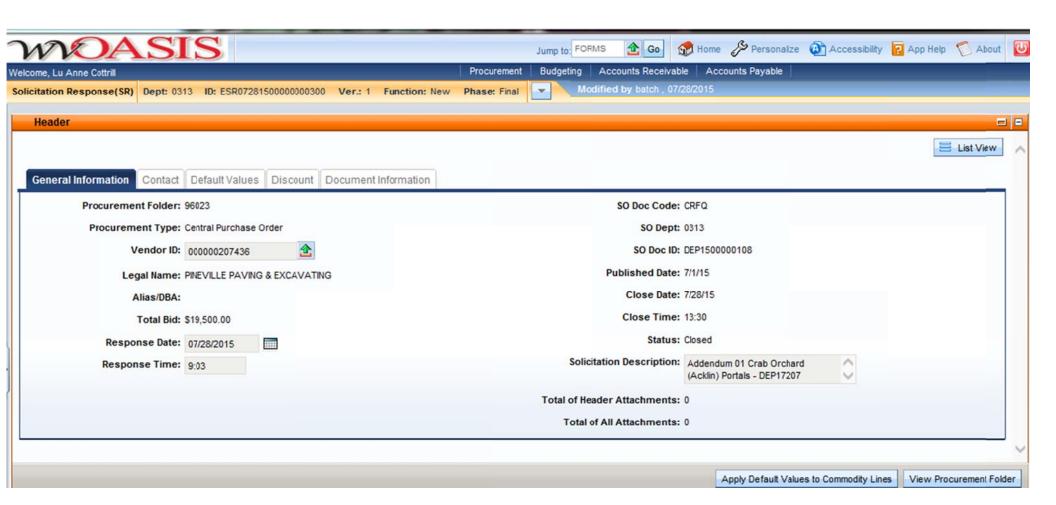


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

Bid Fax: 304-558-3970

The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at *wvOASIS.gov*. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at *WVPurchasing.gov* with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.





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

State of West Virginia Solicitation Response

Proc Folder: 96023

Solicitation Description: Addendum 01 Crab Orchard (Acklin) Portals - DEP17207

Proc Type: Central Purchase Order

Date issued	Solicitation Closes	Solicitation No	Version
	2015-07-28 13:30:00	SR 0313 ESR07281500000000300	1

VENDOR

000000207436

PINEVILLE PAVING & EXCAVATING

FOR INFORMATION CONTACT THE BUYER

Beth Collins (304) 558-2157 beth.a.collins@wv.gov

Signature X FEIN # DATE

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

Page: 1 FORM ID: WV-PRC-SR-001

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Mobilization & Demobilization	1.00000	LS	\$1,000.00	\$1,000.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Extended Des	scription : (Cannot be more than 1	10% of Total Amour	nt Bid)		
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Construction Layout Stakes	1.00000	LS	\$250.00	\$250.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Line 3	Comm Ln Desc Quality Control	Qty 1.00000	Unit Issue LS	Unit Price \$250.00	Ln Total Or Contract Amount \$250.00
3	Quality Control	1.00000		\$250.00	
3 Comm Code	Quality Control Manufacturer	1.00000 Specification	LS	\$250.00	
3 Comm Code 77111603	Quality Control Manufacturer	Specification Specification 3% of Total Amount	LS	\$250.00	
Comm Code 77111603 Extended Des	Manufacturer scription: (Cannot be more than 3	1.00000 Specification	LS Bid)	\$250.00 Model #	\$250.00
Comm Code 77111603 Extended Des Line 4	Manufacturer Scription: (Cannot be more than 3	1.00000 Specification 3% of Total Amount	LS Bid) Unit Issue	\$250.00 Model # Unit Price	\$250.00 Ln Total Or Contract Amount
Comm Code 77111603 Extended Des	Manufacturer Scription: (Cannot be more than 3) Comm Ln Desc Site Preparation	1.00000 Specification 3% of Total Amount Qty 1.00000	LS Bid) Unit Issue	\$250.00 Model # Unit Price \$1,000.00	\$250.00 Ln Total Or Contract Amount

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
5	Silt Fence Sediment Control	350.00000	LF	\$3.00	\$1,050.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Extended Des	Silt Fence Sediment Contr	ol			
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	Stone Construction Entrance (50' x	60.00000	TON	\$40.00	\$2,400.00
	25' Width)			•	· ,
Comm Code	Manufacturer	Specification		Model #	
77111603		<u> </u>			
Extended Des	scription : Stone Construction Entran	ce (50' x 25' Win	łth)		
Line 7	Comm Ln Desc Revegetation	Qty 1.00000	Unit Issue LS	Unit Price \$1,050.00	Ln Total Or Contract Amount \$1,050.00
7	Revegetation	1.00000		\$1,050.00	
7 Comm Code	Revegetation Manufacturer	1.00000		\$1,050.00	
7 Comm Code 77111603	Revegetation Manufacturer	1.00000		\$1,050.00	
7 Comm Code 77111603 Extended Des	Manufacturer scription : Revegetation	1.00000 Specification	LS	\$1,050.00 Model #	\$1,050.00
7 Comm Code 77111603 Extended Des	Manufacturer scription: Revegetation Comm Ln Desc	1.00000 Specification	LS Unit Issue	\$1,050.00 Model # Unit Price	\$1,050.00 Ln Total Or Contract Amount
Comm Code 77111603 Extended Des	Manufacturer scription: Revegetation Comm Ln Desc	1.00000 Specification	LS Unit Issue	\$1,050.00 Model # Unit Price	\$1,050.00 Ln Total Or Contract Amount
7 Comm Code 77111603 Extended Des	Manufacturer Scription: Revegetation Comm Ln Desc Dry Mine Seal	1.00000 Specification Qty 1.00000	LS Unit Issue	\$1,050.00 Model # Unit Price \$2,500.00	\$1,050.00 Ln Total Or Contract Amount

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
9	36" HDPE Double Wall Corrugated Pipe	20.00000	LF	\$50.00	\$1,000.00

Comm Code	Manufacturer	Specification	Model #	
77111603				

Extended Description : 36" HDPE Double Wall Corrugated Pipe

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
10	36" Bat Gate Mine Seal	1.00000	EA	\$9,000.00	\$9,000.00

Comm Code	Manufacturer	Specification	Model #	
77111603				
Extended Descript	tion: 36" Bat Gate Mi	ne Seal		

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Pineville Paving &		igned, Pineville Paving & Excavating, Inc	
	of PO Box 1290 Pinevil		, as Principal, and Ohio Farmers Insurance Com
			ration organized and existing under the laws of the State of
Ohio	with its principal o	ffice in the City of Westfield Center	er, as Surety, are held and firmly bound unto the State
of West	Virginia, as Obligee, in the p	enal sum of <u>Five Percent</u>	(\$ 5%) for the payment of which
			eirs, administrators, executors, successors and assigns.
			Principal has submitted to the Purchasing Section of the
DEP15	500000108, Crab Orchard	(Acklin) Portals in Raleigh Cour	and made a part hereof, to enter into a contract in writing for nty, according to plans and specifications.
	NOW THEREFORE,		
agreem force an	and shall furnish any other boo ent created by the acceptance	pted and the Principal shall enter in nds and insurance required by the b e of said bid, then this obligation sha stood and agreed that the liability o	to a contract in accordance with the bid or proposal attached id or proposal, and shall in all other respects perform the all be null and void, otherwise this obligation shall remain in full fithe Surety for any and all claims hereunder shall, in no event
way imp waive no	aired or affected by any exter otice of any such extension.	nsion of the time within which the Ol	s that the obligations of said Surety and its bond shall be in no oligee may accept such bid, and said Surety does hereby et their hands and seals, and such of them as are corporations
nave cal			entities hands and seals, and such of them as are corporations ents to be signed by their proper officers, this
	_day of _July		his to be signed by their proper officers, this
1001	day of odly	, 20_13	
^o rincipa	Corporate Seal		Pineville Paving & Excavating, Inc (Name of Principal)
	The state of the		- Varian Reading
3 - 5	Ca Miles		Kevin Bradfor(Musy be President or
	3		Vice President)
			Vice President
			(Title)
Surety C	orporate Seal		Ohio Farmers Insurance Company
			(Name of Surety)
			Shella D. McCornicle
ADODT	ANT Correle avanuation to be and	s must be licensed in West Virginia	Sheila D. McCormickriney-in-Fact

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance. Corporate seals must be affixed, and a power of attorney must be attached.

THIS POWER OF ATTORNEY SUPERCEDES ANY PREVIOUS POWER BEARING THIS SAME POWER # AND ISSUED PRIOR TO 04/21/15, FOR ANY PERSON OR PERSONS NAMED BELOW.

General Power of Attorney POWER NO. 4751892 01

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

CERTIFIED COPY

Westfield Center, Ohio

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint ROSS E. JOHNSON, H. RANDOLPH NEVILLE, PATRICK B. KEE, SHEILA D. MCCORMICK, TAYLOR R. JOHNSON, BRADLEY

P. BOBERSKY, JOINTLY OR SEVERALLY

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

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

GUARANTEE, OR BANK DEPOSITORY BONDS.

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

"Be It Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for 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 notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such "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 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 to be hereto affixed this 21st day of APRIL A.D., 2015.

Corporate Seals Affixed

State of Ohio County of Medina Sommen #

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

Ву: Dennis P. Baus, National Surety Leader and

A.D., 2015 , before me personally came Dennis P. Baus to me known, who, being by me duly sworn, did depose and say, that he resides in **Wooster**, **Ohio**; that he is **National Surety Leader and Senior Executive** of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Notarial Seal Affixed

State of Ohio County of Medina

SS.:

SS



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

Senior Executive

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

Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this I orday of A.D.-2015







Frank A. Carrino, Secretary

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. code §5A-3-IOa, 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 tee 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 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:

My Commission

Vendor's Name: PINEVILLE PAVING & EXCA	VATING INC.
Authorized Signature: Whon, M. Bradland	Date: 7/20/15
State of WEST VIRGINIA	
County of WYOMING ,to-wit:	
Taken, subscribed, and sworn to before methis 20	day of July . 2015
My Commission expires <u>- eb 20</u>	2d <u>9</u> .
AFFIX SEAL HERE	NOTARY PUBLIC Jathline D. Bradford
OFFICIAL SEAL	Purchasing Affidavit (Revised 07/01/2012)

State of West Virginia Purchasing Division

CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

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

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

Contract Identif	ication:	
Contract Number		
Contract Purpose	9:	
Agency Request	ing Work:	
Information 21-1D-5 v Name of the successor of the succe	ch box as an indication that the required inform indicating the education and training services provided; the laboratory certified by the United States that performs the drug tests; number of employees in connection with the results for the following categories including ests: (A) Pre-employment and new hires; (de each of the items listed below. The vendor formation has been included in the attached report. The requirements of <i>West Virginia Code</i> § Department of Health and Human Services or its construction on the public improvement; the number of positive tests and the number of B) Reasonable suspicion; (C) Post-accident; and
(D) Rando	711.	
Vendor Contact	Information:	
Vendor Name:	Pineville Paving & Excavating Inc.	Vendor Telephone: 304-732-8303
Vendor Address:	PO Box 1290	Vendor Fax: 304-732-7855
	Pineville, WV 24874	



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

STAT	E OF WEST VIRGINIA,
COUN	ITY OF Wyoming , TO-WIT:
ı, <u>Ar</u>	thony M. Bradford, after being first duly sworn, depose and state as follows:
1.	I am an employee of Pineville Paving & Excavating Inc.; and,
2.	I do hereby attest that Pineville Paving & Excavating 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 al	By: Mhy M. Budad
	Title: Sec.
	Company Name: Pineville Paving & Excavating Inc.
	Date: 7/20/15
Taken	, subscribed and sworn to before me this $\frac{20 + h}{100}$ day of $\frac{5 - h}{100}$.
By Cor	mmission expires Feb. 20, 2019
(Seal)	STATE OF WEST VIRGINIA NOTE CONTROLL Katherine D. Bradford PO Box 949 Pineville, WV 24874 My Commission Exp. Feb. 20, 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.

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: Pineville Paving & Excavating Inc. Tax Payer ID No.: 550709824
Address: PO Box 1290
City: <u>Pineville</u> State: <u>WV</u> Zip Code: <u>24874</u> Phone: <u>304-732-8303</u>
Fax No.: 304-732-7855 E-mail address: tonyppi@aol.com
Part B: Legal Structure
(XX) 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, Anthony M. Bradford , have the express authority to certify that: (print name)
1. XX 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 AV to this form. Sign and date below and do <u>not</u> complete Part D.
2Part of the information on the attached Entity OFT from AVS is missing or incorrect and mus be updated. If you select this option, you must attach an Entity OFT from AVS to this form. Us 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. [7/20/15]
Date Signature Title
IMPORTANT! In order to certify in Part C to the accuracy of existing information in AVS, you
must obtain a copy of your business' Entity OFT. To obtain an Entity OFT, contact the AVS
Office, toll-free, at 800-643-9748 or from the AVS website at https://avss.osmre.gov.

Part D.

Contractor's Business Name: Pineville Paving & Excavating Inc.

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	SEE ATTACHED	Position/Title Telephone #	
Begin Date:		% of Ownership Ending Date:	
Name Address	SEE ATTACHED	Position/Title Telephone#	
Begin Date:		% of Ownership Ending Date:	
Name Address	SEE ATTACHED	Position/Title Telephone #	
Begin Date:		% of Ownership Ending Date:	
Name Address		Position/Title Telephone #	
Begin Date:		% of Ownership 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.



CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV010542

Classification:

GENERAL BUILDING
GENERAL ENGINEERING
PIPING
RESIDENTIAL
SPECIALTY

PINEVILLE PAVING & EXCAVATING INC
DBA PINEVILLE PAVING & EXCAVATING INC
PO BOX 1290
PINEVILLE, WV 24874-1290

Date Issued

Expiration Date

AUGUST 30, 2014

AUGUST 30, 2015

Mhyny M. Maddad Authorized Company Signature

Chair, 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.



Date: 4-May-2007

Applicant Violator System Time :15:4
Current Organizational Family Tree (OFT) Page: 1

Time :15:43:09

(147991) PINEVILLE PAVING & EXCAVATING INC

			Total	Number:	6	
Entity ID	Name	Desc Code	Begin Date	End Date		Hold Code
147992 BRADFORD, 147992 BRADFORD, 147993 BRADFORD,	TROY M	PRS SH VP	9-Aug-1991 9-Aug-1991 9-Aug-1991		60%	
147993 BRADFORD, 147994 BRADFORD, 147994 BRADFORD,	KEVIN D ANTHONY M	SH SH SEC	9-Aug-1991 9-Aug-1991 1-Jul-2001		20% 20%	