



# **FAX COVER SHEET**

TO: Department of Administration, Purchasing Division

\_08/13/15 12:49:34 - WV Purchasing Division

FROM: Williams Excavating, LLC

# OF PAGES:

12 (Including cover sheet)

Sealed Bid Enclosed: DEP1500000106

COMMENTS:

Buyer: Beth Collins

Solicitation No: DEP1500000106 Davis Coal & Coke

Bid Opening Date: 13 AUG 2015

(DEP17233)

Bid Opening Time: 1:30pm

Fax Number: (304) 558-3970

Property of: Williams Excavating, LLC.

8801 CR22A

Bloomingdale, OH 43910

740-937-2077 (Office)

740-937-2022 (Fax)

# Davis Coal and Coke

# REVISED Contractor's Bid Sheet

Company Na	ame: Williams Excavating, LLC
Address:	8801 CR 22A
	Bloomingdale, OH 43910

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

TEM NO.	Qty	Unit	DESCRIPTION	UNI	T PRICE	3	AMOUNT
1.0	Ī	LS	Mobilization and Demobilization (Limited to 10% of Total Bid)	enn (Diocole)	LS	\$	22,000.00
2.0	1		Construction Layout (Limited to 5% of Total Bid)	_	LS	\$	14,500.00
3.0	Ĩ	LS	Quality Control (Limited to 3% of Total Bid)		LS	\$	10,000.00
4.1	1	LS	Site Preparation (Limited to 10% of Total Bid)		LS	\$	23,550.00
42	85	TN	Access Road Stone		38	\$	3,230.00
4.3	205	TN	Gravel Drive Rehabilitation		42	\$	8,610.00
5.43	1,300	LF	Silt Fence Sediment Control	\$	2	\$	
5.2	185	LF	Straw Wattle Erosion Control	\$	4.20	\$	2,600.00
5.3	50	TN	Stablized Construction Entrance (70' x 12' Width)	S	55	\$	777.00 2,750.00
5.4	4	EA	Rock Check Dam		550	\$	
5.0	1.7	AC	Revegetation		,100	\$	2,600.00
7.1	375	LF	8' Grouted Riprap Channel (Channel "C")	\$	95	\$	3,570.00
7.2	360	LF	8' Riprap Lined Channel (Channel "A" and "B")	\$	80		35,625.00
7.3	345	LF	8' Grass Lined Channel w/Type I Curlex (Channel "D")	\$	45	\$ \$	28,800.00
.4	20	LF	6' Riprap Lined Channel (Channel "B")	\$	55		15,525.00
1.5	680	LF	Ditch Rehabilitation	\$		\$	1,100.00
.6	265	LF	24" HDPE Culvert	\$	82	\$	2,856.00
.7	670	LF	18" HDPE Culvert	\$	60	\$	21,730.00
.8	87	LF	15" HDPE Culvert			\$	40,200.00
.9		EA	Type "A" Manhole		55	\$	4,785.00
10		BA	Type "G" Drop Inlet		100	\$	24,800.00
11		EA	Concrete L-Wall			\$	19,425.00
12		EA	Concrete Wingwall			\$	6,710.00
13		LS	Concrete Sidewalk/Access Replacement		,000	\$	7,000.00
14		CY	500 psi Flowable Fill Pipe Encasement		S	\$	1,500.00
15		LF	4' x 8' Underdrain	*	10	\$	1,320.00
16		LF	Underdrain Conveyance Pipe		00	\$	34,000.00
17		EA	Piezometer Abandonment		30	\$	900.00
0			Unclassified Excavation			\$	2,600.00
1			Wet/Modified Mine Seals			\$	2,850.00
2			Mine Seal Conveyance Pipe			\$	8,000.00
3	-		Soda Ash Briquettes (50 LB Bags)			\$	420.00
.1			Asphalt Pavement Wearing Course			\$	335.00
.2		TN	Shoulder Stone	\$ 16		\$	3,200.00
	. 20		Chouncy Giolic	\$ 4	4	\$	880.00
				<u> </u>			
			TOTAL	<del>                                     </del>		\$	358,748.00

PRINT TIME AUG. 13. 12:46PM

Agency	WVDEP	
REQ.P.	.O#_DEP17233	_

#### **BID BOND**

	KNOW ALL MEN BY THESE PR	ESENTS, The	at we, the undersigned,	s, Williams Excavating, LLC
of				s Principal, and Ohio Farmers Insurance Company
of	Westfield Center,	<u>OH</u>		organized and existing under the laws of the State of
<u>OH</u>	with its principal office i	in the City of_	Westfield Center	, as Surety, are held and firmly bound unto the State
of West	Virginia, as Obligee, in the penal s	sum of <u>Five F</u>	Percent of Amount Bio	id (\$ 5% ) for the payment of which
				dministrators, executors, successors and assigns.
	The Condition of the above obli	lgation is suc	h that whereas the Pr	rincipal has submitted to the Purchasing Section of the
Departn	nent of Administration a certain bid	or proposal,	attached hereto and ma	nade a part hereof, to enter into a contract in writing for
Davis (	Coal and Coke DEP17233			
	NOW THEREFORE			
	NOW THEREFORE,			
way imp	refeto and snall turnish any other acceptance eand effect. It is expressly under exceed the penal amount of this oblined and or affected by any extensionatics of any such extension.	epted and the r bonds and it of said bid, the stood and agailgation as here of the time as and seals of the said said said said said said said said	insurance required by the on this obligation shall reed that the liability of rein stated.  ulates and agrees that within which the Obligor Principal and Surety,	r into a contract in accordance with the bid or proposative bid or proposal, and shall in all other respects perform be null and void, otherwise this obligation shall remain in the Surety for any and all claims hereunder shall, in not the obligations of said Surety and its bond shall be in not gee may accept such bid, and said Surety does hereby, executed and sealed by a proper officer of Principal and by of
Principal	Seal		and the same of th	Williams Excavating, LLC  (Name of Principal)  By  (Nust be President, Vice President, or Duly Authorized Agent)  (Title)
Surety S	eal		INSTITUTE OF STREET	Ohio Farmers Insurance Company (Name of Surety)  By:  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 NO. General Power of Attorney

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

Westfield Center, Ohio

#### **CERTIFIED COPY**

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY, and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having their principal offices in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint Nicholas A. Sparachane

and State of WV their true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in their names, place Wheeling of

and stead, to execute, acknowledge and deliver the following surety bond:

Surety Bond Number: Bid Bond Principal: Williams Excavating, LLC

Obligee: State of West Virginia, Department of Environmental Protection

14405438822

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

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

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

"BE IT FURTHER RESOLVED, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2000.)

In Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY, and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their National Surety Leader and Senior Executive and their corporate seals o

be hereto affixed this 1st day of April, A.D., 2014.

Corporate Seals Affixed







WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

By: Dennis P. Baus,

National Surety Leader and Senior Executive

State of Ohio County of Medina

SS.:

On this 1st day of April, A.D., 2014, before me personally came Dennis P. Baus, to me known, who, being by me duly swom, did depose and say, that he resides in Wooster, Ohio; that he is National Surety Leader and Senior Executive of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY, and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Board of Directors of said Companies; and that he signed his name thereto by like order,

Notarial Seal Affixed



By:

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

State of Ohio County of Medina

SS.:

CERTIFICATE

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

In Wilness Whereof, I have hereunto set my hand and affixed the seal of said Company at Westfield Center, Ohio, this 21st day of July ,AD., 2015.



Frank Carrino, Secretary

BPOAC (03-01) RECEIVED TIME AUG. 13. 12:42PM

PRINT TIME AUG. 13. 12:47PM

### ADDITIONAL TERMS AND CONDITIONS (Construction Contracts Only)

1. CONTRACTOR'S LICENSE: West Virginia Code § 21-11-2 requires that all persons desiring to perform contracting work in this state be licensed. The West Virginia Contractors Licensing Board is empowered to issue the contractor's license. Applications for a contractor's license may be made by contacting the West Virginia Division of Labor. West Virginia Code § 21-11-11 requires any prospective Vendor to include the contractor's license number on its bid. Failure to include a contractor's license number on the bid shall result in Vendor's bid being disqualified. Vendors should include a contractor's license number in the space provided below.

Contractor's Name:	Williams Excavating, LLC	
Contractor's License N	oW-038495	

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 drugfree 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 04/13/2015

#### CERTIFICATIONAND SIGNATURE PAGE

By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

Williams Excavating, LLC

(Company)\_

Authorized Signature) (Representative Name, Title)

(740) 937-2077 / (740) 937-2022 13 AUG 25

(Phone Number) (Fax Number) (Date)

Revised 04/13/2015

## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

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

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

	Numbers Received:			
(Check the b	ox next to each addendum r	eceived)		
X	Addendum No. 1		Addendum No. 6	
	Addendum No. 2		Addendum No. 7	
	Addendum No. 3		Addendum No. 8	
	Addendum No. 4		Addendum No. 9	
	Addendum No. 5		Addendum No. 10	
I further under discussion he the information binding.	that failure to confirm the restand that any verbal repreded between Vendor's repredenting and a series on issued in writing and a Excavating, LLC	esentation sentatives	made or assumed to be magnified any state personnel is	ade during any oral
Company 1			<del></del>	
Authorized \$	Navis Liptor ignature	<u>~</u>	<u>-</u>	
Date	13 Aug 24	15	<u>.</u>	
NOTE: Thi	s addendum acknowledger cessing.	ment shou	ld be submitted with the	e bid to expedite

WV-72 Created 07/01/13

#### State of West Virginia Purchasing Division

# CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

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

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

	00			
Contract Identifi	cation:			
Contract Number	DEP 17233 Davis Coal an	d Coke		
Contract Purpose	Construction			
Agency Request	ing Work: WV DEP AML- Special R	Reclamation		
		lude each of the items listed below. The vendor information has been included in the attached report.		
Information indicating the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided;				
Name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;				
Average number of employees in connection with the construction on the public improvement;				
Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.				
<u>Vendor Contact</u>	nformation:			
Vendor Name:	Williams Excavating, LLC	Vendor Telephone: (740) 937-2077		
Vendor Address:	8801 CR 22A	Vendor Fax: (740) 937-2022		
	Bloomingdale, OH 43910			

WV-73 Rev. 08/2013



DRVG MART

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

STATE OF WEST VIRGINIA,			
COUNTY OF JEFFERSON	TO-WIT:		
I, Travis Tipton	, after being first duly sworn, depose and state as follows:		
	Williams Excavating, LLC ; and,		
2. I do hereby attest that _	Williams Excavating, LLC (Company Name)		
maintains a valid writter policy is in compliance w	drug free workplace policy and that such with <b>West Virginia Code</b> §21-1D.		
Title: Project Engineer			
	Company Name: Williams Excavating		
	Date: 14 July 2015		
Taken, subscribed and sworn t	o before me this 14 day of July , 2015.		
By Commission expires <u>JUN</u> L	_03 d0d0		
(Seal) Shannon Notary Public the State	In and For of Ohio		
My Commissi June 03 THIS AFFIDAVIT MUST BE S WITH WV CODE PROVISION	2020 UBMITTED WITH THE BID IN ORDER TO COMPLY IS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE		
BID SHALL RESULT IN DISC	UALIFICATION OF THE BID.		

Rev. August 2013

RFQ No. DEP 17233

# 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

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to the aggregate; or (2) the debtor is in employer default. chapter eleven of the W. Va. Coda, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vandor 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. 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: Williams Excavating
Authorized Signature:
State of Ohio
County of Jufferson, to-wit:
Taken, subscribed, and sworn to before me this 14 day of 1010
My Commission expires dune 03 , 20 20.
AFFIX SEAL HERE NOTARY PUBLIC
Purchasing Affidavit (Revised 07/01/2012) Shannon Travie

ellania Luavis Notary Public in and For the State of Ohlo My Commission Expires June 03, 2020

14405438822.

Part A: General Information

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

#### AML CONTRACTOR INFORMATION FORM

You must complete this form for your AML contracting officer to request an eligibility evaluation from the Office of Surface Mining to determine if you are eligible to receive an AML contract. This requirement applies to contractors and their sub-contractors and is found under OSM's regulations at 30 CFR 874.16. When possible, please type your information onto this form to reduce errors on our end. NOTE: Signature and date this form is signed must be recent (within the last month) to be considered for a current bid

Business Name: Williams Excavating Tax Payer ID No.: 01-0830020  Address: 8801 CR 22A City: Bloomingdale State: OH Zip Code: 43910 Phone: 740-937-2077 Fax No.: 740-937-2022 E-mail address:
Part B: Legal Structure
( ) Corporation ( ) Sole Proprietorship ( ) Partnership (X) LLC ( ) Other (please specify)
Part C: Certifying and updating information in the Applicant/Violator System (AVS). Select only one of the following options, follow the instructions for that option, and sign below.
I, Joe Williams have the express authority to certify that:  (print name)
<ol> <li>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.</li> </ol>
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.
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.
8-13-15 President
Date Signature tine
IMPORTANT! In order to certify in Part C to the accuracy of existing information in AVS, you must obtain a copy of your insiness' Entity OFT. To obtain an Entity OFT, contact the AVS
Office, toll-free, at 800-643-9748 or from the AVS website at https://avss.osmre.gov.

Pa	rŕ	n

Contractor's Business Name:	Williams Excavating, LLC

If the current Entity OFT information for your business is incomplete or incorrect in AVS, or if there is no information in AVS for your business, you must provide all of the following information as it applies to your business. Please make as many copies of this page as you require.

- Every officer (President, Vice President, Secretary, Treasurer, etc.);
- All Directors:
- All persons performing a function similar to a Director;
- Every person or business that owns 10% or more of the voting stock in your business;
- Every partner, if your business is a partnership:
- Every member and manager, if your business is a limited liability company; and
- Any other person(s) who has the ability to determine the manner in which the AML reclamation project is being conducted.

Name	Joe Williams	Position/Title	Owner
Address	8801 CR 22A	Telephone #	304-614-8887
	Bloomingdale, OH 43910	% of Ownership	100%
Begin Date:	March 14. 2005	Ending Date:	
No			
Name	The state of the s	Position/Title	<del></del>
Address		Telephone #	
	· · · · · · · · · · · · · · · · · · ·	% of Ownership	
Begin Date:		Ending Date:	
Name '		Position/Title	
Address		Telephone #	
		% of Ownership	
Begin Date:			
negm Date.		Ending Date:	
Name		Position/Title	
Address		Telephone #	
		% of Ownership	
Begin Date:		Ending Date:	
		crons rate:	

#### 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.