



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

Solicitation

NUMBER
COR61525

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF:
TARA LYLE 304-558-2544

*709045810 (304)755-8135
 Tri-State Roofing & Sheet Metal Company
 of West Virginia
 P. O. Box 1231
 Charleston, WV 25324

VENDOR

SHIP TO

DIVISION OF CORRECTIONS
 MT. OLIVE CORRECTIONAL
 CENTER
 1 MOUNTAINSIDE WAY
 MT. OLIVE, WV
 25185 304-442-7213

DATE PRINTED
09/13/2012

BID OPENING DATE: 10/17/2012 BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	1	JB		910-66		
<p>***** PLEASE NOTE A MANDATORY PRE-BID MEETING IS SCHEDULED FOR 9/25/2012 AT 10:00 AM AT THE MT. OLIVE CORRECTIONAL COMPLEX LOCATED IN FAYETTE COUNTY. VENDORS SHOULD PRE-REGISTER PRIOR TO THE MEETING WITH TERESA GREGORY BY PHONE AT 304-442-7213 OR BY EMAIL AT TERESA.G.GREGORY@WV.GOV. *****</p> <p>PLEASE NOTE: THE DRUG FREE WORKPLACE AFFIDAVIT AND THE BID BOND ARE REQUIRED WITH BID SUBMISSION. *****</p> <p>THE WEST VIRGINIA PURCHASING DIVISION FOR THE AGENCY, WV DIVISION OF CORRECTIONS - MT. OLIVE CORRECTIONAL COMPLEX, IS SOLICITING BIDS TO REMOVE EXISTING ROOF AND INSTALL NEW ROOFING SYSTEMS ON 15 BUILDINGS AT THE MOUNT OLIVE CORRECTIONAL COMPLEX LOCATED IN FAYETTE COUNTY, PER THE ATTACHED SPECIFICATIONS.</p> <p>ATTACHMENTS INCLUDE:</p>						

RECEIVED
 2012 OCT 24 AM 11:05
 WV PURCHASING DIVISION

SIGNATURE <i>P. Haden</i>	TELEPHONE (304) 755-8135	DATE 10/22/12
TITLE Vice President	FEIN 55-0591156	ADDRESS CHANGES TO BE NOTED ABOVE

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



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

Solicitation

NUMBER
COR61525

PAGE
2

ADDRESS CORRESPONDENCE TO ATTENTION OF:
TARA LYLE 304-558-2544

VENDOR

*709045810 (304)755-8135
 Tri-State Roofing & Sheet Metal Company
 of West Virginia
 P. O. Box 1231
 Charleston, WV 25324

SHIP TO

DIVISION OF CORRECTIONS
 MT. OLIVE CORRECTIONAL
 CENTER
 1 MOUNTAINSIDE WAY
 MT. OLIVE, WV
 25185 304-442-7213

DATE PRINTED
09/13/2012

BID OPENING DATE: 10/17/2012 BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
1.				INSTRUCTIONS TO VENDORS SUBMITTING BIDS		
2.				GENERAL TERMS AND CONDITIONS		
3.				ADDITIONAL TERMS AND CONDITIONS (CONSTRUCTION CONTRACTS ONLY)		
4.				COR61525 SPECIFICATIONS		
5.				EXHIBIT #1 INCLUDES DRAWINGS OF ENTIRE FACILITY AND SKETCHES 1 THROUGH 11		
6.				CERTIFICATION AND SIGNATURE PAGE		
7.				ADDENDUM ACKNOWLEDGEMENT FORM		
8.				PURCHASING AFFIDAVIT		
9.				DRUG-FREE WORKPLACE AFFIDAVIT		
10.				BID BOND FORM AND INSTRUCTIONS		
11.				WV-75-CONSTRUCTION BID SUBMISSION REVIEW FORM		
***** THIS IS THE END OF RFQ COR61525 ***** TOTAL:						

SIGNATURE <i>P. Staden</i>	TELEPHONE (304) 755-8135	DATE 10/22/12
TITLE Vice President	FEIN 55-0591156	ADDRESS CHANGES TO BE NOTED ABOVE

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

RFQ # COR61525

ALL LABOR, MATERIALS, EQUIPMENT, AND SUPPLIES NECESSARY TO INSTALL NEW
ROOFING SYSTEM ON FIFTEEN (15) BUILDINGS

MOUNT OLIVE CORRECTIONAL COMPLEX

FAYETTE COUNTY, WV

BID FORM

Bidder's Company Name: Tri-State Roofing & Sheet Metal Company of West Virginia

Bidder's Address: 7 Stone St., Rock Branch Industrial Park
Poca, WV 25159

Remittance Address: P. O. Box 1231

(If different)

Charleston, WV 25324

Phone Number: (304) 755-8135

Fax Number: (340) 755-5275

Email Address: phaden@tri-stateservice.com

WV Contractor's License Number: WV 000104

We, the undersigned, hereby propose to furnish all materials, equipment, and labor to complete all work in a workmanlike manner, as described in the Bidding Documents.

Two Million Seven Hundred Thirty-Two Thousand Nine
CONTRACT BASE BID: Hundred Eighteen and 00/100 Dollars

(\$ 2,732,918.00) (Contract base bid to be written in words and numbers.)

METAL DECKING PER SQUARE FOOTAGE COST BID (IF ANY)

Eight and 70/100 Dollars

(\$ 8.70) (Total to be written in words and numbers.)

Lightning protection contractor:

LPI # 852

License # L1555952384

Account # 1023-2830

The Bidder understands that to the extent allowed by the West Virginia Code, the OWNER reserves the right to waive any informality or irregularity in any Bid, or Bids, and to reject any or all Bids in whole or in part; to reject a bid not accompanied by the required bid security or by other data required by the Bidding Documents; to reject any conditions of the bid by the Bidder that is in any way inconsistent with the requirements, terms, and conditions of the Bidding Documents; or to reject a bid that is in any way incomplete or irregular.

RESPECTFULLY SUBMITTED:

DATE: 10/22/12

WV VENDOR NO.: 709045810

CONTRACTOR LICENSE NO.: WV 000104

BY: *P. Haden*
(SIGNATURE, IN INK)

TITLE: Vice President

FIRM NAME: Tri-State Roofing & Sheet Metal Co. (CORPORATE SEAL
IF APPLICABLE)

ADDRESS: P. O. Box 1231, Charleston, WV 25324

END OF BID FORM

ADDITIONAL TERMS AND CONDITIONS (Construction Contracts Only)

1. **CONTRACTOR'S LICENSE:** West Virginia Code § 21-11-2 requires that all persons desiring to perform contracting work in this state be licensed. The West Virginia Contractors Licensing Board is empowered to issue the contractor's license. Applications for a contractor's license may be made by contacting the West Virginia Division of Labor.

West Virginia Code § 21-11-11 requires any prospective Vendor to include the contractor's license number on its bid. Failure to include a contractor's license number on the bid shall result in Vendor's bid being disqualified. Vendors should include a contractor's license number in the space provided below.

Contractor's Name:

Contractor's License No.

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a purchase order/contract.

2. **DRUG-FREE WORKPLACE:** W. Va. Code § 21-1D-5 provides that any solicitation for a public improvement contract requires each Vendor that submits a bid for the work to submit at the same time an affidavit that the Vendor has a written plan for a drug-free workplace policy. To comply with this law, Vendor must either complete the enclosed drug-free workplace affidavit and submit the same with its bid or complete a similar affidavit that fulfills all of the requirements of the applicable code. Failure to submit the signed and notarized drug-free workplace affidavit, or a similar affidavit that fully complies with the requirements of the applicable code, with the bid shall result in disqualification of Vendor's bid.
3. **AIA DOCUMENTS:** All construction contracts that will be completed in conjunction with architectural services procured under Chapter 5G of the West Virginia Code will be governed by the AIA A101-2007 and A201-2007 or the A107-2007 documents, as amended by the Supplementary Conditions for the State of West Virginia, in addition to the terms and conditions contained herein.
4. **SUBCONTRACTOR LIST SUBMISSION:** In accordance with W. Va. Code § 5-22-1, The apparent low bidder on a contract for the construction, alteration, decoration, painting or improvement of a new or existing building or structure valued at more than \$500,000.00 shall submit a list of all subcontractors who will perform more than \$25,000.00 of work on the project including labor and materials. This provision shall not apply to any other construction projects, such as highway, mine reclamation, water or sewer projects.

c. **Required Information.** The subcontractor list shall contain the following information:

CERTIFICATION AND SIGNATURE PAGE

By signing below, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid or proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.

Tri-State Roofing & Sheet Metal Company of West Virginia

(Company)

P. Haden

(Authorized Signature)

Pat Haden, Vice President

(Representative Name, Title)

(304) 755-8135 (304) 755-5275

(Phone Number)

(Fax Number)

10/22/12

(Date)

ADDENDUM ACKNOWLEDGEMENT FORM

SOLICITATION NO.: COR61525

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 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.

Tri-State Roofing & Sheet Metal Co.

Company



Authorized Signature

10/22/2012

Date

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

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, 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: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. 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.

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.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"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.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Tri-State Roofing & Sheet Metal Company of West Virginia

Authorized Signature: *P. G. Faden* Date: 10/17/12

State of West Virginia

County of Putnam, to-wit:

Taken, subscribed, and sworn to before me this 17 day of October, 2012.

My Commission expires April 18, 2016.

AFFIX SEAL HERE

NOTARY PUBLIC *Jessica N. Saul*





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

STATE OF West Virginia

COUNTY OF Putnam, TO-WIT:

I, Pat Haden, after being first duly sworn, depose and state as follows:

- 1. I am an employee of Tri-State Roofing & Sheet Metal Co.; and,
(Company Name)
- 2. I do hereby attest that Tri-State Roofing & Sheet Metal Co.
(Company Name)

maintains a valid written drug free workplace policy and that such policy is in compliance with **West Virginia Code** §21-1D-5.

The above statements are sworn to under the penalty of perjury.

Tri-State Roofing & Sheet Metal Co.
(Company Name)

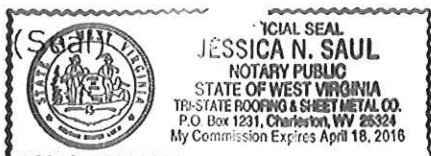
By: P. Haden

Title: Vice President

Date: 10/17/12

Taken, subscribed and sworn to before me this 17th day of October, 2012.

By Commission expires April 18, 2016



Jessica N. Saul
(Notary Public)

THIS AFFIDAVIT MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF THE BID.

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Tri State Roofing & Sheet Metal Company
of Charleston, WV, as Principal, and Travelers Casualty and Surety Company of America
of Hartford, CT, a corporation organized and existing under the laws of the State of
CT with its principal office in the City of Hartford, 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
RFQ #COR61525 - Install New Roofing System on Fifteen (15) Buildings - Mount Olive Correctional Complex,
Fayette County, WV - According to Plans & Specifications

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.

IN WITNESS WHEREOF, Principal and Surety have hereunto set their hands and seals, and such of them as are corporations
have caused their corporate seals to be affixed hereunto and these presents to be signed by their proper officers, this
17th day of October, 2012.

Principal Corporate Seal

Tri State Roofing & Sheet Metal Company

(Name of Principal)

By Pat Haden

(Must be President or
Vice President)

Pat Haden, Vice President

(Title)

Surety Corporate Seal

Travelers Casualty and Surety Company of America

(Name of Surety)

By: Patricia A. Moye

Patricia A. Moye, WV Resident Agent Attorney-in-Fact

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



POWER OF ATTORNEY

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company
Travelers Casualty and Surety Company
Travelers Casualty and Surety Company of America
United States Fidelity and Guaranty Company

Attorney-In Fact No. 220367

Certificate No. 004875710

KNOW ALL MEN BY THESE PRESENTS: That St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company and St. Paul Mercury Insurance Company are corporations duly organized under the laws of the State of Minnesota, that Farmington Casualty Company, Travelers Casualty and Surety Company, and Travelers Casualty and Surety Company of America are corporations duly organized under the laws of the State of Connecticut, that United States Fidelity and Guaranty Company is a corporation duly organized under the laws of the State of Maryland, that Fidelity and Guaranty Insurance Company is a corporation duly organized under the laws of the State of Iowa, and that Fidelity and Guaranty Insurance Underwriters, Inc., is a corporation duly organized under the laws of the State of Wisconsin (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint

Gregory T. Gordon, Patricia A. Moye, Larry D. Kerr, Allan L. McVey, and Kimberly J. Wilkinson

of the City of Charleston, State of West Virginia, their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed and their corporate seals to be hereto affixed, this 23rd day of May, 2012.

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company
Travelers Casualty and Surety Company
Travelers Casualty and Surety Company of America
United States Fidelity and Guaranty Company



State of Connecticut
City of Hartford ss.

By: [Signature]
George W. Thompson, Senior Vice President

On this the 23rd day of May, 2012, before me personally appeared George W. Thompson, who acknowledged himself to be the Senior Vice President of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal. My Commission expires the 30th day of June, 2016.



[Signature]
Marie C. Tetreault, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary, of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 17th day of October, 20 12


Kevin E. Hughes, Assistant Secretary



To verify the authenticity of this Power of Attorney, call 1-800-421-3880 or contact us at www.travelersbond.com. Please refer to the Attorney-In-Fact number, the above-named individuals and the details of the bond to which the power is attached.

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number: WV000104

Classification:

HEATING, VENTILATING & COOLING
SPECIALTY
ROOFING
CRANE

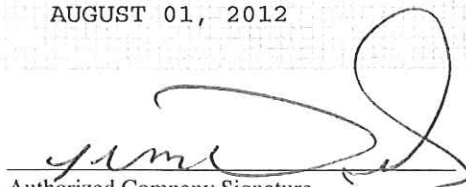
TRI STATE ROOFING & SHEET METAL CO
DBA TRI STATE ROOFING & SHEET METAL CO
PO BOX 1231
CHARLESTON, WV 25324-1231

Date Issued

Expiration Date

AUGUST 01, 2012

AUGUST 01, 2013


Authorized Company Signature


Chair, West Virginia Contractor
Licensing Board

**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.

**WEST VIRGINIA
STATE TAX DEPARTMENT
BUSINESS REGISTRATION
CERTIFICATE**

ISSUED TO:
**TRI STATE ROOFING & SHEET METAL COMPANY OF WEST VIRGINIA
ROCK BRANCH INDUSTRIAL PARK 7 STONE STREET
POCA, WV 25159**

BUSINESS REGISTRATION ACCOUNT NUMBER: 1037-1512

This certificate is issued on: 06/22/2010

*This certificate is issued by
the West Virginia State Tax Commissioner
in accordance with W.Va. Code § 11-12.*

*The person or organization identified on this certificate is registered
to conduct business in the State of West Virginia at the location above.*

This certificate is not transferrable and must be displayed at the location for which issued.

This certificate shall be permanent until cessation of the business for which the certificate of registration was granted or until it is suspended, revoked or cancelled by the Tax Commissioner.

Change in name or change of location shall be considered a cessation of the business and a new certificate shall be required.

TRAVELING/STREET VENDORS: Must carry a copy of this certificate in every vehicle operated by them.
CONTRACTORS, DRILLING OPERATORS, TIMBER/LOGGING OPERATIONS: Must have a copy of this certificate displayed at every job site within West Virginia.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/24/2012

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

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

PRODUCER J Smith Lanier & Co-Lexington Powell-Walton-Milward P O Box 2030 Lexington, KY 40588	CONTACT NAME: Roxanne Cameron PHONE (A/C, No, Ext): 800-796-3567 E-MAIL ADDRESS: rcameron@pwm-jsl.com	FAX (A/C, No): 859-254-8020	
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Tri-State Roofing & Sheet Metal Company of West Virginia P.O. Box 1231 Charleston, WV 25324	INSURER A: Westfield Insurance Company		24112
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			CMM5942244	04/30/2012	04/30/2013	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			CMM5942244	04/30/2012	04/30/2013	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$0			CMM5942244	04/30/2012	04/30/2013	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$ WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Stop Gap Employers Liability			CMM5942244	04/30/2012	04/30/2013	\$1,000,000 Ea. Accident \$1,000,000 Ea. Employee \$1,000,000 Policy Limit

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

CERTIFICATE HOLDER For Information Purposes Only	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/28/2012

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

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

PRODUCER City Insurance Professionals P. O. Box 1126 Charleston WV 25324	CONTACT NAME: Bobby Pauley	
	PHONE (A/C, No, Ext): (304) 926-7400 FAX (A/C, No): (304) 926-7439 E-MAIL ADDRESS: Bobby.Pauley@cityinsure.org	
INSURED Tri-State Roofing & Sheet Metal Co of WV P. O. Box 1231 Charleston WV 25324	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Brickstreet Mutual Insurance	12372
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: 7/1/12 - 13 WC REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WCB1005809	7/1/2012	7/1/2013	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Increased Employers' Liability, WV Deliberate Intent coverage included and Blanket Waiver of Subrogation included

CERTIFICATE HOLDER Evidence of Insurance	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Bobby Pauley/BRP <i>Bobby R Pauley</i>



State Tax Department, Excise and Support Unit
1001 Lee St. East
Charleston, WV 25301



Earl Ray Tomblin, Governor

Craig A. Griffith, Tax Commissioner

TRI STATE ROOFING & SHEET METAL COM
PO BOX 1231
CHARLESTON WV 25324-1231

Letter Id: L1685167488
Issued: 10/22/2012

West Virginia State Tax Department Statement of Good Standing

EFFECTIVE DATE: October 22, 2012

A review of tax accounts indicates that the above named taxpayer is in good standing as of the effective date of this document.

The issuance of this Statement of Good Standing shall not bar any audits, investigations, assessments, refund or credits with respect to the taxpayer named above and is based only on a review of the tax returns and not on a physical audit of records.

Sincerely,

Diana L. Webb, Tax Unit Supervisor
Excise Tax Unit
Tax Account Administration Division



ROOFING & SHEET METAL COMPANY

P.O. BOX 1231, CHARLESTON, WEST VIRGINIA 25324 • TELEPHONE (304) 755-8135 • FAX (304) 755-5275

E-MAIL: charleston@tri-stateservice.com • WEBSITE ADDRESS: www.tri-stateservicegroup.com

CONTRACTORS FOR:

ROOFING
ROOF DECKS
INDUSTRIAL SHEETING AND ROOFING
SHEET METAL FABRICATION AND ERECTION
HVAC/MECHANICAL SERVICE

WV CONTRACTOR LICENSE NO. WV000104

To: Tara Lyle
WV Department of Corrections

Date: 10/24/12

Re RFQ COR61525

The enclosed letters show the manufacturer(s) acceptance of the wind up-lift requirements. This is submitted per the requirements specification 1.22 – Warranty - A
Thank you.

Respectfully,

Pat Haden

CARLISLE SYNTEC

Rep Checklist for Letter Request

1. Warranty Information

Warranty Term: 20 Wind Speed Coverage: 55 other 72

2. Project Information

Addressee Name: Tri-State Roofing & Sheet Metal Company of West Virginia Address: P. O. Box 1231, Charleston, WV 25324

Project Name: Mount Olive Correctional Center Project Address: 1 Mountainside Way City/State/Zip: Mt. Olive, WV 25185

Building Dimensions: Various Roof Height: Ft. 10 - 100 Roof Slope: 1/4"

Roof Status: New Tear-Off Re-roof/No Tear off Membrane Removal Only

If applicable, verify existing membrane type and thickness to remain: n/a

Building Usage (i.e. warehouse, hospital, school, etc.): Prison

Special Building Condition (i.e. controlled environment, swimming pool, etc.): n/a

3. System Information

Deck Type: Metal/Concrete System Type: "A", .060 EPDM

Substrate board used? Yes No; If yes, indicate type: _____

Vapor Retarder Used? Yes No; If yes, indicate type: _____

Base Layer Insulation Board Type/Thickness: ISO/2"

Top Layer Insulation Board Type/Thickness: ISO/3"

Cover Board Type/Thickness: n/a

Membrane Type/Thickness: .060 Membrane Width: 20'

Fastener Type: _____ Fastener Spacing: _____

Insulation Securement Method: Flexible FAST OlyBond 500 Mechanical Fasteners Asphalt Other _____

Insulation Adhesive Bead Spacing: 6" OC

Perimeter Edge Condition: Drip Edge Parapet Height 2'

Carlisle Metal Utilized? Yes No; If yes, indicate type: _____

4. Performance Requirements/Quality Assurance (if applicable)

Factory Mutual (FM) 1-60 1-75 1-90 1-105 1-120 other _____

Underwriters Laboratories (UL) Class A B C

American Society of Civil Engineers (ASCE/SEI 7)

Surface Roughness Categories (Select One)

Exposure B- Urban, suburban & wooded areas or other terrain.

Exposure C- Open terrain with scattered obstructions having heights generally less than 30'.

Exposure D- Flat, unobstructed areas with nearby water surfaces outside hurricane-prone regions.

Classification of Buildings (Select One)

Category I- Buildings that represent a low hazard to human life (agricultural, minor storage)

Category II- Buildings not covered by categories I, III or IV (commercial buildings)

Category III- Buildings that represent a substantial hazard to human life (schools, public buildings).

Category IV- Buildings that are considered essential facilities (hospitals, power plants).

5. Comments

NOTE: TOP LAYER OF POLYISO NEEDS TO BE 25 PSI ISO FOR 20YR - 72MPH WARRANTY. (8 FASTENERS PER 4'x8' BOARD FOR STEEL DECK) & 6" O.C. BEADS OF ADHESIVE FOR ^{all} DECK USING 4'x4' BOARDS

N/A - PH
 Robin Levens
 Sr Design Analyst
 Carlisle SynTec, Inc.
 ORDERED 10/24/12





Request for Manufacturer Certification Form

1. Warranty Information

Warranty Term: 5 10 15 20 25 30 Warranty Wind Speed: 55 72 other _____
 Versico Copy A Submitted? Yes No; If yes, indicate Project # _____

2. Project Information

Contractor Name: Tri-State Roofing & Sheet Metal Co. Email Address: phaden@tri-stateservice.com
 Contact Person: Pat Haden
 Project Name: Mount Olive Correctional Center
 Project Address: 1 Mountainside Way City: Mt. Olive State: WV
 Building Dimensions: Various Roof Height: 10 - 100 Ft. Roof Slope: 1/4"
 Roof Status: New Tear-Off Re-roof/No Tear off Membrane Removal Only
 If applicable, verify existing material to remain: _____

3. System Information

Deck Type 1: Metal System Type: "A" .060 EPDM
 Vapor Retarder Used? Yes No; If yes, indicate type: _____
 Insulation Type/Thickness: 2 layers - 2" and 3" ISO
 Cover Board Type/Thickness: n/a
 Insulation Securement Method: Dash DC OlyBond 500 Mechanical Fasteners Asphalt Other _____
 Membrane Type/Thickness: .060 Membrane Sheet Width: 20'

Deck Type 2: Concrete System Type: "A" .060 EPDM
 Vapor Retarder Used? Yes No; If yes, indicate type: _____
 Insulation Type/Thickness: 2 layers - 2" and 3" ISO
 Cover Board Type/Thickness: n/a
 Insulation Securement Method: Dash DC OlyBond 500 Mechanical Fasteners Asphalt Other _____
 Membrane Type/Thickness: .060 Membrane Sheet Width: 20'

4. Performance Requirements/Quality Assurance (if necessary)

- Underwriters Laboratories (UL) Class A B C
- Factory Mutual (FM) 1-60 1-75 1-90 1-105 1-120 other _____
- American Society of Civil Engineers (ASCE/SEI 7)

Surface Roughness Categories (Select One)

- Exposure B- Urban, suburban & wooded areas or other terrain.
- Exposure C- Open terrain with scattered obstructions having heights generally less than 30'.
- Exposure D- Flat, unobstructed areas and water surfaces outside hurricane-prone regions.

Classification of Buildings (Select One)

- Category I- Buildings that represent a low hazard to human life (agricultural, minor storage)
- Category II- Buildings not covered by categories I, III or IV (commercial buildings)
- Category III- Buildings that represent a substantial hazard to human life (schools, public buildings).
- Category IV- Buildings that are considered essential facilities (hospitals, power plants).

5. Comments

NOTE: TOP LAYER OF POLYISO NEEDS TO BE 25 PSI FOR THE 20yr-72MPH WARRANTY. (8 FASTENER PER 4'x8 BOARD) N/A - FOR METAL DECK & 6" o.c. BEAMS OF ADHESIVE FOR ALL DECK w/ 4'x4' BOARDS

Robin Loyens
 Sr Design Analyst
 Versico, Inc.

OK'd 10/24/12