Johnson Controls, Inc Controls Group 4132 First Avenue P.O. Box 776 Nitro, WV 25143 Tel. 304/755-4353 Service 304/755-3387 FAX 304/755-0765



Buyer: 21

Re: RFQ Number DRS070319

The RFQ dated and signed on 10/17/2006 and submitted on 11/01/2006 supersedes any previous bids submitted by Johnson Controls, Inc.

Respectfully, Scott A Cross Johnson Controls, Inc.



DOCZMA

RFQ COPY

PO BOX 776

TYPE NAME/ADDRESS HERE

JOHNSON CONTROLS INC. 4132 FIRST AVENUE

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

DRS070319

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DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

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INSTITUTE, WV

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GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- Awards will be made in the best interest of the State of West Virginia.
- 2. The State may accept or reject in part, or in whole, any bid.
- 3. All quotations are governed by the West Virginia Code and the Legislative Rules of the Purchasing Division.
- 4. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125.00 registration fee.
- All services performed or goods delivered under State Purchase Orders/Contracts are to be continued for the term of the Purchase Order/Contract, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, this Purchase Order/Contract becomes void and of no effect after June 30.
- 6. Payment may only be made after the delivery and acceptance of goods or services.
- 7. Interest may be paid for late payment in accordance with the West Virginia Code.
- 8. Vendor preference will be granted upon written request in accordance with the West Virginia Code.
- The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 10. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 11. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.
- 12. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
- 13. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, this contract is automatically null and void, and is terminated without further order.
- 14. HIPAA Business Associate Addendum The West Viginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, and available online at the Purchasing Division's web site (http://www.state.wv.us/admin/purchase/vrc/hipaa.htm) is hereby made part of the agreement. Provided that, the Agency meets the definition of a Covered Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.

INSTRUCTIONS TO BIDDERS

- 1. Use the quotation forms provided by the Purchasing Division.
- 2. SPECIFICATIONS: Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as EQUAL to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
- Complete all sections of the quotation form.
- Unit prices shall prevail in cases of discrepancy.
- 5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- 6. BID SUBMISSION: All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications.

SIGNED BID TO:

Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130



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RFO COPY

TYPE NAME/ADDRESS HERE

4132 FIRST AVENUE

NITRO WV 25143

PO BOX 776

JOHNSON CONTROLS INC.

State of West Virginia Department of Administration Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for

DRS070319

KRISTA FERRELL 304-558-2596

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

INSTITUTE, WV 25112

766-4621

ADDRESS CORRESPONDENCE TO ATTENTION OF

FREIGHTTERMS F.O.B. SHIP VIA DATE PRINTED TERMS OF SALE DESTINATION FUB Desr-08/29/2006 DHI NOT 30 BID OPENING TIME 01:30PM BID OPENING DATE: 10/03/2006 CAT AMOUNT LINE QUANTITY UOP ITEM NUMBER UNIT PRICE WARRANTY PERIOD WILL BE ESTABLISHED BY CHANGE ORDER UPON INSTALLATION AND ACCEPTANCE OF THE UNIT BY THE AGENCY. THE MODEL/BRAND/SPECIFICATIONS NAMED HEREIN ESTABLISH THE ACCEPTABLE LEVEL OF QUALITY ONLY AND ARE NOT INTENDED TO REFLECT A PREFERENCE OR FAVOR ANY PARTICULAR BRAND OR VENDOR. VENDORS WHO ARE BIDDING ALTERNATES SHOULD SO STATE AND INCLUDE PERTINENT LITERATURE AND SPECIFICATIONS. FAILURE TO PROVIDE INFORMATION FOR ANY ALTERNATES MAY BE GROUNDS FOR THE STATE RESERVES THE RIGHT REJECTION OF THE BID. TO WAIVE MINOR IRREGULARITIES IN BIDS OR SPECIFICATIONS IN ACCORDANCE WITH SECTION 148-1-4(F) OF THE WEST VIRGINIA LEGISLATIVE RULES AND REGULATIONS. EXHIBIT 5 NOTICE TO PROCEED: THIS CONTRACT IS TO BE PERFORMED WITHIN 30 CALENDAR DAYS AFTER THE NOTICE TO PROCEED UNLESS OTHERWISE SPECIFIED, THE FULLY IS RECEIVED. EXECUTED PURCHASE ORDER WILL BE CONSIDERED NOTICE TO PROCEED. THE DIRECTOR OF PURCHASING RESERVES THE CANCELLATION: RIGHT TO CANCEL THIS CONTRACT IMMEDIATELY UPON WRITTEN NOTICE TO THE VENDOR IF THE MATERIALS OR WORKMANSHIP SUPPLIED ARE OF AN INFERIOR QUALITY OR DO NOT CONFORM WITH THE SPECIFICATIONS OF THE BID AND CONTRACT HERE IN. WAGE RATES: THE CONTRACTOR OR SUBCONTRACTOR SHALL PAY THE HIGHER OF THE U.S. DEPARTMENT OF LABOR MINIMUM WAGE RATES AS ESTABLISHED FOR KANAWHA COUNTY, PURSUANT SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE DATE 304-553-2815 10-17-06 ADDRESS CHANGES TO BE NOTED ABOVE 39-031-0010-001 tocour exer



State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Request for Quotation

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KRISTA FERRELL 304-558-2596

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4132 FIRST AVENUE

NITRO WV 25143

JOHNSON CONTROLS INC.

State of West Virginia Department of Administration Quotation **Purchasing Division** 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for

REQ NUMBER DRS070319

ADDRESS:CORRESPONDENCE (O/A) (EN 160 TO DE 160

KRISTA FERRELL 304-558-2596

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

INSTITUTE, WV

766-4621 25112

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

DRS070319

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JOHNSON CONTROLS INC.

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

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JOHNSON CONTROLS INC

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

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DRS070319 REQUEST FOR QUOTATION

To provide and install one 20 Ton package heat pump, York Model # BQ240E54P2AAA3, or equal.

Unit Specifications:

208/240V
3 Phase Power
Integral economizer with single point enthalpy control
Relief damper
Roof curb adapter
5/2 day programmable state
Outdoor disconnect

Installation:

Removal of present Carrier rooftop unit
Installation of a curb adaptor
Installation of new unit
Complete all electrical, piping and duct connections
Provision of all materials, including crane, and labor to complete the installation
Removal of all debris related to installation
Vendor technician to perform start-up and checkout to ensure proper operation and reliability

Warranty:

Complete one year warranty to include all parts and labor.

Award:

Award shall be made to the lowest bid vendor meeting specifications.

RFQ	No.	DRS070319
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AFFIDAVIT

West Virginia Code §5A-3-10a states:

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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 the debt owned is an amount greater than one thousand dollars in the aggregate.

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.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions.

"Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law, or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities.

"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.

EXCEPTION:

The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this 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.

LICENSING:

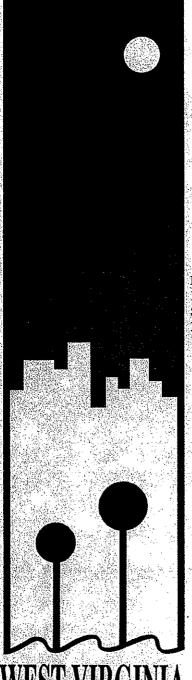
The vendor must be licensed in accordance with any and all state requirements to do business with the state of West Virginia.

CONFIDENTIALITY:

The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures and rules. Vendors should visit www.state.wv.us/admin/purchase/privacy for the Notice of Agency Confidentiality Policies.

Under penalty of law for false swearing (West Virginia Code, §61-5-3), it is hereby certified that the vendor acknowledges the information in this said affidavit and are in compliance with the requirements as stated.

Vendor's Name:	OHNSON CONTRUCT	s, Iuc.	
Authorized Signature:			10-17-06



CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV003182

Classification:

HEATING, VENTILATING & COOLING PLUMBING SPECIALTY LOW VOLTAGE SYSTEMS

> JOHNSON CONTROLS INC SHARED SVC CENTER PO BOX 2012, MILWAUKEE, WI 53201-2012

Date Issued

Expiration Date

Chair, West Virginia Contractor

Licensing Board

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where 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 cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.





PRODUCER:

BrickStreet Mutual Insurance Company 4700 MacCorkle Ave., S.E. Charleston, WV 25304

CERTIFICATE HOLDER:

JOHNSON CONTROLS INC C/O PAYROLL PO BOX 591 X90 MILWAUKEE WI 53201-0591

INSURED:

JOHNSON CONTROLS INC C/O PAYROLL PO BOX 591 X90 MILWAUKEE WI 53201-0591

CERTIFICATE OF INSURANCE

The policy of insurance listed below has been issued to the insured named above for the policy period and coverage indicated. This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or after the coverage afforded by the policy below. Coverage is contingent on the insured's compliance with policy conditions and premium payment.

If the policy is canceled before the expiration date, BrickStreet Mutual Insurance Company will endeavor to mail a written notice to the certificate holder within 30 days of cancelation. Failure to mail the notice shall impose no obligation or liability of any kind upon BrickStreet Mutual Insurance Company.

POLICY NUMBER: WC10007509-02

DATE CERTIFICATE ISSUED: 06/26/2006

POLICY EFFECTIVE DATE:

07/01/2006

POLICY EXPIRATION DATE: 01/01/2007

WORKERS COMPENSATION AND EMPLOYERS LIABILITY

LIMITS / COVERAGE

- [X] WORKERS COMPENSATION STATUTORY LIMITS
- [X] EMPLOYERS LIABILITY LIMITS:

BODILY INJURY BY ACCIDENT: BODILY INJURY BY DISEASE:

\$100,000.00

EACH ACCIDENT

BODILY INJURY BY DISEASE:

\$500,000.00 \$100.000.00 POLICY LIMIT EACH EMPLOYEE

- [] WV BROAD FORM EMPLOYERS LIABILITY ENDORSEMENT COVERAGE FOR WV CODE 23-4-2(d)(2)(ii)
- [] FEDERAL COAL MINE HEALTH AND SAFETY ACT COVERAGE ENDORSEMENT -- COVERAGE FOR WV CODE 23-4b-1 FEDERAL BLACK LUNG COVERAGE

SPECIAL PROVISIONS IF ANY:

WEST VIRGINIA STATE TAX DEPARTMENT

WV/DRT-002 Flow, 7/04

WEST VIRGINIA BUBINESS LOCATION ADDRESS

JOHNSON CONTROLS INC 4132 1⁵⁷ AV NITRO WV 25143 **BUSINESS REGISTRATION CERTIFICATE**

FOR YEAR BEGINNING JULY 1, 2006

ENDING JUNE 30, 2008



WEST VIRGINIA MAILING ADDRESS

JOHNSON CONTROLS INC C/O CORPORATE TAX X81 PO BOX 591 MILWAUKEE WI 53201

012483

This business registration conflictate is lessed by the Wost Virginia Tax Commissioner in accordance with Chapter 11, Article 12 of the West Virginia Code. The person or organization identified on this certificate is registered to conduct business in the State of West Virginia at the location listed.

SEE REVERSE SIDE.

LECATION ADDRESS: 39-038-0010-001 JOHNSON CONTROLS INC 4132 1ST AV NITRO WV 25143

MAILING ADDRESS:

JOHNSON CONTROLS INC C/O CORPORATE TAX X81 PO BOX 591 MILWAUKEE WI 53201 012483

I M P O R T A N T N O T I C E WEST VIRGINIA STATE TAX DEPARTMENT

THE NUMBER ABOVE YOUR NAME AND ADDRESS IS YOUR WEST VIRGINIA IDENTIFICATION NUMBER. REMEMBER TO ALWAYS USE YOUR IDENTIFICATION NUMBER ON ALL CORRESPONDENCE, TAX RETURNS AND PAYMENTS.

Payment Terms: NET CASH

Direct Billing Inquiries To Service Department: 866300764

To Remit Via Credit Card:

Call the phone number listed above.

Remit Payment To:

Johnson Controls, Inc. PO Box 905240 Charlotte, NC, 28290-5240

To Remit Via ACH Wire Transfers:

JPMorgan Chase Bank - One First National Plaza Chicago, IL 60670 ABA #071-000013 Depositor Acct #55-14347 Type of Account: Checking

D01



PRODUCER:

BrickStreet Mutual Insurance Co 4700 MacCorkle Ave., S.E. Charleston, WV 25304

CERTIFICATE HOLDER:

14:30

York International Corporation 7 Craddock Way Poca, WV 25159

INSURED:

York International Corporation 7 Craddock Way Poca, WV 25159

CERTIFICATE OF INSURANCE

The policy of insurance listed below has been issued to the insured named above for the policy period and coverage indicated. This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy below. Coverage is contingent on the insured's compliance with policy conditions and premium payment. For policies issued January 1, 2006, non-payment of initial premiums shall result in cancellation retroactively to January 1, 2006.

If the policy is canceled before the expiration date, BrickStreet Insurance Company will endeavor to mail a written notice to the certificate holder within 30 days of cancelation. Failure to mail the notice shall impose no obligation or liability of any kind upon BrickStreet Insurance Company.

POLICY NUMBER: WC10031264-01

CERTIFICATE ISSUED: 01/20/2006

POLICY EFFECTIVE DATE: 01/01/2006

POLICY EXPIRATION DATE: 07/01/2006

WORKERS COMPENSATION AND EMPLOYERS LIABILITY

LIMITS / COVERAGE

[X] WORKERS COMPENSATION STATUTORY LIMITS

\$ 100,000.00 **EMPLOYERS LIABILITY - EACH ACCIDENT EMPLOYERS LIABILITY DISEASE - EACH EMPLOYEE \$ 100,000.00** \$ 100,000.00 **EMPLOYERS LIABILITY DISEASE - POLICY LIMIT**

- [] WV BROAD FORM EMPLOYERS LIABILITY ENDORSEMENT -COVERAGE FOR WV CODE 23-4-2(d)(2)(ii)
- [] FEDERAL COAL MINE HEALTH AND SAFETY ACT COVERAGE ENDORSEMENT -COVERAGE FOR WV CODE 23-4b-1 - FEDERAL BLACK LUNG COVERAGE

SPECIAL PROVISIONS IF ANY:

PERMIT NUMBER 91=1=063911 EFFECTIVE 07=01+94 THRU CANCEL / SURRENDER

39-038-0010-001

JOHNSON CONTROLS INC ATTN CORPORATE TAX X 81

PO 80X 591 MILWAUKEE WI

53209~

THIS DIRECT PAY PERMIT IS TO BE USED FOR PURCHASES MADE FROM THE VENDORS AS SPECIFIED IN THE APPLICATION TO THE DEPARTMENT OF TAX AND REVENUE. USE OF THIS PERMIT BY ANYONE OTHER THAN THE NAMED TAXPAYER IS PROHIBITED. THIS NUMBER SHOULD BE RECORDED BY THE VENDOR ON ALL APPLICABLE INVOICES. FOR ADDITIONAL INFORMATION SEE BACK OF PERMIT.

SYSCAN P.O. BOX 3222 CHARLESTON, WY

WV PURCHASING ACA SECT Fax 304-558-4115

Oct 17 2006 02:25pm P001/001



NOONE

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia Department of Administration Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for REQNUMBER

DRS070319

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.... ADDRESS CORRESPONDENCE TO ATTENTION OF: KRISTA FERRELL 304-558-2596

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

INSTITUTE, WV 25112

766-4621

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation DRS07031

DRS070319

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ADDRESS CORRESPONDENCE TO ATTENTION OF:

KRISTA FERRELL 304-558-2596

Johnson Controls Attention: Scott Cross 4132 First Ave. Nitro, WV 25143

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DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

INSTITUTE, WV 25112

766-4621

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PO BOX 776

JOHNSON CONTROLS INC

State of West Virginia Department of Administration Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for

RFQ NUMBER DRS070319

ADDRESS CORRESPONDENCE TO ATTENTION OF: KRISTA FERRELL 304-558-2596

304-755-4353

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DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

INSTITUTE, WV 25112

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4132 FIRST AVE NITRO WV 25143

PO BOX 776

JOHNSON CONTROLS INC

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Request for Quotation

REQNUMBER DRS070319 PAGE:::

KRISTA FERRELL
304-558-2596

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DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

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VOLONG LY TO THE
KNOW ALL BY THESE PRESENTS, That we, JOHNSON CONTROLS, INC.
·
of 5757 North Green Bay Avenue; Milwaukee, WI 53209 (hereinafter called the Principal),
as Principal, and SAFECO INSURANCE COMPANY OF AMERICA
(hereinaster called the Surety), as Surety are held and firmly bound unto WV Division of Rehab Services
Institute, West Virginia
(hereinafter called the Obligee) in the penal sum of 5% of Total Contract
for the payment of which the Principal and the Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.
THE CONDITION OF THIS OBLIGATION IS SUCH, That WHEREAS, the Principal has submitted or is about to submit a proposal
to the Obligee on a contract for RFQ # DRS070319 Replace 20-ton rooftop unit
York m/n BQ240E54P2AAA3
NOW, THEREFORE, If the said Contract be timely awarded to the Principal and the Principal shall, within such time as may be specified, enter into the Contract in writing, and give bond, if bond is required, with surety acceptable to the Obligee for the faithful performance of the said Contract, then this obligation shall be void; otherwise to remain in full force and effect.
Signed and sealed this 1st day of November,
JOHNSON CONTROLS, INC. (Seal) Principal
Witness \ \d\
Martin McGavin Title
SAFECO INSURANCE COMPANY OF AMERICA
Stephanie h die Safeco Insurance Company of AMERICA Witness Witness
Lisa M. Slakes Attorney-in-Fact
STREET CONTROLL
SEAL)
CONT. OF WASHINGTH

Johnson Controls, Inc. 5757 N. Green Bay Avenue Post Office Box 591 Milwaukee, WI 53201-0591 Tel. 414/524 1200



DELEGATION OF AUTHORITY

The undersigned, President of Johnson Controls, Inc., a Wisconsin corporation, pursuant to the authority vested in him by a certain resolution adopted by the Board of Directors of the Company on January 23, 1980, hereby authorizes

Martin McGavin Risk Management Services

to perform, on behalf of the Company, the acts described below:

To execute and deliver, as attorney-in-fact for the Company, any and all assignments of surety, performance, and bid bonds necessary and proper in carrying on the business of the company.

This authority does not extend to

- a. the execution of contracts for the performance of work, sale of goods, and furnishing of services:
- b. the collection, receipt and recovery of monies due or to become due to the Company and the issuance o receipts and releases for the payment thereof;
- c. the signing of any notes, contracts, or any other agreement to borrow money in the name of the Company; and
- d. the signing, on behalf of the Company, of any deeds, abstracts, offers to purchases, or any other instruments pertaining to the purchase or sale of real property.

President

This authority shall remain in full force and effect until revoked in writing by the President of the Company.

Signed at Milwaukee, Wisconsin, this 1st day of November , 2006

Secretary

CONTROL S CORPORATE S SEAL



OF WASHINGT

POWER OF ATTORNEY

Safeco Insurance Company of America General Insurance Company of America Safeco Plaza Seattle, WA 98185

KNOW ALL BY THESE PRESENTS:	No.	10618			
That SAFECO INSURANCE COMPANY OF AMERICA and Washington corporation, does each hereby appoint	GENERAL I	NSURANCE	COMPANY O	F AMERICA,	each a
******KATHLEEN A. CRARY; DANIEL J. KWIECINSKI; TRA LISA M. SLAKES; Milwaukee, Wisconsin***********************************	CY K. MATTH	EWS; WEND	Y S. MILLER; [DANIEL J. SAI	PIRO;
its true and lawful attorney(s)-in-fact, with full authority to execut documents of a similar character issued in the course of its busin	te on its behalf less, and to bind	fidelity and si	urety bonds or a	undertakings a reby.	ind other
IN WITNESS WHEREOF, SAFECO INSURANCE COMPAN AMERICA have each executed and attested these presents					ANY O
this 18th	day ofAp	pril		, 2006	
Alephanie Dalley Watsen			Marke) In-	
STEPHANIE DALEY-WATSON, SECRETARY		Mi	, <u>KE PETERS, P</u>	RESIDENT, S	URETY
CERTI Extract from the By-Laws of SAFECO and of GENERAL INSURAN	IFICATE INSURANCE (CE COMPANY	COMPANY O	F AMERICA A:		
"Article V, Section 13 FIDELITY AND SURETY BONDS the F President appointed for that purpose by the officer in charge of stattorneys-in-fact or under other appropriate titles with authority to other documents of similar character issued by the company in the such appointment, the signatures may be affixed by facsimile. Undertaking of the company, the seal, or a facsimile thereof, no provided, however, that the seal shall not be necessary to the validation.	urety operations to execute on both ne course of its On any instru	s, shall each leach leach leach leach of the content conferring sed or affixed	nave authority to company fidelity n any instrumer ing such author	appoint indiversely but making or events.	riduals a onds and videncing
Extract from a Resolution of the Board of Directors of and of GENERAL INSURANCE COMPA	of SAFECO INS NY OF AMERIC	SURANCE CO	MPANY OF AI ly 28, 1970.	MERICA	
"On any certificate executed by the Secretary or an assistant sect (i) The provisions of Article V, Section 13 of the By-Laws (ii) A copy of the power-of-attorney appointment, execute (iii) Certifying that said power-of-attorney appointment is in the signature of the certifying officer may be by facsimile, and the	s, and ed pursuant the n full force and	reto, and		reof."	
Stephanie Daley-Watson , Secretary of SAFECO INSURANC COMPANY OF AMERICA, do hereby certify that the foregoing exist these corporations, and of a Power of Attorney issued pursuant and the Power of Attorney are still in full force and effect.	E COMPANY (OF AMERICA	and of GENER	AL INSURAN	
N WITNESS WHEREOF, I have hereunto set my hand and affi	xed the facsim	ile seal of sa	id corporation		
this 1st	day of	Nove	_		<u>200</u> 6
STANCE COMPANY OF STANCE COMPANY					

STEPHANIE DALEY-WATSON, SECRETARY

Safeco® and the Safeco logo are registered trademarks of Safeco Corporation. S-0974/DS 4/05



State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

Request for BEGNUMBER Quotation

DRS070319

ADDRESS:CORRESPONDENCE TO ATTENTION OF KRISTA FERRELL 304-558-2596

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

INSTITUTE, WV 25112

766-4621

TYPE NAME/ADDRESS HERE JOHNSON CONTROLS INC. 4132 FIRST AVENUE PO BOX 776 **NITRO WV 25143**

RFO COPY

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WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
Department of Administration

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Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for RECNUMBER

DRS070319

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RFQ COPY TYPE NAME/ADDRESS HERE >mzoo#...

JOHNSON CONTROLS INC. **4132 FIRST AVENUE PO BOX 776 NITRO WV 25143**

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING COMMON INSTITUTE, WV

25112

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State of West Virginia Department of Administration **Purchasing Division** 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for MEDINUMBERS. Quotation

DRS070319

KRISTA FERRELL

304-558-2596

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION RECETVING WOODINGTON

ADDRESS CORRESPONDENCE TO ATTENTION OF

INSTITUTE, WV 25112

766-4621

208 C9

TYPE NAME/ADDRESS HERE JOHNSON CONTROLS INC. 4132 FIRST AVENUE PO BOX 776 **NITRO WV 25143**

DATE PRINTED TERMS OF SALE SHIP VIA E.O.B FREIGHT TERMS 08/29/2006 NET 30 DESTINATION FUR DEIT. DHL 10/03/2006 BID OPENING TIME 01:30PM LINE UOP TEM NUMBER INUOMA QUANTITY UNIT PRICE TO WEST VIRGINIA CODE 21-5A, ET, SEQ. WAGE RATES APPLY TO THIS PROJECT) ARBITRATION: ANY REFERENCES MADE TO ARBITRATION OR INTEREST FOR PAYMENTS DUE (EXCEPT FOR ANY INTEREST REQUIRED BY STATE LAW CONTAINED IN THIS CONTRACT OR IN ANY AMERICAN INSTITUTE OF ARCHITECTS DOCUMENTS PERTAINING TO THIS CONTRACT ARE HEREBY DELETED. WORKERS' COMPENSATION: VENDOR IS REQUIRED TO PROVIDE A CERTIFICATE FROM WORKERS' COMPENSATION IF SUCCESSFUL. ALL OF THE ITEMS CHECKED BELOW WILL BE A REQUIREMENT DF THIS CONTRACT: (XX) INSURANCE: SUCCESSFUL VENDOR SHALL FURNISH PROOF OF COMMERCIAL GENERAL LIABILITY INSURANCE PRIOR TO ISSUANCE OF CONTRACT. UNLESS OTHERWISE SPECIFIED IN THE BID DOCUMENTS, THE MINIMUM AMOUNT OF INSURANCE COVERAGE REQUIRED IS \$250,000.) BUILDERS RISK INSURANCE: SUCCESSFUL VENDOR SHALL FURNISH PROOF OF BUILDERS RISK - ALL RISK INSURANCE IN AN AMOUNT EQUAL TO 100% OF THE AMOUNT OF THE CONTRACT. (XX) BONDS: | FIVE PERCENT (5%) OF THE TOTAL AMOUNT OF THE BID PAYABLE TO THE STATE OF WEST VIRGINIA, SHALL BE SUBMITTED WITH EACH BID AS A BID BOND. THE SUCCESSFUL BIDDER SHALL ALSO FURNISH A PERFORMANCE BOND AND LABOR/ MATERIAL BOND FOR 100% OF THE AMOUNT OF THE CONTRACT. BONDS MAY BE PROVIDED IN THE FORM OF A CERTIFIED CHECK, IRREVOCABLE LETTER OF CREDIT, OR BOND FURNISHED BY A SOLVENT SURETY COMPANY AUTHORIZED TO DO BUSINESS IN THE STATE OF WEST VIRGINIA. A LETTER OF CREDIT SUBMITTED IN LIEU OF A PERFORMANCE AND LABOR & MATERIAL BOND WILL ONLY BE ALLOWED FOR PROJECTS UNDER \$100,000. SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE 10-10-06 304-557-2815 FEIN 39 - 038-0010-00) ADDRESS CHANGES TO BE NOTED ABOVE Over

WHEN RESPONDING TO REQ. INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



>wzpon

SIGNATURE

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for REGINDINGER Quotation

DRS070319

KRISTA FERRELL 304-558-2596

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JOHNSON CONTROLS INC. 4132 FIRST AVENUE PO BOX 776 **NITRO WV 25143**

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING WC 24HOL

ADDRESS/CORRESPONDENCE: 10 ATTENTION OF

INSTITUTE, WV 25112

766-4621

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TELEPHONE

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10-10-06

ADDRESS CHANGES TO BE NOTED ABOVE



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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

Request for REGINUMBER

DRS070319

KRISTA FERRELL 304-558-2596

RFQ COPY TYPE NAME/ADDRESS HERE

> JOHNSON CONTROLS INC. 4132 FIRST AVENUE PO BOX 776 NITRO WV 25143

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

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JOHNSON CONTROLS INC. 4132 FIRST AVENUE PO BOX 776 **NITRO WV 25143**

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: WRECEAVENED WORKHOL

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

DRS070319

PAGE

....ADDRESS.CORRESPONDENCE TO A TRENTION OF

KRISTA FERRELL 304-558-2596

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JOHNSON CONTROLS INC. 4132 FIRST AVENUE PO BOX 776 NITRO WV 25143 DIV OF REHABILITATION SERVICES
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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
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Request for Quotation

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DIV OF REHABILITATION SERVICES
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ATTENTION: RECEIVING MORNAGE

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INSTITUTE, WV 25112

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NITRO WV 25143

JOHNSON CONTROLS INC.

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

DRS070319

ADDRESS CORRESPONDENCE TO ATTENTION OF KRISTA FERRELL 304-558-2596

DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING ADSIMOU

INSTITUTE, WV

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DATE PRINTED TERMS OF SALE SHIP VIA 08/29/2006 NET 30 DHL りをスレットレン FOI DESTI BID OPENING DATE: OPENING TIME 10/03/2006 01:30PM UNE QUANTITY ITEM NUMBER UOP UNIT PRICE AMOUNT THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED: SEALED BID BUYER: 21 REQ. NO.: DRS070319 BID OPENING DATE: 10/3/2006 BID OPENING TIME: 1:30 PM PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID: 304-755-0765 PLEASE PRINT OR TYPE NAME OF PERSON TO CONTACT CONCERNING THIS QUOTE: THIS IS THE END OF RFQ DRS070319 ***** TOTAL: 304-523-9812 39-038-0010-001 ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

DRS070319 REQUEST FOR QUOTATION

To provide and install one 20 Ton package heat pump, York Model # BQ240E54P2AAA3, or equal.

Unit Specifications:

54 KW auxiliary heaters
208/240V
3 Phase Power
Integral economizer with single point enthalpy control
Relief damper
Roof curb adapter
5/2 day programmable state
Outdoor disconnect
(10 V Philat Single)
Installation:

Removal of present Carrier rooftop unit
Installation of a curb adaptor
Installation of new unit
Complete all electrical, piping and duct connections
Provision of all materials, including crane, and labor to complete the installation
Removal of all debris related to installation
Vendor technician to perform start-up and checkout to ensure proper operation and reliability

Warranty:

Complete one year warranty to include all parts and labor.

Award:

Award shall be made to the lowest bid vendor meeting specifications.

RFQ No.	DRS070319	
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AFFIDAVIT

West Virginia Code §5A-3-10a states:

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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 the debt owned is an amount greater than one thousand dollars in the aggregate.

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.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions.

"Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law, or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more countles or municipalities.

"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.

EXCEPTION:

The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this 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.

LICENSING:

The vendor must be licensed in accordance with any and all state requirements to do business with the state of West Virginia.

CONFIDENTIALITY:

The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures and rules. Vendors should visit www.state.wv.us/admin/purchase/privacy for the Notice of Agency Confidentiality Policies.

Under penalty of law for false swearing (West Virginia Code, §61-5-3), it is hereby certified that the vendor acknowledges the information in this said affidavit and are in compliance with the requirements as stated.

Vendor's Name: JOHN SON CONTROLS	
Authorized Signature: Scry Lu Date: 10-10-06	
No Post Affidout	

No Debt Affidavit Revised 02/08/06



ADDOR

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

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Attention: Scott Cross

Johnson Controls

4132 First Avenue Nitro, WV 25143

Request for Quotation

DRS070319

PAGE 1

KRISTA FERRELL
304-558-2596

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DIV OF REHABILITATION SERVICES WV REHABILITATION CENTER ATTENTION: RECEIVING

INSTITUTE, WV

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DRS070319 Addendum #01

To provide the following clarifications:

- 1) The 20 Ton Heat Pump is on one (1), 250 amp 3 phase, 208 Volt Breaker with 6 wires leading to the unit. The Agency will be responsible for replacing this service from the breaker box to the disconnect at the new unit with appropriate wiring.
- 2) The Agency will be responsible for adding to the sewer vent if needed.
- 3) The Vender will be responsible for adding a 120 volt outlet at the new unit.
- 4) To clarify that the 7^{th} item listed under "Unit Specifications" of the original RFQ is a 5/2 day programmable thermostat

To provide Agency response to the following vendor written questions:

- 1) Q. Is Contractor responsible to install safety rail at edge of roof?
 - A. Yes
- 2) Q. How is economizer to be controlled during "shelter in place"?
 - A. This is not a shelter.
- 3) Q. Confirm that vent through roof will be extended by owner if required.
 - A. Yes. See clarification #2 above.
- 4) Q. Confirm that owner will run wiring between breaker and disconnect.
 - A. Yes
- 5) Q. Confirm size of heaters @ existing voltage (208 volts 3 phase)
 - A. The existing are 1 Bank 60 KW and 1 Bank 40 KW, but we are only requiring 54 KW for the replacement.
- 6) Q. Who is to supply wiring and breaker for RMR (?) receptacle?
 - A. Contractor shall supply wiring, breaker and installation of 120 Volt receptacle per clarification #3 above.

BID BOND				
Conforms with The Americ Architects, A.I.A. Documen				
KNOW ALL BY THESE P	RESENTS, That we, JOHNSO	N CONTROLS, INC	:	
	5757 NORTH GRI	EEN BAY AVENUE;	MILWAUKEE, WI	53209
			as Principal, hereir	nafter called the Principal,
and the SAFECO INSU	RANCE COMPANY OF AM	ERICA		·
of SAFECO PLAZA;	SEATTLE,	WA	98185 , a corpora	tion duly organized under
the laws of the State of	WASHINGTON	, as Surety, hereinafte	r called the Surety, are h	eld and firmly bound unto
WV Div of Reha	blitation Service	S	as Obligee, here	inafter called the Obligee,
in the sum of	5% of Total Contr	act		
Dollars (\$ Surety, bind ourselves, our l), for the payme			said Principal and the said ly by these presents.
	as submitted a bid for RFQ #			
20-ton Rooftop		E	IOVIGE and II	iscarr one
in accordance with the term good and sufficient surety to the prosecution thereof, or Principal shall pay to the C larger amount for which the	e Obligee shall accept the bid of the sof such bid, and give such bond for the faithful performance of such in the event of the failure of the Obligee the difference not to exce e Obligee may in good faith contrivoid, otherwise to remain in full the	l or bonds as may be sp ch Contract and for the p the Principal to enter su the ded the penalty hereof b act with another party t	ecified in the bidding or prompt payment of labor ch Contract and give su etween the amount spec	Contract Documents with and material furnished in uch bond or bonds, if the ified in said bid and such
Signed and sealed this	10th day	of October		, 2006
Muit Ma	<i>Unial</i> Witn	JOHNS By:	ON CONTROLS, IN	C. (Seal) Principal Attorney-in-Factle
Masy s.	Oose Witn	ess { By TRAC	CY L. FROST y Phone No.	Attorney-in-Fact



POWER OF ATTORNEY

Safeco Insurance Company of America General Insurance Company of America Safeco Plaza Seattle, WA 98185

		No	5155	
KNOW ALL BY THESE				
That SAFECO INSURA Washington corporation,	NCE COMPANY OF AMERICA and does each hereby appoint	GENERAL INS	URANCE COMPANY O	F AMERICA, each a
**************************************	RACY L. FROST; CYNTHIA A. GROSS; V	MILIAM R HA	ACK-CYNTHIA I KUNZ	ZE: MARY K. OSSE:
JOYCE E. ROMANSKI	; BEVERLY STELLMACHER; STEVE ZA	JC; Milwaukee	, Wisconsin********	******
its true and lawful attorno	ey(s)-in-fact, with full authority to execute haracter issued in the course of its busine	on its behalf fid ss, and to bind th	elity and surety bonds or ne respective company the	undertakings and other ereby.
IN WITNESS WHERE	OF, SAFECO INSURANCE COMPANY xecuted and attested these presents			
this	14th	June	2	, <u>2006</u> ·
	-		•	
Stephanie Dalle	uplatsen	TAN	Wolajewsk	٠`
STEPHANIE DALEY-W	ATSON.SECRETARY	TIM MIKOLA	JEWSKI, SENIOR VICE-P	RESIDENT, SURETY
	CERTII			
	Extract from the By-Laws of SAFECO and of GENERAL INSURANCE	INSURANCE CO E COMPANY O	OMPANY OF AMERICA F AMERICA:	
President appointed for t attorneys-in-fact or unde other documents of simil such appointment, the s undertaking of the comm	FIDELITY AND SURETY BONDS the P that purpose by the officer in charge of sum of their appropriate titles with authority to ar character issued by the company in the signatures may be affixed by facsimile. Dany, the seal, or a facsimile thereof, much be seal shall not be necessary to the valid	rety operations, be execute on bel e course of its be On any instrum hay be impresse	shall each have authority half of the company fidelit usiness On any instrume ent conferring such author d or affixed or in any ott	to appoint individuals as ty and surety bonds and ent making or evidencing ority or on any bond or her manner reproduced;
Extract from	m a Resolution of the Board of Directors o and of GENERAL INSURANCE COMPA I	f SAFECO INSU	RANCE COMPANY OF A	
(ii) The provision (ii) A copy of th (iii) Certifying the	uted by the Secretary or an assistant secr ns of Article V, Section 13 of the By-Laws e power-of-attorney appointment, execute at said power-of-attorney appointment is in fying officer may be by facsimile, and the	, and ed pursuant there n full force and e	eto, and ffect,	ereof."
COMPANY OF AMERIC of these corporations, an	on , Secretary of SAFECO INSURANC A, do hereby certify that the foregoing ext ad of a Power of Attorney issued pursuant t by are still in full force and effect.	tracts of the By-L	aws and of a Resolution c	of the Board of Directors
IN WITNESS WHEREOF	F, I have hereunto set my hand and affi	xed the facsimi	le seal of said corporation	n
t	10th	day of .	October	2006 .
REMOLE COMPANY	ANCE BOMPA			
CORPORATE OF	TOPODONATE PA			,
(E) SEAL	SEAL)		Stephanie &	dalughatsen

STEPHANIE DALEY-WATSON, SECRETARY

Johnson Controls, Inc. 5757 N. Green Bay Avenue Post Office Box 591 Milwaukee, WI 53201-0591 Tel. 414/524 1200



DELEGATION OF AUTHORITY

The undersigned, President of Johnson Controls, Inc., a Wisconsin corporation, pursuant to the authority vested in him by a certain resolution adopted by the Board of Directors of the Company on January 23, 1980, hereby authorizes

Martin McGavin Risk Management Services

to perform, on behalf of the Company, the acts described below:

To execute and deliver, as attorney-in-fact for the Company, any and all assignments of surety, performance, and bid bonds necessary and proper in carrying on the business of the company.

This authority does not extend to

- a. the execution of contracts for the performance of work, sale of goods, and furnishing of services:
- b. the collection, receipt and recovery of monies due or to become due to the Company and the issuance o receipts and releases for the payment thereof;
- c. the signing of any notes, contracts, or any other agreement to borrow money in the name of the Company; and
- d. the signing, on behalf of the Company, of any deeds, abstracts, offers to purchases, or any other instruments pertaining to the purchase or sale of real property.

This authority shall remain in full force and effect until revoked in writing by the President of the Company.

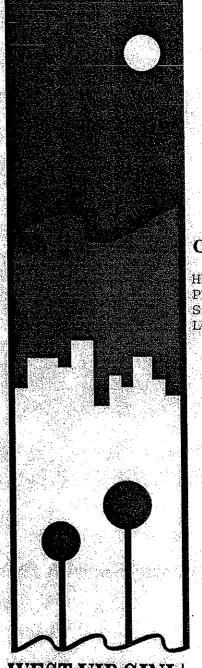
Signed at Milwaukee, Wisconsin, this 6th day of April, 2006.

Secretary

Attest

(SEAL/)

President



CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV003182

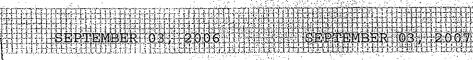
Classification:

HEATING, VENTILATING & COOLING PLUMBING SPECIALTY LOW VOLTAGE SYSTEMS

> JOHNSON CONTROLS INC SHARED SVC CENTER PO BOX 2012, A33 MILWAUKEE, WI 53201-2012

Date Issued

Expiration Date



Chair, West Virginia Contractor

Licensing Board

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where 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 cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.



PRODUCER:

BrickStreet Mutual Insurance Company 4700 MacCorkle Ave., S.E. Charleston, WV 25304

CERTIFICATE HOLDER:

JOHNSON CONTROLS INC C/O PAYROLL PO BOX 591 X90 MILWAUKEE WI 53201-0591

INSURED:

JOHNSON CONTROLS INC C/O PAYROLL PO BOX 591 X90 MILWAUKEE WI 53201-0591

CERTIFICATE OF INSURANCE

The policy of insurance listed below has been issued to the insured named above for the policy period and coverage indicated. This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy below. Coverage is contingent on the insured's compliance with policy conditions and premium payment.

If the policy is canceled before the expiration date, BrickStreet Mutual Insurance Company will endeavor to mail a written notice to the certificate holder within 30 days of cancelation. Failure to mail the notice shall impose no obligation or liability of any kind upon BrickStreet Mutual Insurance Company.

POLICY NUMBER: WC10007509-02

DATE CERTIFICATE ISSUED: 06/26/2006

POLICY EFFECTIVE DATE:

07/01/2006

POLICY EXPIRATION DATE: 01/01/2007

WORKERS COMPENSATION AND EMPLOYERS LIABILITY

LIMITS / COVERAGE

- [X] WORKERS COMPENSATION STATUTORY LIMITS
- [X] EMPLOYERS LIABILITY LIMITS:

BODILY INJURY BY ACCIDENT: BODILY INJURY BY DISEASE: \$100,000.00 \$500,000.00 EACH ACCIDENT POLICY LIMIT

BODILY INJURY BY DISEASE:

\$100,000.00

EACH EMPLOYEE

- [] WV BROAD FORM EMPLOYERS LIABILITY ENDORSEMENT COVERAGE FOR WV CODE 23-4-2(d)(2)(ii)
- [] FEDERAL COAL MINE HEALTH AND SAFETY ACT COVERAGE ENDORSEMENT COVERAGE FOR WV CODE 23-4b-1 FEDERAL BLACK LUNG COVERAGE

SPECIAL PROVISIONS IF ANY:

LOCATION ADDRESS: 39-038-0010-001 JOHNSON CONTROLS INC 4132 151 AV NITRO WV 25143

MAILING ADDRESS:

JOHNSON CONTROLS INC C/O CORPORATE TAX XB1 PO BOX 591 MILWAUKEE WI 53201 012483

I M P O R T A N T N O T I C E WEST VIRGINIA STATE TAX DEPARTMENT

THE NUMBER ABOVE YOUR NAME AND ADDRESS IS YOUR WEST VIRGINIA IDENTIFICATION NUMBER. REMEMBER TO ALWAYS USE YOUR IDENTIFICATION NUMBER ON ALL CORRESPONDENCE, TAX RETURNS AND PAYMENTS.

Payment Terms: NET CASH

Direct Billing Inquiries To Service Department: 866300764

To Remit Via Credit Card:

Call the phone number listed above.

Remit Payment To:

Johnson Controls, Inc. PO Box 905240 Charlotte, NC, 28290-5240

To Remit Via ACH Wire Transfers:

JPMorgan Chase Bank - One First National Plaza Chicago, IL 60670 ABA #071-000013 Depositor Acct #55-14347 Type of Account: Checking



PRODUCER:

BrickStreet Mutual Insurance Co 4700 MacCorkle Ave., S.E. Charleston, WV 25304

CERTIFICATE HOLDER:

York International Corporation 7 Craddock Way Poca, WV 25159

INSURED:

York International Corporation 7 Craddock Way Poca, WV 25159

CERTIFICATE OF INSURANCE

The policy of insurance listed below has been issued to the insured named above for the policy period and coverage indicated. This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy below. Coverage is contingent on the insured's compliance with policy conditions and premium payment. For policies issued January 1, 2006, non-payment of initial premiums shall result in cancelation retroactively to January 1, 2006.

If the policy is canceled before the expiration date, BrickStreet Insurance Company will endeavor to mail a written notice to the certificate holder within 30 days of cancelation. Failure to mail the notice shall impose no obligation or liability of any kind upon BrickStreet Insurance Company.

FOLICY NUMBER: WC10031264-01

CERTIFICATE ISSUED: 01/20/2006

POLICY EFFECTIVE DATE: 01/01/2006

POLICY EXPIRATION DATE: 07/01/2006

WORKERS COMPENSATION AND EMPLOYERS LIABILITY

LIMITS / COVERAGE

[X] WORKERS COMPENSATION STATUTORY LIMITS

EMPLOYERS LIABILITY - EACH ACCIDENT \$ 100,000.00 EMPLOYERS LIABILITY DISEASE - EACH EMPLOYEE \$ 100,000.00 EMPLOYERS LIABILITY DISEASE - POLICY LIMIT \$ 100,000.00

- WV BROAD FORM EMPLOYERS LIABILITY ENDORSEMENT COVERAGE FOR WV CODE 23-4-2(d)(2)(ii)
- [] FEDERAL COAL MINE HEALTH AND SAFETY ACT COVERAGE ENDORSEMENT COVERAGE FOR WV CODE 23-46-1 FEDERAL BLACK LUNG COVERAGE

SPECIAL PROVISIONS IF ANY:

WEST VIRGINIA CONSUMERS' SALES AND SERVICE TAX AND USE TAX DIRECT PAY PERMIT

PERMIT NUMBER 91=1=063911 EFFECTIVE C7=01+94 THRU CANCEL / SURRENDER

39-038-0010-001

JOHNSON CONTROLS INC ATTN CORPORATE TAX X 81

PO BOX 591 MILWAUKEE WI

53209-

THIS DIRECT PAY PERMIT IS TO BE USED FOR PUR-CHASES MADE FROM THE VENDORS AS SPECIFIED IN THE APPLICATION TO THE DEPARTMENT OF TAX AND REVENUE. USE OF THIS PERMIT BY ANYONE OTHER THAN THE NAMED TAXPAYER IS PROHIBITED. THIS NUMBER SHOULD BE RECORDED BY THE VEN-DOR ON ALL APPLICABLE INVOICES. FOR ADDI-TIONAL INFORMATION SEE BACK OF PERMIT.