



FAX COVER SHEET

TO: Dep	artment of Administr	ration, Purchasing Division	
FROM:_	Williams Excavatir	ng, LLC	
# OF PA	GES: 14 (1	Including cover sheet)	
COMME	NTS:	Sealed Bid Enclosed: DEP 1500000024 Buyer: Beth Collins	
		Solicitation No: DEP 1500000024	
		Bid Opening Date: 27 JAN 2015	
		Bid Opening Time: 1:30pm	
		Fax Number: (304) 558-3970	
Property of: W	filliams Excavating, LLC		
88	801 CR22A	PLEASE NOTE:	
ВІ	loomingdale, OH 43910		
74	10-937-2077 (Office)	THIS BID SUPERCE	DES
74	10-937-2022 (Fax)	OUR PREVIOUSLY SUB	MITTED
		BiD.	
		THANX	

Dale R Trasher Slide Repair DEP17025 - CRFQ: DEP15*24

Revised Contractor's Bid Sheet

Company 1	Name: Williams Excavating, LLC	
Address:	8801 CR 22A	West Virgina Contractor License:
	Bloomingdale, OH 43910	WV038495

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

ITEM				T	
NO.	Qty	Unit	DESCRIPTION	UNIT PRICE	AMOUNT
1.0	1	LS	Mobilization and Demobilization (Limited to 10% of Total Bid)	LS	\$ 6,500.00
2.0	1	LS	Construction Layout (Limited to 3% of Total Bid)	LS	\$ 2,000.00
3.0	1	LS	Quality Control (Limited to 2% of Total Bid)	LS	\$ 1,200.00
4.0	1	LS	Site Preparation (Limited to 5% of Total Bid)	LS	\$ 3,000.00
4.1	40	TN	Gravel Road Rehabiliation	\$ 100.00	\$ 4,000.00
5.1	220		Silt Fence Sediment Control	\$ 4.00	\$ 880.00
5.2	615		12" Straw Wattles Erosion Control	\$ 3.00	\$ 1,845.00
5.3	25	TN	Stone Construction Entrance (70 LF x 12' Width)	\$ 45.00	\$ 1,125.00
6.0	1	LS	Revegetation	LS	\$ 5,000.00
7.1	1	EA	Type"A" Manhole	\$ 2,500.00	\$ 2,500.00
7.2	1	EA	Splash Pad	\$ 666	\$ 666.00
7.3	70		12" PVC SDR-35 Conveyance Pipe	\$ 35.00	\$ 2,450.00
7.4	1	EA	Low Water Road Crossing		\$ 4,200.00
8.0	1	LS	Unclassified Excavation	LS	\$ 5,000.00
11.1	320			\$ 65.00	\$ 20,800.00
11.2	3	EA	Soda Ash Briquettes (50 lb. Bags)		\$ 150.00
12.1	30	LF	18" HDPE Access Road Culvert		\$ 2,400.00
12.2	50	LF	Road Ditch Cleanout		\$ 4,950.00
OOOOOXXXX	DO DO DO DO DO				
		-			

			TOTAL		\$ 68,666.00



	Agency WVDEP
	REQ.P.O#_DEP 17025
	BID BOND
KNOW ALL MEN BY THESE PRESENTS. Tha	we, the undersigned, Williams Excavating, LLC
of Bloomingdale	Ohio, as Principal, and Ohio Farmers Insurance Company
of Westfield Center Ohio	, a corporation organized and existing under the laws of the State of
Ohio with its principal office in the City of	
of West Virginia, as Obligee, in the penal sum of Five Per	ent (5%) of the Total Amount Bid (\$ 5%) for the payment of which,
well and truly to be made, we jointly and severally bind o	urselves, our heirs, administrators, executors, successors and assigns.
The Condition of the above obligation is suc	that whereas the Principal has submitted to the Purchasing Section of the
Department of Administration a certain bid or proposal, a Dale R. Thrasher DEP 17025	tached hereto and made a part hereof, to enter into a contract in writing for
(CRFQ 0313 DEP 1500000024)	
§	
NOW THEREFORE,	
attached hereto and shall furnish any other bonds and it the agreement created by the acceptance of said bid, the full force and effect. It is expressly understood and agreement, exceed the penal amount of this obligation as here. The Surety, for the value received, hereby stip	Principal shall enter into a contract in accordance with the bid or proposal surance required by the bid or proposal, and shall in all other respects perform in this obligation shall be null and void, otherwise this obligation shall remain in sed that the liability of the Surety for any and all claims hereunder shall, in no in stated. Interest that the obligations of said Surety and its bond shall be in no within which the Obligee may accept such bid, and said Surety does hereby
WITNESS, the following signatures and seals of	Principal and Surety, executed and sealed by a proper officer of Principal and
Surety, or by Principal individually if Principal is an individually	ual, this 20th day of January 20 15
Principal Seal	Williams Excavating, LLC (Name of Principal) By (Must be President, Vice President, or
	/ Duly Authorized Agent)
	OWNEV (Title)
Surety Seal	Ohio Farmers Insurance Company (Name of Surely)
	Altorney-in-Fact Nicholas A. Sparachane

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.

General Power of Attorney

CERTIFIED COPY

POWER NO. 4751692 01

Westfield Insurance Co. Westfield National Insurance Co. Ohio Farmers Insurance Co.

Westfield Center, Ohio

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint NICHOLAS A. SPARACHANE, SUSAN K. BOORD, BRIANNA L. HARVETH, NICOLE SPARACHANE WHORTON, JOINTLY OR

SEVERALLY

of WHEELING and State of WV its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings, or other instruments or contracts of

LIMITATION: THIS POWER OF ATTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.

and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY:

"Be It Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact, may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such attorney-in-Fact shall be as binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary."

"Be It Further Resolved, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or entificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting heid on February 8, 20

held on February 8, 2000).

In Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARVERS INSURANCE COMPANY have caused these presents to be signed by their National Surety Leader and Senior Executive and their corporate seals to be hereto affixed this 21st day of MARCH A.D., 2014.

Согрогате Seals Affixed

State of Ohio County of Medina

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

Dennis P. Baus, National Surety Leader and Senior Executive

On this 21st day of MARCH A.D., 2014, before me personally came **Dennis P. Baus** to me known, who, being by me duly sworn, did depose and say, that he resides in **Wooster, Ohio**; that he is **National Surety Leader and Senior Executive** of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Notarial Seal Affixed

State of Ohio County of Medina

SS.



David A. Kotnik, Attorney at Law, Notary Public My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

I, Frank A. Carrino, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this 20thday of January AD. 2015 January A.D.







Frank A. Carrino, Secretary

BPOAC2 (combined) (06-02)

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:_	WILLIAMS	EXCAVAT	NG, LLC
Contractor's License	No. LVV 03	38495	

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a Award Document.

- 2. DRUG-FREE WORKPLACE AFFIDAVIT: 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. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.
 - 2.1.DRUG-FREE WORKPLACE POLICY: Pursuant to W. Va. Code § 21-1D-4, Vendor and its subcontractors must implement and maintain a written drug-free workplace policy that complies with said article. The awarding public authority shall cancel this contract if: (1) Vendor fails to implement and maintain a written drug-free workplace policy described in the preceding paragraph, (2) Vendor fails to provide information regarding implementation of its drug-free workplace policy at the request of the public authority; or (3) Vendor provides to the public authority false information regarding the contractor's drug-free workplace policy. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.
- 3. DRUG FREE WORKPLACE REPORT: Pursuant to W. Va. 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. For contracts over \$25,000, the

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public authority shall be the West Virginia Purchasing Division. For contracts of \$25,000 or less, the public authority shall be the agency issuing the contract. The report shall include:

- (1) Information to show that the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided;
- (2) The name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;
- (3) The average number of employees in connection with the construction on the public improvement;
- (4) Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.

Vendor should utilize the attached Certified Drug Free Workplace Report Coversheet when submitting the report required hereunder. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.

- 4. 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 AI01-2007 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.
- 5. 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 \$250,000.00 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. Additionally, if no subcontractors who will perform more than \$25,000.00 of work are to be used to complete the project, it will be noted on the subcontractor list.
 - a. Required Information. The subcontractor list shall contain the following information:
 - i. Bidder's name
 - ii. Name of each subcontractor
 - iii. License numbers as required by W. Va. Code § 21-11-1 et. seq.
 - iv. Notation that no subcontractor will be used to perform more than \$25,000.00 of work, when applicable
 - b. Submission. The completed subcontractor list shall be provided to the Purchasing Division within one business day of the opening of bids for review. Failure to submit the subcontractor

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list within one business day after the deadline for submitting bids shall result in disqualification of the bid.

- c. Substitution of Subcontractor. Written approval must be obtained from the State Spending Unit before any subcontractor substitution is permitted. Substitutions are not permitted unless:
 - i. The subcontractor listed in the original bid has filed for bankruptcy;
 - ii. The subcontractor in the original bid has been debarred or suspended; or
 - iii. The contractor certifies in writing that the subcontractor listed in the original bill fails, is unable, or refuses to perform his subcontract.
- 6. GREEN BUILDINGS MINIMUM ENERGY STANDARDS: In accordance with § 22-29-4, all new building construction projects of public agencies that have not entered the schematic design phase prior to July 1, 2012, or any building construction project receiving state grant funds and appropriations, including public schools, that have not entered the schematic design phase prior to July 1, 2012, shall be designed and constructed complying with the ICC International Energy Conservation Code, adopted by the State Fire Commission, and the ANSI/ASHRAE/IESNA Standard 90.1-2007: Provided, That if any construction project has a commitment of federal funds to pay for a portion of such project, this provision shall only apply to the extent such standards are consistent with the federal standards.

Williams Excavating, LLC

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CERTIFICATIONAND SIGNATURE PAGE

By signing below, or submitting documentation through wvOASIS, 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, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

WILLIAMS EXCAVATING, LIC (Company)

(Authorized Signature) (Representative Name, Title) (740) 937 · 2077 (740) 937 · 2022 (Phone Number) (Fax Number) (Date) 27 JAN 2015

Part A: General Information

OMB #1029-0119 Expiration Date: 1/31/16

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. When possible, please type your information onto this form to reduce errors on our end. NOTE: Signature and date this form is signed must be recent (within the last month) to be considered for a current bid

Business Name: Williams Excavating, LLC Tax Payer ID No.: 01-0830020 Address: 8801 CR 22A City: Bloomingdale State: OH Zip Code: 43910 Phone: (740) 937-2077 Fax No.: (740) 937-2022 E-mail address: jwilliams@williamsx.com
Part B: Legal Structure
() Corporation () Sole Proprietorship () Partnership (X) 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, Joseph Williams , have the express authority to certify that: (print name)
1Information 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.
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.
3. XXX Our business currently is not listed in AVS. If you select this option, you must provide all information required in Part D. Sign and date below and complete Part D.
19 Jan 2015 President
Date Signature Title
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.

Part D.		
Contractor's Business Name:	Williams Excavating, LLC	

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	Joseph Williams 8801 CR 22A Bloomingdale, OH 43910	Position/Title Telephone # % of Ownership	President (304) 614-8887 100
Begin Date:	March 14, 2005	Ending Date:	
Name Address		Position/Title Telephone # % of Ownership	
Begin Date:		Ending Dete:	
Name Address		Position/Title Telephone # % of Ownership	
Begin Date:		Ending Date:	
Name Address		Position/Title Telephone # % of Ownership	
Begin Date:		Ending Date:	

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 banefit.

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.

WV-72 Created 07/01/13 Williams Excavating, LLC

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.

Instructions: 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.

1				
Contract Identific	ation:			
Contract Number:	DEP1500000024 Dale R Thra	asher		
Contract Purpose:	Reclamation			
Agency Requesting	g Work: WV DEP AML			
Required Report Content: The attached report must include each of the items listed below. The vendor should check each box as an indication that the required information has been included in the attached report. Information indicating the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided; Name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests; Average number of employees in connection with the construction on the public improvement; Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.				
/endor Contact Inf	omation:			
	Williams Excavating	Vendor Telephone: 740-937-2077		
/endor Name:	Villario Excavating			
/endor Address: _8	3801 CR 22A	Vendor Fax: 740-937-2022		
-	Bloomingdale, OH 43910			

WY-73 Rev. 08/2013



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

STATE OF WEST VIRGINIA,				
COUNTY OF HARRISON, TO-WIT:				
I, William Tipton, after being first duly sworn, depose and state as follows				
1. I am an employee of Williams Excavating, LLC; and,				
(Company Name) 2. I do hereby attest that Williams Excavating, LLC (Company Name)				
maintains a valid written drug free workplace policy and that such policy is in compliance with West Virginia Code §21-1D.				
The above statements are sworn to under the penalty of perjury.				
By: In Co				
Title: Project Enginéer				
Company Name: Williams Excavating, LLC				
Date: 70 2N 2015				
Taken subscribed and sworn to before me this 20 day of JANUARY, 2015 By Commission expires BRIC SUBRIMES, 2015 NOTARY PUBLIC				
NOTARY PUBLIC STATE OF OHIO Comm. Expires October 05, 2015 (Notary Public)				
THIS AFFIDAVIT MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY				

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.

Rev. August 2013

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RFQ No. DEP1500000024

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 definquent 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 § 23-20-2, 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. Ve. 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.

Vendor's Name: Williams Excavating, LLC Authorized Signature: Awin Date: Date

DEBRAS. GRIMES NOTARY PUBLIC STATE OF OHIO Comm. Expires October 05, 2015 Purchasing Affidavit (Ravised 07/01/2012)

TE OF ON

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: DEP1500000024

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)

[x]	Addendum No. 1 🗸	[]	Addendum No. 6
[X]	Addendum No. 2	I]	Addendum No. 7
[X]	Addendum No. 3	Į]	Addendum No. 8
[]	Addendum No. 4	[1	Addendum No. 9
[]	Addendum No. 5	Ī]	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

Authorized Signature

19 Jan 2015

Date

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

Revised 6/8/2012