

2400 Ritter Drive Daniels, WV 25832 PH: 304-763-4573 Fax: 304-763-4591

Fax: 304-763-4591 www.aspen-golf.com

Beth Collins

## Aspen Corporation



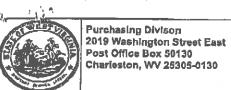
lot	WV Purchasing Div 2019 Washington S P.O. Box 50130 Charleston, WV 25	Street, East	From	Brian Knight		
Fax:	304-558-3970		Pages	1		
Phone:	304-558-2157		Date:	4-2-2015		
Re:	DEP 17115 Pepp	er Portals	CCı	File		
□ Urger	nt 🗆 For Review	v 🛘 Please C	omment	🗆 Please Rej	ply	☐ Please Recycle
• Comm	ientsi					
Buyer	,	Beth Collin	18			
RFQ.	NO.	DEP17115				
Bid Opening Date:		April 2, 20	15			15 09:30:58 Chasing Division

This bid was originally submitted on March 17, 2015. It has been updated per addendums.

IMPORTANT: The information contained in this facsimile transmission is only for the use of the individual or entity named above and may contain information that is privileged, confidential or exempt or protected from disclosure under applicable law. If the reader of this transmission is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone and return the original message to us at the above address via the U.S. Postal Service. Thank you.

1:30 PM

Bid Opening Time:



State of West Virginia Request for Quotation 09 — Construction

	Proc Folder: 68730					
	Doc Description: Addendum 1 PEPPER PORTALS DRAINAGE REFERENCE DEP17115					
	Proc Type: Central Purchase Order					
Date Issued	Solicitation Closes	Solicitation No	Version			
2015-03-10	2015-03-17 13:30:00	CRFQ 0313 DEP1500000030	2			

600-740 0000 50-7X600	.:		con a 10 a service companier companier alignment and a service and a ser
BID CLERK			
DEPARTMENT OF ADMINISTRATION			
PURCHASING DIVISION			
2019 WASHINGTON ST E			
CHARLESTON	wv	25305	
US			

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Vendor Name, Address and Telephone Number:		المستعدد والمستورين والمستعدد المستعدد المستعدد المستعدد المستعدد المستعدد المستعدد المستعدد المستعدد المستعدد

FOR INFORMATION CONTACT THE BUYER Gregory Clay (304) 558-2566 gregory.c.clay@wv.gov		
Signature X  All offers subject to all terms and conditions contained in this	FEIN# 55-0627766	DATE /7 MARCH 2015

Page: 1

FORM ID: WV-PRC-CRFQ-001

## PEPPER PORTALS AND DRAINAGE

## Contractor's Bid Sheet

Company Name: Aspen Corporation

Address: 2400 Ritter Drive Daniels, WV 25832

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

ITEM				
NO.	QUANTITY		דואט	
110.	QUANTILI	DESCRIFTION	PRICE	AMOUNT
1.0	1 LS	Mobilization and Demobilization (Shall not exceed 10% of total)	+	\$ 35,000.00
2.0	1 LS	Construction Layout (Shall not exceed 5% of total)		\$ 15.000.00
3,0	1 LS	Quality Control (Shall not exceed 3% of total)		\$5,000.00
4.0	1 LS	Site Preparation (Shall not exceed 7% of total)		\$ 40,000.00
5,1	1900 LF	Super Silt Fence	\$8.00	\$ 15,200.00
5.2	8100 LF	Erosion Control Wattles	\$4.00	\$ 32,400.00
5.3	61 EA	Rock Check Dams	\$300.00	
5.4.	2 EA	Stabilized Construction Entrances	\$4,000.00	\$ 18,300.00 \$ 8,000.00
5.5	3 BA	RipRap Dissipaters	\$2,500.00	\$ 7,500.00
6.0	14.2 AC	Revegetation	\$2,000.00	
7.1	130 LF	15-inch HDPE Culvert	\$100.00	\$28,400,00
7.2	68 LF	24-inch HDPR Culvert	\$100.00	\$ 13,000,00
7.3	ISO LF	Grouted Riprap Vee Drainage Channel - Type A	\$100.00	\$6,800.00
7.4	2611 LF	Synthetic Lined Voe Drainage Channel - Type B	\$5.00	\$ 15.000.00
7.5	45 LF	Riprap Trapczoidal Drainage Channel - Type C	\$100.00	\$ 13,055,00
7.6	198 LF	Grouted Riprap Trapezoidal Drainage Channel - Type D	\$100.00	\$ 4,500.00
7.7	1 EA	Low Water Crossing	\$2,500.00	\$ 19,800.00
8.0	79309 CY	Unclassified Excavation	\$2.00	\$ 2,500.00
9.1	I EA	Modified Wet Mine Seal		\$158.618.00
9.2	25 EA	Soda Ash Briquettes, 50 lb. Bag	\$12,000.00	\$ 12,000.00
9.3	I EA	Straw Bale/Silt Fence Pit	\$30,00	\$ 750.00
9,4	314 LF	12-inch Conveyance Pipe Solid	\$25.00	\$1,000.00
10.0	100 LF	Underdrains		\$ 7.850.00
13.1	982 LF	Access Road	\$100.00 \$55.00	\$10,000.00
13.2	3 EA	Farm Gates	\$1,500.00	\$ 54,010.00
13.3	126 CY	Stone Filled Gabion Baskats	\$300.00	\$ 4,500.00
13.4	140 LF	Temporary Fence	\$5.00	\$ 37,800.00
13.5	150 LF	Permanent Fence	\$10.00	\$ 700.00
15.0	215 TN	Encapsulated Aggregate Plug		\$1,500.00
			\$70.00	\$ 15,050.00
1				
		TOTAL		\$ 583,233.00

45 (ii

Agency Environmental Protection	*
REQ.P.O#_DEP17115	

ere (0

#### BID BOND

10	
KNOW ALL MEN BY THESE PI	RESENTS, That we, the undersigned, Aspen Corporation
of 2400 Ritter Drive	Daniels, WV 25832 as Principal, and Lexon Insurance Company
of Suite 100	ulsville, KY 40223, a corporation organized and existing under the laws of the State of
	in the City of Louisville, KY, 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 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 oblig	gation is such that whereas the Principal has submitted to the Purchasing Section of the
Department of Administration a certain bi	d or proposal, attached heroto and made a part hereof, to enter into a contract in writing for
DEP 17115 - Pepper Portals and D	Oralnage - Reclamation On Mining Operation Located Near Bridgeport, WV
(Barbour County)	
NOW THEREFORE,	
(a) If said bid shall be rejected,	or
(b) If 6ald bid shall be accepted been and shall furnish any other bonds.	i and the Principal shall enter into a contract in accordance with the bid or proposal attached 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 fi
force and effect. It is expressly understore exceed the penal amount of this obligation	od and agreed that the liability of the Surety for any and all claims hereunder shall, in no ever
evoces and bound amount of this couldn't	and the state of t
The Surety, for the value receive	ed, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in n
way impaired or affected by any extension waive notice of any such extension.	n of the time within which the Obligee may accept such bid, and said Surety does hereby
Part follow of any easi, extension.	
IN WITNESS WHEREOF, Princi	pal and Surety have hereunto set their hands and seals, and such of them as are corporatio
have caused their corporate seals to be a	ffixed hereunto and these presents to be signed by their proper officers, this
	, 2016
<b>主質さららい音ピ</b>	
Principal Corporato Seal	Aspen Corporation
	(Name of Principal)
The state of the s	By \ \
Prog.	(Must be President or Vice President)
$= \frac{\sqrt{N(M)(m_{H_{H_{H_{H_{H_{H}}}}}}}}{\sqrt{N(M)(M)(m_{H_{H_{H_{H_{H}}}}}}}$	
	V. P.
A CONTRACTOR	(Title)
Surety Corporate Seal	Lexon Insurance Company
	(Name of Surety)
, , , , , , , , , , , , , , , , , , ,	/ : .
Dys. Yal	Drue Il when
	Bonnie J. Wortham 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.

#### **POWER OF ATTORNEY**

LX-239312

## **Lexon Insurance Company**

KNOW ALL MEN BY THESE PRESENTS, that LEXON INSURANCE COMPANY, a Texas Corporation, with its principal office in Louisville, Kentucky, does hereby constitute and appoint: Brook T, Smith. Raymond M. Hundley, Jason D. Cromwell, James H. Martin, Barbara Duncan, Sandra L, Fusinetti, Mark A, Guidry, Jill Kemp, Jackie C, Koestel, Lynnette Long, Amy Meredith, Deborah Nelchter, Jessica Nowlin, Theresa Pickerrell. Shervon Quinn, Bonnie J, Wortham its true and lawful Attorney(s)-In-Fact to make, execute, seal and deliver for, and on its behalf as surety, any and all bonds, undertakings or other writings obligatory in nature of a bond.

This authority is made under and by the authority of a resolution which was passed by the Board of Directors of LEXON INSURANCE COMPANY on the 1<sup>st</sup> day of July, 2003 as follows:

Resolved, that the President of the Company is hereby authorized to appoint and empower any representative of the Company or other person or persons as Attorney-in-Fact to execute on behalf of the Company any bonds, undertakings, policies, contracts of indemnity or other writings obligatory in nature of a bond not to exceed \$ 4,000,000.00, Four Million dollars, which the Company might execute through its duly elected officers, and affix the seal of the Company thereto. Any said execution of such documents by an Attorney-in-Fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company. Any Attorney-in-Fact, so appointed, may be removed for good cause and the authority so granted may be revoked as specified in the Power of Attorney.

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

IN WITNESS THEREOF, LEXON INSURANCE COMPANY has caused this instrument to be signed by its President, and its Corporate Seal to be affixed this 21<sup>st</sup> day of September, 2009.

LEXON INSURANCE COMPANY

BY\_

David E. Campbell\*
President



On this 21<sup>st</sup> day of September, 2009, before me, personally came David E. Campbell to me known, who be duly sworn, did depose and say that he is the President of LEXON INSURANCE COMPANY, the corporation described in and which executed the above instrument; that he executed said instrument on behalf of the corporation by authority of his office under the By-laws of said corporation.



AMY L. TAYLOR
Notary Public- State of Tennessee
Davidson County
My Commission Expires 01-09-16

BY\_\_\_\_

Amy .. Taylor Notary Public

CERTIFICATE

I, the undersigned, Assistant Secretary of LEXON INSURANCE COMPANY, A Texas Insurance Company, DO HEREBY CERTIFY that the original Power of Attorney of which the forgoing is a true and correct copy, is in full force and effect and has not been revoked and the resolutions as set forth are now in force.

Signed and Seal at Mount Juliet, Tennessee this

124

Day of March, 2015

SEAL

3Y \_\_\_\_

Andrew Smith Assistant Secretary

"WARNING: Any person who knowingly and with intent to defraud any insurance company or other person, files and application for insurance of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties."

# 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 deliars 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 essessment, premium, penalty, fine, tax or other amount of monoy 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 § 23-20-2, failure to maintain mendatory 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 awearing (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: ASPEN CORPORATION
Authorized Signature: Date: 17 MARCH 2015
State of West Virginia  County of Rallian, to-wit:
County of <u>FOLITAN</u> , to-wit:  Taken, subscribed, and sworn to before me this Tay of <u>March</u> . 20_15
My Commission expires March 3 , 20 19.
AFFIX SEAL HERE NOTARY PUBLIC MUTA CI. CHELK
OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC ANITA A. CHEEK

SOPHIA, WV 25921 My commission expires March 2, 2019

## 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: ASPEN CORPORATION	_
Contractor's License No. 1)VOOD653	

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

Revised 08/08/2014

# 8/ 12

### 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.

(Authorized Signature) (Representative Name, Title)

304-763-4573 /304-763-4591 / 17 MARCH 2015 (Phone Number) (Fax Number) (Date)

Revised 08/08/2014

WV-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 RALEISH TO-WIT:
I, DENNIE ADKWS, after being first duly sworn, depose and state as follows:
1. I am an employee of ASPEN CORPORATION; and, (Company Name)
2. I do hereby attest that ASPEN Corporation (Company Name)
maintains a valid written drug free workplace policy and that such policy is in compliance with <b>West Virginia Code</b> §21-1D.
The above statements are sworn to under the penalty of perjury.  By:
Title:
Company Name: ASPEN CORPORATION
Date: 1) MARCH 2015
Taken, subscribed and sworn to before me this 11 day of 100ch, 2015.  By Commission expires 100ch 3 2019
(Seal)  OPFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC ANITA A. CHEEK PO BOX 1398 SOPHIA, WV 25921 My commission expires March 3, 2019 (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.

Rev. August 2013

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

Part A: General Information
Business Name: ASDEN COLOCATION Tax Payer ID No.: 55-062-7766-00 Address: 2400 Ritter Dr. ve City: Daniels State: W Zip Code: 25832 Phone: 304-763-4573 Fax No.: 304-763-4571 E-mail address: A a dkins @aspen-golf.com
Part B: Legal Structure
( ) Corporation ( ) Sole Proprietorship ( ) Partnership ( ) LLC ( ) Other (please specify)
Part C: Certifying and updating information in the Applicant/Violator System (AVS). Select only one of the following options, follow the instructions for that option, and sign below.
I, Donnie Ackinis, have the express authority to certify that:  (print name)
Information on the attached Entity Organizational Family Tree (OFT) from AVS is accurate, complete, and up-to-date. If you select this option, you must attach an Entity OFT from AVS to this form. Sign and date below and do not complete Part D.
2. Part of the information on the attached Entity OFT from AVS is missing or incorrect and must be updated. If you select this option, you must attach an Entity OFT from AVS to this form.  Use Part D to provide the missing or corrected information. Sign and date below and complete Part D.
3. 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.
3-17-15 V.P.
Date Signature Tisto
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 between the average and the average at the averag

Part D.

Contractor's Business Name: Aspen Corporation

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 Begin Date:	Donnie AdKins 2400 Ritter Dr. Daniels INV 25832 9-9-1982	Position/Title Telephone # % of Ownership Ending Date:	President 304-763-4573 5070 Current
Name Address Begin Date:	Ronnie Adkins 2400 Ritter Dr. Daniels WV 25832 9.9.1982	Position/Title Telephone # % of Ownership Ending Date:	Vice President, Sec., To 204-763-4573 5070 Current
Name Address Begin Date:		Position/Title Telephone # % of Ownership 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 benefit.

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

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: DEP1500000030

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.

x next to each addendum	received	1)	
Addendum No. 1	Į	]	Addendum No. 6
Addendum No. 2	[	]	Addendum No. 7
Addendum No. 3	[	]	Addendum No. 8
Addendum No. 4	Į	]	Addendum No. 9
	Addendum No. 1  Addendum No. 2  Addendum No. 3	Addendum No. 1 [ Addendum No. 2 [ Addendum No. 3 [	Addendum No. 2 [ ] Addendum No. 3 [ ]

Addendum Numbers Received:

1 Addendum No. 5

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.

[ ] Addendum No. 10

Company

Company

Authorized Signature

17 Marcu 20/5

Date

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

Revised 6/8/2012



2400 Ritter Drive Daniels, WV 25832 PH: 304-763-4573 Fax: 304-763-4591 www.aspen-golf.com

**Gregory Clay** 

Bid Opening Date:

Bid Opening Time:

## **Aspen Corporation**



To:	WV Purchasing Divis 2019 Washington St P.O. Box 50130 Charleston, WV 253	reet, East	From:	Brian Knight	
Fax	304-558-3970		Pages	:	
Phone:	304-558-2316		Date:	3-17-2015	
Rei	DEP 17115 Peppe	r Portals	CC:	File	
□ Urgei	nt 🗆 For Review	☐ Please Co	omment	☐ Please Reply	☐ Please Recycle
• Comn	nents:		<del></del>		·
Buyer		Gregory C	lay		
RFQ.	NO.	DEP17115			

IMPORTANT: The information contained in this facsimile transmission is only for the use of the individual or entity named above and may contain information that is privileged, confidential or exempt or protected from disclosure under applicable law. If the reader of this transmission is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone and return the original message to us at the above address via the U.S. Postal Service. Thank you.

March 17, 2015

1:30 PM

03/17/15 10:52:42

WV Purchasing Division

;304-763-4591 KELEIVEU MAN 1 U ZUD # 2/ 12



Purchasing Divison 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

State of West Virginia Request for Quotation 09 — Construction

	Proc Folder: 68730		
	Doc Description: Addend	um 1 PEPPER PORTALS DRAINAGE REFERENCE	DEP17115
	Proc Type: Central Purch	ase Order	
Date Issued	Solicitation Closes	Solicitation No	Version
2015-03-10	2015-03-17 13:30:00	CRFQ 0313 DEP1500000030	2

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BID CLERK	_	•				
DEPARTMENT OF ADMINISTRATION						
PURCHASING DIVISION						
2019 WASHINGTON ST E						
CHARLESTON	W	25305				
us						

	Vendor Name, Address and Telephone Number:
ł	

FOR INFORMATION CONTACT THE BUYER
Gregory Clay
(304) 558-2566
gregory.c.clay@wv.gov

Signature X

FEIN # 55-0627766

DATE /7 MARCH 2015

All offers subject to all terms and conditions contained in this solicitation

Page : 1

FORM ID: WV-PRC-CRFQ-001



# Pepper Portals & Drainage

## Contractor's Bld Sheet

Company Name: Aspen Corporation	
Address; 2400 Ritter Drive	
Daniels, WV 25832	

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

NO.	QUANTITY	DESCRIPTION	UNIT	AMOUN
1.0	ILS			
2.0	119	Mobilization and Demobilization (Shall not exceed 10% of total)		\$ 35,000.00
3.0	1 LS	Construction Layout (Shall not exceed 5% of total)		\$ 15,000.00
4.0	1 L8	Oneliny Courtrol (Shall not exceed 3% of total)		\$ 5,000.00
5.1	1900 LF	Site Preparation (Shall not exceed 7% of total) Super Silt Fence		\$ 40,000.00
5.2	8100 LF	Brosion Control Wattles	\$8.00	\$ 15,200.00
5.3	61 EA	Rook Check Danie	\$4.00	\$ 32,400.00
5.4	2 EA		\$300.00	\$ 18,300.00
5.5	3 EA	Stabilized Construction Entrances	\$4,000.00	\$8,000.00
6.0	14.2 AC	RipRey Dissipaces	\$2,500,00	\$ 7,500.00
7.1	130 LF	Rovegenation	\$2,000.00	\$ 28,400.00
7.2	68 LF	15-high FIDPIS Culvert	\$100.00	\$ 13,000.00
73	150 LF	24-inch HDPE Culvert	\$100,00	\$ 6,800.00
7.4	2611 LF	Choused Ripray Voe Drainage Channel - Type A		\$15,000.00
7.5	45 LF	Symbolic Lined Voc Drainege Channel - Type B	\$5.00	\$ 13,055.00
7.6	198 LF	Riptop Trapenoidal Drainage Channel - Type C	\$100.00	\$ 4,500.00
7.7	1 PA	Ground Riprap Trapeznidal Drainsige Channel - Type D		\$19,800.00
8.0	79309 CY	Low Weter Crossing		\$ 2,500.00
9.1		Unclassified Excavation	\$2,00	\$ 158,618.00
9.2	1 EA   25 BA	Modified Wet Mine Seal		\$ 12,000.00
9.3		Seda Ash Briquettes, SO lb. Bag		\$ 750.00
9.4	1 RA	Strew Bale/Silt Fence Pit		\$ 1,000.00
0.0	314 LF  -	12-insh Convéyance Pine Solid		\$ 7,850.00
3.1	100 LF	Underdruins		\$ 10,000.00
3.2	982 LP	Abdess Rind		\$ 54,010.00
3.3	3 PA	Farrin, Gradien	\$1,500.00	\$ 4 500 00
	126 CY	Stone Filled Gabier Bankets	\$300.00	\$ 37,800.00
.4	140 LF	Temperary Fence		\$ 700.00
2.5	150 LP	Permanant Ferice		1.500.00
0.	IEA	Encapsulated Agaringate Plug	\$5,000.00	\$ 5,000,00
-+-				2,000.00
上				
,		TOTAL		10 day
	Same True			
7.20%		TOMU	1277	
See time	Section 2		1-C	573,183.00

	Agency Environmental Protection ' REQ.P.O# DEP17115
	BID BOND
•	PID BOKD
	nat we, the undersigned, Aspen Corporation
	s, WV 25832, as Principal, and <u>Lexon Insurance Company</u>
of Sulto 100 Louisville, KY 402	
<del></del>	Louisville, KY 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 Bid ) for the payment of which,
well and truly to be made, we jointly and severally bind	burselves, 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
DEP 17115 - Pepper Portals and Drainage - Re	eclamation On Mining Operation Located Near Bridgeport, WV
(Barbour County)	
NOW THEREFORE,	
(a) If said bid shall be rejected, or	
	cipal shall enter into a contract in accordance with the bid or proposal attached
hereto and shall furnish any other bonds and insurance	e required by the bid or proposal, and shall in all other respects perform the this obligation shall be null and void, otherwise this obligation shall remain in full
agreement created by the acceptance of said bid, then force and effect. It is expressly understood and agreed	t that the liability of the Surety for any and all claims hereunder shall, in no event,
exceed the penal amount of this obligation as herain at	
The Surely, for the value received, hereby stip	pulates and agrees 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
waive notice of any such extension.	William the obligation of despitation was and delety about 10000
valor	
$3^{\circ} \times 3^{\circ} \times 11$	ly have hereunto set their hands and seals, and such of them as are corporations
at at the state of	to and these presents to be signed by their proper officers, this
17th day of March 2015	,
Side yet in	
Principal, Corporato Seal	Aspen Corporation
	(Name of Principal)
Andrew Control of the	By \
<sup>19</sup> 100.	(Must be President or Vice President)
$\frac{a^{m}A(1)\eta_{D_{D_{i}}}}{A(1)A(1)\eta_{D_{i}}}$	
	V.P.
	(elli))
Surety Corporate Sea	Lexon Insurance Company
	(Name of Surety)
14 × 1 × 1	*
102 01	Roma Old Jakan
111	Bonnie J. Wortham Attorney-in-Fact
	MAILING AS A LANDING INTRODUCTION OF COLUMN AND A SECOND OF COLUMN A

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.

#### POWER OF ATTORNEY

1x-239312

## **Lexon Insurance Company**

KNOW ALL MEN BY THESE PRESENTS, that LEXON INSURANCE COMPANY, a Texas Corporation, with its principal office in LouisvIlle, Kentucky, does hereby constitute and appoint: Brook T. Smith. Raymond M. Hundley, Jason D. Cromwell, James H. Martin, Barbara Duncan, Sandra L. Fusinetti, Mark A. Guidry, Jill Kemp, Jackie C. Koestel, Lynnette Long, Amy Meredith, Deborah Nelchter, Jessica Nowlin, Theresa Pickerrell, Shervon Quinn, Bonnie J. Wortham its true and lawful Attorney(s)-In-Fact to make, execute, seal and deliver for, and on its behalf as surety, any and all bonds, undertakings or other writings obligatory in nature of a bond.

This authority is made under and by the authority of a resolution which was passed by the Board of Directors of LEXON INSURANCE COMPANY on the 1st day of July, 2003 as follows:

Resolved, that the President of the Company is hereby authorized to appoint and empower any representative of the Company or other person or persons as Attorney-In-Fact to execute on behalf of the Company any bonds, undertakings, policies, contracts of indemnity or other writings obligatory in nature of a bond not to exceed \$ 4,000.000.00, Four Million dollars, which the Company might execute through its duly elected officers, and affix the seal of the Company thereto. Any said execution of such documents by an Attorney-In-Fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company. Any Attorney-in-Fact, so appointed, may be removed for good cause and the authority so granted may be revoked as specified in the Power of Attorney.

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

IN WITNESS THEREOF, LEXON INSURANCE COMPANY has caused this instrument to be signed by its President, and its Corporate Seal to be affixed this 21et day of September, 2009.

LEXON INSURANCE COMPANY

David E. Campbell President

#### **ACKNOWLEDGEMENT**

On this 21st day of September, 2009, before me, personally came David E. Campbell to me known, who be duly sworn, did depose and say that he is the President of LEXON INSURANCE COMPANY, the corporation described in and which executed the above instrument; that he executed said instrument on behalf of the corporation by authority of his office under the By-laws of said corporation.



AMY L. TAYLOR Notary Public- State of Tennessee Davidson County My Commission Expires 01-09-16

#### CERTIFICATE

i, the undersigned, Assistant Secretary of LEXON INSURANCE COMPANY, A Texas Insurance Company, DO HEREBY CERTIFY that the original Power of Attorney of which the forgoing is a true and correct copy, is in full force and effect and has not been revoked and the resolutions as set forth are now in force.

Signed and Seal at Mount Juliet, Tennessee this 174 Day of March, 2015

Andrew Smith Assistant Secretary

"WARNING: Any person who knowingly and with intent to defraud any insurance company or other person, files and application for insurance of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties."

RFQ No.	
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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 vandor 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 apprepate; 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 § 23-20-2, 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. Vs. 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: ASPEN CORPORATION
Authorized Signature: Date: 17 MARCH 2015
State of West Virginia
County of Halalah to-wit:
Taken, subscribed, and sworn to before me this 17 day of March . 2015
My Commission expires March 3 2019.
AFFIX SEAL HERE NOTARY PUBLIC MUTAL CHEEK
OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC ANITA A. CHEEK PO BOX 1388 SOPHIA, WV 25921 My compulsion expires March 3, 2019

### 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:	ASPEN	CORDORAT	104
Contractor's License 1	10. WY	000653	

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

Revised 08/08/2014

# 8/ 12

### 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.

ASPEN COPPORATION

(Company)

(Authorized Signature) (Representative Name, Title)

304-763-4573 / 304-763-4591 / 17 MARCH 2015 (Phone Number) (Fax Number) (Date)

Revised 08/08/2014

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 RALEISH TO-WIT:
I, Dennie ADKINS, after being first duly sworn, depose and state as follows:
1. I am an employee of ASPEN CORPORATION; and, (Company Name)
2. I do hereby attest that ASPEN CORPORATION (Company Name)
maintains a valid written drug free workplace policy and that such policy is in compliance with <b>West Virginia Code</b> §21-1D.
The above statements are sworn to under the penalty of perjury.  By:
Title:
Company Name: ASPEN CORPORATION
Date: DARCH ZOIS
Taken, subscribed and sworn to before me this 17 day of March, 2015.
By Commission expires Official SEAL STATE OF WEST VIRGINIA
NOTARY PUBLIC ANITA A. CHEEK PO BOX 1388 SOPHIA, WV 25921
My commission expires March 3, 2019 (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

Rev. August 2013

BID SHALL RESULT IN DISQUALIFICATION OF THE BID.

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: ASDEN Corporation Tax Payer ID No.: 55-062-7766-00 Address: 2400 Ritter Driver City: Daniels State: W Zip Code: 2583 Phone: 304-763-4573 Fax No.: 304-763-4591 E-mail address: Aadkins Coaspen-golf.com
Part B: Legal Structure
( ) Corporation ( ) Sole Proprietorship ( ) Partnership ( ) LLC ( ) Other (please specify)
Part C: Certifying and updating information in the Applicant/Violator System (AVS). Select only one of the following options, follow the instructions for that option, and sign below.
I, Ponnie Ackins, 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.
<ol> <li>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.</li> </ol>
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.
3-17-15 V.P.
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, tolleftee, at 800-643-9748 or from the AVS website at https://gyss.osmre.gov

## Part D.

Contractor's Business Name: ASpen Corporation

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	Donnie Ad Kins auto Ritter Dr. Daniels INV 25832 9-9-1982	Position/Title Telephone # % of Ownership Ending Date:	President 304-763-4573 5090 Current
Begin Date:	4-4-1918	Enume Date.	(10)
Name Address	Ronnie Adkins 2400 Ritter Dr. Daniels LUV 25832	Position/Title Telephone # % of Ownership Ending Date:	Vice President, Sec., T. 304-762-4573 5070 Current
Begin Date:	9.9.1982	Ending Date:	Current
Name Address		-	
Begin Date:	162	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 benefit.

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

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: DEP1500000030

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.

<u>Addendum</u>	<u>Numbers</u>	Received:

(Check the box next to each addendum received)

[)	(]	Addendum No. 1	[	]	Addendum No. 6
]	]	Addendum No. 2	[	J	Addendum No. 7
I	J	Addendum No. 3	Į	]	Addendum No. 8
[	]	Addendum No. 4	[	]	Addendum No. 9
[	]	Addendum No. 5	[	3	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

Company

Authorized Signature

17 Mareu 20/5

Date

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

Revised 6/8/2012