



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.

Header

List View

General Information [Contact](#) [Default Values](#) [Discount](#) [Document Information](#)

Procurement Folder: 117736

SO Doc Code: CRFQ

Procurement Type: Central Purchase Order

SO Dept: 0932

Vendor ID: 000000113760 

SO Doc ID: DRS1600000001

Legal Name: NEWTECH SYSTEMS INC

Published Date: 10/2/15

Alias/DBA:

Close Date: 10/7/15

Total Bid: \$45,045.62

Close Time: 13:30

Response Date: 10/06/2015 

Status: Closed

Response Time: 16:23

Solicitation Description: Addendum #2 - Two Security Camera Systems

Total of Header Attachments: 0

Total of All Attachments: 0



State of West Virginia Solicitation Response

Solicitation Description : Addendum #2 - Two Security Camera Systems

Proc Type : Central Purchase Order

Date issued	Solicitation Closes	Solicitation No	Version
	2015-10-07 13:30:00	SR 0932 ESR10061500000001487	1

VENDOR

000000113760

NEWTECH SYSTEMS INC

FOR INFORMATION CONTACT THE BUYER

Laura E Hooper
(304) 558-0468
laura.e.hooper@wv.gov

Signature X

FEIN #

DATE _____

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	SECURITY CAMERA SYSTEMS	1.00000	LS	\$45,045.620000	\$45,045.62

Comm Code	Manufacturer	Specification	Model #
46171610			

Extended Description :	SECURITY CAMERA SYSTEMS INCLUDING INSTALLATION, TESTING, EMPLOYEE USE TRAINING AND THREE YEAR WARRANTY.
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Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

State of West Virginia
Request for Quotation
—

Proc Folder: 117736

Doc Description: Addendum #1 - Two Security Camera Systems

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2015-09-11	2015-10-07 13:30:00	CRFQ 0932 DRS1600000001	2

FOR INFORMATION CONTACT THE BUYER

Laura E Hooper
(304) 558-0468
laura.e.hooper@wv.gov

Signature X

FEIN # 20-5736303

DATE 10-6-2015

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

CERTIFICATION AND 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.

NewTech Systems, Inc.

(Company)



(Authorized Signature) (Representative Name, Title)

304-766-0000/304-766-0003 10-5-2015

(Phone Number) (Fax Number) (Date)

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ DRS1600000001

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="checked" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input 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.

NewTech Systems, Inc.

Company

Authorized Signature

10-6-2015

Date

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

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: NewTech Systems, Inc.
Contractor's License No. WV042038

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



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

STATE OF WEST VIRGINIA,

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

I, Michael A. Bryant, after being first duly sworn, depose and state as follows:

1. I am an employee of NewTech Systems, Inc.; and,
 (Company Name)
2. I do hereby attest that NewTech Systems, Inc.
 (Company Name)

maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with **West Virginia Code §21-1D**.

The above statements are sworn to under the penalty of perjury.

Printed Name: Michael A. Bryant

Signature: 

Title: General Manager

Company Name: NewTech Systems, Inc.


Date: 10-6-2015

Taken, subscribed and sworn to before me this 6th day of Oct, 2015.

By Commission expires 8/11/19

(Seal)




 (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: NewTech Systems, Inc.

Authorized Signature: *Michael Bogan* Date: 10-6-2015

State of West Virginia

County of Kanawha, to-wit:

Taken, subscribed, and sworn to before me this 6th day of Oct, 2015

My Commission expires 8/11, 2019.

AFFIX SEAL HERE

NOTARY PUBLIC

Lora L. Harless

Purchasing Affidavit (Revised 07/01/2012)





420 16th Street
Dunbar, WV 25064
office: 304-766-0000
fax: 304-766-0003
www.newtechwv.com

To: WV Division of Rehab Services
Attn: Stephanie Gale
2019 Washington St E
Charleston, WV 25305

Phone: 304-558-8801

Fax: 304-558-4115

Quote: NSIQ15689
Date: 10/01/15
Terms: NET 30
Sales Tax: Not Included
FOB: Factory
Expires: 90 Days

Project: Rehab Services CCTV Systems

Qty	Manufacturer	Part Number	Description	Unit	Extended
CCTV Systems					
Kanawha City Location					
1	Avigilon	3.0TB-HD-NVR	HD NVR Workstation, 3.0 TB Storage WS	\$2,794.50	\$2,794.50
1	Avigilon	8C-ACC5-ENT	ACC 5 Enterprise license for up to 8 camera channels and unlimited viewing clients	\$1,854.90	\$1,854.90
1	Netgear	JGS516PE-100	ProSafe Plus JGS516PE - Switch - unmanaged - 8 x 10/100/1000 (PoE) + 8 x 10/100/1000 - NAS	\$290.91	\$290.91
2	Clinton Electronics	CE-VT320-C	32" CCTV LCD Monitor	\$850.50	\$1,701.00
4	Avigilon	8.0MP-HD-DO	180° 8.0 Megapixel Panoramic HD Color Dome with factory installed heater	\$1,251.45	\$5,005.80
4	Avigilon	1.3L-H3-D1	1.3 Megapixel (1024p) LightCatcher Day/Night Indoor Dome, 3-9mm f/1.2 P-iris lens	\$518.40	\$2,073.60
1	Middle Atlantic	UPS-2200R-81	2200VA UPS, IND. OUT W/NIC P	\$1,513.35	\$1,513.35
SubTotal					\$15,234.06
Nitro Location					
1	Avigilon	3.0TB-HD-NVR	HD NVR Workstation, 3.0 TB Storage WS	\$2,794.50	\$2,794.50
1	Avigilon	8C-ACC5-ENT	ACC 5 Enterprise license for up to 8 camera channels and unlimited viewing clients	\$1,854.90	\$1,854.90
1	Netgear	JGS516PE-100	ProSafe Plus JGS516PE - Switch - unmanaged - 8 x 10/100/1000 (PoE) + 8 x 10/100/1000 - NAS	\$290.91	\$290.91
2	Clinton Electronics	CE-VT320-C	32" CCTV LCD Monitor	\$850.50	\$1,701.00
4	Avigilon	8.0MP-HD-DO	180° 8.0 Megapixel Panoramic HD Color Dome with factory installed heater	\$1,251.45	\$5,005.80
4	Avigilon	1.3L-H3-D1	1.3 Megapixel (1024p) LightCatcher Day/Night Indoor Dome, 3-9mm f/1.2 P-iris lens	\$518.40	\$2,073.60
1	Middle Atlantic	UPS-2200R-81	2200VA UPS, IND. OUT W/NIC P	\$1,513.35	\$1,513.35
SubTotal					\$15,234.06
1	NSI	LBR	ALL LOCATIONS Installation, Set-up, Testing & Training	\$12,427.50	\$12,427.50
1	NSI	lot	Wire & Misc Materials for Installation	\$2,050.00	\$2,050.00
SubTotal					\$14,477.50

Qty	Manufacturer	Part Number	Description	Unit	Extended
1	Shipping	Shipping	Shipping & Handling Charges	\$100.00	\$100.00
				Grand Total:	\$45,045.62

Accepted By _____

Title _____

Date _____

PO # _____

Please return a signed copy of this proposal with purchase order.

TERMS: BALANCE DUE (NET 30) UPON COMPLETION.

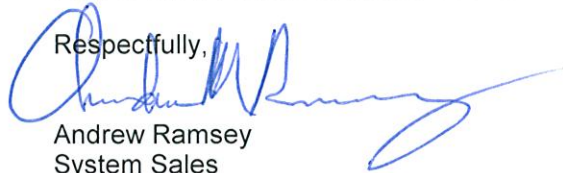
Sales tax not included.

AC POWER WILL BE THE RESPONSIBILITY OF THE OWNER!

Three year parts and one year labor warranty during normal working hours will be provided on all new equipment except for abuse, neglect or acts of God.

Please call if I can be of further assistance.

Respectfully,



Andrew Ramsey
System Sales
WV Lic# WV042038

Agency _____
REQ.P.O# _____

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Newtech Systems, Inc.
of Dunbar, West Virginia, as Principal, and Great American Insurance
Company of Cincinnati, Ohio, a corporation organized and existing under the laws of the State of _____
Ohio with its principal office in the City of Cincinnati, OH, as Surety, are held and firmly bound unto the State
of West Virginia, as Oblige, in the penal sum of Five Percent of Amount Bid (\$ 5%) 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
Installation of security cameras at 4701 McCorkle Ave, Charleston, WV and 10 McJunkin Road, Nitro, WV.

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 Oblige 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 2nd day of October, 2015.

Principal Seal

Newtech Systems, Inc.

(Name of Principal)

By Remy J. Mulder
(Must be President, Vice President, or
Duly Authorized Agent)

PRESIDENT
(Title)

Surety Seal

Great American Insurance Company

(Name of Surety)

Thomas J. Hines
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.**

GREAT AMERICAN INSURANCE COMPANY®

Administrative Office: 301 E 4TH STREET • CINCINNATI, OHIO 45202 • 513-369-5000 • FAX 513-723-2740

The number of persons authorized by
this power of attorney is not more than SIX

No. 0 18867

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

Name	Address	Limit of Power	
THOMAS H. VOELTZ	DANA N. CONLEY	BOTH OF ASHLAND, KENTUCKY	ALL
J. MICHAEL WELLMAN	THOMAS C. PHIPPS	BOTH OF ASHLAND, KENTUCKY	\$100,000,000
THOMAS H. BOTTOMS, JR.	CLARENCE C. MASSEY	BOTH OF HUNTINGTON, WEST VIRGINIA	

This Power of Attorney revokes all previous powers issued on behalf of the attorney(s)-in-fact named above.

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 2nd day of OCTOBER, 2014.

Attest

GREAT AMERICAN INSURANCE COMPANY



Atty L C. B.
Assistant Secretary

David C. Kitchen
Divisional Senior Vice President

STATE OF OHIO, COUNTY OF HAMILTON - ss:

DAVID C. KITCHIN (877-377-2405)

On this 2ND day of OCTOBER, 2014, before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.



Shelle Clontz
Notary Public, State of Ohio
My Commission Expires 08-09-2015

Shelle Clontz

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisional Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATION

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this 2nd day of October, 2015.



Atty L C. B.
Assistant Secretary



NEWTE-1

OP ID: D1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/06/2015

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 Agcy-Ashland PO Box 991 Ashland, KY 41105 Thomas C. Phipps		CONTACT NAME: Thomas C. Phipps PHONE (A/C, No, Ext): 606-329-2200 E-MAIL ADDRESS: tcp@theputnamagency.com FAX (A/C, No): 606-325-7787		
INSURED Newtech Systems, Inc. 420 16th Street Dunbar, WV 25064		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A : St. Paul Travelers		25674
		INSURER B : Brickstreet Insurance		12372
		INSURER C :		
		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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Empl Benefits GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CO5614B825	11/30/2014	11/30/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Emp Ben. \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			8105614B825	11/30/2014	11/30/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000			CUP5614B850	11/30/2014	11/30/2015	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A			WCB1020463	12/15/2014	12/15/2015	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER 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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Security Camera System

CERTIFICATE HOLDER**CANCELLATION**

WV Disvison of Rehabilitation
Services
1701 MacCorkle Avenue SE
Charleston, WV 25304

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

© 1988-2014 ACORD CORPORATION. All rights reserved.



NEWTE-1

OP ID: D1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/06/2015

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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 Agcy-Ashland PO Box 991 Ashland, KY 41105 Thomas C. Phipps		CONTACT NAME: Thomas C. Phipps PHONE (A/C, No, Ext): 606-329-2200 E-MAIL ADDRESS: tcp@theputnamagency.com FAX (A/C, No): 606-325-7787	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: St. Paul Travelers	
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		INSURER C:	
		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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Empl Benefits GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CO5614B825	11/30/2014	11/30/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Emp Ben. \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			8105614B825	11/30/2014	11/30/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000			CUP5614B850	11/30/2014	11/30/2015	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WCB1020463	12/15/2014	12/15/2015	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER 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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Security Camera Systems

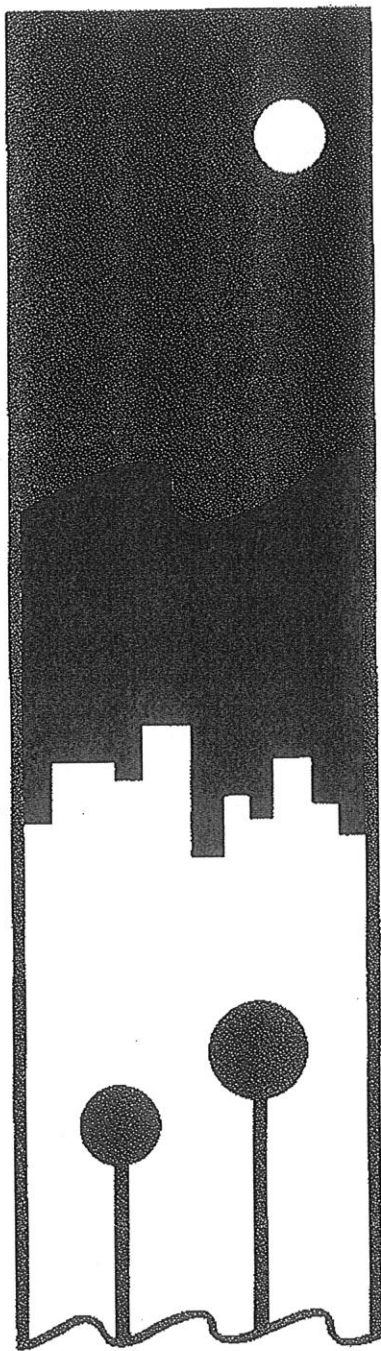
CERTIFICATE HOLDER**CANCELLATION**

WV Division of Rehabilitation
Services
10 McJunkin Road
Nitro, WV 25143

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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**WEST VIRGINIA
CONTRACTOR
LICENSING
BOARD**

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV042038

Classification:

LOW VOLTAGE SYSTEMS

NEWTECH SYSTEMS INC
DBA NEWTECH SYSTEMS INC
1850 DALTON AVENUE
ASHLAND, KY 41102

Date Issued

FEBRUARY 26, 2015

Expiration Date

FEBRUARY 26, 2016

Perry J. Madden
Authorized Company Signature

Michael A. Carl
Chair, West Virginia Contractor
Licensing Board

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