



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

State of West Virginia
 Request for Quotation

Proc Folder: 19025

Doc Description: ADDENDUM NO. 1 CARD ACCESS SYSTEM, LOCKS,LABOR,WARRANTY

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2014-10-01	2014-10-08 13:30:00	CRFQ 0506 WSH1500000001	2

BID RECEIVING LOCATION

BID CLERK
 DEPARTMENT OF ADMINISTRATION
 PURCHASING DIVISION
 2019 WASHINGTON ST E
 CHARLESTON WV 25305
 US

VENDOR

Vendor Name, Address and Telephone Number:

The Summit Electric Group, Inc.
 P.O. Box 254
 Hurricane, WV 25526
 304-562-7091

10/15/14 01:04:07PM
 West Virginia Purchasing Division

FOR INFORMATION CONTACT THE BUYER

Bryan Rosen
 (304) 558-4741
 bryan.d.rosen@wv.gov

Signature X

FEIN # 27-4037324

DATE 10.15.2014

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

INVOICE TO		SHIP TO	
PROCUREMENT OFFICER - 304-269-1210 HEALTH AND HUMAN RESOURCES WILLIAM R SHARPE JR HOSPITAL 936 SHARPE HOSPITAL RD WESTON WV26452 US		PROCUREMENT OFFICER - 304-269-1210 HEALTH AND HUMAN RESOURCES WILLIAM R SHARPE JR HOSPITAL 936 SHARPE HOSPITAL RD WESTON WV 26452 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Hardware, software, installation, and one (1) year warranty		\$235,000.00	\$235,000.00	\$235,000.00

Comm Code	Manufacturer	Specification	Model #
46171619			

Extended Description :

CRFQ SECTION 3.1 MUST BE SIMILAR OR EQUAL TO CURRENT CARD ACCESS SYSTEM. MUST BE COMPATIBLE WITH CURRENT DOOR SOFTWARE

WSH1500000001	Document Phase Final	Document Description ADDENDUM NO. 1 CARD ACCESS SYS TEM, LOCKS, LABOR, WARRANTY	Page 3 of 3
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ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: WSH150000001

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

The Summit Electric Group, Inc.

Company



Authorized Signature

October 15, 2014

Date

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

Revised 6/8/2012

CRFQ 0506 WSH150000001
EXHIBIT A

<u>Quantity</u>	<u>Description</u>	<u>Total Price</u>
1	PURCHASE OF PARTS, SOFTWARE, INSTALLATION, AND A ONE (1) YEAR WARRANTY FOR EXPANSION OF THE WILLIAM R. SHARPE, JR. HOSPITAL CARD ACCESS SYSTEM PER THE SPECIFICATIONS ATTACHED.	\$235,000.00

Vendor Name: The Summit Electric Group, Inc.

Vendor Address: Rt. 2, Box Hurricane, WV 25526

P.O. Box 254; Hurricane, WV 25526

Vendor Telephone Number: 304-562-7091

Vendor Fax Number: 304-562-7137

Vendor Email: tim@tseginc.com

Vendor Authorized Representative: Timothy W. Reed
(Please Print)

Vendor Authorized Representative Signature: 

Date: October 15, 2014

REQUEST FOR QUOTATION
WSH1500000001 PURCHASE OF PARTS, INSTALLATION AND WARRANTY FOR
THE EXPANSION OF WILLIAM R. SHARPE, JR. HOSPITAL CARD ACCESS
SYSTEM

SPECIFICATIONS

1. **PURPOSE AND SCOPE:** The West Virginia Purchasing Division is soliciting bids on behalf of William R. Sharpe, Jr. Hospital to establish a contract for the purchase of parts, installation and warranty for the expansion of the William R. Sharpe, Jr. Hospital Card Access System.

2. **DEFINITIONS:** The terms listed below shall have the meanings assigned to them below. Additional definitions can be found in section 2 of the General Terms and Conditions.
 - 2.1 **“Contract Services”** means provide parts, installation and warranty for the expansion of the William R. Sharpe, Jr. Hospital Card Access System. This includes the required hardware and software for the access system.

 - 2.2 **“Pricing Page”** means the pages upon which Vendor should list its proposed price for the Contract Services.

 - 2.3 **“CRFQ”** means the official request for quotation published by the Purchasing Division.

 - 2.4 **“Contract Item”** means to provide required hardware and software for security system.

 - 2.5 **“VSS” Vendor Self Service** means the item upon which the Vendor should list their proposed price for the contract items or services.

3. **MANDATORY REQUIREMENTS:**
 - 3.1 **Mandatory Contract Item Requirements:** Contract Items must meet or exceed the mandatory requirements listed below.
 - 3.1.1. Six (6) Door locks must be IDH MAX from Stanley Security Solutions or equal with alarm for designated exit doors. Copies of these specifications are enclosed. This lock should require only one 4 conductor wire run, the RQE switch must sense the inside lever the inside lever/know rotation.

 - 3.1.2. Must be a specialized locking system for the three (3) new unit

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THE EXPANSION OF WILLIAM R. SHARPE, JR. HOSPITAL CARD ACCESS
SYSTEM

doors similar to the current locking system on current unit doors. These locks must be able to use the same "S" key that we currently use on the unit doors.

- 3.1.3. Must be thirteen (13) Kantech Door Controllers with Proximity Card Readers and other equipment or equal for designated Double Doors that is compatible with our current doors and software. Copies of these specifications are enclosed.

The KT-300 or equivalent must be a two door controller with eight monitored points on board expandable to sixteen, door strike power, auxiliary power output, and two auxiliary outputs. It shall accept Wiegand, proximity, bar code, magnetic and integrated keypad reader types. It must support RS-232, RS-485, and Combus communication.

- 3.1.4. Must be twenty-four (24) Kantech Door Controllers with Proximity Card Reader and other equipment or equal for designated Single Doors that is compatible with our current doors and software. Copies of these specifications are enclosed.

The KT-100 or equal is a one door controller with four monitored points, door strike power, and four auxiliary outputs. It must accept Wiegand, proximity, bar code, magnetic and integrated keypad reader types.

3.2 Mandatory Contract Service Requirements: Contract Services must meet or exceed the mandatory requirements listed below.

- 3.2.1 Vendor must Install the Card Access System (including locks, controller, wires and other required parts). Note that any installations or repairs completed on fire rated doors must maintain the fire rating specified on the door.
- 3.2.2 Install locations are listed in Exhibit A for each unit. Attachment B representative of each door location.
- 3.2.3 Cable should be installed as follows:

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3.2.3.1 Walls constructed of surface finish over studs or furring strips shall have all cabling concealed within the walls.

3.2.3.2 Walls constructed of solid masonry shall have all cabling within surface mounted raceways

3.2.3.3 Cabling installed above suspend ceilings shall be plenum rated as required and supported to building members at regular intervals by approved National Electrical Code methods.

3.2.3.4 All cables shall be installed securely.

3.2.3.5 Existing cabling shall be used as possible to interface with newly installed cable.

3.2.3.6 All cabling shall be of a type and size, and installed as specified and shown in accordance with the manufacturer's recommendations.

3.2.4 A one year materials and labor warranty must be included in for all work required to complete this project.

4 CONTRACT AWARD:

4.1 **Contract Award:** The Contract is intended to provide Agency with a purchase price for the Contract Items and Services. The Contract shall be awarded to the Vendor that provides the Contract Items and Services meeting the required specifications for the lowest overall total cost.

4.2 **Pricing Page:** Vendor should complete the Pricing Page on VSS or submit a paper bid by providing pricing for the total cost. Vendor should complete the Pricing Page in full as failure to complete the Pricing Page in full as failure to complete the pricing page in its entirety may result in Vendor's bid being disqualified.

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SYSTEM

Notwithstanding the foregoing, the Purchasing Division may correct errors as it deems appropriate. Vendor shall enter the information into the Pricing Page to prevent errors in the evaluation.

- 5 PERFORMANCE:** Vendor and Agency shall agree upon a schedule for performance of Contract Services and Contract Services Deliverables, unless such a schedule is already included herein by Agency.

5.1 Shipment and Delivery: Vendor shall deliver and install the Contract Items within 60 working days after receiving a purchase order. Contract Items must be delivered and installed at 936 Sharpe Hospital Road, Weston, WV 26452.

5.2 Late Delivery: The Agency placing the order under this Contract must be notified in writing if the shipment of the Contract Items will be delayed for any reason. Any delay in delivery that could cause harm to an Agency will be grounds for cancellation of the Contract, and/or obtaining the Contract Items from a third party.

Any Agency seeking to obtain the Contract Items from a third party under this provision must first obtain approval of the Purchasing Division.

5.3 Delivery Payment/Risk of Loss: Vendor shall deliver the Contract Items F.O.B. destination to the Agency's location.

5.4 Installation Acceptance: The Chief Financial Officer at the Hospital (or their designee) as well as designee from West Virginia Department of Health and Human Resources shall deem the installation accepted and part of the entire system following an initial inspection and fully operational period of seven (7) consecutive days. This acceptance shall be submitted in writing to the project manager.

- 6 PAYMENT:** Vendor shall accept payment in accordance with the payment procedures of the State of West Virginia.

- 7 TRAVEL:** Vendor shall be responsible for all mileage and travel costs, including travel time, associated with performance of this Contract. Any anticipated mileage or travel costs

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SYSTEM

may be included in the flat fee or hourly rate listed on Vendor's bid, but such costs will not be paid by the Agency separately.

8 FACILITIES ACCESS: Performance of Contract Services may require access cards and/or keys to gain entrance to Agency's facilities. In the event that access cards and/or keys are required:

8.2 Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.

8.3 Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.

8.4 Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.

8.5 Anyone performing under this Contract will be subject to Agency's security protocol and procedures.

8.6 Vendor shall inform all staff of Agency's security protocol and procedures.

9 VENDOR DEFAULT:

9.2 The following shall be considered a vendor default under this Contract.

9.2.1 Failure to perform Contract Services in accordance with the requirements contained herein.

9.2.2 Failure to comply with other specifications and requirements contained herein.

9.2.3 Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.

**REQUEST FOR QUOTATION
WSH1500000001 PURCHASE OF PARTS, INSTALLATION AND WARRANTY FOR
THE EXPANSION OF WILLIAM R. SHARPE, JR. HOSPITAL CARD ACCESS
SYSTEM**

9.2.4 Failure to remedy deficient performance upon request.

9.3 The following remedies shall be available to Agency upon default.

9.3.1 Immediate cancellation of the Contract.

9.3.2 Immediate cancellation of one or more release orders issued under this Contract.

9.3.3 Any other remedies available in law or equity.

10 MISCELLANEOUS:

10.2 Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Tim Reed
Telephone Number: 304-964-4462
Fax Number: 304-372-3721
Email Address: tim@tseginc.com

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: The Summit Electric Group, Inc.

Contractor's License No. WV047675

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

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 A101-2007 and A201-2007 or the A107-2007 documents, as amended by the Supplementary Conditions for the State of West Virginia, in addition to the terms and conditions contained herein.
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

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.

Exhibit A
 REQUEST FOR QUOTATIONS
 WSH15058 CARD ACCESS SYSTEM AND LOCKS

PRICING PAGE

Desired Item #	Quantity	Description	Unit Cost	Extended Cost
#1 (3.1.1.1)	7	IDH Max from Stanley Security Solutions for Single Exit Doors with Alarms or equal and must be compatible with current door software.		
#2 (3.1.1.2)	3	Specialized locking system for unit double doors that is similar to the current locking system on other units.		
#3 (3.1.1.3)	13	Kantech Door Controller with Proximity Card Readers and other equipment or equal for Double Doors that is compatible with our current doors and software		
#4 (3.1.1.4)	23	Kantech Door Controller with Proximity Card Readers and other equipment or equal for Single Doors that is compatible with our current doors and software		
#5 (3.1.1.5)	1	Installation of locks, controller and other parts required for the Card Access System		
#6 (3.1.1.6)	1	One year material and labor warranty		
Grand Total Bid				

THIS IS A ONE-TIME PURCHASE AND INSTALLATION FOR THE EXPANSION OF THE CARD ACCESS SYSTEM AT WILLIAM R. SHARPE, JR. HOSPITAL.

CONTRACT ITEMS MUST BE SHIPPED F.O.B. DESTINATION.

AGENCY WILL EVALUATE BIDS BASED ON THE GRAND TOTAL BID PRICE. A CONTRACT WILL BE AWARDED TO THE VENDOR THAT PROVIDES THE CONTRACT ITEMS MEETING THE REQUIRED SPECIFICATIONS FOR THE LOWEST OVERALL GRAND TOTAL BID PRICE.

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV047675

Classification:

ELECTRICAL

THE SUMMIT ELECTRIC GROUP INC
DBA THE SUMMIT ELECTRIC GROUP INC
PO BOX 254
HURRICANE, WV 25526

Date Issued

JANUARY 14, 2014

Expiration Date

JANUARY 14, 2015

Richard D. Milam

Authorized Company Signature

Michael A. Carl

Chair, West Virginia Contractor
Licensing Board

WEST VIRGINIA
CONTRACTOR
LICENSING
BOARD

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where work is being performed. This license number must appear in all advertisements, on all bid submissions and on all fully executed and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.



CERTIFICATE OF LIABILITY INSURANCE

OP ID: AE

DATE (MM/DD/YYYY)

10/09/2014

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

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

PRODUCER Peoples Insurance Agency, LLC 101 Fifth Ave, PO Box 2388 Huntington, WV 25724-2388 Clarence C. Massey	CONTACT NAME: PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____ PRODUCER CUSTOMER ID #: THESU-1														
INSURED The Summit Electric Group Inc PO Box 254 Hurricane, WV 25526-0254	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Motorists Mutual Insurance Co.</td> <td style="text-align: center;">14621</td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Motorists Mutual Insurance Co.	14621	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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INSURER D :															
INSURER E :															
INSURER F :															

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			33283285-80	02/21/2014	02/21/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000
	<input checked="" type="checkbox"/> XCU Included						PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> Contractual Liab						GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						\$
A	AUTOMOBILE LIABILITY			33283285	02/21/2014	02/21/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (PER ACCIDENT) \$
	<input checked="" type="checkbox"/> HIRED AUTOS						\$
	<input checked="" type="checkbox"/> NON-OWNED AUTOS						\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			33283285	02/21/2014	02/21/2015	EACH OCCURRENCE \$ 3,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$ 3,000,000
	<input type="checkbox"/> DEDUCTIBLE						\$
	<input checked="" type="checkbox"/> RETENTION \$ NONE						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			SEPARATE CERTIFICATE			WC STATU-TORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		<input type="checkbox"/> Y / <input type="checkbox"/> N	N/A			E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
A	INSTALLATION			33283285	02/21/2014	02/21/2015	Installat 100,000
							Leased/Re 100,000

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

CERTIFICATE HOLDER

CANCELLATION

EVIDENC

Evidence of Coverage

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Clarence C. Massey



CERTIFICATE OF LIABILITY INSURANCE

OP ID: AE

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PRODUCER Peoples Insurance Agency, LLC 101 Fifth Ave, PO Box 2388 Huntington, WV 25724-2388 Clarence C. Massey		CONTACT NAME: PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____ PRODUCER CUSTOMER ID #: THESU-1	
INSURED The Summit Electric Group Inc PO Box 254 Hurricane, WV 25526-0254		INSURER(S) AFFORDING COVERAGE INSURER A : Brickstreet Insurance INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	
		NAIC #	


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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY						EACH OCCURRENCE	\$
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$
							GENERAL AGGREGATE	\$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (PER ACCIDENT)	\$
	<input type="checkbox"/> HIRED AUTOS							\$
	<input type="checkbox"/> NON-OWNED AUTOS							\$
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$
	<input type="checkbox"/> OCCUR							\$
	<input type="checkbox"/> DEDUCTIBLE							\$
	<input type="checkbox"/> RETENTION \$							\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						<input checked="" type="checkbox"/> WC STATUTORY LIMITS	<input type="checkbox"/> OTHER
A	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y / <input type="checkbox"/> N	N / A	WCB1011008 INCLUDES BROAD FORM	02/01/2014	02/01/2015	E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Evidence of West Virginia workers compensation insurance.

CERTIFICATE HOLDER**CANCELLATION**

EVIDENC Evidence of Coverage	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, The Summit Electric Group, Inc.
of Hurricane, West Virginia, as Principal, and The Ohio Casualty Insurance
Company of Fairfield, Ohio, a corporation organized and existing under the laws of the State of Ohio
Ohio with its principal office in the City of Fairfield, as Surety, are held and firmly bound unto the State
of West Virginia, as Obligee, in the penal sum of 5% of Amount of 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 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
WSH1500000001 - William R Sharpe Jr Hospital Card Access System

NOW THEREFORE,

- (a) If said bid shall be rejected, or
- (b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal
attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform
the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in
full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no
way impaired or affected by any extension of the time within which the Obligee may accept such bid, and said Surety does hereby
waive notice of any such extension.

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 individual, this 15 day of October, 2014.

Principal Seal

The Summit Electric Group, Inc.
(Name of Principal)
By [Signature]
(Must be President, Vice President, or
Duly Authorized Agent)
Vice President
(Title)

Surety Seal

The Ohio Casualty Insurance Company
(Name of Surety)
[Signature]
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.

POWER OF ATTORNEY
THE OHIO CASUALTY INSURANCE COMPANY

Agency Name: Peoples Insurance Agency LLC

Know All Men by These Presents: That THE OHIO CASUALTY INSURANCE COMPANY, a New Hampshire Corporation, pursuant to the authority granted by Article IV, Section 12 of the Code of Regulations and By-Laws of The Ohio Casualty Insurance Company, do hereby nominate, constitute and appoint: Clarence C. Massey, Thomas H. Bottoms Jr of HUNTINGTON, West Virginia its true and lawful agent(s) and attorney(ies)-in-fact, to make, execute, seal and deliver for and on its behalf as surety, and as its act and deed **any and all** BONDS, UNDERTAKINGS, and RECOGNIZANCES, excluding, however, any bond(s) or undertaking(s) guaranteeing the payment of notes and interest thereon.

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of said Company at their administrative offices in Keene, NH, in their own proper persons. The authority granted hereunder supersedes any previous authority heretofore granted the above named attorney(ies)-in-fact.

In WITNESS WHEREOF, the undersigned officer of the said The Ohio Casualty Insurance Company has hereunto subscribed his name and affixed the Corporate Seal of said Company this 1st day of December, 2012.



STATE OF WASHINGTON
COUNTY OF KING

Gregory W. Davenport Assistant Secretary

On this 1st day of December, 2012 before the subscriber, a Notary Public of the State of Washington, in and for the County of King, duly commissioned and qualified, came Gregory W. Davenport, Assistant Secretary of The Ohio Casualty Insurance Company, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn deposes and says that he is the officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and the said Corporate Seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporation.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at the City of Seattle, State of Washington, the day and year first above written.



Notary Public in and for County of King, State of Washington
My Commission expires December 9, 2013

This power of attorney is granted under and by authority of Article IV, Section 12 of the By-Laws of The Ohio Casualty Insurance Company, extracts from which read:

ARTICLE IV - Officers: Section 12. Power of Attorney.

Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bond, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary.

Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

This certificate and the above power of attorney may be signed by facsimile or mechanically reproduced signatures under and by authority of the following vote of the board of directors of The Ohio Casualty Insurance Company effective on the 15th day of February, 2011:

VOTED that the facsimile or mechanically reproduced signature of any assistant secretary of the company, wherever appearing upon a certified copy of any power of attorney issued by the company in connection with surety bonds, shall be valid and binding upon the company with the same force and effect as though manually affixed.

CERTIFICATE

I, the undersigned Assistant Secretary of The Ohio Casualty Insurance Company, do hereby certify that the foregoing power of attorney, the referenced By-Laws of the Company and the above resolution of their Board of Directors are true and correct copies and are in full force and effect on this date.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the Company this 15th day of October 2014



David M. Carey Assistant Secretary



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

STATE OF WEST VIRGINIA,

COUNTY OF Putnam, **TO-WIT:**

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

1. I am an employee of _____; and,
(Company Name)

2. I do hereby attest that The Summit Electric Group, Inc.
(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: Timothy W. Reed Timothy W. Reed

Title: Vice President

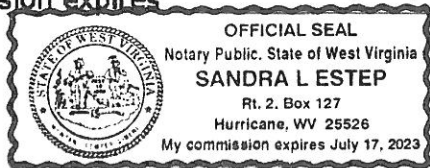
Company Name: The Summit Electric Group, Inc.

Date: October 15, 2014

Taken, subscribed and sworn to before me this 15th day of October, 2014.

By Commission expires July 17, 2023

(Seal)



Sandra L. Estep
(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.

STATE OF WEST VIRGINIA
Purchasing Division
PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

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

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

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

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: The Summit Electric Group, Inc.

Authorized Signature: [Signature] Date: October 15, 2014

State of West Virginia

County of Putnam, to-wit:

Taken, subscribed, and sworn to before me this 15th day of October, 2014.

My Commission expires July 17, 2023, 20 .

AFFIX SEAL HERE

NOTARY PUBLIC [Signature]
Purchasing Affidavit (Revised 07/01/2012)

