



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

Solicitation

NUMBER
NCF13530

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF:
TARA LYLE 804-558-2544

VENDOR

*B05155730 412-697-9201
 SUPER LAUNDRY EQUIPMENT CO
 1201A BRIGHTON RD
 PITTSBURGH PA 15233

SHIP TO

NORTHERN CORRECTIONAL FACILITY
 DIVISION OF CORRECTIONS
 RD#2, BOX 1
 MOUNDSVILLE, WV
 26041

DATE PRINTED
05/13/2013

BID OPENING DATE: 06/04/2013 BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
***** THERE IS A NON-MANDATORY MEETING SCHEDULED FOR MAY 21, 2013 AT 10:00 AM AT THE NORTHERN CORRECTIONAL FACILITY LOCATED AT 112 NORTHERN REGION CORRECTIONAL DRIVE MOUNDSVILLE, WV 26041. ***** PLEASE NOTE THE DRUG FREE WORKPLACE AFFIDAVIT AND BID BOND ARE REQUIRED WITH BID SUBMISSION. *****						
0001	1	JB		500-87		\$94,021.00
LAUNDRY WASHER EXTRACTORS AND TUMBLE DRYERS						
THE WEST VIRGINIA PURCHASING DIVISION FOR THE AGENCY, WV DIVISION OF CORRECTIONS - NORTHERN CORRECTIONAL FACILITY, IS SOLICITING BIDS TO REMOVE EXISTING WASHERS AND DRYERS AND REPLACE WITH NEW WASHERS AND DRYERS AT THE NORTHERN CORRECTIONAL FACILITY LOCATED AT 112 NORTHERN REGION CORRECTIONAL DRIVE MOUNDSVILLE, WV 26041, PER THE ATTACHED SPECIFICATIONS. ATTACHMENTS INCLUDE: 1. INSTRUCTIONS TO VENDORS SUBMITTING BIDS 2. GENERAL TERMS AND CONDITIONS 3. ADDITIONAL TERMS AND CONDITIONS (CONSTRUCTION CONTRACTS ONLY)						

06/04/13 09:12:31 AM
West Virginia Purchasing Division

SIGNATURE <i>Bob Meyer</i>	TELEPHONE 877-404-7278	DATE 6/3/13
TITLE SALES MANAGER	FEIN 53-018-8589	ADDRESS CHANGES TO BE NOTED ABOVE

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



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4.				NCF13530 SPECIFICATIONS		
5.				CERTIFICATION AND SIGNATURE PAGE		
6.				ADDENDUM ACKNOWLEDGEMENT FORM		
7.				PURCHASING AFFIDAVIT		
8.				DRUG-FREE WORKPLACE AFFIDAVIT		
9.				BID BOND INSTRUCTIONS AND FORM		
10.				WV-75-CONSTRUCTION BID SUBMISSION REVIEW FORM		
***** THIS IS THE END OF RFQ NCF13530 ***** TOTAL:						<u>\$94,021.00</u>

SIGNATURE <i>Bob Meyer</i>	TELEPHONE 877-404-7278	DATE 6/3/13
TITLE <i>Sales Manager</i>	FEIN 53-018-8589	ADDRESS CHANGES TO BE NOTED ABOVE

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

NCF13530 Washers & Dryers

Pricing Page - Exhibit A

Item	Description	* Unit Price	Unit of Measure	** Quantity	Extended Price
3.1.1	Laundry Washer-Extractor UniMac UWN100T3VQ or equal	\$17,455.00	Each	4	\$69,820.00
3.1.2	Tumble Dryer UniMac UT120NRU or equal	\$8,067.00	Each	3	\$24,201.00
				Total Cost:	\$94,021.00

* The unit price shall include setup and installation

** The Agency reserves the right to award this contract in whole or in part.

Failure to use this form may result in disqualification of your bid

Name:	COINMACH DBA SUPER LAUNDRY
Signature:	<i>Bob Meyer</i>
Address:	1201A. BRIGHTON ROAD PITTSBURGH. PA 15122
Phone Number:	877-404-7278
Fax Number:	412-697-9206
Authorized Signature:	<i>Bob Meyer</i>
Email Address:	BOB@SUPERLAUNDRY.PA.COM

000025

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.

COINMACH DBA SuperLaundry

(Company)

Bob Guyer

(Authorized Signature)

BOB GUYER, Sales Manager

(Representative Name, Title)

877-404-7278

(Phone Number)

412-697-9206

(Fax Number)

6/3/2013

(Date)

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: NCF13530

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 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.

COINMACH DBA Super Laundry
Company

Bob Myers
Authorized Signature

6/3/13
Date

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

RFQ No. _____

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 exceeds 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: Bob Guyer - Super Laundry

Authorized Signature: Bob Guyer Date: 5-24-13

State of PA

County of Allegheny, to-wit:

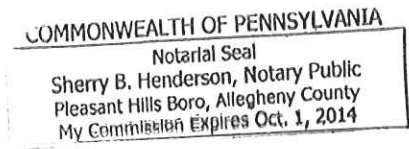
Taken, subscribed, and sworn to before me this 24th day of May, 2013.

My Commission expires October 1, 2014.

AFFIX SEAL HERE

NOTARY PUBLIC Sherry B. Henderson

Purchasing Affidavit (Revised 07/01/2012)



BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Coinmach Corporation
of 1201 A Brighton Road, Pittsburgh, PA, as Principal, and RLI Insurance Company
of 9025 North Lindbergh Drive Peoria, IL 61615, a corporation organized and existing under the laws of the State of Illinois
with its principal office in the City of Peoria, 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% of Amount Bid) 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
One Time Purchase of Four (4) Laundry Washer-Extractors and Three (3) Tumble Dryers

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
30th day of May, 2013.

Principal Corporate Seal

COINMACH CORPORATION

(Name of Principal)

By [Signature]
(Must be President or Vice President)

Vice President
(Title)

Surety Corporate Seal

RLI INSURANCE COMPANY

Maureen McNeill (Name of Surety)

[Signature]
Maureen McNeill Attorney-in-Fact

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.



RLI Surety
 P.O. Box 3967 | Peoria, IL 61612-3967
 Phone: (800)645-2402 | Fax: (309)689-2036
 www.rlicorp.com

POWER OF ATTORNEY

RLI Insurance Company

Know All Men by These Presents:

That this Power of Attorney is not valid or in effect unless attached to the bond which it authorizes executed, but may be detached by the approving officer if desired.

That **RLI Insurance Company**, an Illinois corporation, does hereby make, constitute and appoint:
Darella E. White, Douglas R. Wheeler, Richard A. Jacobus, Mary C. O'Leary, Elizabeth Marrero, Maureen McNeill, Marisa Thielen,
Wayne G. McVaugh, Marina Tapia, Jaquanda Long, jointly or severally

in the City of Philadelphia, State of Pennsylvania its true and lawful Agent and Attorney in Fact, with full power and authority hereby conferred, to sign, execute, acknowledge and deliver for and on its behalf as Surety, the following described bond.

Any and all bonds provided the bond penalty does not exceed Twenty Five Million Dollars (\$25,000,000.00).

The acknowledgment and execution of such bond by the said Attorney in Fact shall be as binding upon this Company as if such bond had been executed and acknowledged by the regularly elected officers of this Company.

The **RLI Insurance Company** further certifies that the following is a true and exact copy of the Resolution adopted by the Board of Directors of **RLI Insurance Company**, and now in force to-wit:

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

IN WITNESS WHEREOF, the **RLI Insurance Company** has caused these presents to be executed by its Vice President with its corporate seal affixed this 24th day of December, 2012.



RLI Insurance Company

By: [Signature]
 Roy C. Die Vice President

State of Illinois }
 County of Peoria } SS

CERTIFICATE

On this 24th day of December, 2012, before me, a Notary Public, personally appeared Roy C. Die, who being by me duly sworn, acknowledged that he signed the above Power of Attorney as the aforesaid officer of the **RLI Insurance Company** and acknowledged said instrument to be the voluntary act and deed of said corporation.

I, the undersigned officer of **RLI Insurance Company**, a stock corporation of the State of Illinois, do hereby certify that the attached Power of Attorney is in full force and effect and is irrevocable; and furthermore, that the Resolution of the Company as set forth in the Power of Attorney, is now in force. In testimony whereof, I have hereunto set my hand and the seal of the **RLI Insurance Company** this 30th day of MAY, 2013.

By: [Signature]
 Jacqueline M. Bockler Notary Public

RLI Insurance Company

By: [Signature]
 Roy C. Die Vice President





RLI Insurance Company
 P.O. Box 3967 Peoria IL 61612-3967
 Phone: 309-692-1000 Fax: 309-683-1610

RLI Insurance Company

December 31, 2012

Admitted Assets

Investments:	
Fixed maturities,	\$ 357,980,948
Equity securities	912,184,028
Short-term investments	23,235,318
Real estate	17,271,017
Properties held to produce income	0
Cash on hand and on deposit	10,051,146
Other invested assets	1,115,700
Receivables for securities	0
Agents' balances	85,516,217
Investment income due and accrued	4,022,247
Funds held	4,000
Reinsurance recoverable on paid losses	10,137,514
Federal income taxes receivable	0
Net deferred tax asset	381,309
Guarantee funds receivable or on deposit	179,484
Electronic data processing equipment, net of depreciation	227,680
Receivable from affiliates	0
Other admitted assets	1,594,808
Total Admitted Assets	\$ 1,423,901,416

Liabilities and Surplus

Liabilities:	
Reserve for unpaid losses and loss adjustment expenses	\$ 423,119,909
Unearned premiums	183,123,513
Accrued expenses	46,246,361
Funds held	9,404,285
Advance premiums	4,637,835
Amounts withheld	46,553,072
Ceded reinsurance premium payable	16,146,440
Payable for securities	0
Statutory penalties	1,244,600
Current federal & foreign income taxes	2,163,746
Federal income tax payable	0
Borrowed money and accrued interest	0
Drafts outstanding	0
Payable to affiliate	3,081,840
Other liabilities	4,107,634
Total Liabilities	\$ 739,829,235
Surplus:	
Common stock	\$ 10,000,375
Additional paid-in capital	242,451,084
Unassigned surplus	431,620,722
Total Surplus	\$ 684,072,181
Total Liabilities and Surplus	\$ 1,423,901,416

State of Illinois }
 County of Peoria }

The undersigned, being duly sworn, says: That he is the President of RLI Insurance Company; that said Company is a corporation duly organized, in the State of Illinois, and licensed and engaged in business in the State of _____ and has duly complied with all the requirements of the laws of said State applicable of said Company and is duly qualified to act as Surety under such laws; that said Company has also complied with and is duly qualified to act as Surety under the Act of Congress approved July 1947, 6U.S.C sec. 6-13; and that to the best of his knowledge and belief the above statement is a full, true, and correct statement of the financial condition of the said Company on the 31st day of December 2012.

Attest:



{ Corporate Seal Affixed }

Michael J. Stone President

 Cynthia S. Dohm Assistant Secretary

Sworn to before me this 4th day of March, 2013.



{ Notarial Seal Affixed }

Jacqueline M. Bockler Notary Public, State of Illinois

West Virginia Offices of the Insurance Commissioner



Certificate of Authority

Whereas, **RLI INSURANCE COMPANY**, domiciled in the State of **ILLINOIS**, has complied with all the requirements of the laws of this State so as to entitle it to transact its appropriate business in the State of West Virginia.

Therefore, I the undersigned, Insurance Commissioner of the State of West Virginia, pursuant to the authority vested in me by the laws of this State, do hereby authorize it to transact the business of insurance as defined in Chapter 33

ACCIDENT & SICKNESS - ARTICLE 1, SECTION 10(b)

CASUALTY - ARTICLE 1, SECTION 10(e)

FIRE - ARTICLE 1, SECTION 10(c)

MARINE - ARTICLE 1, SECTION 10(d)

SURETY - ARTICLE 1, SECTION 10(f) (1) (2) & (3)

of the 1931 Code of West Virginia as amended, in the State of West Virginia in accordance with the laws thereof until midnight on the 31st day of May, 2013, unless this license be sooner revoked. Pursuant to W. Va. Code §33-3-2(c), the above authorization does not allow the insurer to transact a kind of insurance in this State unless duly authorized or qualified to transact such insurance in the state or country of its domicile.

In Testimony Whereof, I have hereunto set my hand and affixed my seal of office at the City of Charleston this 1st day of June, 2012.

Handwritten signature of Michael D. Riley in cursive script.

Michael D. Riley
Insurance Commissioner

NAIC # 13056

WV File # 0885