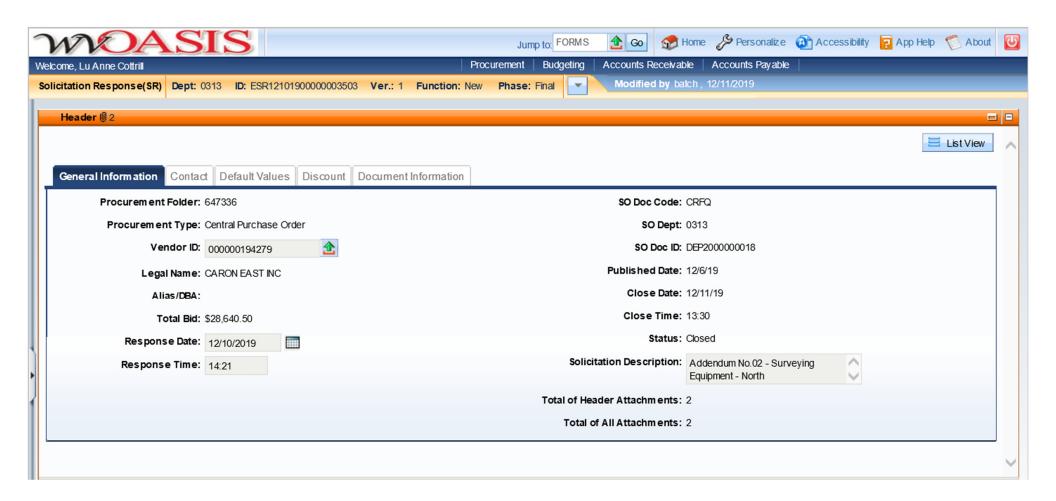
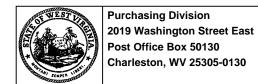


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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: 647336

Solicitation Description: Addendum No.02 - Surveying Equipment - North

Proc Type: Central Purchase Order

Date issued	Solicitation Closes	Solicitation Response	Version
	2019-12-11 13:30:00	SR 0313 ESR12101900000003503	1

VENDOR

000000194279

CARON EAST INC

Solicitation Number: CRFQ 0313 DEP2000000018

Total Bid: \$28,640.50 **Response Date:** 2019-12-10 **Response Time:** 14:21:25

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	GPS Base and Rover (Sokkia GRX3 or Equal)	1.00000	EA	\$24,148.000000	\$24,148.00

Comm Code	Manufacturer	Specification	Model #	
20121909				
Extended Description	: GPS Base and	Rover (Sokkia GRX3 or Equal)		
		. ,		

Comments: Please see detailed quote attached. Recommended OAF (Need QTY 2 for Dual Kit. OAF will perform Network RTK via Data Collector Internet.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Data Collector (Carlson Surveyor 2 or Equal)	1.00000	EA	\$4,492.500000	\$4,492.50

Comm Code	Manufacturer	Specification	Model #	
20121909				
Extended Descrip	tion: Data Collector (C	arlson Surveyor 2 or Equal)		

Page:

Quote



Caron East, Inc. 429 N. Mechanic Street Cumberland, MD 21502 (301) 724-4490

Order Number: 0033061 Order Date: 12/10/2019

Salesperson: 0006

Customer Number: 00-0001973

Sold To:

WV Dept Envir Protection Office of Special Reclamation 47 School St. Suite 301 Philippi, WV 26416 Confirm To:

Ship To:

WV Dept Envir Protection Office of Special Reclamation 47 School St. Suite 301 Philippi, WV 26416-9998

Telephone:

(304) 926-0499

Customer P.O.	Ship VIA		F.O.B.		Terms Net 30 Days		
Item Number	Unit	Ordered	Shi	pped	Back Order	Price	Amount
GNSS Dual Receive Includes: 2 - GRX 1 - Hard Carrying C Serial Data Cables, - OP Tribrach, 1 - To 100mm Spacer, 1 - 808016 Carbon Fib	3, 2 - Charging Systems case, 2 - OAF (Default - 1 - Alligator Clips to SAI ribrach Adapter w/ Remo SK-15 Wood/Fiberglass er 2M Rover Pole (2 Sec N 3/4x12ft/3.7m HI Tape	, 2 - USB Cables, GRX3), 2 - DB9 E Power Cable, 1 ovable Center, 1 - Tripod, 1 - stion), 1 -	Whse:	0.00	0.00	24,148.00	24,148.00
Tracking Channel te MHz Digital UHF Ra Network RTK and th GPS - L1 C/A, L1C, GLONASS - L1 C/A Galileo - E1/E5a/E5 BeiDou/BDS - B1, E IRNSS - L5 SBAS - WAAS, EGI L-band - TopNET G QZSS - L1 C/A, L1C	A, L1P, L2C/A, L2P, L3C 5b/Alt-BOC	Rate, 425-470 omms, RTK, ng: 1/L5) Services	Whse:	0.00	0.00	0.00	0.00
,	EACH IP68 512Mb/8Gb 1GHZ otal Stations) Software in		Whse:	0.00	0.00	4,492.50	4,492.50

Continued

Quote



Caron East, Inc. 429 N. Mechanic Street Cumberland, MD 21502 (301) 724-4490

Order Number: 0033061 Order Date: 12/10/2019

Salesperson: 0006

Customer Number: 00-0001973

Sold To:

WV Dept Envir Protection Office of Special Reclamation 47 School St. Suite 301 Philippi, WV 26416 Confirm To:

Ship To:

WV Dept Envir Protection Office of Special Reclamation 47 School St. Suite 301 Philippi, WV 26416-9998

Telephone:

(304) 926-0499

Customer P.O.	Ship VIA		F.O.B.		Terms Net 30 Days		
Item Number	Unit	Ordered	Sh	nipped	Back Order	Price	Amount
6506.002.000 SurvCE Robotics 6.xx	EACH (Requires SurvCE Ba	1.00 asic TS))	Whse:	0.00	0.00	0.00	0.00
6506.003.000 SurvCE GPS 6.xx (Red	EACH quires SurvCE Basic	1.00 TS)	Whse:	0.00	0.00	0.00	0.00
10-5274 SureGrip QR Cradle fo Seco pole clamp)	EACH r Surveyor2/Allegro2	1.00 (Fits SitePro or	Whse:	0.00	0.00	0.00	0.00
10-5215 Sure-Grip QR Pole Cla	EACH Imp Assy	1.00	Whse:	0.00	0.00	0.00	0.00

Net Order:	28,640.50
Less Discount:	0.00
Freight:	0.00
Sales Tax:	0.00
Ouden Tetali	20.040.50

Order Total: 28,640.50

CAROEAS

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/10/2019

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. 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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER CBIZ Insurance Svcs., Inc. 44 Baltimore Street	CONTACT Greg Smith PHONE (A/C, No, Ext): 301-784-2431 FAX (A/C, No): 855-288-6100			
Cumberland, MD 21502 301 777-1500 INSURED Caron East, Inc	E-MAIL ADDRESS: gregsmith@cbiz.com INSURER(S) AFFORDING COVERAGE			
	INSURER A: Ohio Security Insurance Co.	24082		
	INSURER B: Travelers Casualty Ins. Co. of America	19046		
P.O. Box 1378	INSURER C:			
Cumberland, MD 21502	INSURER D:			
Cambonana, IND 21002	INSURER E:			
	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. ADDL SUBR INSR WVD INSR LTR TYPE OF INSURANCE POLICY EFF POLICY EXP (MM/DD/YYYY) **POLICY NUMBER** LIMITS X COMMERCIAL GENERAL LIABILITY A BKS1856580699 04/01/2019 04/01/2020 EACH OCCURRENCE \$1,000,000 X OCCUR DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE \$1,000,000 MED EXP (Any one person) \$15,000

PERSONAL & ADV INJURY \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE \$2,000,000 PRO-JECT POLICY X LOC PRODUCTS - COMP/OP AGG \$2,000,000 OTHER: 04/01/2019 04/01/2020 COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY Δ BAS56580699 \$1,000,000 ANY AUTO BODILY INJURY (Per person) \$ SCHEDULED OWNED AUTOS ONLY BODILY INJURY (Per accident) \$ AUTOS NON-OWNED HIRED AUTOS ONLY PROPERTY DAMAGE X AUTOS ONLY \$ \$ UMBRELLA LIAB A OCCUR USO56580699 04/01/2019 04/01/2020 EACH OCCURRENCE \$5,000,000 **EXCESS LIAB** CLAIMS-MADE AGGREGATE \$5,000,000 DED X RETENTION \$10000 WORKERS COMPENSATION UB4K7232211942 04/01/2019 04/01/2020 X PER STATUTE AND EMPLOYERS' LIABILITY YIN ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT \$500,000 N N/A (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$500.000 If yes, describe under DESCRIPTION OF OPERATIONS below \$500,000 E.L. DISEASE - POLICY LIMIT

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CEDT	IEIC V	TE HO	DED
CLKI	ILICH	ILIO	LDER

West Virginia Environmental Protection

Office of Special Reclamation 47 School ST Suite 301 Philippi, WV 26416-9998

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.

AUTHORIZED REPRESENTATIVE

CBIZ Insurance Services, Inc.

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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: <u>(aron East, Inc</u>	
Authorized Signature:	Date: 12-10-19
State of Mary land	
County of Alegany, to-wit:	
Taken, subscribed, and sworn to before me this 10 day of	December, 2019.
My Commission expires	
AFFIX SEAL HERE NO	OTARY PUBLIC MAN MAKED

Purchasing Affidavit (Revised 01/19/2018)

Notary Public Allegany County, Maryland My Commission Expires January 18, 2021 **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.

Chris Robson, Salesman
(Name, Title)
Chris Robson, Salesman
(Printed Name and Title) / 429 N. Mechanic St. Cumberland MD 21502
(Address) 240-285-4050
(Phone Number) / (Fax Number)
Chris @ Caroneast.com
(email address)
CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration. Caron Cast Ticc (Company)
(Authorized Signature) (Representative Name, Title)
Michael Clites President
(Printed Name and Title of Authorized Representative)
12-10-19
(Date)
301-724-4490 / 301-724-6139
(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ DEP20*18

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)					36
[v	1	Addendum No. 1	[]	Addendum No. 6
[/]	Addendum No. 2	[]	Addendum No. 7
]]	Addendum No. 3	lessed.]	Addendum No. 8
]]	Addendum No. 4	[]	Addendum No. 9
[]	Addendum No. 5	[]	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.

Caron East, Inc.
Company
aner
Authorized Signature
12-10-19
Date

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

Revised 6/8/2012