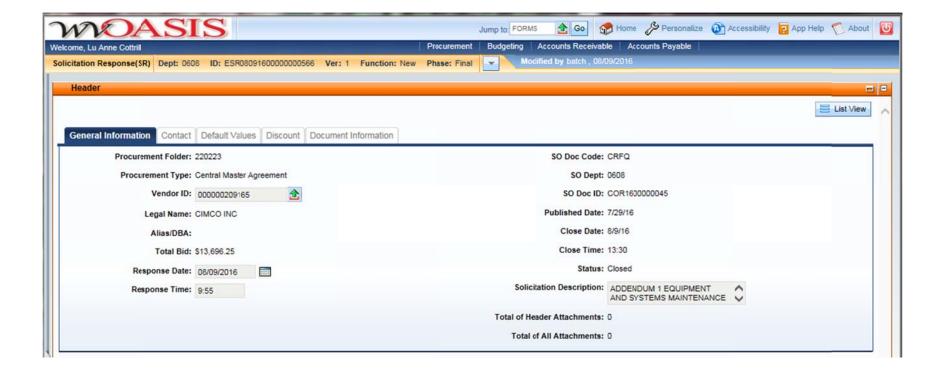


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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: 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 ESR08091600000000566	1

VENDOR

000000209165

CIMCO INC

Solicitation Number: CRFQ 0608 COR1600000045

**Total Bid :** \$13,696.25 **Response Date**: 2016-08-09 **Response Time**: 09:55:39

**Comments:** 

FOR INFORMATION CONTACT THE BUYER

Crystal Rink (304) 558-2402 crystal.g.rink@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	Equipment and Systems Bi-Annual Inspections and Testing	2.00000	LS	\$1,088.000000	\$2,176.00
Comm Code	Manufacturer	Specification		Model #	
78141600		•			
Extended Des	scription : Equipment and Systems E	Bi-Annual Inspect	ions and Tes	ting	
Lina	Comm Ln Desc	Other	linit lagua	Unit Price	In Total Or Contract Amount
Line 2		<b>Qty</b> 100.00000	Unit Issue LS	\$80.000000	Ln Total Or Contract Amount \$8,000.00
_	Regular Labor Rate	100.00000		ψου.συσσο	ψ0,000.00
Comm Code	Manufacturer	Specification		Model #	
78141600					
Extended Des	scription : Regular Labor Rate				
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
Line 3	Overtime Labor Rate	<b>Qty</b> 16.00000	LS	\$120.000000	\$1,920.00
3	Overtime Labor Rate	16.00000		\$120.000000	
3 Comm Code	Overtime Labor Rate  Manufacturer	16.00000		\$120.000000	
3 Comm Code 78141600	Overtime Labor Rate  Manufacturer	16.00000		\$120.000000	
3 Comm Code 78141600	Overtime Labor Rate  Manufacturer	16.00000		\$120.000000	
3 Comm Code 78141600	Overtime Labor Rate  Manufacturer	16.00000		\$120.000000	
3 Comm Code 78141600	Overtime Labor Rate  Manufacturer	16.00000		\$120.000000	
3 Comm Code 78141600	Overtime Labor Rate  Manufacturer	16.00000	LS Unit Issue	\$120.000000  Model #	
Comm Code 78141600 Extended Des	Manufacturer  Scription: Overtime Labor Rate	16.00000  Specification	LS	\$120.000000 Model #	\$1,920.00
Comm Code 78141600  Extended Des	Manufacturer  Scription: Overtime Labor Rate  Comm Ln Desc  Holiday Labor Rate	16.00000  Specification  Qty 8.00000	LS Unit Issue	\$120.000000  Model #  Unit Price \$120.000000	\$1,920.00  Ln Total Or Contract Amount
Comm Code 78141600 Extended Des	Manufacturer  Scription: Overtime Labor Rate  Comm Ln Desc	16.00000 Specification	LS Unit Issue	\$120.000000  Model #	\$1,920.00  Ln Total Or Contract Amount
Comm Code 78141600 Extended Des Line 4 Comm Code 78141600	Manufacturer  Scription: Overtime Labor Rate  Comm Ln Desc Holiday Labor Rate  Manufacturer	16.00000  Specification  Qty 8.00000	LS Unit Issue	\$120.000000  Model #  Unit Price \$120.000000	\$1,920.00  Ln Total Or Contract Amount
Comm Code 78141600  Extended Des Line 4	Manufacturer  Scription: Overtime Labor Rate  Comm Ln Desc  Holiday Labor Rate  Manufacturer	16.00000  Specification  Qty 8.00000	LS Unit Issue	\$120.000000  Model #  Unit Price \$120.000000	\$1,920.00  Ln Total Or Contract Amount
Comm Code 78141600 Extended Des Line 4 Comm Code 78141600	Manufacturer  Scription: Overtime Labor Rate  Comm Ln Desc Holiday Labor Rate  Manufacturer	16.00000  Specification  Qty 8.00000	LS Unit Issue	\$120.000000  Model #  Unit Price \$120.000000	\$1,920.00  Ln Total Or Contract Amount

5	Emergency Labor Rate	8.00000	LS	\$80.000000	\$640.00	
Comm Code	Manufacturer	Specification		Model #		
78141600						
Extended Desc	cription : Emergency Labor Ra	ite				

Unit Issue

**Unit Price** 

**Ln Total Or Contract Amount** 

Qty

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	Parts Markup Percentage	1.00000	PCT	\$0.250000	\$0.25

Comm Code	Manufacturer	Specification	Model #	
78141600				
<b>Extended Descripti</b>	ion: Parts Markup Per	rcentage		

**Comments:** Percentage Markup is 25%

Line

Comm Ln Desc



#### 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 CRFQ 2016-06-22 2016-08-09 0608 COR1600000045 13:30:00

END RESIDIVING LOCATION

**BID CLERK** 

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

VENDOR -

Vendor Name, Address and Telephone Number:

Cinco INC Po Box 480 Culloden wo

25500

FOR INFORMATION CONTACT THE BUYER

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

Signature X

lemate FEIN# 55-27495(1

DATE

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

Page: 1

FORM ID: WV-PRC-CRFQ-001

#### evenillerersket (MHereiteatret

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

Involution of the second	Comments of the second	TESTICIONE PROPERTIE DE LA CONTRACTION DEL CONTRACTION DE LA CONTR			
BUSINESS OFFICE		BUSINESS OFFICE	BUSINESS OFFICE		
PARKERSBURG CORRECTIONAL CTR		PARKERSBURG CORRECT	FIONAL CTR		
225 HOLIDAY HILLS DR		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	1.088 60	#2,17600

Comm Code	Manufacturer	Specification	Model #	
78141600				

#### **Extended Description:**

Equipment and Systems Bi-Annual Inspections and Testing

[V]V(#)[9]=[[9]		Still To.		
BUSINESS OFFICE		BUSINESS OFFICE		
PARKERSBURG CORRECTIONAL CTR		PARKERSBURG CORRECTIONAL (	CTR	
225 HOLIDAY HILLS DR		225 HOLIDAY HILLS DR		
PARKERSBURG	WV26104	PARKERSBURG	WV 26104	
US		US		

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
Regular Labor Rate	100.00000	LS	0000	00000
		400 00000	400 00000	400,00000

Comm Code	Manufacturer	Specification	Model #	
78141600		·		

#### **Extended Description:**

Regular Labor Rate

107/0164270		SHETTE	
BUSINESS OFFICE		BUSINESS OFFICE	
PARKERSBURG CORRECTIONAL CTR		PARKERSBURG CORRECTIONAL	CTR
225 HOLIDAY HILLS DR		225 HOLIDAY HILLS DR	
9			
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	\$ 12600	192000

Comm Code	Manufacturer	Specification	Model #	
78141600	*			

#### **Extended Description:**

Overtime Labor Rate

navojesijo)		SHIP TO TO THE STATE OF THE STA	
BUSINESS OFFICE		BUSINESS OFFICE	
PARKERSBURG CORRECT	IONAL CTR	PARKERSBURG CORRECTIONA	L CTR
225 HOLIDAY HILLS DR		225 HOLIDAY HILLS DR	
, and the second			
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	B 12000	96000

Comm Code	Manufacturer	Specification	Model #	
78141600				

#### **Extended Description:**

Holiday Labor Rate

UMAOLOS TO		SHIP TO	
BUSINESS OFFICE		BUSINESS OFFICE	
PARKERSBURG CORRECT	TIONAL CTR	PARKERSBURG CORRECTIONAL CTR	
225 HOLIDAY HILLS DR		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	8000	64000

Comm Code	Manufacturer	Specification	Model #	
78141600				

**Extended Description:** 

**Emergency Labor Rate** 

involation		SRIP TO THE TOTAL AND A SECOND	
BUSINESS OFFICE		BUSINESS OFFICE	
PARKERSBURG CORRECTI	ONAL CTR	PARKERSBURG CORRECTIONAL CTR	
225 HOLIDAY HILLS DR		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	25%	

Comm Code	Manufacturer	Specification	Model #	
78141600				

#### Extended Description:

Parts Markup Percentage

itealtedddamheit afwin		
Line	Event	<b>Event Date</b>
1	MANDATORY PRE-BID MEETING	2016-07-20
2	VENDOR QUESTION DEADLINE	2016-07-25

#### 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:	Limco INC		
Contractor's License No.	40 0 0255 CQ	WU 025512	_

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;

<b>DESIGNATED CONTACT:</b> Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.
(Name/Title)
Jeff Gillenwater UP
(Printed Name and Title)  Po Box 490 Cullader wo 25500
(Address)
304/352-7205 304 397-4178
(Phone Number) / (Fax Number)
The Gillenwater & lines wo. 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.
(Company)
Hyp Pollunte VI
(Authorized Signature) (Representative Name, Title)
Jeff Gillerwater UP
(Printed Name and Title of Authorized Representative)
8/6/11
06166
(Date)
(Date) 304-362-7705 / 304-397-4178
(Phone Number) (Fax Number)

## 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 Rec			
(Check the box next to ea	ch addendum receiv	ed)	
Addendum No Addendum No Addendum No Addendum No Addendum No Addendum No	. 2 . 3 . 4	Addendum No. 6 Addendum No. 7 Addendum No. 8 Addendum No. 9 Addendum No. 10	
I further understand that a discussion held between	any verbal representa Vendor's representat	t of addenda may be cause for reation made or assumed to be made ives and any state personnel is not the specifications by an official	de during any oral ot binding. Only
Company  Authorized Signature	Wante		
Date			

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

document processing.

to award of contract.

Contract Manager: Jeff Gillenweter
Telephone Number: 309-562-7765

Fax Number: 304 - 387-4178

Email Address: JCGillewater Cinco ac . Go an

#### 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 COR1600000045 - Equipment and Systems Maintenance and Repairs Contract Pricing Page

				•			
Inspections and Testing	Units	Number of Times Per Year	Unit Price Per Each Time	Annual Price For All Required Inspections and			
Equipment and Systems				Testing			
Equipment and Systems	Bi-Annual	2	1.088.00	217600			
		l	Subtotal A:	217660			
Hourly Rates	Unit of Measure	Estimated Annual Hours *	Unit Price	Extended Amount			
Regular Labor Rate	Hour	100	96 00	966600			
Overtime Labor Rate	Hour	16	126 60	1920 66			
Holiday Labor Rate	Hour	8	120 60	960 00			
Emergency Labor Rate	Hour	8	86.00	64000			
Parts Quote	Estimated	Parts Cost **	Subtotal B:	/1.526 00			
Parts		,000.00	Markup Percentage %	Extended Amount			
OVERALL COST (by adding subtotals A, B, and C)							
Bidder/Vendor Information:							
Name: Cimeo Inc							
Address: Po Box 486 Calloden wa 25510							
Phone No.: 3A4-562-7765							
Phone No.: 364-562-2765 /							
mail Address: The Gillen water > Cinco we com							
3 - GERENE	water & Cim	cow.com					
J. J	ellen						

NOTES:

<sup>\*</sup> Quantities are estimated for bid evaluation purposes only.

<sup>\*\*</sup> Estimated cost for bid evaluation purposes only.

Contract Identification:

#### State of West Virginia Purchasing Division

### CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

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

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



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

STATE OF WEST VIRGINIA,
COUNTY OF Putnam, TO-WIT:
I, Jeff Gillenwater, after being first duly sworn, depose and state as follows:
1. I am an employee of; and, (Company Name)
2. I do hereby attest that(Company Name)
maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with <b>West Virginia Code</b> §21-1D.
The above statements are sworn to under the penalty of perjury.
Printed Name: Leff Gillenwater
Signature:
Company Name: Cimco Lic
Date:
Taken, subscribed and sworn to before me this day of August, doll
By Commission expires 2024
OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC Cheryl L Griffith 4810 Spring Hill Ave South Charleston WV 25309 (Notary Public)
THIS AFFIDAVITI MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT
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:**

11/1911

"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:	
Authorized Signature: 4 Sullemble Date:	8/9/16
State of West Dirginia	
County of Ridman, to-wit:	
Taken, subscribed, and sworn to before me this Aday of August  My Commission expires April 3 204, 20.	, 2016
My Commission expires Hpril 3, 204, 20.	0
Cheryl L Griffith 4810 Spring Hill Ave	curchasing Affidavit (Revised 08/01/2015)
South Charleston WV 25309 My Commission Expires April 3, 2024	

4810 Spring Hill Ave
South Charleston WV 25309
My Commission Expires April 3, 2024



**Purchasing Divison** 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 2 2016-07-29 2016-08-09 **CRFQ** 0608 COR1600000045 13:30:00

ENDIRECEWING LOGATION

**BID CLERK** 

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION 2019 WASHINGTON ST E

CHARLESTON

WV

25305

US

VENDOR :

Vendor Name, Address and Telephone Number:

FOR INFORMATION CONTACT THE BUYER

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

Signature X

55 -0949511 DATE 8/8/

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

Page: 1

FORM ID: WV-PRC-CRFQ-001

#### APPOLITONAL IN FORMATTION

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

INVIOLOGICAL TO THE STATE OF TH		34PTO	
BUSINESS OFFICE		BUSINESS OFFICE	
PARKERSBURG CORRECTIONAL CTR		PARKERSBURG CORRECTIONAL CTR	
225 HOLIDAY HILLS DR		225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
US		UŞ	

Line Comm Ln Desc Qty Unit Issue	Unit Price	Total Price
1 Equipment and Systems Bi-Annual 2.00000 LS Inspections and Testing	1 150 66	217/60

Comm Code	Manufacturer	Specification	Model #	
78141600				

#### **Extended Description:**

Equipment and Systems Bi-Annual Inspections and Testing

			SHRTO	
1	BUSINESS OFFICE		BUSINESS OFFICE	
1	PARKERSBURG CORRECTIONAL (	CTR	PARKERSBURG CORRECTIONAL C	CTR
12	225 HOLIDAY HILLS DR		225 HOLIDAY HILLS DR	~
				~
F	PARKERSBURG	WV26104	PARKERSBURG	WV 26104
١,	US		110	
L			US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Regular Labor Rate	100.00000	LS	84	8100 00
				10	0000

Comm Code	Manufacturer	Specification	Model #	
78141600			e e	

#### **Extended Description:**

Regular Labor Rate

INVOIGETOTT, TITLE		TENDED THE TOTAL OF	
BUSINESS OFFICE		BUSINESS OFFICE	
PARKERSBURG CORRECTI	ONAL CTR	PARKERSBURG CORREC	CTIONAL CTR
225 HOLIDAY HILLS DR		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	12.60	
				120	1920

Comm Code	Manufacturer	Specification	Model #	
78141600				

#### **Extended Description:**

Overtime Labor Rate

INVOICE TO	SHPTO
BUSINESS OFFICE	BUSINESS OFFICE
PARKERSBURG CORRECTIONAL CTR	PARKERSBURG CORRECTIONAL CTR
225 HOLIDAY HILLS DR	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	50	04.00
				120	960

Comm Code	Manufacturer	Specification	Model #	
78141600				

#### Extended Description :

Holiday Labor Rate

INVOICE TO		SHPTO	
BUSINESS OFFICE		BUSINESS OFFICE	
PARKERSBURG CORRECTIONAL C	CTR	PARKERSBURG CORRECTIONAL C	CTR
225 HOLIDAY HILLS DR		225 HOLIDAY HILLS DR	
PARKERSBURG	WV26104	PARKERSBURG	WV 26104
			25101
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Emergency Labor Rate	8.00000	LS	92	1400
L					670

Comm Code	Manufacturer	Specification	Model #	
78141600				

#### **Extended Description:**

**Emergency Labor Rate** 

		ISHPTO LTT. TATE	
BUSINESS OFFICE		BUSINESS OFFICE	
PARKERSBURG CORRECTI	ONAL CTR	PARKERSBURG CORRECT	TIONAL CTR
225 HOLIDAY HILLS DR		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	206/	
				2010	

Comm Code	Manufacturer	Specification	Model #	
78141600				

#### **Extended Description:**

Parts Markup Percentage

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

### SOLICITATION NUMBER: CRFQ – COR1600000045 Addendum Number: 1

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
[X]	Attachment of vendor questions and responses
[X]	Attachment of pre-bid sign-in sheet
]	Correction of error
1	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.

#### 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.

## (RFQ 0608 (0R16X45

#### SIGN IN SHEET

### Request for Proposal No.

PLEASE PRINT

Page		_ of _	gantanenne (statelesse
Date: 7/2	0/:	20,	16

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

FIRM & REPRESENTATIVE NAME	MAILING ADDRESS	TELEPHONE & FAX NUMBERS	
Company: CIMCO BUTLDING SERVICES  Rep: LEE Brown  Email Address: 1 brown & CIMCOW COM	2336 VINGENZA AVE HURNZCAME, WV 25526	PHONE 304 - 562-7705 TOLL FREE FAX	
Rep: Terry Vaughan Email Address: + Vaughan Dimagenbary reun	St. Albans WV 85177	PHONE 304-755-6781  TOLL  FREE  FAX 304-755-4010	
Company: DSO mechanical  Rep: Derrick Dunlap  Email Address: Dounlap @ Dsomech.com	So Charleston WV 25503	PHONE TOLL FREE 304744.8479  FAX 3047448491	
Company: Casto Technical  Rep: Awtonio Ritter  Email Address: aritter@Castoten.com	Charleston WU 25307	PHONE 304 993 4211 TOLL FREE FAX	
Company: Control Courte Perfection (rucing)  Rep: Scott J. Burke  Email Address: Sburke @ perfection group.com	102 Roxalena Business Park Dumber, WV 25064	PHONE 304-768-3970 TOLL FREE FAX	

## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ COR16000000045

**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.

Adde	ndı	um N	Sumbers Received:			
(Chec	k tl	he bo	x next to each addendum red	ceive	(h	
	]	V	Addendum No. 1	[	]	Addendum No. 6
	[	]	Addendum No. 2	[	]	Addendum No. 7
	[	]	Addendum No. 3	[	]	Addendum No. 8
	[	]	Addendum No. 4	[	]	Addendum No. 9
	Γ	1	Addendum No. 5	Γ	1	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.

Company

Authorized Signature

Date

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

#### **BID BOND**

KNOW ALL MEN BY THESE PRESENTS, That we, the under	Cimco, Inc.
of P. O. Box 480 Culloden, WV 255	10-0480 as Principal and Great American Insurance Company
of 301 E 4th Street Cincinnati, OH 45242 a corpo	oration organized and existing under the laws of the State of
Ohio with its principal office in the City of Cincinnati	, as Surety, are held and firmly bound unto the State
Ohio with its principal office in the City of Cincinnati of West Virginia, as Obligee, in the penal sum of Five Percent of Total Ar	mount Bid (\$ 5% ) for the payment of which,
well and truly to be made, we jointly and severally bind ourselves, our h	
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
COR1600000045 - Equipment and Systems Maintenance an	d Repairs
101171777777	
NOW THEREFORE,	
<ul> <li>(a) If said bid shall be rejected, or</li> <li>(b) If said bid shall be accepted and the Principal shall enter in</li> </ul>	nto 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 sh 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 Surphy for the volue received hereby etimulates and agree	es 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 C	Obligee may accept such bid, and said Surety does hereby
waive notice of any such extension.	
IN WITNESS WHEREOF, Principal and Surety have hereunto	set their hands and seals, and such of them as are corporations
have caused their corporate seals to be affixed hereunto and these pres	ents to be signed by their proper officers, this
9th day of August , 20 16.	1
	1
Principal Corporate Seal	Cimco, Ind.
	(Name/of Principal)
	ву
	(Must be President or Vice President)
	VILE PRESIDENT
	(Title)
Surety Corporate Seal	Great American Insurance Company
Surety Corporate Sear	(Name of Surety)
	$1 \qquad ()$
	July March Shark
	Attorney-in-Fact

IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance. Raised corporate seals must be affixed, a power of attorney must be attached.

**GREAT AMERICAN INSURANCE COMPANY®** 

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

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

No. 0 20211

POWER OF ATTORNEY

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

Name

Address

Limit of Power

JEFFERY O'DELL

RICHARD L. HIGGINBOTHAM ALL OF

ALL

C. DAVID THOMAS

ROSEANN B. DYE-SMALLEY CHARLESTON, WEST VIRGINIA

\$75,000,000

ROBIN M. HUBBARD-SHERROD

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

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate

officers and its corporate seal hereunto affixed this

day of AUGUST

Attest

GREAT AMERICAN INSURANCE COMPANY



Assistant Secretary

DAVID C. KITCHIN (877-377-2405)

STATE OF OHIO, COUNTY OF HAMILTON - ss:

10TH

day of **AUGUST** 

2011, before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his

name thereto by like authority.



KAREN L. GROSHEIM NOTARY PUBLIC, STATE OF OHIO MY COMMISSION EXPIRES 02-20-16 men of Grandin

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

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

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

#### CERTIFICATION

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

Signed and sealed this

9th

day of

August

2016



Assistant Secretary

S1029AC (4/11)