL LIABILITY		CWP3294164	1/29/2023	1/28/2024	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000
		CLAIMS-MADE X OCCUR	- 1				PREMISES (Ea occurrence)	\$ 500,000
		1					MED EXP (Any one person)	\$ 5,000
			- 1	1			PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AC	GGREGATE LIMIT APPLIES PER:				r'	GENERAL AGGREGATE	\$2,000,000
		ICY X PRO. LOC					PRODUCYS - COMP/OP AGG	\$2,000,000
	OTH	IER:						S
A		BILE LIABILITY	-	CWP3294164	1/29/2023	1/29/2024	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X ANY	AUTO			1		BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS ONLY HIRED NON-OWNED					BODILY INJURY (Per accident)	\$	
			4			PROPERTY DAMAGE (Par accident)	\$	
	TUA H	OS ONLY AUTOS ONLY					TO BE MESSESSIE	s
_	X UME	BRELLA LIAB X OCCUR	-	CWP3294184	1/29/2023	1/29/2024	EACH OCCURRENCE	\$ 5,000,000
	\rightarrow	CLAIMS-MAD					AGGREGATE	\$ 5,000,000
	DEC	IVI -						s
В	WORKER	S COMPENSATION		WCN6008282	1/29/2023	1/29/2024	X PER OTH-	
ľ	AND EMPLOYERS LIABILITY			1		E.L. EACH ACCIDENT	\$1,000,000	
	ANYPROPRIETOR/PARTNER/EXECUTIVE N OFFICER/MEMBEREXCLUDED?		IA		2		E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	If yes, des	oribe under YION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
				·				
			10					
	1		-		1 0 1 17 0			

DESCRIPTION OF OPERATIONS / LOCATIONS / VENI 🖫 (ACORD 101, Additional Remarks Schedula, may be attached if more space is required) WC includes Broad Form Employers Liab lit . WV 23-4-2 Evidence of 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

AUTHORIZED REPRESENTATIVE

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Agency Division of Culture and History REQ.P.O#_DCH2400000004

BID BOND

	Fredokina/Stafford Construction Company Inc
KNOW ALL MEN BY THE	PRESENTS, That we, the undersigned, Fredeking/Stafford Construction Company, Inc. Princeton, WV 24740 as Principal, and Harco National Insurance Company
of 203 Industrial Street	
of 702 Obedin Road	Raleigh, NC 27605, a corporation organized and existing under the laws of the State of
	lice in the City of Newark as Surety, are held and firmly bound unto the State
of West Virginia, as Obligee, in the p	and sum of the factority of blad attourt /4
well and truly to be made, we jointly	and severally blind ourselves, our heirs, administrators, executors, successors and assigns.
The Condition of the abo	is obligation is such that whereas the Principal has submitted to the Purchasing Section of the
	In bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for
	of Repairs and HVAC Upgrades
NOW THEREFORE,	
(a) If said bid shall :x (b) If said bid shall !	rejected, or accepted and the Principal shall enter into a contract in accordance with the bid or proposal
a delayed bards and about burniels a	with the stands and incurance required by the bid of proposal, and shall in all other respects perform
the common and bottom from according	since of said bld, then this obligation shall be null and vold, otherwise this obligation shall remain in inderstood and agreed that the liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of	ils obligation as herein stated.
The Surety, for the value to way impaired or affected by any a waive notice of any such extension.	ceived, hereby stipulates and agrees that the obligations of seld Surety and its bond shall be in no liansion of the time within which the Obligee may accept such bid, and said Surety does hereby
WITNESS the following si	natures and seals of Principal and Surety, executed and sealed by a proper officer of Principal and
	Principal is an individual, this 9th day of January 2024
	Fredeking/Stafford Construction Company, Inc.
Principal Seal	(Name opprincipal)
	By My Company
	(Must be President, Vice President, or
	Duly Authorized Agent)
	President
200 g	(Title)
* * *	Harco National Insurance Company
Surety See	(Mama of Surety)
· -\	

IMPORTANT - Surety executing ands must be licensed in West Virginia to transact surely insurance, must affix its seal affixed.

Bond #

09/14

POWER OF ATTORNEY

H RCO NATIONAL INSURANCE COMPANY

INTEL NATIONAL FIDELITY INSURANCE COMPANY

Member companies of IAT I is strance Group, Headquartered: 702 Oberlin Road, Raleigh, North Carolina 27605

KNOW ALL MEN BY THESE PRESENTS and HARCO NATIONAL INSURANCE COMPANY, a corporation organized and existing under the lews of the State of Illinois, and INTERNATIONAL I DELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and having their principal offices Ico ed respectively in the cities of Rolling Meadows, Illinois and Newark, New Jersey, do hereby constitute and

RICHARD L. HIGGINBOTHAM, BIJ INIE MARIE PERRINE, JEFFERY O'DELL, ROBIN HUBBARD-SHERROD, LISA G. **ASBURY**

Charleston, WV

04/01/2013 20:54

force and effect as though manually affice: i.

their true and lawful attorney(s)-in-fact to elecute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in in nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said HARCO NATIONAL INSURANCE COMPANY and INTERNATIC LIAL FIDELITY INSURANCE COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by it if regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Lews of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURAN SE COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY N IJRANCE COMPANY at a meeting duly held on the 13th day of December, 2018 Directors of HARCO NATIONAL INSURAN E COMPANY at a meeting held on the 13th day of December, 2018.

"RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Sentor Vice President, Vice President, or Secretary of the Corporation shall have the power to appoint and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and in the written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointment: I joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute walvers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or can inxation given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related in mato, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of suc officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same

IN VM MESS WHEREOF, HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FID :: "I'Y INSURANCE COMPANY have each executed and attested these presents

31st day of December, 2023

STATE OF IEW JERSEY

County o' E islext

STATE OF ILLINOIS County of Cook

Kenneth Chapman

Executive Vice President, Harco National Insurance Company and International Fidelity Insurance Company

On this 31st day of December, 2023

said Corporate Seals and his signature were thuly affixed by order of the Boards of Directors of said Companies.

, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the then in described and authorized officer of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANC: 10MPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the



I TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, law Jersey the day and year first above written.

Shirelle A. Outley a Notary Public of New Jersey My Commission Expires April 4, 2023

CERTIFICATION

I, the undersigned officer of HARCO NATIO HAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the origular saids on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the sald originals, and that the said "ower of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have here and like they hand on this day. January 09, 2024

Subcit fractor List Submission (Construction Contracts Only)

Bidder's Name: Fredeking St. Pf. Catalian Co.				
Check this box if r	subcontractors will perfor	rm more than \$25,000.00 of work to complete the		
Subcontractor Name		License Number if Required by W. Va. Code § 21-11-1 et. seq.		
Frye Roofing	Ine.	WV001003		
David Petitt P	sinting LLC	WV032647		

<u> </u>				
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-		***		
		42.00		
	. •	in the second se		
	-			

Attach additional pages finecessary

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DESIGNATED CONT ACT: 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 a	id Title) David Graham - General Mangger
(Address)	204 Industrial Street Princeton WV 24740
(Phone Number	(Fax Number) 304-425-2534 / 304-487-5750
(email address)	davide fredelingstafford. com
through wvOASIS, I ce	D SIGNATURE: By signing below, or submitting documentation if that: I have reviewed this Solicitation/Contract in its entirety; that I ents, terms and conditions, and other information contained herein; that
this bid, offer or propos	l constitutes an offer to the State that cannot be unilaterally withdrawn;
	that product or service, unless otherwise stated herein; that the Vendor
accepts the terms and or	additions contained in the Solicitation, unless otherwise stated herein; that
	offer or proposal for review and consideration; that this bid or offer was standing, agreement, or connection with any entity submitting a bid or
	al, supplies, equipment or services; that this bid or offer is in all respects
	a or fraud; that this Contract is accepted or entered into without any prior
	It, or connection to any other entity that could be considered a violation of
-	by the Vendor to execute and submit this bid, offer, or proposal, or any
	o on Vendor's behalf; that I am authorized to bind the vendor in a
	and that to the best of my knowledge, the vendor has properly registered
with any State agency t	at may require registration.
By signing below, I fur	er certify that I understand this Contract is subject to the
provisions of West Virg	pia Code § 5A-3-62, which automatically voids certain contract
clauses that violate Sta	law; and that pursuant to W. Va. Code 5A-3-63, the entity
entering into this contr	ct is prohibited from engaging in a boycott against Israel.
Fridely Ste	ford Const. To.
Company)	
Signature of Authorized	Representative)
Saclo Fredeli	1/24/24
Printed Name and Title	of Authorized Representative) (Date)
	(304) 487-5750
Dhone Number) (For III	(mhor)
davide fredell	my stofford. eom
Email Address)	

ESCONST

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REQUEST FOR QUOTATION Coal Heritage 1 rail Interpretation Center Roof Repairs and HVAC Upgrades CRFQ DCH24*04

Parkersburg Marietta Contractors Association

25 35 Emerson Avenue

likersburg, WV 26104

19 one: 304-485-6485

Jan.: 304-428-7622

E aail: pmcadesk@gmail.com

- 13. SUBSTITUTIONS: Any substitution requests must be submitted in accordance with the official question an answer period described in the INSTRUCTIONS TO VENDORS SUBMITTING BID: , Paragraph 4. Vendor Question Deadline.
- 14. FACILITIES ACCE SS: 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:
 - 14.1. Vendor no st identify principal service personnel which will be issued access cards and/or key to perform service.
 - 14.2. Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
 - 14.3. Vendor sin Il notify Agency immediately of any lost, stolen, or missing card or key.
 - 14.4. Anyone per forming under this Contract will be subject to Agency's security protocol and proceed gres.
 - 14.5. Vendor shull inform all staff of Agency's security protocol and procedures.

15. MISCELLANEOUS:

15.1. Contract W inager: During its performance of this Contract, Vendor must designate and mainta has primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal build less hours to address any customer service or other issues related to this Contract. Wendor should list its Contract manager and his or her contact information below.

Contract Manager: David Graham

Telephone Number: 304-920-2465

Fax Number: 304 - 487 - 5750

Email Address: __david efredekingstafford. com

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FSCONST

REQUEST FOR QUOTATION

Coal Heritage 'I' ail Interpretation Center Roof Repairs and HVAC Upgrades

CRFQ DCH24*04

	Name: David Graham
~	Telephone Number: 304-920-2465
	Fax Number:304-487-5750
	Email Address: davide fredeking stafford. com

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Rev. July 7, 2017

WV-73 Approved / April 30, 2020



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

Ĭ,	David Graham	, after being first duly sworn, depose and state as follows:
1.	I am an employee of F	redeking Stiffel Contaction Co; and, (Company Name)
2.	I do hereby attest :hat _	Fredeking Stefford Contaction Co. (Company Name)
	maintains a writte plan policy are in comp ance	for a drug-free workplace policy and that such plan and with West Virginia Code §21-1D,
The a	bove statements ar : swor	n to under the penalty of perjury.
		Printed Name: David Grohen
		Signature: Signature:
		Title: General Manager
		Company Name: Fredoking Stoffel Contrato Co.
		Date: 1 15 2024
STATE	E OF WEST VIRGIN: 4,	
COUN	TY OF Mere:	, TO-WIT:
Taken	, subs cribed and so orn to	before me this 19th day of Sanuary, 2024.
Ву Со	mmission expires <u>17-2</u>	7-2025
(Seal)	DONNA A BRS Notary Public Seal State of We: the Seal My Comm. Expinis ut 27, 202 250 Monoglow Drive Levy WV 2597	(Notary Public) Rev. July 7 2017