

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

State of West Virginia Request for Quotation 09 — Construction

Proc Folder: 488948

Doc Description: Addendum 1- Bidg 17 Elevator Jack Replacement

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Soncitation	No		Version
2018-09-12	2018-10-09 13:30.00	CRFQ	0211	GSD1900000004	2

BID RECIEWING LOCATION

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 Jessica S Chambers (304) 558-0246 jessica.s.chambers@wv.gov			
		- E - E	

Signature X

FEIN# 45-576036

DATE 6/5/18

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

AMDÍTIO		

Addendum

Addendum No.01 issued to publish and distribute the attached information to the vendor community.

The West Virginia Purchasing Division is soliciting bids on behalf of the WV Department of Administration, General Services Division to establish a contract for the following:

Remove and replacement of the existing hydraulic cylinder on the single passenger elevator in Building 17, located at 2101 Washington Street East on the WV State Capitol Complex in Charleston, WV, 25305, including returning the elevator to an operable state per the terms and conditions and specifications as attached.

INVOICE TO		SHIP TO	
DEPARTMENT OF ADMIT		DEPARTMENT OF ADMINISTRATION GENERAL SERVICES DIVISION BLDG 17 - CON	TRACTORS
112 CALIFORNIA AVENU	E, 5TH FLOOR	2101 WASHINGTON ST	
CHARLESTON	WV25305	CHARLESTON WV 25305	
us		us	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Building 17 Elevator Hydraulic Jack Replacement Project				

Comm Code	Manufacturer	Specification	Model #	
72154010				
				1

Extended Description:

Base Bid, per the attached documentation

	,		
	Document Phase	Document Description	Page 3
GSD1900000004	Draft.	Addendum 1- Bldg. 17 Elevator Jack	of 3
		Replacement	

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

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 Numbers Received:

(Check the box next to each addendum received)

×	(i	Addendum No. I	[J	Addendum No. 6
1	Parameter 1	Addendum No. 2	[1	Addendum No. 7
[]	Addendum No. 3	[]	Addendum No. 8
ĺ]	Addendum No. 4	[]	Addendum No. 9
C. January	1	Addendum No. 5	Į]	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.

Authorized Signature

Date

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

SOLICITATION NUMBER: CRFQ GSD19000000004 Addendum Number: No.01

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

Applicable Addendum Category:

1		Modify bid opening date and time
[1	Modify specifications of product or service being sought
[1	Attachment of vendor questions and responses
ĺ	l	Attachment of pre-bid sign-in sheet
-	1	Correction of error
l	1	Other

Description of Modification to Solicitation:

Addendum issued to publish and distribute the attached documentation to the vendor community.

1. The purpose of this addendum is to extend the bid opening date to 10/09/2018 at 1:30 PM (EST)

No additional changes.

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 addends issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addends may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

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 Contractor's 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. If an apparent low bidder fails to submit a license number in accordance with this section, the Purchasing Division will promptly request by telephone and electronic mail that the low bidder and the second low bidder provide the license number within one business day of the request. Failure of the bidder to provide the license number within one business day of receiving the request shall result in disqualification of the bid. Vendors should include a contractor's license number in the space provided below.

Contractor's Name:	West	Lanner Elevanter LCC	
Contractor's License	No.: WV	049746	-

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a contract 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 an affidavit that the Vendor has a written plan for a drug-free workplace policy. If the affidavit is not submitted with the bid submission, the Purchasing Division shall promptly request by telephone and electronic mail that the low bidder and second low bidder provide the affidavit within one business day of the request. Failure to submit the affidavit within one business day of receiving the request shall result in disqualification of the bid. To comply with this law, Vendor should complete the enclosed drug-free workplace affidavit and submit the same with its bid. Failure to submit the signed and notarized drugfree workplace affidavit or a similar affidavit that fully complies with the requirements of the applicable code, within one business day of being requested to do so 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.

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name:	West Vugina Blovas	artic.
	ox if no subcontractors will per	rform more than \$25,000.00 of work to complete the
Subcontractor Name		License Number if Required by W. Va. Code § 21-11-1 et. seq.

Attach additional pages if necessary

Revised 06/08/2018

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.

Total to initial to this Ci
C Shares
(Name, Title)
-District Grant of the
(Printed Name and Title)
10 120x 57 Am. 100 20 A
(Address)
301-081-1383 / 3011-381-6666
(Phone Number) / (Fax Number)
- WY FRYOUTH GOOD
(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 unitaterally 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 I am authorized to bind the vendor in a contractual relationship; and that to the best of my registration.

(Company) Levater LCC
(Authorized Signature) (Representative Name, Title)
Printed Name and Title of Authorized Representative)
(Date) / S / 18
34-88/-1383 / 38 - 381-4449 (Phone Number) (Fax Number)

REQUEST FOR QUOTATION Building 17 Elevator Hydraulic Jack Replacement

12. MISCELLANEOUS:

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

Contract Manager: 18th Dock	
Telephone Number: 381 - 871 - B82	
Fax Number: 35 - 381 - 4444	
Email Address: VVelevator 6 gmil. car	_

REQUEST FOR QUOTATION Building 17 Elevator Hydraulic Jack Replacement

EXHIBIT A - Pricing Page

Base Bid (Commodity Line 1 in wvOasis): All inclusive, lump-sum bid to provide removal and replacement of Building 17 Elevator Hydraulic Jack

Lump Sum = \$ 30,880,00 (A)

REQUEST FOR QUOTATION Building 17 Elevator Hydraulic Jack Replacement

Contractor Acknowledgement:

i, the undersigned, have read, reviewed and acknowledge my understanding of the General Services Division safety requirements, as set forth in this handbook. I am also aware that all applicable rules and regulations are to be followed, regardless of whether they are specifically mentioned in this handbook.

Contractor Representative (Print Name):

Contractor Representative Signature:

This signed acknowledgement must be signed and returned to the GSD Safety Section prior to start of project work.

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, properly 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 provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tex 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 § 23-20-2, 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 banefit, 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 exception above.

WITNESS THE FOLLOWING SIGNATURE

My Commission Expires October 09, 2019

THE POLICY HIS SIGNATURE:
Vendor's Name: WEST VIRGINIA ELEVATOR LLC
Authorized Signature:
State of WEST VIRGINIA
County of Kanawaa , to-wit:
Taken, subscribed, and sworn to before me this That day of October 20 18
My Commission expires 10 9 2019
AFFIX SEAL HERE OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA PHIB W Young The UP3 Store #5077 Stoft MesCordle Ave SE



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

STATE OF WEST VIRGINIA,		
COUNTY OF ROADE TO-WIT:		
The state of the s		
I, CHPIS BRANCE1, after being first duly sworn, depose and state as follows:		
1. I am an employee of WWELEVATOR LLC; and.		
(Company Name)		
2. I do hereby attest that WV EUEVATOR LLC (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: CHRIS FORMER J BRADLEY		
Signature:		
Title: MEABER		
Company Name: WI FUEURIOR		
Date:		
Taken, subscribed and sworn to before me this 974 day of OUTOBER, 2018		
By Commission expires 10 9 2019		
(Seal) OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA PINIS W Young The UPS Store #5077 3501 MacCorkle Ave SE Cherisaton, W 2 25304 My Commission Expires October 09, 2019		

Rev. July 7, 2017

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.

instructions: 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.

Contract Identification:				
Contract Number: 050 19000000	4			
Contract Purpose: TACK REPLACEMEN	1			
Agency Requesting Work: 65 P				
Required Report Content: The attached report must include each of the items listed below. The vendor should check each box as an indication that the required information has been included in the attached report. Information indicating the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided; Name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;				
 Average number of employees in connection with the construction on the public improvement; Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and 				
Vendor Contact Information:				
Vendor Name: WV ELEVATOR Vendor Address: P.O. Box 57 Anna WV 2500 5	Vendor Telephone: 3481-1383 Vendor Fax: 301381 4444 Vendor E-Mail: WV QUEUTTON @ grut, com			

West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity:	Address:
Name of Authorized Agent: Contract Number: Governmental agency awarding contract:	Contract Description:
Li Greck here if this is a Supplemental Disclosure	
List the Names of Interested Parties to the contract which are is entity for each category below (attach additional pages if necessary). Subcontractors or other entities performing work or a Check here if none, otherwise list entity/individual name	arvice under the Contract
2. Any person or entity who owns 25% or more of contra	cting entity (not applicable to publicly traded entities) is below.
3. Any person or entity that facilitated, or negotiated the services related to the negotiation or drafting of the ap Check here if none, otherwise list entity/individual names	
Signature:	Date Signed: /o - 9 - /æ
State of WEST VIRGINIA County I. CHRISTOPHER TOHN BRADLEY entity listed above, being duly sworn, acknowledge that the Dispenalty of perjury.	
Taken, swom to and subscribed before me this	aday of OCTOPER , 2018
To be completed by State Agency: Date Received by State Agency: Date submitted to Ethics Commission: Governmental agency submitting Disclosure:	Notary Public's Signature OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA Philip W Young The UPS Shore #5077 3501 MacCorkle Ave SE Charleston, WY 25304 My Commission Expires October 09, 2019 Revised June 8, 2018

BID BOND

	KNOW ALL MEN BY THESE	PRESENTS, That we, th	ne undersigned, West Virginia Elevator, LLC
of		WV	
of		ОН	. 3 corporation promized and existing under the love of the China
OH	with its principal offi	ce in the City ofC	incinnati as Surety, are held and firmly bound unto the State
of West	andung' sa Oplidee' iu fije bet	hal sum of Five Percent	of Amount Bid /\$ 5% \ for the payment of which
well and	truly to be made, we jointly an	d severally bind ourselve	es, our heirs, administrators, executors, successors and assigns.
	The Condition of the above	obligation is such that v	whereas the Principal has submitted to the Purchasing Section of the
nebanni	ent of Administration a certain	bid or proposal, attached	hereto and made a part bereaf to enter into a contract in white s
DUNCHE	Tr Lievator nyoraulic Jac	ck Replacement Proje	ect - CRFQ 0211 GSD1900000004 - According to Plans &
Specific			
•	NOW THEREFORE,		
ì	(a) If said bid shall be rej	ecrapted and the Drivele	med wheel makes take a set of h
attached	hereto and shall furnish any o	ther bonds and insurance	pal shall enter into a contract in accordance with the bid or proposal in required by the bid or proposal, and shall in all other respects perform
full force :	and effect. It is expressly unr	terstood and agreed that	the lightith of the Sand void, otherwise this obligation shall remain in
event, exc	ceed the penal amount of this	obiligation as herein state	ed.
	The Surety, for the value received or affected by any extension.	ved, hereby stipulates an sion of the time within w	nd agrees that the obligations of said Surety and its bond shall be in no which the Obligee may accept such bid, and said Surety does hereby
٧	VITNESS, the following signat	ures and seals of Princio	pal and Surety, executed and sealed by a proper officer of Principal and
Surety, or	by Principal individually if Prin	cinal is an individual, this	
,		when to sur terminateless and	s 2nd day of October , 2018
Principal S	Seal		West Virginia Elevator, LLC
			(Name of Principal)
			By Control of the Con
			(Must be President, Vice President, or
			Duly Authorized Agent)
			Dustin Bozek Managing Member (Title)
			(4100)
Surety Sea			The Cincinnati Insurance Company
4			(Name of Surety)
÷ 2			the same
			By: Taluna A layo
			Patricia A. Moye, WV Resident Agent Attorney-in-Fast

IMPORTANT STIPLY Greening 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

Kimberly Wilkinson, Patricia Moye, Gregory Gordon,

Charleston, WV

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:

Fifty Million Dollars and 00/100 (\$50,000,000 00)

This appointment is raade 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 Adorneys-infact 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 scaled 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 May, 2012.

STATE OF OHIO COUNTY OF BUTLER

THE CINCINNATI INSURANCE COMPANY

Vice President

On this 10th day of May, 2012, 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. HÜLLER, Attorney at Law NOTARY PUBLIC - STATE OF OHIO My commission has no expiration date Section 147.63 O.R.C.

indersigned Segretary of Assistant Secretary of THE CINCINNATI INSURANCE COMPANY, hereby certify that the always sopy of the Original Power of Attorney issued by said Company, and do hereby further certify that the said Power of h full force and effect.

whand and seal of said Company at Fairfield, Ohio.

2 XX 8

BN-1003 (51/2)