# Exhibit A Pricing Page - Revised for Addendum 1

	DESCRIPTION	UNIT OF MEASURE	UNIT PRICE	ESTIMATED QTY	EXTENDED COST
001	Demolition and Removal of Single and Multiple Story Foundational Structures (Public, Private, Commercial) and Non-Foundational Structures (Trailers, Modulars, etc.)	Square Foot	4.18	195,000	
002	Removal of Personal Property Debris (Structures that have been previously demolished but not removed).	Cubic Yard	15.00	75	\$ 815,100.00
003	Removal of Municiple Waste and Woody and Vegetative Debris.	Cubic Yard	15.00	20	\$ 1,125,6
04	Filling in of Basements and Crawlspaces.	Cubic Yard	4.50	32500	
05	Draining, Removal, and Backfilling of Septic Tanks	Per Tank	650.00	65	\$ 146,250,0 \$ 42,250,0
06	Sealing, Filling In, and/or Capping Underground Wells	Per Well	600.00	65	\$ 39,000.0
07	Removal of External Propane or Fuel Oil Tanks	Per Tank	300.00	45	1,000.00
08	Inspection, Sampling, Testing, and Documentation of Asbestos Containing Materials of all Standing Structures.	Per Structure	572.00	65	\$ 19,500.0
09	Inspection, Sampling, Testing, and Documentation of Asbestos Containing Materials of Personal Property Debris (Structures that have been previously demolished).	Per Structure	165.00		\$ 111,540.00
10	Removal, Containment, and Transportation of Asbestos Containing Materials to an approved and properly licensed sanitary landfill. Line item includes Personal Property Debris.	Square-Foot	2.50		\$ 12,375.00
1	inspection, Sampling, Testing, and Documentation of Hazardous Materials.	Per Structure	287.00		101.3
2	Removal, Containment, and Transportation of Hazardous Materials to an approved and properly licensed sanitary landfill.	Per Structure	521.00		55,965.00



**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.

(Name, Title)
Michael L. McCallister, President/Owner
(Printed Name and Title)
1608 Virginia Ave. W., Huntington, WV 25704
(Address)
Office (681) 204-5366 Cell (304) 633-3776
(Phone Number) / (Fax Number)
mike@csiwv.net
(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contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated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.

Custom Services Industries (Company)
Minhael McCallista President
(Authorized Signature) (Representative Name, Title)
Michael L. McCallister, President/ Owner (Printed Name and Title of Authorized Representative)
A rame and Title of Authorized Representative)
August 7, 2018
(Date)
Office (681) 204-5366 Cell (304) 633- 3776
(Phone Number) (Fax Number)

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0307 DEV190000006

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 recei	ved)			
Addendum No. 1 Addendum No. 2 Addendum No. 3 Addendum No. 4 Addendum No. 5	☐ Addendum No. 6 ☐ Addendum No. 7 ☐ Addendum No. 8 ☐ Addendum No. 9 ☐ Addendum No. 10			
I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.				
Custom Services Industries Company				
Authorized Signature				
August 7, 2018 Date				
NOTE: This addendum acknowledgement sho	uild be submitted with the hid to expedite			

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

### 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:CRFO_0307_DEV190000006					
Contract Number: CREO 0307 DEV190000006					
CREO 0307 DEVISORO					
Contract Purpose:					
Agency Requesting Work:					
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 <b>West Virginia Code</b> 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;					
<ul> <li>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 (D) Random.</li> </ul>					
Vendor Contact Information:					
Vendor Name: Custom Services Industries Vendor Telephone: (681) 204-536					
Vendor Address:       1608 Virginia Avenue W.       Vendor Fax:       (681) 204-5366         Huntington, WV 25704       Vendor E-Mail: mike@csiwv.net					



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

STATE OF WEST VIRGINIA,					
COUNTY OF Cabell , TO-WIT:					
I, Michael L. McCalliste after being first duly sworn, depose and state as follows:					
<ol> <li>I am an employee of <u>Custom Services Industries</u>; and, (Company Name)</li> </ol>					
2. I do hereby attest that Custom Services Industries					
(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: Michael L. McCallister					
Signature: Michael mcC sliste					
Title: President / Owner					
Company Name: Custom Services Industries					
Date: August 7, 2018					
Taken, subscribed and sworn to before me this 1774 day of August , 2018					
By Commission expires /0/10/2020					
OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRONIA Lyrue B. Meadors RI 3 Rox 75 Meton, W2 2554 My Commission Expires October 10, 2020  (Notary Public)					
THIS AFFIDAVIT MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY					

BID SHALL RESULT IN DISQUALIFICATION OF THE BID.

WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE

# 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 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: (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:

Vendor's Name: Custom Services Indust	ries	
Authorized Signature: Michael McCall	ati	Date: August 7, 2018
State of		
County of <u>CABELL</u> , to-wit:		
Taken, subscribed, and swom to before me this 200 day	of August	, 20 <u>/&amp;</u> .
My Commission expires /0/10/2020	20,20	
AFFIX SEAL HERE  OFFICIAL SEAL NOTARY PUBLIC	NOTARY PUBLIC	Syme B. Headous

Purchasing Affidavit (Revised 01/19/2018)

### **BID BOND**

	KNOW ALL MEN BY T	HESE PRESENTS That we the	undersigned (	Creet American Insurance Co.	_
	of Huntington	West Virginia	u.,,	as Principal, and Great American Insurance Co.	_
	of Cincinnati	Ohio , a	corporation or	irganized and existing under the laws of the State of	_
Ohio		pal office in the City of Cincinnat	ti	, as Surety, are held and firmly bound unto the Stat	е
of West	Virginia, as Obligee, in	the penal sum of Five percent o	f bid	_, as Surety, are held and firmly bound unto the Stat (\$ 5% of bid) for the payment of which	۱,
well and	I truly to be made, we jo	intly and severally bind ourselves.	our heirs, adm	ninistrators, executors, successors and assigns.	
	The Condition of the	above obligation is such that wh	nereas the Prir	ncipal has submitted to the Purchasing Section of th	е
Departn	nent of Administration a	certain bid or proposal, attached	hereto and mad	de a part hereof, to enter into a contract in writing for	
CRFQ	0307 DEV19000000	06 - Demolition and Removal o	f Debris - Re	gion 2	
					_
_					-
	NOW THEREFORE				
	NOW THEREFORE,				
	(a) If said bid sha	all be rejected, or	al shall enter i	into a contract in accordance with the bid or propos	al
attache	d horato and shall furni	sh any other hands and insurance	required by th	ne bid or proposal, and shall in all other respects perior	111
the ear	romant created by the s	occentance of said hid, then this of	bligation shall t	be null and void, otherwise this obligation shall remain the Surety for any and all claims hereunder shall, in r	
event, e	e and effect. It is expre	essiy understood and agreed that it of this obligation as herein state	d.	the durity for any and an owner of	
				and the head shell be in the	
way im	The Surety, for the va	lue received, hereby stipulates an	d agrees that t hich the Oblig	the obligations of said Surety and its bond shall be in a gee may accept such bid, and said Surety does here	oy O
way iiii waive n	otice of any such extens	sion.	,,,e., e.ag	, , ,	
	MUTALEON Has fallensis	itur and earle of Dringin	al and Suraty	executed and sealed by a proper officer of Principal a	nd
0	WITNESS, the following	ng signatures and seals of Princip	aranu surety, 7th day of	August, 20_18	
Surety,	or by Principal Individua	ally if Principal is an individual, this	uay or		
Principa	al Seal			Custom Services Industries, LLC	
Timop	ai Ocai	3		· (Name of Principal)	A
	, \$			By Kichard Men Setral	<u> </u>
				(Must be President, Vice President, or Duly Authorized Agent)	
				Duly Authorized Agenty	
				Vice-tres,	_
				(1.1.5)	
Surety	Saal			Great American Insurance Company	
Guiety	ocar			(Name of Surety)	
				A A	
				Umanda Collies	
				Attorney-in-Fact	_

Amanda Colley

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.

**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

POWER OF ATTORNEY

No. 0 20932

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

THOMAS H. BOTTOMS, JR. CLARENCE C. MASSEY J. MICHAEL WELLMAN DAVID B. LUCAS **AMANDA COLLEY** 

Attest

Address HUNTINGTON, WEST VIRGINIA **HUNTINGTON, WEST VIRGINIA** ASHLAND, KENTUCKY ASHLAND, KENTUCKY HUNTINGTON, WEST VIRGINIA

Limit of Power ALL \$100,000,000

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

APRIL

day of GREAT AMERICAN INSURANCE COMPANY

Assistant Secretary

Divisional Senior Vice President

STATE OF OHIO, COUNTY OF HAMILTON - ss.

On this 16TH day of

**APRIL** 

DAVID C. KITCHIN (877-377-2405)

2018 , 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.



Notary Public, State of Ohio My Commission Expires 05-18-2020

Susan a Lohoust

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

7th

day of

August



Assistant Secretary