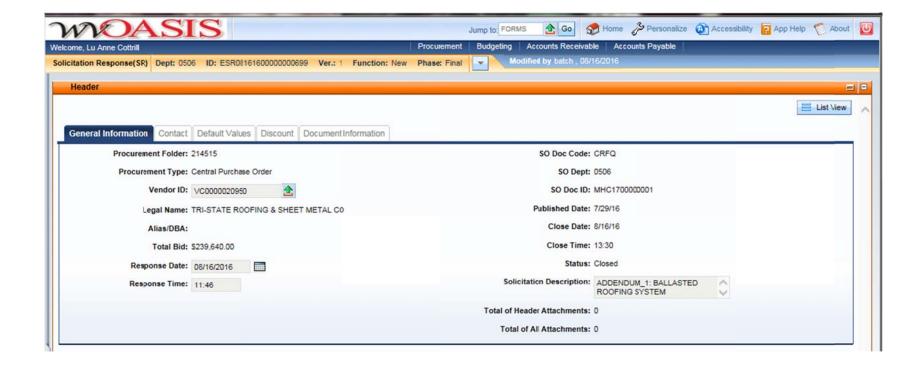


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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.





State of West Virginia Solicitation Response

Proc Folder: 214515

 $\textbf{Solicitation Description}: \texttt{ADDENDUM_1}: \texttt{BALLASTED ROOFING SYSTEM}$

Proc Type: Central Purchase Order

Date issued	Solicitation Closes	Solicitation Response	Version
	2016-08-16	SR 0506 ESR08161600000000699	1
	13:30:00		

VENDOR

VC0000020950

TRI-STATE ROOFING & SHEET METAL CO

Solicitation Number: CRFQ 0506 MHC1700000001

Total Bid : \$239,640.00 **Response Date:** 2016-08-16 **Response Time:** 11:46:21

Comments:

FOR INFORMATION CONTACT THE BUYER

Mark A Atkins (304) 558-2307 mark.a.atkins@wv.gov

Signature on File 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	REPLACEMENT OF EXISTING BALLASTED ROOFING SYSTEM	1.00000	LS	\$239,640.000000	\$239,640.00

Comm Code	Manufacturer	Specification	Model #	
72000000				

Extended Description:

Section 4.1.1 - All labor, materials, equipment, and anything incidental to replace the existing ballasted roof with a fully adhered EPDM roofing system.
100% STATE FUNDED

Comments: Pricing based on 125 SQ ballasted area.

CRFQ 0506 MHC1700000001 Replacement of Existing Ballasted Roofing System

ITEM#	DESCRIPTION	QUANTITY	UNIT PRICE (Lump Sum)
4.1.1	Lump Sum Total Cost for all labor, materials, equipment, and anything incidental to replace the existing ballasted roof with a fully adhered EPDM roofing system.	1 (Lump Sum Total Cost)	s 216, 140

^{*} Award will be made to lowest overall total lump sum cost, meeting specifications*

Vendor Name	TRI-STATE ROOFING & SHEET METAL CO.
Vendor Address	1651 BLUE HORIEN DRIVE
	MORGANTOWN, WV 76501
Remit Address	PO BOX 4255
	MORGANTOWN, WV 26504
Phone #	304.328.5244
Fax#	304, 328, 5248
Email	cstrimer etri-stateservice.com
Signature	(XA)

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersig	ned, <u>Tri - State Roofing</u> and Sheet Metal Company			
of 1651 Blue Horizon Drive, Morgantown WV 26501	as Principal, and Travelers Casualty and Surety			
Company of of 119 Virginia Street W. Charleston WV 25302 corpora	n organized and existing under the laws of the State of			
America with its principal office in the City of Hartford	as Surety, are held and firmly bound unto the State			
of West Virginia, as Obligee, in the penal sum of Five Percent	(\$ 5%) for the payment of which			
well and truly to be made, we jointly and severally bind ourselves, our heir	s, administrators, executors, successors and assigns.			
The Condition of the above obligation is such that whereas the Pa	rincipal has submitted to the Purchasing Section of the			
Department of Administration a certain bid or proposal, attached hereto an Project MHC1700000001 - Replacement of Roofing System at Jo	nd made a part hereof, to enter into a contract in writing for hn Manchin Sr. Health Care Center			
according to plans and specifications.				
NOW THEREFORE,				
(a) If said bid shall be rejected, or (b) If said bid shall be accepted and the Principal shall enter into hereto and shall furnish any other bonds and insurance required by the bid agreement created by the acceptance of said bid, then this obligation shall force and effect. It is expressly understood and agreed that the liability of exceed the penal amount of this obligation as herein stated.	for proposal, and shall in all other respects perform the			
The Surety, for the value received, hereby stipulates and agrees to way impaired or affected by any extension of the time within which the Oblivial waive notice of any such extension.	igee may accept such bid, and said Surety does hereby			
IN WITNESS WHEREOF, Principal and Surety have hereunto set	t their hands and seals, and such of them as are corporations			
have caused their corporate seals to be affixed hereunto and these presen	its to be signed by their proper officers, this			
8th day of August . 20 16				
Principal Corporate Seal	By (Must be President) (Title)			
Surety Corporate Seal	Travelers Casualty and Surety Company of America (Name of Surety)			
	Sheila McCormick Altorney-in-Fact			

and a power of attorney must be attached.

IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance. Corporate seals must be affixed,



POWER OF ATTORNEY

Farmington Casualty Company Fidelity and Guaranty Insurance Company Fidelity and Guaranty Insurance Underwriters, Inc. St. Paul Fire and Marine Insurance Company St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company Travelers Casualty and Surety Company Travelers Casualty and Surety Company of America United States Fidelity and Guaranty Company

Attorney-In Fact No.

229290

Certificate No. 006737295

KNOW ALL MEN BY THESE PRESENTS: That Farmington Casualty Company, St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company are corporations duly organized under the laws of the State of Connecticut, that Fidelity and Guaranty Insurance Company is a corporation duly organized under the laws of the State of Iowa, and that Fidelity and Guaranty Insurance Underwriters, Inc., is a corporation duly organized under the laws of the State of Wisconsin (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint

Ross E. Johnson, Patrick B. Kee, Beverly A. Holstine, Sheila McCormick, Taylor R. Johnson, and Bradley P. Bobersky

01 1110 0111) 01	·leston	, State of		⁷ irginia			ul Attorney(s)-in-Fact
other writings obligatory	acity if more than one is nan in the nature thereof on bel r guaranteeing bonds and un	alf of the Companies i	in their business	of guaranteeing	the fidelity of pe	ersons, guaranteeii	
IN WITNESS WHERE day ofApril	OF, the Companies have cau	sed this instrument to b	pe signed and thei	r corporate seal	s to be hereto affi	ixed, this	12th
	Fidelity and Gua St. Paul Fire and	alty Company ranty Insurance Comp ranty Insurance Unde Marine Insurance Co n Insurance Company	erwriters, Inc. ompany	Trave Trave	elers Casualty ar elers Casualty ar	urance Company nd Surety Compa nd Surety Compa 7 and Guaranty C	nny nny of America
CASUALIA CONTROLLA CONTROL	1977 8 NCORPORATED STATES	THE GOLD OF	SEAL 8	SEAL S	HARTFORD, OF THE PART OF THE P	Whattorn &	TELLIY AND OF THE PROPERTY
State of Connecticut City of Hartford ss.			E	Зу:	The Robert L. Rane	y, Senior Vice Presid	dent
Fire and Marine Insurance Casualty and Surety Cor	day of April ent of Farmington Casualty C ee Company, St. Paul Guardi npany of America, and Unite ses therein contained by sign	an Insurance Company d States Fidelity and C	Guaranty Insuran , St. Paul Mercury Guaranty Compan	ce Company, Fi y Insurance Con y, and that he, a	delity and Guarar npany, Travelers (s such, being aut	nty Insurance Unde Casualty and Sure	ty Company, Travelers
	nereunto set my hand and off the 30th day of June, 2016.	cial seal.	TREE LI			iu C. Z	theault

58440-8-12 Printed in U.S.A.

WARNING: THIS POWER OF ATTORNEY IS INVALID WITHOUT THE RED BORDER

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, and Vi President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, and Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary, of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, İnc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 8th day of August , 2016.



















To verify the authenticity of this Power of Attorney, call 1-800-421-3880 or contact us at www.travelersbond.com. Please refer to the Attorney-In-Fact number, the above-named individuals and the details of the bond to which the power is attached.



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

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 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: Tri-State Roofing and Sheet Metal Co	ompany
Authorized Signature:	Date: 8/16/16
State of West Virginia	
County of Honongalia, to-wit:	
Taken, subscribed, and sworn to before me this $\underline{1 \downarrow_{\mathcal{Q}}}$ day	of August, 2016.
My Commission expires January 30	, 20 <u>0</u> 1.
AFFIX SEAL HERE	NOTARY PUBLIC
·····	Purchasing Affidavit (Revised 07/01/2012)



ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 MHC1700000001

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)	
	ndum No. 6
——————————————————————————————————————	ndum No. 7
	ndum No. 8
	ndum No. 9
Addendum No. 5	ndum No. 10
I understand that failure to confirm the receipt of add I further understand that any verbal representation madiscussion held between Vendor's representatives and the information issued in writing and added to the spending.	nde or assumed to be made during any oral d any state personnel is not binding. Only ecifications by an official addendum is
Company	•
Authorized/Signature /	
8/16/16	
Date	3.
	, vi

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