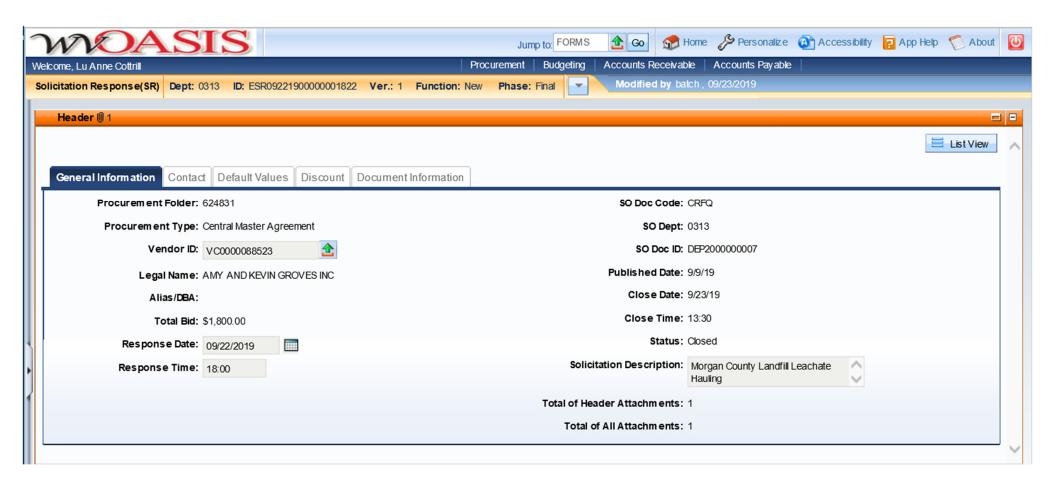
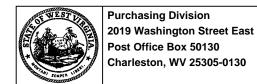


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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: 624831

Solicitation Description: Morgan County Landfill Leachate Hauling

Proc Type: Central Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version		
	2019-09-23 13:30:00	SR 0313 ESR0922190000001822	1		

VENDOR

VC0000088523

AMY AND KEVIN GROVES INC

Solicitation Number: CRFQ 0313 DEP2000000007

Total Bid: \$1,800.00 **Response Date:** 2019-09-22 **Response Time:** 18:00:30

Comments:

FOR INFORMATION CONTACT THE BUYER

Brittany E Ingraham (304) 558-2157 brittany.e.ingraham@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	Liquid waste collection or processing	100.00000	EA	\$18.000000	\$1,800.00
	or disposal				

Comm Code	Manufacturer	Specification	Model #	
76121502				

Extended Description:

To provide for the hauling and disposal of leachate from the Morgan County Landfill to the Warm Springs PDS in Berkeley Springs, WV; Price per 100 gallons.

Vendor should complete the Pricing Page by providing a unit price per 100 gallons hauled. Unit Price will then be multiplied by 100 to calculate the Total Price.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/22/2019

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 have ADDITIONAL INSURED provisions or be endorsed.

	SUBROGATION IS WAIVED, subject is certificate does not confer rights to				ch end	orsement(s)	•	require an endorsement	. Ast	:atement on
PRODUCER					CONTACT NAME:					
Smallwood Small Insurance 121 Administrative Drive, Suite 200				PHONE (A/C, No, Ext): 304-263-3361 FAX (A/C, No): (304)263-3412 E-MAIL ADDRESS:						
							URER(S) AFFOR	DING COVERAGE		NAIC#
Ma	tinsburg			VW 25404	INSURE	RA: ERIE IN	S PROPERT	Y CASUALTY CO		
INSL	RED				INSURE	RB:				
	Amy & Kevin Groves Inc				INSURE	RC:				
					INSURER D :					
	18 Drawing Arm Lane				INSURER E :					
	Martinsburg			VW 25403	INSURE	RF:				
				NUMBER:				REVISION NUMBER:		
II.	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT	REMEI	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN	Y CONTRACT	OR OTHER	DOCUMENT WITH RESPEC	OT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
	COMMERCIAL GENERAL LIABILITY								\$ 1000	0000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1000	0000
				Q367800022					\$ 5000)
Α						12/28/18	12/28/19	PERSONAL & ADV INJURY	\$ 1000000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2000000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2000	0000
	OTHER:								\$	
А	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$ 100C	0000
	ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY X SCHEDULED AUTOS			Q09-5130342	09/01/	09/01/19	09/01/20	BODILY INJURY (Per accident)	\$	
	HIRED NON-OWNED AUTOS ONLY							(Per accident)	\$	
									\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE S	\$	
	DED RETENTION \$	-							\$ \$	
	WORKERS COMPENSATION							PER OTH- STATUTE ER		
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE									\$	
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A						E.L. DISEASE - EA EMPLOYEE S	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
DEG	CONTION OF ODERATIONS // OCATIONS ///FING	FO (CODD	404 Additional Research Cabada		44ll :6		D		
	cription of operations / Locations / Vehicl chate Haul	LES (A	CORD	TOT, Additional Remarks Schedu	ile, may b	e attached ii mor	e space is requir	euj		
CERTIFICATE HOLDER CANCEL						ANCELLATION				
West Virginia Dept of Environmental Protection 601 57th St SE Charleston				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE						
				Amy L. Lewes						

Email: