

TYPE NAME/ADDRESS HERE

ALL-CON, LLC

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

PHILPOTT LANE

BEAVER, UNV 25813

### Request for Quotation

CHUCK BOWMAN

304-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF

OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

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03/10/	2011				
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### GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- 1. 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. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
- 4. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, 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.
- 5. Payment may only be made after the delivery and acceptance of goods or services.
- 6. Interest may be paid for late payment in accordance with the West Virginia Code.
- 7. Vendor preference will be granted upon written request in accordance with the West Virginia Code.
- 8. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 9. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 10. The laws of the State of West Virginia and the Legislative Rules of the Purchasing Division shall govern the purchasing process.
- 11. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
- 12. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
- 13. HIPAA BUSINESS ASSOCIATE ADDENDUM: The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and is hereby made part of the agreement. Provided that the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
- 14. 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. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf.
- 15. LICENSING: Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, and the West Virginia Insurance Commission. The vendor must provide all necessary releases to obtain information to enable the director or spending unit to verify that the vendor is licensed and in good standing with the above entities.
- 16. ANTITRUST: In submitting a bid to any agency for the State of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the State of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, or person or entity submitting a bid for the same material, supplies, equipment or services and is in all respects fair and without collusion or Fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

#### **INSTRUCTIONS TO BIDDERS**

- 1. Use the quotation forms provided by the Purchasing Division. Complete all sections of the quotation form.
- 2. 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.
- 3. Unit prices shall prevail in case of discrepancy. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- 4. 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: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130
- 5. Communication during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited (W.Va. C.S.R. §148-1-6.6).



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Purchasing Division
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## Request for Quotation

DEP15375

PAGE 2

ADDRESS CORRESPONDENCE TO ATTE

CHUCK BOWMAN 304-558-2157

ENVIRONMENTAL PROTECTION
DEPARTMENT OF
OFFICE OF AML&R
601 57TH STREET SE

CHARLESTON, WV 25304

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PLANS AND SPECIFICATIONS MAY BE OBTAINED FROM WVDEP, OFFICE AML&R, 601 57TH ST., SE, CHARLESTON, WV 25304, PH. 304-926-0485 UPON PAYMENT OF \$10.00 NON-REFUNDABLE FEE. PAYMENT MUST BE MADE BY CHECK OR MONEY ORDER. NO CASH WILL BE ACCEPTED.	
EXHIBIT 5	
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304-558-2157	
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ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

RFQ COPY TYPE NAME/ADDRESS HERE N D O R

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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

DEP15375

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ADDRESS:CORRESPONDENCE:TO A HIEN HONG

CHUCK BOWMAN 304-558-2157

ENVIRONMENTAL PROTECTION

B DEPARTMENT OF

OFFICE OF AML&R

601 57TH STREET SE

CHARLESTON, WV

25304

304-926-0499

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ADDRESS CHANGES TO BE NOTED ABOVE

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

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ALL-CON, LLC 124 PHILPOTT LANE BEAVER, W 25813

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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CHARLESTON, WV

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### Request for Quotation

**DEP15375** 

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	ENVIRON	IMENTAL	PROTECTION
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AML&R 601 57TH STREET SE CHARLESTON, WV

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### Request for

**DEP15375** 

ADDRESS CORRESPONDENCE TO A TIENTION OF \*\*\*

¢huck bowman 304-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

RFQ COPY TYPE NAME/ADDRESS HERE ALL·CON, LLC 124 PHILPOTT LANE BEAVER. W 25813 VENDOR

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#### Request for Quotation

DEP15375

PAGE 10

CHUCK BOWMAN 304-558-2157

ENVIRONMENTAL PROTECTION
DEPARTMENT OF
OFFICE OF AML&R
601 57TH STREET SE

CHARLESTON, WV 25304

RFQ COPY TYPE NAME/ADDRESS HERE	
ALL-CON, LLC 124 PHILPOTT LANE	
124 PHILPOTT LANE	
BEAVER, W 25813	,

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### Request for Quotation

DEP15375

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CHUCK BOWMAN 304-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

25304

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ALL-CON, LLC
174 PHILPOTT LANE
BEAVER W 25813

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#### Request for BEGINUMBER Quotation

**DEP15375** 

12

**CHUCK BOWMAN** 304-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 304-926-0499 25304

RFQ COPY TYPE NAME/ADDRESS HERE ALL-CON, LLC 124 PHILPOTT LANE BEAVER, W 25813

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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

ALL-CON, LLC 124 PHILPOTT LANE BEAVER W 25813

### Request for

**DEP15375** 

13

ADDRESS CORRESPONDENCE TO ATTENTION OF

CHUCK BOWMAN 304-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

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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

DEP15375

.....PAGE.....

CHUCK BOWMAN 304-558-2157

ENVIRONMENTAL PROTECTION
DEPARTMENT OF
OFFICE OF AML&R
601 57TH STREET SE

CHARLESTON, WV 25304

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#### ADDENDUM No. 1

### Adrian (Hyre) Clogged Stream

### Requisition # DEP15375

REVISED Contractor's Bid Sheet

Company Name: ALL-CON, LLC

Address: 124 PHILPOTT LANE:

BEAVER, NN 25813

The DEP reserves the right to request additional information and supporting documentation regarding unit prices when the unit price appears to be unreasonable.

ITEM	04.	Tinit	DESCRIPTION	UNIT PRICE	AMOUNT
NO.	Qty	Unit			
			Mobilization and Demobilization (Limited to 10% of Total Bid)	LS	8900,00
1.0	1	LS	Construction Layout (Limited to 5% of Total Bid)	LS	3500,00
2.0	1	LS	Quality Control (Limited to 3% of Total Bid)	LS	500.00
3.0	<u> </u>	LS	Site Preparation (Limited to 10% of Total Bid)	LS	6.686.00
4.0	1	LS		35.00	1,400,00
4.2	40		Gravel Road Rehabilitation	1.00	530.00
5.0	530		Silt Fence Sediment Control	5.25	575.00
5.1	100		Hay/Straw Bale Erosion Control	1,700.00	1700.00
5.2	1	EA	Stone Construction Entrance	1950.00	1,950.00
6.0	1	LS	Revegetation	2,100.00	2100,00
7.0	1	EA	Type "G" Inlet	65.00	17,875.00
7.1	275		6' Grouted Riprap Channels "C"	5.00	1,400,00
7.2	280	LF	6' Grass Lined Channels "A" & "B"	36.00	3,024.00
7.3	84	LF	18" HDPE Culvert		
11.1	260	LF	4' x 8' Underdrain (12" PVC SDR 35)	105.00	27,300,00
11.2	100	LF	4' x 4' Underdrain (12" PVC SDR 35)	50.00	5,000.00
11.3	50	LF	Underdrain Conveyance Pipe	20.00	1,000.00
12.0	50	TN	Asphalt Pavement	190.00	9,500.00
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OMB #1029-0119 Expiration Date: 1/31/13

#### AML CONTRACTOR INFORMATION FORM

You must complete this form for your AML contracting officer to request an eligibility evaluation from the Office of Surface Mining to determine if you are eligible to receive an AML contract. This requirement applies to contractors and their sub-contractors and is found under OSM's regulations at 30 CFR 874.16.

rart A: General Information
Business Name: ALL CON, LLC Tax Payer ID No.: 20-5637517  Address: 124 PHILPOTT LANE  City: BENVER State: W Zip Code: 25813 Phone: 3047310190  Fax No.: 304 255 4232 E-mail address: 01PLE C ACI-WV. Com
Part B: Legal Structure
( ) Corporation ( ) Sole Proprietorship ( ) Partnership ( ) LLC ( ) Other (please specify)
Part C: Certifying and updating information in the Applicant/Violator System (AVS).  Select only one of the following options, follow the instructions for that option, and sign below.  I, Lips Bollulan, have the express authority to certify that:  (print name)
Information on the attached Entity Organizational Family Tree (OFT) from AVS is accurate, complete, and up-to-date. If you select this option, you must attach an Entity OFT from AVS to this form. Sign and date below and do not complete Part D.
2. Part of the information on the attached Entity OFT from AVS is missing or incorrect and must be updated. If you select this option, you must attach an Entity OFT from AVS to this form. Use Part D to provide the missing or corrected information. Sign and date below and complete Part D.
Our business currently has no information in AVS. If you select this option, you must provide all information required in Part D. Sign and date below and complete Part D.
Signature Man MB\ Title
THE STREET

IMPORTANT! In order to certify in Part C to the accuracy of existing information in AVS, you must obtain a copy of your business' Entity OFT. To obtain an Entity OFT, contact the AVS Office, toll-free, at 800-643-9748 or from the AVS website at https://avss.osmre.gov.

**		-
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Contractor's Business Name:	All-CON, LIC

If the current Entity OFT information for your business is incomplete or incorrect in AVS, or if there is no information in AVS for your business, you must provide all of the following information as it applies to your business. Please make as many copies of this page as you require.

- Every officer (President, Vice President, Secretary, Treasurer, etc.);
- All Directors;
- · All persons performing a function similar to a Director;
- Every person or business that owns 10% or more of the voting stock in your business;
- · Every partner, if your business is a partnership;
- · Every member and manager, if your business is a limited liability company; and
- Any other person(s) who has the ability to determine the manner in which the AML reclamation project is being conducted.

Name Address	CHARLES B GILLIAN 3770 GRANDVIAN RO BERVER IN 25813	Position/Title Telephone # % of Ownership	MAN. MBR. 3047310192 60
Begin Date:	1-1-2001	Ending Date:	
Name Address Begin Date:	CIMIDIO E YOU  203 BETTINA G.  GHENT, WY 25843  1-1-201	Position/Title Telephone # % of Ownership Ending Date:	<u>Memberl</u> 304758 0491 20
Name Address Begin Date:	FREDERICK R VASS HC 76 BOX 34 NIMITZ W 25973 1-1-2001	Position/Title Telephone # % of Ownership Ending Date:	Member 304 255 049 20
Name Address Begin Date:	ALLIANCE CONSULTING INC 124 PHILPOTT LANE BEAVER UN 75813 1-1-2001	Position/Title Telephone # % of Ownership Ending Date:	MENBER 304 255049

#### PAPERWORK REDUCTION STATEMENT

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501) requires us to inform you that: Federal Agencies may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. This information is necessary for all successful bidders prior to the distribution of AML funds, and is required to obtain a benefit.

Public reporting burden for this form is estimated to range from 15 minutes to 1 hour, with an average of 22 minutes per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, Constitution Ave., NW, Washington, D.C. 20240.

Instructions for Completing AML Contractor Form OMB #1029-01191

Part A: General Information. Part A should be completed by the AML Contractor.

Part B: Legal Structure. Part B should be completed by the AML Contractor.

Part C: Certifying and updating information in the Applicant/Violator System (AVS). Part C should be completed by the AML Contractor, selecting the statement that best describes their situation.

If information is accurate, complete and up-to-date, then check the first statement and sign and date. Attach the Entity OFT printout to the OMB #1029-0119 form and submit the form and attachment to the AML Contracting Officer your business is working with.  $^2$ 

Upon reviewing an Entity OFT printout, if you discover the information contained in AVS is not accurate, complete and up-to-date, then check the second statement and complete Part D to provide missing or corrected information that needs reflected in AVS. Attach the Entity OFT printout to the OMB #1029-0119 form and submit the form and attachment to the AML Contracting Officer your business is working with.

If your business does not appear to have any information in AVS, then check the third statement and complete Part D. Submit the OMB #1029-0119 form to the AML Contracting Officer your business is working with.

#### Part D:

If current Entity OFT information for your business is incomplete, incorrect, or if you believe there is no information currently in the AVS for your business, you must complete Part D. Submit the OMB #1029-0119 form to the AML Contracting Officer your business is working with.

<sup>&</sup>lt;sup>1</sup> If you need any assistance completing OMB #1029-0119, please contact the AVS Office at 800.643.9748.

<sup>&</sup>lt;sup>2</sup> You may obtain your business' Entity OFT for certification purposes two ways. One way is to contact the AVS Office at 800.643.9748 and request the information. The second way is to access the AVS from your personal computer by visiting <a href="https://avss.osmre.gov">https://avss.osmre.gov</a>. Click "Access AVS", and then Login as Guest. Place your cursor on the "Entity" Module and "Click". Type your business name in search box and press enter key. If more than one entity record appears, select your company and then "Click" on the "relationship" tab to display your Entity OFT information. Print the Entity OFT from AVS.

#### **BID BOND**

KNOW ALL MEN BY THES	SE PRESENTS, That we, the	undersigned, ALL-CON, LLC
of <u>Beaver</u>		as Principal, and <u>The Cincinnati Insur</u> anc
Co of Cincinnati	, <u>Ohio</u> ,;	a corporation organized and existing under the laws of the State of
Ohio with its principal of	office in the City of <u>Cinci</u>	nnati, as Surety, are held and firmly bound unto the State
of West Virginia, as Obligee, in the p	oenal sum of <u>5% of to</u>	tal bid (\$4,644.50 ) for the payment of which,
well and truly to be made, we jointly	and severally bind ourselves	, our heirs, administrators, executors, successors and assigns.
		eas the Principal has submitted to the Purchasing Section of the
Department of Administration a certa	ain bid or proposal, attached!	hereto and made a part hereof, to enter into a contract in writing for
Provide labor a	nd materials fo	r the reclamantion of
<u>abandoned mine</u>	known as the Ad	rian (HYRE) clogged stream.
NOW THEREFORE,		
hereto and shall furnish any other be	epted and the Principal shall onds and insurance required to se of said bid, then this obligaters derstood and agreed that the li	enter into a contract in accordance with the bid or proposal attached by the bid or proposal, and shall in all other respects perform the ation shall be null and void, otherwise this obligation shall remain in full iability of the Surety for any and all claims hereunder shall, in no event,
way impaired or affected by any ext waive notice of any such extension.	ension of the time within whic	d agrees that the obligations of said Surety and its bond shall be in no the Obligee may accept such bid, and said Surety does hereby reunto set their hands and seals, and such of them as are corporations
		se presents to be signed by their proper officers, this
3rd day of May		,
La NA BEN AL	, =0	
Principal Corporate Seal		ALL-COM LCC
Fraicipal Corporate Ceal		(Name of Principal)
	·	By ("MUQ DIV
		(Must be President or
		Vice President
		- Vypi Ovijaci.
		(Title)
Surety Corporate Seal		The Cincinnati Insurance Co.
• • • • • • • • • • • • • • • • • • • •		(Name of Strety)
•		
7		Michael S Attorney in Fact
		Michael S Lungiord

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance. Raised corporate seals must be affixed, a power of attorney must be attached.

#### THE CINCINNATI INSURANCE COMPANY

Fairfield, Ohio

#### POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That THE CINCINNATI INSURANCE COMPANY, a corporation organized under the laws of the State of Ohio, and having its principal office in the City of Fairfield, Ohio, does hereby constitute and appoint

Arch T. Keller; C. David Robinson; Brenda J. Kash; Michael S. Lunsford and/or Zachary R. Keller

Ona, West Virginia

its true and lawful Attorney(s)-in-Fact to sign, execute, seal and deliver on its behalf as Surety, and as its act and deed, any and all bonds, policies, undertakings, or other like instruments, as follows:

Any such obligations in the United States, up to

Five Million and No/100 Dollars (\$5,000,000.00).

This appointment is made under and by authority of the following resolution passed by the Board of Directors of said Company at a meeting held in the principal office of the Company, a quorum being present and voting, on the 6th day of December, 1958, which resolution is still in effect:

"RESOLVED, that the President or any Vice President be hereby authorized, and empowered to appoint Attorneys-in-Fact of the Company to execute any and all bonds, policies, undertakings, or other like instruments on behalf of the Corporation, and may authorize any officer or any such Attorney-in-Fact to affix the corporate seal; and may with or without cause modify or revoke any such appointment or authority. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company."

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company at a meeting duly called and held on the 7th day of December, 1973.

"RESOLVED, that the signature of the President or a Vice President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Secretary or Assistant Secretary and the seal of the Company may be affixed by facsimile to any certificate of any such power and any such power of certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certified by certificate so executed and sealed shall, with respect to any bond or undertaking to which it is attached, continue to be valid and binding on the Company."

IN WITNESS WHEREOF, THE CINCINNATI INSURANCE COMPANY has caused these presents to be sealed with its corporate seal, duly attested by its Vice President this 10th day of October, 2008.

STATE OF OHIO COUNTY OF BUTLER

On this 10th day of October, 2008, before me came the above-named Vice President of THE CINCINNATI INSURANCE COMPANY, to me personally known to be the officer described herein, and acknowledged that the seal affixed to the preceding instrument is the corporate seal of said Company and the corporate seal and the signature of the officer were duly affixed and subscribed to said instrument by the authority and direction of said corporation.

MARK J. HULLER, Attorney at Law

NOTARY PUBLIC - STATE OF OHIO My commission has no expiration date. Section 147.03 O.R.C.

I, the undersigned Secretary or Assistant Secretary of THE CINCINNATI INSURANCE COMPANY, hereby certify that the above is a true and correct copy of the Original Power of Attorney issued by said Company, and do hereby further certify that the said Power of Attorney is still in full force and effect,

GIVEN under my hand and seal of said Company at Fairfield, Ohio.

this

3rd day of May 2011

) ss:

Gregery J.

BN-1005 (10/08)

SEAL



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

. 1
STATE OF WEST VITZGINIA
COUNTY OF <u>LALEIGH</u> , TO-WIT:
I, CHARLES B GILLIAN, after being first duly sworn, depose and state as follows:
1. I am an employee of AUCON, UC; and, (Company Name)
2. I do hereby attest that
maintains a valid written drug free workplace policy and that such policy is in compliance with <b>West Virginia Code</b> §21-1D-5.
The above statements are sworn to under the penalty of perjury.
ALL- CON, LLC
By: (Company Name)
Title: // //
Date:
Taken, subscribed and sworn to before me this 3 day of May 201!
By Commission expires Ut, 27 2012
OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC
JODY R. SULESKY P. O. BOX 923 BEAVER, WV 25813 My commission expires October 29, 2012 SUBMITTED WITH THE BID IN ORDER TO
COMPLY MUTH MY CODE PROVISIONS. FAILURE TO INCLUDE THE
AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF
THE BID.  Rev March 200

Rev March 2009

RFQ No.
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### STATE OF WEST VIRGINIA Purchasing Division

### PURCHASING AFFIDAVIT

West Virginia Code §5A-3-10a states: 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 owed is an amount greater than one thousand dollars in the aggregate.

"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.

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

acknowledges as a second secon
WITNESS THE FOLLOWING SIGNATURE
Vendor's Name:
Authorized Signature:
State of <u>Wilest Virginia</u>
County of Ralife to-wit:  Taken, subscribed, and sworn to before me this 3 day of May
Taken, subscribed, and swort to before me and
My Commission expires Oct. 25 2012, 20  NOTARY PUBLIC Day & July King
AFFIX SEAL HERE
OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC JODY R. SULESKY P. O. BOX 923 PEAVED MV 39813

My commission expires October 29, 201