

REQUEST FOR QUOTATION  
Complete roofing system Equipment Division Shop  
83 Brushy Fork Crossing, Buckhannon, WV 26201

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**EXHIBIT A – Pricing Page**

Cl

**Installation of Roof at:  
83 Brushy Fork Crossing  
Buchannon, WV 26201**

RECEIVED

2025 JUN 10 PM 12: 12

WV PURCHASING  
DIVISION

**DATE:** 06/10/2025

**VENDOR NAME:** Eskola, LLC

**AUTHORIZED SIGNATURE:**

**The aforementioned, hereinafter referred to Vendor, being familiar with and understanding the bidding documents and also having examined the site and being familiar with all local conditions affecting the project hereby proposes to furnish all labor, equipment, and supplies, and transportation and to perform all work in accordance with the bidding documents within the time set forth for the sum of.**

**BASE BID:**

**For the lump sum of: \$** 2,956,859.00

**(show amount in numbers)**

Two Million, Nine Hundred Fifty Six Thousand, Eight Hundred Fifty Nine

**(show amount in words)**

**(In the event of a difference between the written amount and the number amount, the written amount shall govern.)**

**CONTRACT AWARD:**

**The contract shall be awarded to the vendor that provides the lowest overall lump sum cost.**

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**EXHIBIT B – PROJECT PLANS**

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- 11.1. Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
- 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:** Josh Bates

**Telephone Number:** 865-919-0611

**Fax Number:** 423-318-2198

**Email Address:** jbates@eskolaroofing.com



**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) Jordan Biery

(Address) 5306 Manchester Ave, Morristown, TN 37813

(Phone Number) / (Fax Number) 423-438-7836 / 423-318-2198

(email address) jbiery@eskolaroofing.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 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.

Eskola, LLC

(Company)

Ty Konkle

(Signature of Authorized Representative)

Ty Konkle, Sr. Estimator

(Printed Name and Title of Authorized Representative) (Date)

423-438-8202 / 423-318-2198

(Phone Number) (Fax Number)

ty@eskolaroofing.com

(Email Address)

State of West Virginia  
Purchasing Division

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## CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

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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.

**Instructions:** 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: Equipment Division Shop Roof Replacement, 83 Brushy Rd Crossing, Buckhannon, WV

Agency Requesting Work: Eskola, LLC

**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: Eskola, LLC

Vendor Telephone: 423-438-8202

Vendor Address: 5306 Manchester Ave  
Morristown, TN 37813

Vendor Fax: 423-318-2198

Vendor E-Mail: ty@eskolaroofing.com




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

I, Ben Eskola, after being first duly sworn, depose and state as follows:

1. I am an employee of Eskola, LLC; and,  
(Company Name)
2. I do hereby attest that Eskola, LLC  
(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 above statements are sworn to under the penalty of perjury.

Printed Name: Ben Eskola  
Signature:   
Title: Vice President  
Company Name: Eskola, LLC  
Date: 06/09/2025

STATE OF ~~WEST VIRGINIA~~, Tennessee

COUNTY OF Trousdale, TO-WIT.

Taken, subscribed and sworn to before me this 9th day of June, 2025.

By Commission expires 06/29/27



  
(Notary Public)

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFQ DOT250000066**

**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)

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3            | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4            | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5            | <input type="checkbox"/> 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.

Eskola, LLC

Company



Authorized Signature

06/09/2025

Date

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





# CONTRACTOR LICENSE

AUTHORIZED BY THE  
West Virginia Contractor  
Licensing Board

NUMBER: WV057794

CLASSIFICATION:

SPECIALTY  
ROOFING

ESKOLA LLC  
DBA ESKOLA LLC  
PO BX 26367  
KNOXVILLE, TN 37912

DATE ISSUED

EXPIRATION DATE

JUNE 26, 2024	JUNE 26, 2025
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Authorized Signature

Chair, West Virginia Contractor  
Licensing Board



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.



# Business Entity Details

## Main

Name: ESKOLA, LLC			Organization Number: 458566	
Type: LLC	Sec Type:	City: MORRISTOWN	Class: P	Ch Type: F
Eff Date: 7/18/2018	Fil Date: 7/18/2018	Term Date: 7/5/2054	Term Reason: X	AW/Term: T
CH County:	Ch State: WV	Bus Purp: 2362	Ex Acres:	Term Yrs: 36
Auth Shrs:	Cap Stck:	Status: Active	Par Val:	MGMT: MBR

## Addresses

Principal Office Address:	Name:	Addr1: 2418 N MORELOCK ROAD	Addr2:	City: MORRISTOWN	State: TN	Zip: 37814
Designated Office Address:	Name:	Addr1: 2418 N MORELOCK ROAD	Addr2:	City: MORRISTOWN	State: TN	Zip: 37814
Notice of Process Address:	Name: JON ESKOLA	Addr1: 2418 N MORELOCK ROAD	Addr2:	City: MORRISTOWN	State: TN	Zip: 37814
Mailing Address:	Name:	Addr1: P O BOX 26367	Addr2:	City: KNOXVILLE	State: TN	Zip: 37912

## Officers

Member:	Name: JON ESKOLA	Addr1: 2418 N MORELOCK ROAD	Addr2:	City: MORRISTOWN	State: TN	Zip: 37814
Member:	Name: BENJAMIN ESKOLA	Addr1: 2418 N MORELOCK ROAD	Addr2:	City: MORRISTOWN	State: TN	Zip: 37814

## DBAs

No Records Found.

## Names

[Privacy - Terms](#)

No Records Found.

### Mergers

No Records Found.

### Subsidiaries

No Records Found.

### Amendments

No Records Found.

### Dissolutions

No Records Found.

### Annual Reports

Filing For	Date Filed
2022	7/1/2022
2021	1/20/2021
2020	1/20/2021
2019	7/1/2019

### With this information, you can...

#### Purchase Certificate of Authorization

If you would like to purchase a Certificate of Authorization for this business entity, select the button to the left to add the certificate to your shopping cart. You will be assessed a \$10.00 fee for each certificate. Click the Shopping Cart link in the upper right corner to complete your order.

[Back To Search Results](#)

[Search Again](#)

Agency \_\_\_\_\_  
REQ.P.O# \_\_\_\_\_

**BID BOND**

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Eskola, LLC  
of Morristown TN as Principal, and Everest Reinsurance Company  
of Warren NJ, a corporation organized and existing under the laws of the State of  
DE with its principal office in the City of Warren, as Surety, are held and firmly bound unto the State  
of West Virginia, as Obligee, in the penal sum of Five Percent of Amount Bid (\$ 5%) for the payment of which,  
well and truly to be made, we jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the  
Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for  
Equipment Division Shop Roof Replacement, CRFQ 0803 DOT2500000066

**NOW THEREFORE,**

- (a) If said bid shall be rejected, or
- (b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal  
attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform  
the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in  
full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no  
event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no  
way impaired or affected by any extension of the time within which the Obligee may accept such bid, and said Surety does hereby  
waive notice of any such extension.

WITNESS, the following signatures and seals of Principal and Surety, executed and sealed by a proper officer of Principal and  
Surety, or by Principal individually if Principal is an individual, this 10th day of June, 2025

Principal Seal

Eskola, LLC  
(Name of Principal)  
By: [Signature]  
(Must be President, Vice President, or  
Duly Authorized Agent)  
Vice President  
(Title)

Surety Seal



Everest Reinsurance Company  
(Name of Surety)

Signed by:  
By: Catherine L. McMillan  
Catherine L. McMillan  
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.**



**POWER OF ATTORNEY  
EVEREST REINSURANCE COMPANY and EVEREST NATIONAL INSURANCE COMPANY**

KNOW ALL PERSONS BY THESE PRESENTS: That Everest Reinsurance Company and Everest National Insurance Company, corporations of the State of Delaware ("Company") having their principal offices located at 100 Everest Way, Warren Corporate Center, Warren, New Jersey, 07059, do hereby nominate, constitute, and appoint: **Catherine L. McMillan**

Bond No.: Bid Bond

Principal: Eskola, LLC

Obligee: State of West Virginia, Department of Administration, Purchasing Division

its true and lawful Attorney(s)-in-fact to make, execute, attest, seal and deliver for and on its behalf, as surety, and as its act and deed, where required, any and all bonds and undertakings in the nature thereof, for the penal sum of no one of which is in any event to exceed UNLIMITED, reserving for itself the full power of substitution and revocation.

Such bonds and undertakings, when duly executed by the aforesaid Attorney(s)-in-fact shall be binding upon the Company as fully and to the same extent as if such bonds and undertakings were signed by the President and Secretary of the Company and sealed with its corporate seal.

This Power of Attorney is granted and is signed by facsimile under and by the authority of the following Resolutions adopted by the Board of Directors of Company ("Board") on April 21, 2016:

*RESOLVED, that the President, any Executive Vice President and any Senior Vice President are hereby appointed by the Board as authorized to make, execute, seal and deliver for and on behalf of the Company, any and all bonds, undertakings, contracts or obligations in surety or co-surety with others and that the Secretary or any Assistant Secretary of the Company be and that each of them hereby is authorized to attest to the execution of any such bonds, undertakings, contracts or obligations in surety or co-surety and attach thereto the corporate seal of the Company.*

*RESOLVED, FURTHER, that the President, any Executive Vice President and any Senior Vice President are hereby authorized to execute powers of attorney qualifying the attorney named in the given power of attorney to execute, on behalf of the Company, bonds and undertakings in surety or co-surety with others, and that the Secretary or any Assistant Secretary of the Company be and that each of them is hereby authorized to attest the execution of any such power of attorney, and to attach thereto the corporate seal of the Company*

*RESOLVED, FURTHER that the signature of such officers named in the preceding resolutions and the corporate seal of the Company may be affixed to such powers of attorney or to any certificate relating thereto by facsimile, and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be thereafter valid and binding upon the Company with respect to any bond, undertaking, contract or obligation in surety or co-surety with others to which it is attached*

IN WITNESS WHEREOF, Everest Reinsurance Company and Everest National Insurance Company have caused their corporate seals to be affixed hereto and these presents to be signed by their duly authorized officers this 22nd day of March 2023



Everest Reinsurance Company and Everest National Insurance Company

By: Anthony Romano, Senior Vice President

On this 22<sup>nd</sup> of March 2023, before me personally came Anthony Romano, known to me, who, being duly sworn, did execute the above instrument, that he knows the seal of said Company, that the seal affixed to the aforesaid instrument is such corporate seal and was affixed thereto, and that he executed said instrument by like order

LINDA ROBINS  
Notary Public, State of New York  
No 01R06239736  
Qualified in Queens County  
Term Expires April 29, 2027

Linda Robins, Notary Public

I, Sylvia Semerdjian, Assistant Secretary of Everest Reinsurance Company and Everest National Insurance Company do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Section of the bylaws and resolutions of said Corporation as set forth in said Power of Attorney, with the ORIGINALS ON FILE IN THE HOME OFFICE OF SAID CORPORATION, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect **IN WITNESS WHEREOF**, I have hereunto set my hand and affixed the seal of said Company, this 10th day of June 2025



By: Sylvia Semerdjian, Assistant Secretary