



# 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

Procurement Folder: 220223	SO Doc Code: CRFQ
Procurement Type: Central Master Agreement	SO Dept: 0608
Vendor ID: 000000172581 <input type="button" value="Go"/>	SO Doc ID: COR1600000045
Legal Name: PERFECTION GROUP INC	Published Date: 7/29/16
Alias/DBA:	Close Date: 8/9/16
Total Bid: \$20,833.25	Close Time: 13:30
Response Date: 08/08/2016 <input type="button" value="Calendar"/>	Status: Closed
Response Time: 22:51	Solicitation Description: ADDENDJUM 1 EQUIPMENT AND SYSTEMS MAINTENANCE <input type="button" value="Up"/> <input type="button" value="Down"/>
	Total of Header Attachments: 0
	Total of All Attachments: 0



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

**State of West Virginia  
 Solicitation Response**

**Proc Folder :** 220223

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

**Proc Type :** Central Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2016-08-09 13:30:00	SR 0608 ESR08081600000000564	1

<b>VENDOR</b>
000000172561 PERFECTION GROUP INC

**Solicitation Number:** CRFQ 0608 COR1600000045

**Total Bid :** \$20,833.25      **Response Date:** 2016-08-08      **Response Time:** 22:51:42

**Comments:**

**FOR INFORMATION CONTACT THE BUYER**  
 Crystal Rink  
 (304) 558-2402  
 crystal.g.rink@wv.gov

<b>Signature on File</b>	<b>FEIN #</b>	<b>DATE</b>
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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	\$4,644.000000	\$9,288.00

Comm Code	Manufacturer	Specification	Model #
78141600			

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

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			

Extended Description : Regular Labor Rate

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			

Extended Description : Overtime Labor Rate

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			

Extended Description : Holiday Labor Rate

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	\$1.250000	\$1.25

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description : Parts Markup Percentage



Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
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State of West Virginia  
 Request for Quotation

Proc Folder: 220223

Doc Description: EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIR

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2016-06-22	2016-08-09 13:30:00	CRFQ 0608 COR1600000045	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

*Crystal B. Rink*

FEIN #

31-1067245

DATE

8/6/16

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 PARKERSBURG CORRECTIONAL CENTER PER THE ATTACHED

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
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	\$4644.00	\$9288.00

Comm Code	Manufacturer	Specification	Model #
78141600			

**Extended Description :**

Equipment and Systems Bi-Annual Inspections and Testing

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
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	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
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	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
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	
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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



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US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Parts Markup Percentage	1.00000	PCT	25%	

Comm Code	Manufacturer	Specification	Model #
78141600			

**Extended Description :**  
Parts Markup Percentage

SCHEDULE OF EVENTS
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<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	MANDATORY PRE-BID MEETING	2016-07-20
2	VENDOR QUESTION DEADLINE	2016-07-25

<b>COR160000045</b>	<b>Document Phase</b> Final	<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



Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
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State of West Virginia  
 Request for Quotation

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Proc Type: Central Master Agreement

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**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

*Christi B. Rink*

FEIN #

31-1067245

DATE

8/6/16

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Comm Code	Manufacturer	Specification	Model #
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**Extended Description :**  
Equipment and Systems Bi-Annual Inspections and Testing

INVOICE TO		SHIP TO	
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
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Comm Code	Manufacturer	Specification	Model #
78141600			

**Extended Description :**  
Regular Labor Rate

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
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Comm Code	Manufacturer	Specification	Model #
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Extended Description :  
Overtime Labor Rate

INVOICE TO		SHIP TO	
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
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Extended Description :  
Holiday Labor Rate

INVOICE TO		SHIP TO	
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PARKERSBURG	WV26104	PARKERSBURG	WV 26104
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Emergency Labor Rate	8.00000	LS	\$78.00	\$624.00

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Emergency Labor Rate

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
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US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Parts Markup Percentage	1.00000	PCT	25%	

Comm Code	Manufacturer	Specification	Model #
78141600			

**Extended Description :**  
Parts Markup Percentage

**SCHEDULE OF EVENTS**

Line	Event	Event Date
1	MANDATORY PRE-BID MEETING	2016-07-20
2	VENDOR QUESTION DEADLINE	2016-07-25

<b>COR160000045</b>	<b>Document Phase</b> Draft	<b>Document Description</b> EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIR	<b>Page 5</b> <b>of 5</b>
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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 / Perfection Group / Business Development Rep  
(Name, Title)  
Traci B. Ray / Perfection Group / Business Development Rep  
(Printed Name and Title)  
102 Roxalana Business Park Dunbar WV 25004  
(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 / Traci B. Ray / Business Development Rep  
(Authorized Signature) (Representative Name, Title)  
Traci B. Ray / Business Development Rep  
(Printed Name and Title of Authorized Representative)  
8/6/16  
(Date)  
304-373-7246 / 855-879-8051  
(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM  
SOLICITATION NO.: CRFQ COR160000045

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="" type="checkbox"/> Addendum No. 1 | <input checked="" type="checkbox"/> Addendum No. 6  |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input checked="" type="checkbox"/> Addendum No. 7  |
| <input checked="" type="checkbox"/> Addendum No. 3 | <input checked="" type="checkbox"/> Addendum No. 8  |
| <input checked="" type="checkbox"/> Addendum No. 4 | <input checked="" type="checkbox"/> Addendum No. 9  |
| <input checked="" type="checkbox"/> Addendum No. 5 | <input checked="" 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.

Perfection Group  
Company

Walter B. Ray  
Authorized Signature

8/6/16  
Date

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

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.

#### **1.18 CLEANUP**

- A. The Contractor shall keep the work area as clean as possible during the entire progress of work, and shall be responsible to remove from the site, the packaging materials from the products and other debris as it accumulates. All items that are removed to allow the installation of the new items will become the property of the contractor to dispose of unless otherwise noted.

#### **1.19 SAFETY**

- A. The contractor shall be responsible for all means and methods as they relate to safety and shall comply with all applicable local, state and federal requirements that are safety related. Safety shall be the responsibility of the contractor. All related personnel shall be instructed daily to be mindful of the full time requirement to maintain a safe environment for the facility's occupants including staff, visitors, customers and the occurrence of the general public on or near the site.

#### **1.20 WORKMANSHIP**

- A. All work shall be of highest quality and in strict accordance with the manufacturer's published specifications and to the building owner's satisfaction.

#### **1.21 QUALITY ASSURANCE**

- A. Unless otherwise noted in this specification, the contractor must strictly comply with the manufacturer's current specifications and details.

CRFQ COR160000045 - 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	\$4644.00	\$9288.00

Subtotal A: \$9288.00

Hourly Rates	Unit of Measure	Estimated Annual Hours *	Unit Price	Extended Amount
Regular Labor Rate	Hour	100	\$78.00	\$7800.00
Overtime Labor Rate	Hour	16	\$117.00	\$1872.00
Holiday Labor Rate	Hour	8	\$156.00	\$1248.00
Emergency Labor Rate	Hour	8	\$78.00	\$624.00

Subtotal B: \$11,544.00

Parts Quote	Estimated Parts Cost **	Markup Percentage	Extended Amount
Parts	\$5,000.00	1.25 %	\$6250.00

Subtotal C: \$6250.00

OVERALL COST (by adding subtotals A, B, and C) \$27,082.00

**Bidder/Vendor Information:**

Name: Perfection Group

Address: 102 Roxalana Business Park  
Dunbar WV 25064

Phone No.: 304-373-7246

Fax No.: 855-879-8651

Email Address: trays@perfectiongroup.com

Authorized Signature: [Signature]

NOTES:

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

Agency \_\_\_\_\_  
REQ.P.O# COR160000045

**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 Parkersburg Correctional  
225 Holiday Hills Drive, Parkersburg, WV 26104

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 9th day of August, 2016.

Principal Seal

Perfection Group, Inc.  
\_\_\_\_\_  
(Name of Principal)  
By [Signature]  
\_\_\_\_\_  
(Must be President, Vice President, or Duly Authorized Agent)  
W. JOHN ALBRECHT, 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.



THE CINCINNATI INSURANCE COMPANY

Thomas H. Kelly
Vice President

STATE OF OHIO ) ss:
COUNTY OF BUTLER )

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 9th day of August 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

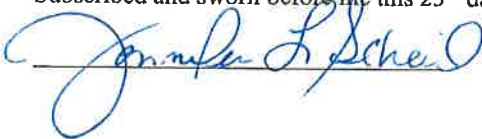
Theresa A. Hoffer, Senior Vice President & Treasurer of The Cincinnati Insurance Company, being duly sworn for herself, deposes and says that she is the above described officer of the said company and that the above Financial Statement as of December 31, 2015 is true and correct to the best of her knowledge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





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

State of West Virginia  
 Request for Quotation

Proc Folder: 220223

Doc Description: ADDENDUM 1 EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIR

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2016-07-29	2016-08-09 13:30:00	CRFQ 0608 COR1600000045	2

**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

*Wari B Ray*

FEIN #

*31-1067245*

DATE

*8/6/16*

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 PARKERSBURG CORRECTIONAL CENTER PER THE ATTACHED

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
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	\$4644.00	\$9288.00

Comm Code	Manufacturer	Specification	Model #
78141600			

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

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
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	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Overtime Labor Rate	16.00000	LS	\$117.00	\$1872.00

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Overtime Labor Rate

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	Holiday Labor Rate	8.00000	LS	\$156.00	\$1248.00

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Holiday Labor Rate

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Emergency Labor Rate	8.00000	LS	\$78.00	\$624.00

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Emergency Labor Rate

INVOICE TO		SHIP TO	
BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR		BUSINESS OFFICE PARKERSBURG CORRECTIONAL CTR 225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Parts Markup Percentage	1.00000	PCT	250%	

Comm Code	Manufacturer	Specification	Model #
78141600			

Extended Description :  
Parts Markup Percentage

**SCHEDULE OF EVENTS**

Line	Event	Event Date
1	MANDATORY PRE-BID MEETING	2016-07-20
2	VENDOR QUESTION DEADLINE	2016-07-25

<b>COR1600000045</b>	<b>Document Phase</b> <b>Draft</b>	<b>Document Description</b> ADDENDUM 1 EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIR	<b>Page 5</b> <b>of 5</b>
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

# SOLICITATION NUMBER: CRFQ – COR1600000045

## Addendum Number: 1

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The purpose of this addendum is to modify the solicitation identified as CRFQ COR1600000045 (“Solicitation”) to reflect the change(s) identified and described below.

### Applicable Addendum Category:

- Modify bid opening date and time
- Modify specifications of product or service being sought
- Attachment of vendor questions and responses
- Attachment of pre-bid sign-in sheet
- Correction of error
- Other

### Description of Modification to Solicitation:

1. To provide a copy of the pre-bid meeting sign-in sheet
2. To answer vendor questions

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

### Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ATTACHMENT A

CRFQ 0608 COR1600000045

Charleston Correctional Center

Equipment and Systems Maintenance and Repairs Contract

Questions:

Q1A: Daikin has a service checker which is an integral part of diagnosing, servicing and properly maintaining the equipment. To use the service checker you must be certified by Daikin. Is this something you are going to require in order to bid?

A1A: Yes

Q1B: If so will you require a certificate or a letter of certification from Daikin to be submitted with the bid?

A1B: The certificate or letter of certification will not be required to submit with the bid documents, but must be submitted to the Purchasing Division before the contract can be encumbered.

Clarifications:

C1: Please delete specifications section 1.01(B), subsection 7: One (1) power generator unit that is manufactured by Cumming with model #: 1300 series.

C2: In specifications section 1.01(B), subsection 16, the quantity of McQuay p-tac units was not specified. There are a total of 20 (twenty) McQuay p-tac units.

CRFQ 0608 10R16X45

SIGN IN SHEET

Page 1 of 1

Request for Proposal No.

PLEASE PRINT

Date: 7/20/2016

\* PLEASE BE SURE TO PRINT LEGIBLY - IF POSSIBLE, LEAVE A BUSINESS CARD

FIRM & REPRESENTATIVE NAME	MAILING ADDRESS	TELEPHONE & FAX NUMBERS
Company: <u>CIMCO BUILDING SERVICES</u> Rep: <u>LEE BROWN</u> Email Address: <u>lbrown@cimcowv.com</u>	<u>2336 VIRGINIA AVE</u> <u>HUNTSVILLE WV 25926</u>	PHONE <u>304-562-7705</u> TOLL FREE FAX
Company: <u>Mason &amp; Barry, Inc.</u> Rep: <u>Terry Vaughn</u> Email Address: <u>tvaughn@masonbarry.com</u>	<u>301 Smiley Dr</u> <u>St. Albans WV 25177</u>	PHONE <u>304-755-0781</u> TOLL FREE FAX <u>304-755-4010</u>
Company: <u>Dso mechanical</u> Rep: <u>Derrick Dunlap</u> Email Address: <u>ddunlap@dsomech.com</u>	<u>515 3rd Ave</u> <u>So Charleston WV 25303</u>	PHONE TOLL FREE <u>304744-8479</u> FAX <u>304 744 8491</u>
Company: <u>Casto Technical</u> Rep: <u>Antonio Ritter</u> Email Address: <u>aritter@castoten.com</u>	<u>540 Leav Sullivan Way</u> <u>Charleston WV 25301</u>	PHONE <u>304 993 4211</u> TOLL FREE FAX
Company: <del>Scott J. Burke</del> <u>Perfection Group</u> Rep: <u>Scott J. Burke</u> Email Address: <u>sburke@perfectiongroup.com</u>	<u>102 Royalene Business Park</u> <u>Dunbar, WV 25064</u>	PHONE <u>304-768-3970</u> TOLL FREE FAX



**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFQ COR1600000045**

**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="" 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 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  
Wani B. Key  
Authorized Signature  
8/6/16  
Date

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



**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, Traci B Ray, 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: Traci B. Ray

Signature: Traci B. Ray

Title: Business Development Rep

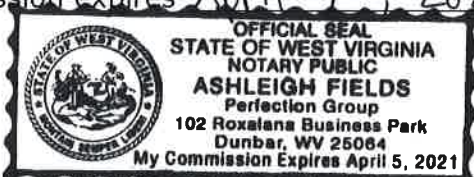
Company Name: Perfection Group

Date: 8/8/16

Taken, subscribed and sworn to before me this 8<sup>th</sup> day of August, 2021.

By Commission expires April 5<sup>th</sup>, 2021

(Seal)



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 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: Perfection Group  
Authorized Signature: [Signature] Date: 8/8/16

State of West Virginia

County of Kanawha, to-wit:

Taken, subscribed, and sworn to before me this 8<sup>th</sup> day of August, 2016

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

**AFFIX SEAL HERE**

**NOTARY PUBLIC** [Signature]

*Purchasing Affidavit (Revised 08/01/2015)*

