#### **Otis Elevator Company**

North American Operations 4768 Chimney Drive Charleston, WV 25302



August 20, 2013

Ms. Connie Oswald 900 Pennsylvania Ave Charleston, WV 25301

Reference: WV Lottery Elevator Maintenance

LOT512

NO QUOTE / BID

Dear Ms. Oswald:

Otis will not be quoting the RFQ LOT512. Please keep Otis on you bid list for future opportunities. If you have any questions, please give me a call.

Sincerely,

OTIS ELEVATOR COMPANY

Eric Painter

Account Manager

08/20/13 01:18:56 PM
West Virginia Purchasing Division

## SECTION 6: AWARD CRITERIA

The State of West Virginia shall award this Contract according to the following award criteria. A + B + C = D Total Bid

The following is a **SAMPLE** bid tabulation, for reference only. The amount of hours and the aggregate expenditures of supplied parts are estimates, used only as a basis for award of a contract. Actual amounts required during the life of the contract may be greater or lesser.

NOTE: The multiplier listed below is derived by taking the parts percentage mark-up listed in III.(C)(12)(c) and converting it to a multiplier factor. For example, a 50% mark-up would equal a multiplier of 1.5; conversely, a 10% reduction would equal a multiplier of .9.

West Virginia Lottery

ELEVATOR NO.	CAPACITY	MONTHLY COST	(X12) YEARLY COST
1	2,500	\$650.00	\$7,800.00
2	2,500	\$650.00	\$7,800.00
3	2,500	\$650.00	\$7,800.00
4	2,500	\$650.00	\$7,800.00
TOTAL MONTH	LY CHARGE	\$2,600.00	3
	\$31,200.00 (A)		
COST OR PARTS: \$5,000 X MARKUP (25%) 1.25 =			\$6,250.00 (B)
FLAT HOURLY RATE: \$85.00 X 200 HOURS =			\$17,000.00 (C)
TOTAL BID			\$54,450.00 (D)

# LOT512 ELEVATOR MAINTENANCE

### PRICING PAGE

# ATTACHMENT A-BID FORM

West Virginia Lottery

TOTAL OF A + B + C	= (D) TOTAL	COST		A + B + C = (D) TOTAL COST
FLAT HOURLY RAT	E: \$	X 200 HOURS =	\$	(C)
COST OR PARTS:	5,000 X MARKI	UP ( %) =	\$	(B)
	T(	OTAL YEARLY CHARGE	\$	(A)
TOTAL MONTH	The second secon	\$	+	
4	2,500	\$	\$	
3	2,500	\$	\$	
2	2,500	\$	\$	
1	2,500	\$	\$	112/12/11/21 0001
ELEVATOR NO.	CAPACITY	MONTHLY COST	IO	(12) YEARLY COST

COMPANY NAME		la la la più	
ADDRESS			STATE OF THE STATE
CITY / STATE / ZIP CODE			
CONTACT PERSON			
SIGNATURE			
DATE			
PHONE NUMBER			
EMAIL ADDRESS			-
FAX	*		

Contract will be awarded to the Contractor with the lowest grand total meeting specifications.

AWARD WILL BE MADE BASED UPON THE LOWEST TOTAL COST BID OF A + B + C. HOURS AND PARTS ARE ESTIMATES ONLY FOR THE PURPOSE OF COMPARING CONTRACTOR BIDS.

# LOT512 ELEVATOR MAINTENANCE

# ATTACHMENT B

ELEVATOR NO.	CAPACITY	TYPE
1	2,500	FREIGHT
2	2,500	PASSENGER
3	2,500	PASSENGER
4	2,500	PASSENGER

WV-75 Created 07/18/12



#### State of West Virginia

# **PURCHASING DIVISION**

#### **Construction Bid Submission Review Form**

This list has been provided for informational purposes only and is not to be construed as a complete list of request for quotation or bidding requirements for any individual construction project. This list does not and cannot include every item, mistake or oversight that could cause a contractor's bid to be disqualified. Rather, this list is intended to draw attention to some of the most common problems that the Purchasing Division encounters in the bidding process for construction projects. All potential bidders must read the request for quotation, all additional documents, and all instructions relating thereto ("Bid Documents") in their entirety to identify the actual request for quotation and bidding requirements. Fallure to read the Bid Documents in their entirety and comply with the stated requirements contained therein may result in bid disqualification.

# Errors That Shall Be Reason for Immediate Bid Disqualification

- 1. Failure to attend a mandatory pre-bid meeting
- 2. Failure to sign the bid
- 3. Failure to supply West Virginia contractor's license # on bid
- 4. Failure to supply a signed drug free workplace affidavit with the bid
- 5. Failure to supply a valid bid bond or other surety approved by the State of West Virginia
- 6. Failure to meet any mandatory requirement of the RFQ
- 7. Failure to acknowledge receipt of Addenda (only if stipulated as mandatory)
- 8. Failure to submit bid prior to the bid opening date and time
- 9. Federal debarment
- 10. State of West Virginia debarment or suspension

# Errors that May Be Reason for Bid Disqualification Before Contract Award

- Uncontested debt to the State exceeding \$1,000.00 (must be cured prior to award)
- Workers' Compensation or Unemployment Compensation delinquency (must be cured prior to award)
- 3. Not registered as a vendor with the State (must be cured prior to award)
- 4. Failure to obtain required bonds and/or insurance
- Failure to provide the sub-contractor listing within 1 business day of bid opening.
- 6. Failure to use the provided RFQ form (only if stipulated as mandatory).

#### BID BOND PREPARATION INSTRUCTIONS

			AGENCY_(A)_ RFQ/RFP#(B)_
(A)	WV State Agency (Stated on Page 1 "Spending Unit")	KNOW ALL MEN BY THESE PRE	
(B)	Request for Quotation Number (upper right	as Principal, and(F)	(D) (E) (E)
(C)	Corner of page #1) Your Business Entity Name (or Individual	of the State of (I) with	organized and existing under the laws th its principal office in the City of
(D)	Name if Sole Proprietor) City, Location of your Company	of West Virginia, as Obligee, in the penal sum of	held and firmly bound unto The State
(E)	State, Location of your Company	(\$(L) ) for the payme	f (K) ent of which, well and truly to be made,
(F)	Surety Corporate Name	we jointly and severally bind ourselves, our heirs	s administrators executors
(G)	City, Location of Surety	successors and assigns.	s, administrators, executors,
(H)	State, Location of Surety		
(1)	State of Surety Incorporation	The Condition of the above obligation	n is such that whereas the Principal has submitted to
(J)	City of Surety's Principal Office	the Purchasing Section of the Department of Ad-	ministration a certain bid or proposal, attached hereto
(K)	Minimum amount of acceptable bid bond is 5% of total bid. You may state "5% of bid"	and made a part hereof to enter into a contract in	writing for
	or a specific amount on this line in words	(M)	
(L)	Amount of bond in numbers		
(M)	Brief Description of scope of work		
(N)	Day of the month		
(0)	Month	NOW THEREFORE	
(P)	Year	7.5 40 11111 6 111 1 1	
(Q)	Name of Business Entity (or Individual Name if Sole Proprietor)	(a) If said bid shall be rejected (b) If said bid shall be accep	sted and the Principal shall enter into a contract in
(R) (S)	Seal of Principal	accordance with the bid or proposal attached her	reto and shall furnish any other bonds and insurance
	Signature of President, Vice President, or Authorized Agent	acceptance of said bid then this obligation sha	other respects perform the agreement created by the all be null and void, otherwise this obligation shall
(U)	Title of Person Signing for Principal Seal of Surety	remain in full force and effect. It is expressly u	inderstood and agreed that the liability of the Surety
(V)	Name of Surety	herein stated	vent, exceed the penal amount of this obligation as
(W)	Signature of Attorney in Fact of the Surety	HEICHI SUNDU	
()	or Summer or a constraint the state or one ordered	The Surety for value received here	by stipulates and agrees that the obligations of said
		Surety and its bond shall be in no way impaired	or affected by any extension of time within which the
NOTE I	Dated Power of Attorney with Surety Seal must accompany this bid bond.	Obligee may accept such bid: and said Surety do	es hereby waive notice of any such extension
		WITNESS, the following signatur	
			res and seals of Principal and Surety, executed and
		sealed by a proper officer of Principal and Suindividual, the (N) day of (O) 20	res and seals of Principal and Surety, executed and rety, or by Principal individually if Principal is an(P)
		sealed by a proper officer of Principal and Su	rety, or by Principal individually if Principal is an
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an [P].
		sealed by a proper officer of Principal and Suindividual, the (N) day of (O) 20	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S)
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an(P)  (O)
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S)
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an(P)  (O)
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S) (Must be President, Vice President, or Duly Authorized Agent)
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S) (Must be President, Vice President, or Duly Authorized Agent)
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S) (Must be President, Vice President, or Duly Authorized Agent)
		sealed by a proper officer of Principal and Suindividual, the (N) day of (O) 20  Principal Seal  (R)	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S) (Must be President, Vice President, or Duly Authorized Agent)  (T) Title
		scaled by a proper officer of Principal and Suindividual, the (N) day of (O) 20 Principal Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S) (Must be President, Vice President, or Duly Authorized Agent)  (T) Title
		sealed by a proper officer of Principal and Suindividual, the (N) day of (O) 20  Principal Seal  (R)  Surety Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S) (Must be President, Vice President, or Duly Authorized Agent)  (T) Title
		sealed by a proper officer of Principal and Suindividual, the (N) day of (O) 20  Principal Seal  (R)  Surety Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S) (Must be President, Vice President, or Duly Authorized Agent)  (T) Title
		sealed by a proper officer of Principal and Suindividual, the (N) day of (O) 20  Principal Seal  (R)  Surety Seal	rety, or by Principal individually if Principal is an (P).  (O) (Name of Principal)  By (S) (Must be President, Vice President, or Duly Authorized Agent)  (T) Title

IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.

1				
1				
4				
8				
8				
8				
-				
-				
-				
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46.				

	Agency REQ.P.O#
BID B	BOND
KNOW ALL MEN BY THESE PRESENTS, That we, the und	dersigned.
	, as Principal, and
	proporation organized and existing under the laws of the State of
with its principal office in the City of	, as Surety, are held and firmly bound unto the
of West Virginia, as Obligee, in the penal sum of	(\$) for the payment of w
well and truly to be made, we jointly and severally bind ourselves, ou	
The Condition of the above obligation is such that where Department of Administration a certain bid or proposal, attached here	eas the Principal has submitted to the Purchasing Section o
NOW THEREFORE.	M. C.
HOVY INEREPORE,	
attached hereto and shall furnish any other bonds and insurance req the agreement created by the acceptance of said bid, then this obligated full force and effect. It is expressly understood and agreed that the event, exceed the penal amount of this obligation as herein stated.	ation shall be null and void, otherwise this obligation shall rema liability of the Surety for any and all claims hereunder shall, in grees that the obligations of said Surety and its bond shall be in
WITNESS, the following signatures and seals of Principal ar	nd Surety, executed and sealed by a proper officer of Principal
Surety, or by Principal individually if Principal is an individual, this	day of, 20
Principal Seal	
	(Name of Principal)
	Ву
	(Must be President, Vice President, or Duly Authorized Agent)
	(Title)
Surety Seal	(Name of Surety)
	,
	Attorney-in-Fact

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.

WV-72 Created 07/01/13

#### State of West Virginia Purchasing Division

# CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

In accordance with **West Virginia Code** § 21-1D-7b, no less than once per year, or upon completion of the project, every contractor shall provide a certified report to the public authority which let the contract. That report must include each of the items identified below in the Required Report Content section.

<u>Instructions:</u> Vendor should complete this coversheet, attach it to the required report, and submit it to the appropriate location as follows: For contracts more than \$25,000, the report should be mailed to the West Virginia Purchasing Division at 2019 Washington Street East, Charleston, WV 25305. For contracts of \$25,000 or less, the vendor should mail the report to the public authority issuing the contract.

Contract Identification:	
Contract Number:	
Contract Purpose:	
Agency Requesting Work:	
Required Report Content: The attached report must inclusive should check each box as an indication that the required in	
Information indicating the education and training second 21-1D-5 was provided;	rvice to the requirements of West Virginia Code §
Name of the laboratory certified by the United State successor that performs the drug tests;	es Department of Health and Human Services or its
Average number of employees in connection with the	ne construction on the public improvement;
Drug test results for the following categories including negative tests: (A) Pre-employment and new hires; (D) Random.	ng the number of positive tests and the number of (B) Reasonable suspicion; (C) Post-accident; and
Vendor Contact Information:	
Vendor Name:	Vendor Telephone:
Vendor Address:	Vendor Fax:



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

STATE OF	TOTAL CONTROL OF THE
COUNTY OF	, TO-WIT:
I,state as follows:	, after being first duly sworn, depose and
1. I am an employee of	(Company Name); and,
2. I do hereby attest that _	(Company Name)
	drug free workplace policy and that such ith <b>West Virginia Code</b> §21-1D-5.
The above statements are swor	n to under the penalty of perjury.
	(Company Name)
	Ву:
	Title:
	Date:
Taken, subscribed and sworn to	before me this day of
By Commission expires	4444
(Seal)	
	(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 DISOUALIFICATION OF THE BID.

Rev March 2009

RFQ No.	LOT512	
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#### 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 flability 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 fallure 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:	
Authorized Signature:	Date:
State of	
County of, to-wit:	
Taken, subscribed, and sworn to before me this de	ay of, 20
My Commission expires	, 20
AFFIX SEAL HERE	NOTARY PUBLIC

Purchasing Affidavk (Revised 07/01/2012)

## 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.

(Company)	
(Authorized Signature)	
(Representative Name, Ti	tle)
(Phone Number)	(Fax Number)
(Date)	

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

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.

		Numbers Received: ox next to each addendum rece	ived	)	
]	]	Addendum No. I	[	]	Addendum No. 6
[	]	Addendum No. 2	[	]	Addendum No. 7
]	]	Addendum No. 3	.[	]	Addendum No. 8
[ ]	]	Addendum No. 4	[	]	Addendum No. 9
]	]	Addendum No. 5	[	]	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.					
			Company		
			Margarentanan	-	Authorized Signature
			Saftweetsheethad	and the same of	Date

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

Revised 07/12/2013