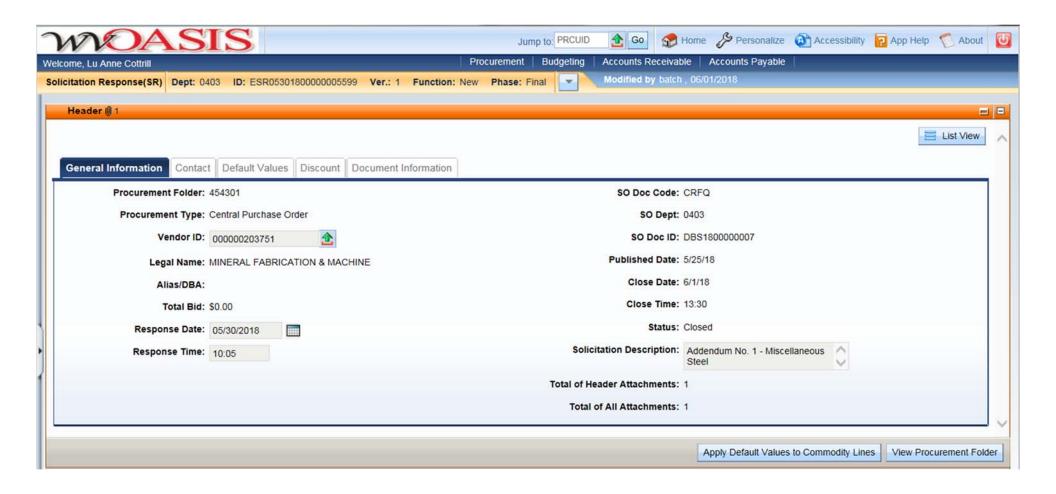
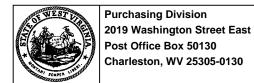


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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: 454301

Solicitation Description: Addendum No. 1 - Miscellaneous Steel

Proc Type: Central Purchase Order

| Date issued | Solicitation Closes    | Solicitation Response        | Version |
|-------------|------------------------|------------------------------|---------|
|             | 2018-06-01<br>13:30:00 | SR 0403 ESR05301800000005599 | 1       |

**VENDOR** 

000000203751

MINERAL FABRICATION & MACHINE

Solicitation Number: CRFQ 0403 DBS1800000007

**Total Bid :** \$0.00 **Response Date**: 2018-05-30 **Response Time**: 10:05:42

**Comments:** If you need any additional information please let us know.

FOR INFORMATION CONTACT THE BUYER

Michelle L Childers (304) 558-2063 michelle.l.childers@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

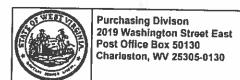
| Line | Comm Ln Desc | Qty     | Unit Issue | Unit Price       | Ln Total Or Contract Amount |
|------|--------------|---------|------------|------------------|-----------------------------|
| 1    | Steel        | 0.00000 | LS         | \$102,500.000000 | \$0.00                      |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 11101704  |              |               |         |  |
|           |              |               |         |  |

**Extended Description:** 

All inclusive lump sum price to provide miscellaneous steel items. All transportation and delivery costs are to be included.

**Comments:** Delivery will be made according to the buyer.



State of West Virginia Request for Quotation 06 - Building Supply

|             | Proc Folder: 454301      |                                |         |
|-------------|--------------------------|--------------------------------|---------|
|             | Doc Description: Addend  | um No. 1 - Miscellaneous Steel |         |
|             | Proc Type: Central Purch |                                |         |
| Date Issued | Solicitation Closes      | Call that all all              | Version |
| 2018-05-25  | 2018-06-01<br>13:30:00   | CRFQ 0403 DBS1800000007        | 2       |

BID RECEIVING LOCATION

**BID CLERK** 

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

W 25305

US

VENDOR

Vendor Name, Address and Telephone Number:

Mineral Fabrication + Machine Co., Inc.

PO BOX 21

Keyser, WV 26726

FOR INFORMATION CONTACT THE BUYER

Michelle L Childers (304) 558-2063

michelle.l.childers@wv.gov

Signature X

FEIN# 55-0598025

DATE 5-29-18

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

Page: 1

FORM ID : WV-PRC-CRFQ-001

| AL INFORMATI |  |
|--------------|--|
|              |  |
|              |  |
|              |  |

#### Addendum

Addendum No. 1 issued to publish the vendor questions and agency answers.

End of Addendum

#### **Request for Quotation**

The West Virginia Purchasing Division is soliciting bids on behalf of the West Virginia Schools for the Deaf and the Blind (WVSDB) to establish a contract for the one-time purchase of miscellaneous steel for renovations on its campus, located at 301 E. Main Street, Romney, WV 26757. This will be for the purchase of materials only.

| INVOICE TO  |              | SHIP TO   |               |
|---|--------------|---|---------------|
| ACCOUNTS PAYABLE<br>SCHOOL FOR THE DE<br>301 EAST MAIN ST | AF & BLIND   | CENTRAL SUPPLY<br>SCHOOL FOR THE DI<br>301 EAST MAIN ST | EAF & BLIND   |
| ROMNEY  | WV26757-1894 | ROMNEY  | WV 26757-1894 |
| us  |              | us  |               |

| Line | Comm Ln Desc | Qty      | Unit Issue | Unit Price | Total Price   |
|------|--------------|----------|------------|------------|---------------|
| 1    | Steel        | 0.00000  | LS         |            | \$ 102,500.00 |
|      |              | <u> </u> | _          |            | \$ 102,500.00 |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 11101704  |              |               |         |  |
|           |              |               |         |  |

#### **Extended Description:**

All inclusive lump sum price to provide miscellaneous steel items. All transportation and delivery costs are to be included.

| 7             | Document Phase | Document Description | Page 3 |
|---------------|----------------|----------------------|--------|
| DBS1800000007 | Final          | Miscellaneous Steel  | of 3   |

### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions



### Mineral Fabrication & Machine Co. Inc.

PO Box 21, Keyser Ind. Park Keyser, WV. 26726 1-304-788-5855

Quote# 28102
DATE May 17, 2018
CUSTOMER WV School
EXPIRATION DATE 6/4/2018

TO

WV Schools for the Deaf and the Blind

301 East Main St. Romney, WV 26757

304-822-3521

Project: Keller Hall, Blue & Gold, Seaton Hall and Arnold Houe

Building Renovations Bid Package # 20

Miscellaneous Steel Req. # - M18-2131

| SALESPERSON   | FOB        | PAYMENT TERMS | DUE DATE |
|---------------|------------|---------------|----------|
| Shane Steward | Keyser, WV | Net 30        |          |

| QUANTITY              | DESCRIPTION  | UNIT PRICE  | LINE TOTAL   |
|-----------------------|--|-------------|--------------|
|                       | Misc. Steel Req. # M18-2131  |             |              |
|                       | Section A - Provide Galvanized Steel Handrailing / Guard Railing   |             |              |
|                       | for the following locations 1 - 5 from the summary of work   |             |              |
| 1.00                  | for the amount of  | \$85,000.00 | \$85,000.00  |
|                       | Section B - Provide Galvanized Steel Pipe Bollards Quantity 30   |             |              |
| 1.00                  | for the amount of  | \$7,500.00  | \$7,500.00   |
| 1.00                  | Section C - Provide RTU Support for the amount of  | \$2,600.00  | \$2,600.00   |
|                       | Section D - Provide Roof Opening Frames for ERV-1, ERV-2, KEF-1,   |             |              |
| 1.00                  | & KEF-2 for the amount of  | \$2,600.00  | \$2,600.00   |
| 1.00                  | Section E - Provide Pinch Beam for the amount of   | \$1,500.00  | \$1,500.00   |
| 1.00                  | Section F - Provide Loading Dock Supports for the amount of  | \$3,300.00  | \$3,300.00   |
|                       |  |             |              |
|                       |  | SUBTOTAL    | \$102,500.00 |
|                       | py:Shane Steward 5/17/2018   | SALES TAX   |              |
| (Describe any conditi | n the goods named, subject to the conditions noted below;<br>ons pertaining to these prices and any additional terms of the agreement.<br>ude contingencies that will affect the quotation.) | TOTAL       | \$102,500.00 |

To accept this quotation, sign here and return:



#### Mineral Fabrication & Machine Co. Inc.

PO Box 21, Keyser Ind. Park Keyser, WV. 26726 1-304-788-5855

To accept this quotation, sign here and return:

Quote# 28102 DATE May 17, 2018 CUSTOMER **WV School** 

**EXPIRATION DATE** 6/4/2018

TO

WV Schools for the Deaf and the Blind

301 East Main St.

Romney, WV 26757 304-822-3521

Project: Keller Hall, Blue & Gold, Seaton Hall and Arnold Houe

Building Renovations Bid Package # 20

Miscellaneous Steel Req. # - M18-2131

| SALESPERSON   | FOB        | PAYMENT TERMS | DUE DATE |
|---------------|------------|---------------|----------|
| Shane Steward | Keyser, WV | Net 30        |          |

| QUANTITY              | DESCRIPTION  | UNIT PRICE   | LINE TOTAL |
|-----------------------|--|--|------------|
| - 19 10 Gr Ek         | Misc. Steel Req. # M18-2131  |  | 151        |
| Notes                 | Field Measure, Detail, Supply Material, Fabricate, Hot Dip   |  |            |
| 1                     | Galvanize, and Delivery all sections and details from customer   |  |            |
|                       | supplied drawings and specifications.  |  |            |
|                       | 2. Customer to supply clarification of information not supplied on   |  | A          |
| = iA                  | customer drawings.   |  | 1250.0     |
|                       | 3. Anything outside the scope of work would be at an extra.  |  | AN AND     |
| Exclusions            | 1. Bid Bond  | The state of the s |            |
|                       | 2. Anything other than what is specified on customer drawings and  |  |            |
|                       | supplied scope of work.  |  |            |
|                       | 3. Grout for the installation of Handrails   |  |            |
|                       | 4. Field Installation  |  |            |
| A. 1875 — Tax         |  |  |            |
|                       |  |  |            |
|                       |  | SUBTOTAL   | \$0.00     |
|                       | by:Shane Steward 5/17/2018   | SALES TAX  |            |
| (Describe any conditi | n the goods named, subject to the conditions noted below:<br>ons pertaining to these prices and any additional terms of the agreement.<br>lude contingencies that will affect the quotation. | TOTAL  | \$0.00     |

THANK YOU FOR YOUR BUSINESS!

# Exhibit A: Pricing Page CRFQ DBS1800000007 Miscellaneous Steel

#### SUBMITTED TO:

### West Virginia Schools for the Deaf and Blind

The Bidder, being familiar with local conditions affecting the cost of the Work and the Contract Documents, including Instructions to Bidders, Bid Form, General Conditions, Drawings, Specifications, and any Addenda or Clarifications issued, hereby propose to furnish all material, transportation, and delivery necessary for the satisfactory and complete execution of

CRFQ DBS1800000007 Miscellaneous Steel Keller Hall, Blue and Gold, Seaton Hall, and Arnold House West Virginia Schools for the Deaf and Blind

in every detail, all in full accordance with, and in conformity to, the Contract Documents including the Summary of Bid Package as attached to this Bid Form for the stipulated Sum as follows:

| The undersigned proposes to furnish and deliver <u>all</u> materi described in the attached Summary of Materials as follows: | als called for in Bid Package - Miscellaneous Steel as |
|--|--|
| For the Lump Sum of: One hundred two t   | housand five hundred dollars                           |
| and Zero cents   | ( <u>s 102, 500.00</u> ).                              |
|  |  |
|  |  |
| SIGNATURE OF BIDDER:   | $\Omega$   |
| Firm: Mineral Fabrication + Machine Co.  | Inc. By: XILL R/Frele                                  |
| Address: PO Box 21   | Title: President                                       |
| Address: Keyser Industrial Park  | Phone: 304-788-5855                                    |
| Address: Keyser, WV 16726  | Fax: 304-788-5692                                      |
|  |  |

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

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 Numbe<br>(Check the box nex   | rs Received:<br>at to each addendum rec                  | ceived)  |
|--|--|--|
|  | um No. 1<br>um No. 2<br>um No. 3<br>um No. 4<br>um No. 5 | ☐ Addendum No. 6 ☐ Addendum No. 7 ☐ Addendum No. 8 ☐ Addendum No. 9 ☐ Addendum No. 10  |
| I further understandiscussion held bet | d that any verbal repres                                 | reipt of addenda may be cause for rejection of this bid. The entation made or assumed to be made during any oral entatives and any state personnel is not binding. Only and to the specifications by an official addendum is |
| Mineral 1                              | Fabrication +  | Machine Co., Inc.  |
| Company                                | a Atoli  |  |
| Authorized Signat                      | ure  |  |
| Authorized Signati                     | 18   |  |
| Date                                   |  |  |
|  |  | t should be submitted with the bid to expedite   |
| document process                       | ing.   |  |

Revised 02/16/2018

| <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.   |
| Shane Steward - Estimating   |
| (Name, Title) Shane Steward, Estimating  |
| (Printed Name and Title)   |
| PO Box 21, Keyser, WV 26726  |
| (Address)  |
| 304-788-5855 / 304-788-5692  |
| (Phone Number) / (Fax Number)  |
| shane. Steward @ minfab. us (email address)  |
| (chan 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. |
| Mineral Fabrication + Machine Co., Inc.  |
| (Company)  |
| (Authorized Signature) (Representative Name, Title)  |
| John R. Hale, President  |
| (Printed Name and Title of Authorized Representative)  |
| 5-29-18  |
| (Date)   |
| 304-788-5855 / 304-788-5692  |
| (Phone Number) (Fax Number)  |

### West Virginia Ethics Commission



## Disclosure of Interested Parties to Contracts

Pursuant to W. Va. Code § 6D-1-2, a state agency may not enter into a contract, or a series of related contracts, that has/have an actual or estimated value of \$100,000 or more until the business entity submits to the contracting state agency a Disclosure of Interested Parties to the applicable contract. In addition, the business entity awarded a contract is obligated to submit a supplemental Disclosure of Interested Parties reflecting any new or differing interested parties to the contract within 30 days following the completion or termination of the applicable contract.

For purposes of complying with these requirements, the following definitions apply:

"Business entity" means any entity recognized by law through which business is conducted, including a sole proprietorship, partnership or corporation.

"Interested party" or "Interested parties" means:

- (1) A business entity performing work or service pursuant to, or in furtherance of, the applicable contract, including specifically sub-contractors;
- (2) the person(s) who have an ownership interest equal to or greater than 25% in the business entity performing work or service pursuant to, or in furtherance of, the applicable contract. (This subdivision does not apply to a publicly traded company); and
- (3) the person or business entity, if any, that served as a compensated broker or intermediary to actively facilitate the applicable contract or negotiated the terms of the applicable contract with the state agency. (This subdivision does not apply to persons or business entities performing legal services related to the negotiation or drafting of the applicable contract.)

"State agency" means a board, commission, office, department or other agency in the executive, judicial or legislative branch of state government, including publicly funded institutions of higher education: Provided, that for purposes of W. Va. Code § 6D-1-2, the West Virginia Investment Management Board shall not be deemed a state agency nor subject to the requirements of that provision.

The contracting business entity must complete this form and submit it to the contracting state agency prior to contract award and to complete another form within 30 days of contract completion or termination.

This form was created by the State of West Virginia Ethics Commission, 210 Brooks Street, Suite 300, Charleston, WV 25301-1804. Telephone: (304)558-0664; fax: (304)558-2169; e-mail: <a href="mailto:ethics@wv.gov">ethics@wv.gov</a>; www.ethics.wv.gov.

# West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

| Contracting Business Entity: Mineral Febrication + Machine Co Address: PO Rox 21   |
|--|
| Keyser Industrial Park   |
| Authorized Agent: John Hale Address: Keyser, WV 26726  |
| Contract Number: DBS 1800000007 Contract Description: Miscellancous Steel  |
| Governmental agency awarding contract: WV Schools for the Deaf and Blind   |
| ☐ Check here if this is a Supplemental Disclosure  |
| List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (attach additional pages if necessary):  |
| <ol> <li>Subcontractors or other entities performing work or service under the Contract</li> <li>Check here if none, otherwise list entity/individual names below.</li> </ol>  |
| <ol> <li>Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities)</li> <li>☑ Check here if none, otherwise list entity/individual names below.</li> </ol>  |
| <ol> <li>Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding lega services related to the negotiation or drafting of the applicable contract)</li> <li>Check here if none, otherwise list entity/individual names below.</li> </ol>  |
| Signature: Date Signed: 5-29-18  |
| Notary Verification  |
| State of West Virginia County of Mineral .   |
| , <u>John Hale</u> , the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the penalty of perjury.   |
| Taken, sworn to and subscribed before me this $\frac{29^{\text{TH}}}{}$ day of $\frac{\text{May}}{}$ , $\frac{2018}{}$ .   |
| Taken, sworn to and subscribed before me this  |
| Notary Public's Signature  TROY J. KESNER Notary Public official Seat  State Agency:  Date Received by State Agency:  Date submitted to Ethics Commission:  Sovernmental agency submitting Disclosure:  Notary Public's Signature  TROY J. KESNER Notary Public Official Seat State of West Vargana My Comm. Expires Feb 15, 2023 474 Bobwhite Drive Keyser WV 26/26 |

WV-10 Approved / Revised 12/16/15

### State of West Virginia

### **VENDOR PREFERENCE CERTIFICATE**

Certification and application is hereby made for Preference in accordance with **West Virginia Code**, §5A-3-37. (Does not apply to construction contracts). **West Virginia Code**, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the **West Virginia Code**. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Vendor Preference, if applicable.

|                            | Application is made for 2.5% vendor preference for the reason checked: Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or, Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification;  |
|----------------------------|--|
|                            | Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; or,  |
|                            | Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,   |
| 2.                         | Application is made for 2.5% vendor preference for the reason checked:  Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,   |
| 3.                         | Application is made for 2.5% vendor preference for the reason checked: Bidder is a nonresident vendor that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's bid; or, |
| 4.                         | Application is made for 5% vendor preference for the reason checked:  Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,   |
|                            | Application is made for 3.5% vendor preference who is a veteran for the reason checked: Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,  |
|                            | Application is made for 3.5% vendor preference who is a veteran for the reason checked:  Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.  |
| 7.                         | Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with West Virginia Code §5A-3-59 and West Virginia Code of State Rules.  Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.  |
| or (b) ass<br>the contr    | inderstands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the nents for such preference, the Secretary may order the Director of Purchasing to: (a) rescind the contract or purchase order; sess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to racting agency or deducted from any unpaid balance on the contract or purchase order.  |
| By submauthorize the requi | nission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and<br>es the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid<br>ired business taxes, provided that such information does not contain the amounts of taxes paid nor any other information<br>by the Tax Commissioner to be confidential.   |
| ing Divis                  | nereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder bything contained within this certificate changes during the term of the contract, Bidder will notify the Purchassion in writing immediately.  |
| Bidder:_                   | Mineral Fabrication + Machine Co. In Signed: / Chale   |
| Date:                      | 5-29-18 Title: President   |
|                            |  |

<sup>\*</sup>Check any combination of preference consideration(s) indicated above, which you are entitled to receive

# STATE OF WEST VIRGINIA Purchasing Division

### **PURCHASING AFFIDAVIT**

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL CONTRACTS: 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

"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: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, 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:

Notary Public Official Seaf
State of West Virginia
My Comm. Expires Feb 15, 2023
474 Bobwhite Drive Keyser WV 26726

| Vendor's Name: Mineral Fabrication + Machine Co., Inc.          |
|---|
| Authorized Signature:   |
| State of West Virginia  |
| County of Mineral, to-wit:                                      |
| Taken, subscribed, and sworn to before me this day of May 2018. |
| My Commission expires <u>Fcb. 15</u> , 20 <u>23</u> .           |
| AFFIX SEAL HERE  NOTARY PUBLIC                                  |

Purchasing Affidavit (Revised 01/19/2018)



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/12/2017

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 'ELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED LEPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or 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).

| tl   | is certificate does not confer rights to   |         |               |   | n endor                                  | sement(s).         | ay require                | , an endersone                               | iie maidu  | MILE        | 011        |
|--|--|---------|---------------|---|--|--------------------|---------------------------|--|------------|-------------|------------|
| PRODUCER   |  |         |               | CONTACT Southpointe Surety, Inc.                        |  |                    |                           |  |            |             |            |
| Southpointe Surety, Inc.                               |  |         |               | PHONE (814) 255-7261 FAX (A/C, No, Ext): (814) 255-7995 |  |                    |                           |  |            |             |            |
| 1749 Lyter Drive                                       |  |         |               | E-MAIL ADDRESS:   |  |                    |                           |  |            |             |            |
| Joh  | nstown, PA 15905   |         |               |   |  |                    |                           |  |            |             | NAIC #     |
|  |  |         |               |   | INSURE                                   | Accordat           | ed Industries Ir          |  |            |             | 1111111    |
| INSL   | RED  |         |               | <del></del>   | INSURER B : Travelers Excess and Surplus |                    |                           |  |            |             |            |
|  | Mineral Fabrication & Machine  | Co., In | IC.           |   |  | RC: RLI Insu       | rance Compan              | y .  |            |             |            |
|  | P.O. Box 21  |         |               |   |  |                    | -                         |  |            |             |            |
|  | 356 Waxler Road, Keyser Indu   | trial P | ark           |   | INSURER D:                               |                    |                           |  |            |             |            |
|  | Keyser, WV 26726   |         |               |   | INSURER E : INSURER F :                  |                    |                           |  |            |             |            |
| CO   | /ERAGES CEF  | TIFIC   | ATF           | NUMBER: 2017-2018 CC                                    |  | AF.                |                           | REVISION NUM                                 | BER.       |             |            |
| Ť  | IS IS TO CERTIFY THAT THE POLICIES OF  | INSU    | RANCI         | E LISTED BELOW HAVE BEEN                                | I ISSUEI                                 | D TO THE INSU      | RED NAMED A               | BOVE FOR THE P                               | OLICY PER  | IOD         |            |
| - IN   | DICATED. NOTWITHSTANDING ANY REQU  | IREM    | ENT, T        | ERM OR CONDITION OF ANY                                 | CONTR                                    | ACT OR OTHE        | R DOCUMENT                | WITH RESPECT 1                               | O WHICH T  | HIS         |            |
| E  | ERTIFICATE MAY BE ISSUED OR MAY PER<br>(CLUSIONS AND CONDITIONS OF SUCH P          | IAIN, I | HEIN<br>S.LIM | ISURANCE AFFURDED BY TH<br>ITS SHOWN MAY HAVE REFI      | JE POLK<br>J RFDH                        | CED BY PAID C      | ED HEREIN IS S<br>II AIMS | SUBJECT TO ALL                               | THE TERMS  | 5,          |            |
| INSR   | TYPE OF INSURANCE  | ADDL    | SUBR          |   | POLICY EFF   POLICY EXP                  |                    |                           |  |            |             |            |
| 5-111  | COMMERCIAL GENERAL LIABILITY   | INSU    | WVU           | TOGOT HOMOLIK   |  | (MM/DD/YYYY)       | (MM/DD/YYYY)              | EACH COOLIDDEN                               |            | s 1,00      | 0.000      |
|  | CLAIMS-MADE X OCCUR  |         |               |   |  |                    |                           | DAMAGE TO RENT                               | ED         | s 100,      |            |
|  | OCHING-III/OE  |         |               |   |  |                    |                           | PREMISES (Ea occ.                            |            | s 5,00      |            |
| Α  |  |         |               | AES1031615  |  | 09/08/2017         | 09/08/2018                | MED EXP (Any one )                           |            | <del></del> | 0,000      |
|  | GEN'L AGGREGATE LIMIT APPLIES PER:   |         |               |   |  |                    |                           | GENERAL AGGREG                               |            | s 2,00      |            |
|  | POLICY X PRO- LOC  |         |               |   |  |                    |                           | PRODUCTS - COMP                              | 2,000,00   |             |            |
|  | OTHER:   |         |               |   |  |                    |                           | PRODUCTS - COMP                              |            | \$          | ,          |
| 1  | AUTOMOBILE LIABILITY   |         |               |   |  |                    |                           | COMBINED SINGLE                              | 1 11 11 2  | 5           |            |
| -  | ANY AUTO   |         |               |   |  |                    |                           | (Ea accident)  BODILY INJURY (Per person) \$ |            |             |            |
|  | OWNED SCHEDULED AUTOS  |         |               |   |  |                    |                           | BODILY INJURY (Per accident) \$              |            |             |            |
|  | HIRED NON-OWNED AUTOS ONLY   |         |               |   |  |                    |                           | PROPERTY DAMAGE                              |            |             |            |
|  | AUTOS UNET   |         |               |   |  |                    |                           | (Per accident)                               |            | 5           |            |
|  | X UMBRELLA LIAB X OCCUR  |         |               |   |  |                    |                           | EACH OCCURRENC                               | - <u>-</u> | 5,00        | 0,000      |
| В  | EXCESS LIAB CLAIMS-MADE  |         |               | ZUP-71M13034-17-NF                                      |  | 09/08/2017         | 09/08/2018                | AGGREGATE                                    |            | <u> </u>    | 0,000      |
|  | DED RETENTION \$   | ~       |               |   |  |                    |                           | AGGILGATZ                                    |            | \$          |            |
|  | WORKERS COMPENSATION   | 1       | ·             |   |  |                    |                           | PER<br>STATUTE                               | OTH-<br>ER |             |            |
|  | AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | l       |               |   |  |                    |                           | E.L. EACH ACCIDE?                            |            | s           |            |
|  | (Mandatory In NH)  | N/A     |               |   |  |                    |                           | E.L. DISEASE - EA I                          |            | s           |            |
| If yes, describe under DESCRIPTION OF OPERATIONS below |  |         |               |   |  |                    |                           | E.L. DISEASE - POL                           | 9.4        | s           |            |
|  | Rented/Leased Equipment  |         |               |   |  |                    |                           | \$ 750,000 - Blan                            |            |             |            |
| С  | Property Insurance   |         |               | ILMO705175  | 10/01/2017                               |                    | 10/01/2018                | See Below                                    |            |             |            |
|  | • •  |         |               |   |  |                    |                           |  |            |             |            |
| DES  | RIPTION OF OPERATIONS / LOCATIONS / VEHIC  | ES (A   | ORD 1         | 01, Additional Remarks Schedule,                        | may be a                                 | ittached if more s | pace is required)         |  |            |             |            |
| Cer  | ificate holder is listed as additional insured                                     |         |               |   |  |                    |                           |  |            |             |            |
|  |  |         |               |   |  |                    |                           |  |            |             |            |
|  |  |         |               |   |  |                    |                           |  |            |             |            |
|  |  |         |               |   |  |                    |                           |  |            |             |            |
|  |  |         |               |   |  |                    |                           |  |            |             |            |
|  |  |         |               |   |  |                    |                           |  |            |             |            |
| CE   | TIFICATE HOLDER  |         |               |   | CANC                                     | ELLATION           |                           |  |            | -           |            |
|  |  |         |               |   |  |                    |                           |  |            |             |            |
|  |  |         |               |   |  |                    |                           | SCRIBED POLICI<br>F. NOTICE WILL E           |            |             | ) BEFORE   |
| West Virginia Schools for the Deaf and Blind           |  |         |               |   |  |                    | PROVISIONS.               | L DELIVER                                    | ED IM      |             |            |
| 301 East Main Street                                   |  |         |               |   |  |                    |                           |  |            |             |            |
|  |  |         |               | AUTHO   | RIZED REPRESEI                           | NTATIVE            | 170                       | 1.   |            |             |            |
| Romney WV 26757  |  |         |               | 1/2/20  |  |                    |                           |  |            |             |            |
| 1  |  |         |               |   |  |                    |                           |  |            |             |            |
|  |  |         |               |   |  |                    | 24008 2015                | ACORD CORRO                                  | MATION     | A 11 -1-    | hin annual |



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MNUDD/YYYY) 05/29/2018

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 IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) 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 PRODUCER State Farm Insurance CONTACT HAME: Hayward Wilson, Agent NAME: Playward wilson, Agent PHONE: AC. No. Entr: 304-788-3122 E-MAIL ADDRESS: hayward wilson 12z1@statefarm.com PO Box 518 FAX IA/C, Noj: 304-788-4046 Keyser, WV 26726 INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : State Form Automobile Insurance Company INSURED Mineral Fabrication & Machine Co., Inc. 25178 INSURER 8: PO Box 21 INSURER C: Keyser, WV 26726 INSURER D INSURER E INSURER F COVERAGES CERTIFICATE 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. ADDL SUBR TYPE OF INSURANCE POLICY EFF POLICY EXP INSR WVD POLICY NUMBER GENERAL LIABILITY LIMITS EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Es occurrence) COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER PRODUCTS - COMP/OP AGG POLICY PRO-AUTOMOBILE LIABILITY Y F100134-C01-48-922 COMBINED SINGLE LIMIT (Ea accident) 03/01/2018 03-01-2019 ANY AUTO 2,000,000 ALL OWNED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS BODILY INJURY (Per person) 2,000,000 **BODILY INJURY (Per accident)** HIRED AUTOS 2,000,000 PROPERTY DAMAGE (Per accident) 1,000,000 UMBRELLA LIAB OCCUR **EXCESS LIAB EACH OCCURRENCE** CLAIMS-MADE AGGREGATE DED ! RETENTION 5 £ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY
ANY PROPRIETORPARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDEO? E.L. EACH ACCIDENT (Mandetary in NH) If yea, describe under E.L. DISEASE - EA EMPLOYEE \$ DESCRIPTION OF OPERATIONS below ELL DISEASE - POLICY LIMIT \$ DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Ramerius Schedule, if more space is required) Additional Insured: West Virginia Schools for the Deaf and the Blind 301 E. Main ST Romney, WV 26757 CERTIFICATE HOLDER CANCELLATION West Virginia Schools for the Deaf and the Blind SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. 301 E. Main ST Romney, WV 26757 AUTHORIZED REPRESENTATIVE

ACORD 25 (2010/05)

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1001486 132849.8 01-23-2013



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/29/2018

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 PHONE (A/C, No. Ext): E-MAIL ADDRESS: Southpointe Surety Inc. 1749 Lyter Dr INSURER(5) AFFORDING COVERAGE NAIC# **Johnstown** PA 15905 INSURER A: Brickstreet Insurance Co 12372 INSURED INSURER B Mineral Fabrication & Machine Co Inc. INSURER C P O Box 21 INSURER D INSURER E WV 26726 INSURER F COVERAGES CERTIFICATE NUMBER: **REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADOLSUUR INSD WVD TYPE OF INSURANCE POLICY NUMBER COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE
DAMAGE TO RENTED
PREMISES (Ea occurrence) CLAIMS-MADE OCCUR MED EXP (Any one person) s PERSONAL & ADV INJURY GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE PRO-JECT POLICY Loc PRODUCTS - COMP/OP AGG OTHER: COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY ¢ ANY AUTO **BODILY INJURY (Per person)** ALL OWNED AUTOS SCHEDULED **BODILY INJURY (Per accident)** AUTOS NON-OWNED \$ PROPERTY DAMAGE (Per accident) HIRED AUTOS 5 5 **UMBRELLA LIAB** OCCUR EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE AGGREGATE DED RETENTIONS WORKERS COMPENSATION X PER X OTH-AND EMPLOYERS' LIABILITY **BROAD FORM** ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) s 1,000,000 E.L. EACH ACCIDENT NIA WCB1006618-17 07/12/2017 07/12/2018 5 1,000,000 E.L. DISEASE - EA EMPLOYEE yes, describe under ESCRIPTION OF OPERATIONS below 1,000,000 E.L. DISEASE - POLICY LIMIT | \$ DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) OWNERS/OFFICERS/PARTNERS EXCLUDED: MELINDA HALE A BLANKET WAIVER OF SUBROGATION APPLIES IN FAVOR OF THE HOLDER CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. West Virginia Schools for the Deaf and the Blind 301 E. Main ST **AUTHORIZED REPRESENTATIVE** Keny Dolad Romney

WV 26757