



# West Virginia Purchasing Division

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.

## Header

List View

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

<b>Procurement Folder:</b> 220221	<b>SO Doc Code:</b> CRFQ
<b>Procurement Type:</b> Central Master Agreement	<b>SO Dept:</b> 0608
<b>Vendor ID:</b> <input type="text" value="000000172561"/> <input type="button" value="Go"/>	<b>SO Doc ID:</b> COR1600000043
<b>Legal Name:</b> PERFECTION GROUP INC	<b>Published Date:</b> 7/14/16
<b>Alias/DBA:</b>	<b>Close Date:</b> 7/20/16
<b>Total Bid:</b> \$16,441.20	<b>Close Time:</b> 13:30
<b>Response Date:</b> <input type="text" value="07/20/2016"/> <input type="button" value="Calendar"/>	<b>Status:</b> Closed
<b>Response Time:</b> <input type="text" value="10:39"/>	<b>Solicitation Description:</b> <input type="text" value="ADDENDUM 1 EQUIPMENT AND SYSTEMS MAINTENANCE"/> <input type="button" value="Up"/> <input type="button" value="Down"/>
<b>Total of Header Attachments:</b> 0	
<b>Total of All Attachments:</b> 0	



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

**State of West Virginia  
 Solicitation Response**

**Proc Folder :** 220221

**Solicitation Description :** ADDENDUM 1 EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIR

**Proc Type :** Central Master Agreement

Date issued	Solicitation Closes	Solicitation No	Version
	2016-07-20 13:30:00	SR 0608 ESR07201600000000245	1

VENDOR
000000172561 PERFECTION GROUP INC

**FOR INFORMATION CONTACT THE BUYER**  
 Crystal Rink  
 (304) 558-2402  
 crystal.g.rink@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	Equipment and Systems Bi-Annual Inspections and Testing	2.00000	LS	\$2,448.000000	\$4,896.00

Comm Code	Manufacturer	Specification	Model #
78141600			

<b>Extended Description :</b>	Equipment and Systems Bi-Annual Inspections and Testing
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Regular Labor Rate	100.00000	LS	\$78.000000	\$7,800.00

Comm Code	Manufacturer	Specification	Model #
78141600			

<b>Extended Description :</b>	Regular Labor Rate
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	Overtime Labor Rate	16.00000	LS	\$117.000000	\$1,872.00

Comm Code	Manufacturer	Specification	Model #
78141600			

<b>Extended Description :</b>	Overtime Labor Rate
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
4	Holiday Labor Rate	8.00000	LS	\$156.000000	\$1,248.00

Comm Code	Manufacturer	Specification	Model #
78141600			

<b>Extended Description :</b>	Holiday Labor Rate
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
5	Emergency Labor Rate	8.00000	LS	\$78.000000	\$624.00

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description : Emergency Labor Rate

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	Parts Markup Percentage	1.00000	PCT	\$1.200000	\$1.20

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description : Parts Markup Percentage

# Arthur J. Gallagher Co.

1 West Fourth Street, Suite 1300, Cincinnati, Ohio 45202  
513-977-3187 / 513-977-4687 fax

Enclosed please find the bond(s) requested. Please check the following:

- Bond must be signed by an authorized officer of the company.  
 Corporate Seal  
 Complete the bottom of this form for Bid Results  
*Return via email ASAP to pat\_hehman@ajg.com*

Pat Hehman  
513-977-3187

## Bid Results

Obligee: State of West Virginia

Project: Semi-Annual HVAC PM's at Charleston Correctional

Bid Date: July 20, 2016

Results:

LOW BIDDER: \_\_\_\_\_ \$ \_\_\_\_\_

2nd Bidder: \_\_\_\_\_ \$ \_\_\_\_\_

3rd Bidder: \_\_\_\_\_ \$ \_\_\_\_\_

YOUR BID: \$ \_\_\_\_\_

If not low, is there any chance you still may be awarded this project? Yes \_\_\_ No \_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Perfection Group Inc.

\_\_\_\_\_  
(signed)



July 14, 2016

UPS

Perfection Group, Inc.  
Attn: Traci Ray  
2649 Commerce Blvd.  
Cincinnati, OH 45241

RE: Name of owner State of West Virginia

Project title Semi-Annual HVAC PM's at Charleston Correctional

Bid date (state if rebid) July 20, 2016

Dear Traci:

Thank you for placing your bond needs with Arthur J. Gallagher & Co. We have enclosed the requested bid bond. As a precaution, please check all dates, descriptions, names, surety signatures, and remember that the appropriate contactor signature is necessary.

Be advised that the surety company may amend or withdraw surety credit at any time based, for example, upon financial results or other significant events. Please let us know if you have questions in this regard. We thank you for placing your bond business with us and look forward to working with you this year.

Sincerely,

Pat Hehman  
Bond Client Service Manager

Agency \_\_\_\_\_  
REQ.P.O# COR1600000043

**BID BOND**

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Perfection Group, Inc.  
of 102 Roxalana Business Park, Dunbar, WV 25064, as Principal, and The Cincinnati Insurance Company  
of Fairfield, Ohio, a corporation organized and existing under the laws of the State of Ohio  
with its principal office in the City of Fairfield, OH, as Surety, are held and firmly bound unto the State  
of West Virginia, as Obligee, in the penal sum of Five Percent (5%) of the total 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  
Semi-Annual HVAC PM's at Charleston Correctional  
1356 Hansford Street, Charleston, WV 25301

NOW THEREFORE,

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

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

WITNESS, the following signatures and seals of Principal and Surety, executed and sealed by a proper officer of Principal and Surety, or by Principal individually if Principal is an individual, this 20th day of July, 2016.

Principal Seal

Perfection Group, Inc.  
(Name of Principal)  
By [Signature]  
(Must be President, Vice President, or Duly Authorized Agent)  
W. Jahn A. Blech, Jr. - Pres/owner  
(Title)

Surety Seal

The Cincinnati Insurance Company  
(Name of Surety)  
[Signature]  
Patricia L. Hehman, 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.**



THE CINCINNATI INSURANCE COMPANY

Fairfield, Ohio

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That THE CINCINNATI INSURANCE COMPANY, a corporation organized under the laws of the State of Ohio, and having its principal office in the City of Fairfield, Ohio, does hereby constitute and appoint

Thomas R. Dietz; Robert E. Gigax, Jr.; Patricia L. Hehman; Cassandra J. Krumpelman; Phyllis T. Neal; Shelly M. Martin and/or Christina A. Arvizu

of Cincinnati, Ohio its true and lawful Attorney(s)-in-Fact to sign, execute, seal and deliver on its behalf as Surety, and as its act and deed, any and all bonds, policies, undertakings, or other like instruments, as follows:

Any such obligations in the United States, up to Twenty Million and No/100 Dollars (\$20,000,000.00).

This appointment is made under and by authority of the following resolution passed by the Board of Directors of said Company at a meeting held in the principal office of the Company, a quorum being present and voting, on the 6th day of December, 1958, which resolution is still in effect:

"RESOLVED, that the President or any Vice President be hereby authorized, and empowered to appoint Attorneys-in-Fact of the Company to execute any and all bonds, policies, undertakings, or other like instruments on behalf of the Corporation, and may authorize any officer or any such Attorney-in-Fact to affix the corporate seal; and may with or without cause modify or revoke any such appointment or authority. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company."

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company at a meeting duly called and held on the 7th day of December, 1973.

"RESOLVED, that the signature of the President or a Vice President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Secretary or Assistant Secretary and the seal of the Company may be affixed by facsimile to any certificate of any such power and any such power of certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certified by certificate so executed and sealed shall, with respect to any bond or undertaking to which it is attached, continue to be valid and binding on the Company."

IN WITNESS WHEREOF, THE CINCINNATI INSURANCE COMPANY has caused these presents to be sealed with its corporate seal, duly attested by its Vice President this 10th day of October, 2008.



STATE OF OHIO ) ss:
COUNTY OF BUTLER )

THE CINCINNATI INSURANCE COMPANY

Thomas H. Kelly
Vice President

On this 10th day of October, 2008, before me came the above-named Vice President of THE CINCINNATI INSURANCE COMPANY, to me personally known to be the officer described herein, and acknowledged that the seal affixed to the preceding instrument is the corporate seal of said Company and the corporate seal and the signature of the officer were duly affixed and subscribed to said instrument by the authority and direction of said corporation.



Mark J. Huller
MARK J. HULLER, Attorney at Law
NOTARY PUBLIC - STATE OF OHIO

My commission has no expiration date. Section 147.03 O.R.C.

I, the undersigned Secretary or Assistant Secretary of THE CINCINNATI INSURANCE COMPANY, hereby certify that the above is a true and correct copy of the Original Power of Attorney issued by said Company, and do hereby further certify that the said Power of Attorney is still in full force and effect.

GIVEN under my hand and seal of said Company at Fairfield, Ohio.
this 20th day of July 2016



Gregory J. Schlemmer
Secretary



The Cincinnati Insurance Company ■ The Cincinnati Indemnity Company  
The Cincinnati Casualty Company ■ The Cincinnati Specialty Underwriters Insurance Company  
The Cincinnati Life Insurance Company

THE CINCINNATI INSURANCE COMPANY  
FINANCIAL STATEMENT  
DECEMBER 31, 2015

ASSETS


Cash	\$ 350,245,654
Bonds	5,317,509,438
Stocks	3,847,880,811
Agents Balance Receivable	1,488,420,069
All Other Admitted Assets	190,120,698
<b>TOTAL ADMITTED ASSETS</b>	<b><u>\$11,194,176,670</u></b>

LIABILITIES

Reserve for Losses and Loss Expense	\$4,160,506,314
Reserve for Unearned Premiums	2,079,433,143
All Other Liabilities	541,805,740
Capital	\$ 3,586,355
Surplus	4,408,845,118
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b><u>4,412,431,473</u></b> <b><u>\$11,194,176,670</u></b>

State of Ohio  
County of Butler

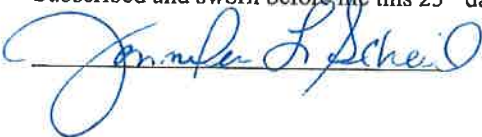
Theresa A. Hoffer, Senior Vice President & Treasurer of The Cincinnati Insurance Company, being duly sworn for herself, deposes and says that she is the above described officer of the said company and that the above Financial Statement as of December 31, 2015 is true and correct to the best of her knowledge and belief.

  
Theresa A. Hoffer  
Senior Vice President, Treasurer



**Jennifer L. Scheid**  
Notary Public, State of Ohio  
My Commission Expires 01-16-2021

Subscribed and sworn before me this 23<sup>rd</sup> day of February, 2016.



**AGREEMENT ADDENDUM**

In the event of conflict between this addendum and the agreement, this addendum shall control:

1. **DISPUTES** – Any references in the agreement to arbitration or to the jurisdiction of any court are hereby deleted. Disputes arising out of the agreement shall be presented to the West Virginia Court of Claims.
2. **HOLD HARMLESS** – Any provision requiring the Agency to indemnify or hold harmless any party is hereby deleted in its entirety.
3. **GOVERNING LAW** – The agreement shall be governed by the laws of the State of West Virginia. This provision replaces any references to any other State’s governing law.
4. **TAXES** – Provisions in the agreement requiring the Agency to pay taxes are deleted. As a State entity, the Agency is exempt from Federal, State, and local taxes and will not pay taxes for any Vendor including individuals, nor will the Agency file any tax returns or reports on behalf of Vendor.
5. **PAYMENT** – Any reference to prepayment are deleted. Payment will be in arrears.
6. **INTEREST** – Any provision for interest or charges on late payments is deleted. The Agency has no statutory authority to pay interest or late fees.
7. **NO WAIVER** – Any language in the agreement requiring the Agency to waive any rights, claims or defenses is hereby deleted.
8. **FISCAL YEAR FUNDING** – Service performed under the agreement may be continued in succeeding fiscal years for the term of the agreement, contingent upon funds being appropriated by the Legislature or otherwise being available for this service. In the event funds are not appropriated or otherwise available for this service, the agreement shall terminate without penalty on June 30. After that date, the agreement becomes of no effect and is null and void. However, the Agency agrees to use its best efforts to have the amounts contemplated under the agreement included in its budget. Non-appropriation or non-funding shall not be considered an event of default.
9. **STATUTE OF LIMITATIONS** – Any clauses limiting the time in which the Agency may bring suit against the Vendor, lessor, individual, or any other party are deleted.
10. **SIMILAR SERVICES** – Any provisions limiting the Agency’s right to obtain similar services or equipment in the event of default or non-funding during the term of the agreement are hereby deleted.
11. **FEES OR COSTS** – The Agency recognizes an obligation to pay attorney’s fees or costs only when assessed by a court of competent jurisdiction. Any other provision is invalid and considered null and void.
12. **ASSIGNMENT** – Notwithstanding any clause to the contrary, the Agency reserves the right to assign the agreement to another State of West Virginia agency, board or commission upon thirty (30) days written notice to the Vendor and Vendor shall obtain the written consent of Agency prior to assigning the agreement.
13. **LIMITATION OF LIABILITY** – The Agency, as a State entity, cannot agree to assume the potential liability of a Vendor. Accordingly, any provision limiting the Vendor’s liability for direct damages to a certain dollar amount or to the amount of the agreement is hereby deleted. Limitations on special, incidental or consequential damages are acceptable. In addition, any limitation is null and void to the extent that it precludes any action for injury to persons or for damages to personal property.
14. **RIGHT TO TERMINATE** – Agency shall have the right to terminate the agreement upon thirty (30) days written notice to Vendor. Agency agrees to pay Vendor for services rendered or goods received prior to the effective date of termination.
15. **TERMINATION CHARGES** – Any provision requiring the Agency to pay a fixed amount or liquidated damages upon termination of the agreement is hereby deleted. The Agency may only agree to reimburse a Vendor for actual costs incurred or losses sustained during the current fiscal year due to wrongful termination by the Agency prior to the end of any current agreement term.
16. **RENEWAL** – Any references to automatic renewal is hereby deleted. The agreement may be renewed only upon mutual written agreement of the parties.
17. **INSURANCE** – Any provision requiring the Agency to purchase insurance for Vendor’s property is deleted. The State of West Virginia is insured through the Board of Risk and Insurance Management, and will provide a certificate of property insurance upon request.
18. **RIGHT TO NOTICE** – Any provision for repossession of equipment without notice is hereby deleted. However, the Agency does recognize a right of repossession with notice.
19. **ACCELERATION** – Any reference to acceleration of payments in the event of default or non-funding is hereby deleted.
20. **CONFIDENTIALITY** – Any provision regarding confidentiality of the terms and conditions of the agreement is hereby deleted. State contracts are public records under the West Virginia Freedom of Information Act.
21. **AMENDMENTS** – All amendments, modifications, alterations or changes to the agreement shall be in writing and signed by both parties. No amendment, modification, alteration or change may be made to this addendum without the express written approval of the Purchasing Division and the Attorney General.
22. **DELIVERY** – All deliveries under the agreement will be FOB destination unless otherwise stated in the State’s original solicitation. Any contrary delivery terms are hereby deleted.

**ACCEPTED BY:**  
**STATE OF WEST VIRGINIA**

Spending Unit: \_\_\_\_\_

Signed: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**VENDOR**

Company Name: Perfection Group

Signed: [Signature]

Title: Area Director

Date: 07/19/16



**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, JOHN SETTLE, after being first duly sworn, depose and state as follows:

- 1. I am an employee of PERFECTION GROUP; and,  
(Company Name)
- 2. I do hereby attest that PERFECTION GROUP  
(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: JOHN SETTLE

Signature: [Handwritten Signature]

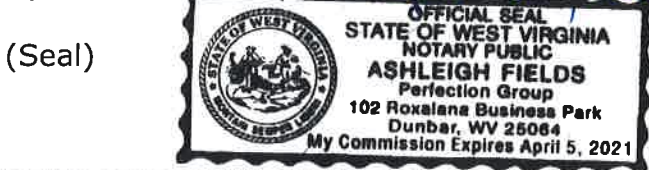
Title: Area Director

Company Name: Perfection Group

Date: 07/19/16

Taken, subscribed and sworn to before me this 19 day of July, 2016.

By Commission expires April 5th 2021



Ashleigh Fields  
(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: PERFECTION GROUP

Authorized Signature: [Signature] Date: 07/19/16

State of West Virginia

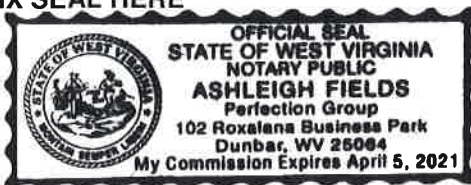
County of Kanawha, to-wit:

Taken, subscribed, and sworn to before me this 19<sup>th</sup> day of July, 2016.

My Commission expires April 5<sup>th</sup>, 2021.

**AFFIX SEAL HERE**

**NOTARY PUBLIC** [Signature]





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

State of West Virginia  
 Request for Quotation

*Charleston Correctional  
 pre-bid 7/1 @ 10am*

Proc Folder: 220221

Doc Description: EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIR

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2016-06-16	2016-07-20 13:30:00	CRFQ 0608 COR1600000043	1

**BID RECEIVING LOCATION**

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

**VENDOR**

Vendor Name, Address and Telephone Number:

*Perfection Group  
 102 Roxalana Business Park  
 Dunbar, WV 25064  
 304-373-7246*

**FOR INFORMATION CONTACT THE BUYER**

Crystal Rink  
 (304) 558-2402  
 crystal.g.rink@wv.gov

Signature X

*Wacib. Ray*

FEIN #

*31-1067245*

DATE

*7/19/16*

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

**ADDITIONAL INFORMATION:**

THE STATE OF WEST VIRGINIA PURCHASING DIVISION FOR THE AGENCY, THE WEST VIRGINIA DIVISION OF CORRECTIONS, IS SOLICITING BIDS TO ESTABLISH AN OPEN-END CONTRACT FOR EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIR AT CHARLESTON CORRECTIONAL CENTER PER THE ATTACHED.

INVOICE TO		SHIP TO	
CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST		CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Equipment and Systems Bi-Annual Inspections and Testing	2.00000	LS	\$2448.00	\$4896.00

Comm Code	Manufacturer	Specification	Model #
78141600			

**Extended Description :**  
Equipment and Systems Bi-Annual Inspections and Testing

INVOICE TO		SHIP TO	
CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST		CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Regular Labor Rate	100.00000	LS	\$78.00	\$7800.00

Comm Code	Manufacturer	Specification	Model #
78141600			

**Extended Description :**  
Regular Labor Rate

INVOICE TO		SHIP TO	
CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST		CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Overtime Labor Rate	16.00000	LS	\$117. <sup>00</sup>	\$1872. <sup>00</sup>

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Overtime Labor Rate

INVOICE TO		SHIP TO	
CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST		CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	Holiday Labor Rate	8.00000	LS	\$156. <sup>00</sup>	\$1248. <sup>00</sup>

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Holiday Labor Rate

INVOICE TO		SHIP TO	
CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST		CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Emergency Labor Rate	8.00000	LS	\$78. <sup>00</sup>	\$624. <sup>00</sup>

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Emergency Labor Rate



INVOICE TO		SHIP TO	
CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST		CHARLESTON CORRECTIONAL CENTER 1356 HANSFORD ST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Parts Markup Percentage	1.00000	PCT	20% <sup>o</sup>	

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Parts Markup Percentage

**SCHEDULE OF EVENTS**

Line	Event	Event Date
1	MANDATORY PRE-BID MEETING	2016-07-01
2	VENDOR QUESTION DEADLINE	2016-07-06
3	BID OPENING	2016-07-20

COR160000043	<b>Document Phase</b> Draft	<b>Document Description</b> EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIR	<b>Page 5</b> of 5
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

**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: Perfection Group  
Contractor's License No. WV022601

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a Award Document.

**2. DRUG-FREE WORKPLACE AFFIDAVIT:** W. Va. Code § 21-1D-5 provides that any solicitation for a public improvement contract requires each Vendor that submits a bid for the work to submit at the same time an affidavit that the Vendor has a written plan for a drug-free workplace policy. To comply with this law, Vendor must either complete the enclosed drug-free workplace affidavit and submit the same with its bid or complete a similar affidavit that fulfills all of the requirements of the applicable code. Failure to submit the signed and notarized drug-free workplace affidavit or a similar affidavit that fully complies with the requirements of the applicable code, with the bid shall result in disqualification of Vendor's bid. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.

**2.1. DRUG-FREE WORKPLACE POLICY:** Pursuant to W. Va. Code § 21-1D-4, Vendor and its subcontractors must implement and maintain a written drug-free workplace policy that complies with said article. The awarding public authority shall cancel this contract if: (1) Vendor fails to implement and maintain a written drug-free workplace policy described in the preceding paragraph, (2) Vendor fails to provide information regarding implementation of its drug-free workplace policy at the request of the public authority; or (3) Vendor provides to the public authority false information regarding the contractor's drug-free workplace policy.

Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.

**3. DRUG FREE WORKPLACE REPORT:** Pursuant to W. Va. Code § 21-1D-7b, no less than once per year, or upon completion of the project, every contractor shall provide a certified report to the public authority which let the contract. For contracts over \$25,000, the public authority shall be the West Virginia Purchasing Division. For contracts of \$25,000 or less, the public authority shall be the agency issuing the contract. The report shall include:

(1) Information to show that the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided;

**DESIGNATED CONTACT:** Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

Traci B. Ray / Business Development Rep

(Name, Title)

Traci B. Ray / Business Development Rep

(Printed Name and Title)

102 Roxalana Business Park Dunbar WV 25064

(Address)

304-373-7246 / 855-879-8051

(Phone Number) / (Fax Number)

tray@perfectiongroup.com

(email address)

**CERTIFICATION AND SIGNATURE:** By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated 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.

Perfection Group

(Company)

Traci B. Ray / Business Development Rep / Traci B. Ray

(Authorized Signature) (Representative Name, Title)

Traci B. Ray Business Development Rep

(Printed Name and Title of Authorized Representative)

7/19/16

(Date)

304-373-7246 / 855-879-8051

(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM

SOLICITATION NO.: CRFQ COR1600000043

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)

- Addendum No. 1
- Addendum No. 2
- Addendum No. 3
- Addendum No. 4
- Addendum No. 5

- Addendum No. 6
- Addendum No. 7
- Addendum No. 8
- Addendum No. 9
- 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.

Perfection Group  
Company

Mari B. Ray  
Authorized Signature

7/19/14  
Date

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

**1.13 WORK TIMES**

- A. The standard hours of work are Monday thru Friday from 8:00 am until 5:00 pm unless otherwise noted.
- B. If for any reason, the contractor wishes to work other than the previous stated days and hours, the request must be turned into the Facility at least forty-eight (48) hours in advance for approval. The request must be submitted to the Building and Grounds Maintenance Supervisor or designee.

**1.14 PERFORMANCE:**

- A. Vendor and Agency shall agree upon a schedule for performance of Contract Services and Contract Services Deliverables, unless such a schedule is already included herein by Agency. In the event that this Contract is designated as an open-end contract, Vendor shall perform in accordance with the release orders that may be issued against this Contract.

**1.15 WORK SEQUENCE:**

- A. Schedule and execute work to coordinate with the Facility.

**1.16 CONTRACT MANAGER:**

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

**Contract Manager:** Traci B. Ray  
**Telephone Number:** 304-373-7246  
**Fax Number:** 855-879-8051  
**Email Address:** tray@perfectiongroup.com

**1.17 DAMAGES**

- A. Any damages occurring to the building or property resulting from the contractor's performance of this work shall be the responsibility of the contractor to repair at the contractor's expense; either by using his/her own forces or that of an approved sub-contractor. The repair method and finished product will be subject to the approval of the owner.

CRFQ COR1600000043 - Equipment and Systems Maintenance and Repairs Contract Pricing Page

EXHIBIT A

Inspections and Testing	Units	Number of Times Per Year	Unit Price Per Each Time	Annual Price For All Required Inspections and Testing
Equipment and Systems				
Equipment and Systems	Bi-Annual	2	\$2448. <sup>00</sup>	\$4896. <sup>00</sup>

Subtotal A: \$4896.<sup>00</sup>

Hourly Rates	Unit of Measure	Estimated Annual Hours *	Unit Price	Extended Amount
Regular Labor Rate	Hour	100	\$78. <sup>00</sup>	\$7800. <sup>00</sup>
Overtime Labor Rate	Hour	16	\$117. <sup>00</sup>	\$1872. <sup>00</sup>
Holiday Labor Rate	Hour	8	\$156. <sup>00</sup>	\$1248. <sup>00</sup>
Emergency Labor Rate	Hour	8	\$78. <sup>00</sup>	\$624. <sup>00</sup>

Subtotal B: \$11,544.<sup>00</sup>

Parts Quote	Estimated Parts Cost **	Markup Percentage	Extended Amount
Parts	\$5,000.00	20 %	\$6000. <sup>00</sup>

Subtotal C: \$6000.<sup>00</sup>

OVERALL COST (by adding subtotals A, B, and C) \$22,440.<sup>00</sup>

**Bidder/Vendor Information:**

Name: Perfection Group

Address: 102 Roxalana Business Park  
Dunbar, WV 25064

Phone No.: 304-373-7246

Fax No.: 855-879-8051

Email Address: tray@perfectiongroup.com

Authorized Signature: *Walter B. Ray*

NOTES:

- \* Quantities are estimated for bid evaluation purposes only.
- \*\* Estimated cost for bid evaluation purposes only.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
1/15/2015

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 Arthur J. Gallagher Risk Management Services, Inc. 1 W. 4th Street, Suite 1300 Cincinnati OH 45202	CONTACT NAME: Karen McCloud	
	PHONE (A/C, No., Ext): 513-977-3100	FAX (A/C, No.):
	E-MAIL ADDRESS: karen_mccloud@ajg.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED Perfection Group, Inc. 102 Roxalana Business Park Dunbar WV 25064	INSURER A: Cincinnati Insurance Company	10677
	INSURER B: Westchester Surplus Lines Insurance	10172
	INSURER C: Cincinnati Casualty Company	28665
	INSURER D:	
	INSURER E:	

**COVERAGES**                                  **CERTIFICATE NUMBER: 658473344**                                  **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC			CPP0885591	9/1/2014	9/1/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" 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			CPP0885591	9/1/2014	9/1/2015	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"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE  DED <input checked="" type="checkbox"/> RETENTION \$0			CPP0885591	9/1/2014	9/1/2015	EACH OCCURRENCE \$15,000,000 AGGREGATE \$15,000,000
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC2119330	9/1/2014	9/1/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000
B	Professional Liability Pollution Liability			G27458774001	5/22/2014	5/22/2015	Each Claim 2,000,000 Aggregate 2,000,000

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

**CERTIFICATE HOLDER**                                  **CANCELLATION**

State of West Virginia 2019 Washington Street East Charleston WV 25305-0130	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 <i>Thomas R. Ditz</i>



# CONTRACTOR LICENSE

Authorized by the

**West Virginia Contractor Licensing Board**

**Number:** WV022601

**Classification:**

HEATING, VENTILATING & COOLING

PERFECTION GROUP INC  
DBA PERFECTION SERVICES OF WV INC  
2649 COMMERCE BLVD  
CINCINNATI, OH 45241

**Date Issued**

DECEMBER 14, 2015

**Expiration Date**

DECEMBER 14, 2016



Authorized Company Signature



Chair, West Virginia Contractor  
Licensing Board

**WEST VIRGINIA  
CONTRACTOR  
LICENSING  
BOARD**

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



# CITY OF MORGANTOWN CONTRACTOR LICENSE

FINANCE DEPARTMENT  
389 Spruce St, Morgantown, West Virginia 26505  
Office: (304) 284-7417 Fax (304) 284-7418  
www.morgantown.com

Expiration Date

6/30/2016

Mailing Address

PERFECTION GROUP INC  
2649 COMMERCE BLVD  
CINCINNATI, OH, 45241

Effective Date

6/1/2015

License Issued To

PERFECTION SERVICES OF WV INC

Business Location

102 ROXALANA BUSINESS PARK

Business License Number

1676

This is to certify that the applicant named herein is granted a license under the provision of ordinances of the City of Morgantown, West Virginia, for the privilege of conducting the business, engaging in the activity, or operating the devices for which the license tax herein itemized has been assessed and collected, as evidence by the seal affixed below.

This certificate of license shall be posted in a conspicuous position, in the place where privileges of this license are exercised and shall be produced for inspection whenever required by the city police, director of finance, or agents thereof.

CUSTOMER RECEIPT

CITY OF MORGANTOWN

Total Amount Due: \$90

License Type: CONTRACTOR

<u>QUANTITY</u>	<u>RECEIPT DESCRIPTION</u>	<u>TRANSACTION AMOUNT</u>
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1	CONTRACTOR LICENSE FEE	\$90.00
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By: Cynthia Siedler

Date: 6-1-15

