

The following documentation is an electronicallysubmitted 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.

WOAS	IS			Jump to: FORMS	술 Go	Mome	& Personalize	Acces:	sibility 🛛	🛛 App Help	About	t 🙋
Welcome, Lu Anne Cottrill				Procurement Budgeting	Accounts Re	eceivable	Accounts Payable					
Solicitation Response(SR) Dept: (	0803 ID: ESR031020	0000000516	67 Ver.: 1 Function: N	lew Phase: Final	Modified	by batch , (	03/10/2020					
Header 🛛 4											c.	
										JU	List View	
General Information Contac	d Default Values	Discount	Document Information									
Procurem ent Folder:	676612				SO Doc (	Code: CRFC	2					
Procurem ent Type:	Central Purchase Ord	er			so	Dept: 0803						
Vendor ID:	000000192520	<b></b>			SOD	OC ID: DOT2	2000000120					
Legal Name:	TRI STATE ROOFING	& SHEET MET	TAL CO		Published	Date: 2/28/	20					
Alias/DBA:					Close	Date: 3/10/	20					
Total Bid:	\$72,950.00				Close	Time: 13:30	)					
Response Date:	03/10/2020				St	tatus: Close	ed					
Response Time:	9:20			Solici	tation Descri		DENDUM 1 ROOF LACEMENT- RANDOP	PLH CO.	$\hat{}$			
				Total of He	ader Attachm	ents: 4						
				Total o	of All Attachm	ents: 4						



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

#### State of West Virginia Solicitation Response

	Proc Folder: 676612 Solicitation Description: ADDENDUM 1 ROOF REPLACEMENT- RANDOPLH CO. HQ (08200358) Proc Type: Central Purchase Order					
Date issued	Solicitation Closes	Solicitation Response	Version			
	2020-03-10 13:30:00	SR 0803 ESR0310200000005167	1			

## VENDOR

000000192520

TRI STATE ROOFING & SHEET METAL CO

Solicitation Nu	mber:	CRFQ	0803	DOT2000000120			
Total Bid :	\$72,950	.00		Response Date:	2020-03-10	Response Time:	09:20:25

Comments:

FEIN #	DATE	
	FEIN #	

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	ROOF REPLACEMENT	1.00000	LS	\$72,950.000000	\$72,950.00
Comm Code	Manufacturer	Specification		Model #	
30151500					
Extended De	scription : REPLACEMENT OF SHI	NGLE ROOF WIT	H ETHYLEN	E PROPYLENE MC	NOMER ROOFING SYSTEM

**Comments:** Start date to be mutually agreed upon by owner and contractor following notice to proceed.



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: 676612

Doc Description: ADDENDUM 1 ROOF REPLACEMENT- RANDOPLH CO. HQ (08200358)

Date Issued	Solicitation Closes	Solicitation No	Version
2020-02-28	2020-03-10 13:30:00	CRFQ 0803 DOT2000000120	2

BID RECEIVING LOCATION			State Sta	
BID CLERK				
DEPARTMENT OF ADMINISTRATION				
PURCHASING DIVISION				
2019 WASHINGTON ST E				
CHARLESTON	WV	25305		
US				

#### VENDOR

Vendor Name, Address and Telephone Number: Tri-State Roofing & Sheet Metal Company 221 Plum Run Road Ridgeley WV 26753-7311 Telephone 304 738 0502

OR INFORMATION CONTACT THE BUYER Crystal G Hustead 304) 558-2402		
crystal.g.hustead@wv.gov		3
Signature X KN VHh	FEIN # 52 056 7811	DATE 03/10/2020

FORM ID : WV-PRC-CRFQ-001

#### ADDITIONAL INFORMATION:

THE STATE OF WEST VIRGINIA PURCHASING DIVISION FOR THE AGENCY, WEST VIRGINIA DIVISION OF HIGHWAYS, IS SOLICITING BIDS TO ESTABLISH A ONE-TIME CONTRACT FOR THE REPLACEMENT OF A SHINGLE ROOF WITH ETHYLENE PROPYLENE DIENE ROOFING SYSTEM AT WV DOH RANDOLPH COUNTY HEADQUARTERS PER THE ATTACHED DOCUMENTS.

\*\*\*QUESTIONS REGARDING THE SOLICITATION MUST BE SUBMITTED IN WRITING TO CRYSTAL.G.HUSTEAD@WV.GOV PRIOR TO THE QUESTION PERIOD DEADLINE CONTAINED IN THE INSTRUCTIONS TO VENDORS SUBMITTING BIDS\*\*\*

INVOICE TO		SHIP TO			
DIVISION OF HIGHWAY DISTRICT EIGHT - ALL I		DIVISION OF HIGHWA RANDOLPH COUNTY I			
PO BOX 1516		176 COUNTRY CLUB F	RD		
ELKINS	WV26241	ELKINS	WV 26241		
US		US			

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	ROOF REPLACEMENT	1.00000	LS	\$72,950.00	\$72,950.00

Comm Code	Manufacturer	Specification	Model #	
30151500	Versico	Adhered .060 EPDM		

#### **Extended Description :**

REPLACEMENT OF SHINGLE ROOF WITH ETHYLENE PROPYLENE MONOMER ROOFING SYSTEM

SCHEDULE OF EVENTS						
Line	Event	Event Date				
1	MANDATORY PRE-BID MEETING	2020-02-21				
2	VENDOR QUESTION DEADLINE	2020-02-28				

	Document Phase	<b>Document Description</b>	Page 3
DOT200000120	Final	ADDENDUM 1 ROOF REPLACEMENT-	of 3
		RANDOPLH CO. HQ (08200358)	

#### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

#### REQUEST FOR QUOTATION CRFQ DOT200000120 Roof Removal and Replacement (08200358)

#### EXHIBIT A-Pricing Page

To supply all labor and materials necessary to replace existing shingled roof with Ethylene Propylene Diene Monomer (EPDM) roofing system at WVDOH Randolph County Headquarters, 76 Country Club Road, Elkins WV 26241

VENDOR COMPANY NAME: Tri-State Roofing & Sheet Metal Company

VENDOR ADDRESS: _	221 Plum Run Road				
	Ridgeley WV 26753-7311				
TELEPHONE:	304 738 0502				
FAX NUMBER:	304 738 0505				
E-MAIL ADDRESS:	khanson@tri-stateservice.com				

#### **CONTRACT TOTAL BID AMOUNT:**

SEVENTY-TWO THOUSAND NINE HUNDRED FIFTY DOLLARS AND 00/100

tim

(\$ 72,950.00

) (Contract bid to be written in words and numbers.)

Failure to use this bid form may result in bid disqualification.

SIGNATURE:

DATE: 03/10/2020

NAME	

Kenneth E. Hanson

(Please Print)

TITLE:

Vice-President

Revised 06/08/18

#### REQUEST FOR QUOTATION CRFQ DOT200000120 Roof Removal and Replacement (08200358)

- 10.4.2. Final Inspection: Vendor shall participate in a final inspection with the Agency's project manager. The purpose of the final inspection will be to identify deficiencies that need to be remedied prior to Agency's final acceptance of the work. Vendor shall at all times be obligated to perform in accordance with the Contract and must take all actions necessary to ensure that work complies with requirements of Contract prior to final acceptance. Final acceptance does not waive or release Vendor from its obligation to ensure that work complies with the Contract requirements. Vendor shall submit any warranty documents to the Agency project manager at final inspection.
- 11. FACILITIES ACCESS: Performance of Contract Services may require access cards and/or keys to gain entrance to Agency's facilities. In the event that access cards and/or keys are required:
  - 11.1. Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
  - **11.2.** Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
  - 11.3. Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
  - **11.4.** Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
  - 11.5. Vendor shall inform all staff of Agency's security protocol and procedures.

#### **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: \_\_\_\_Ken Hanson, Tri-State Roofing & Sheet Metal Company

Telephone Number: 304 738 0502

Fax Number: 304 738 0505

Email Address: khanson@tri-stateservice.com
Revised 06/08/18

#### 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 Contractors 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: Tri-State Roofing & Sheet Metal Company Contractor's License No.: WV- 053077

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.

Revised 01/09/2020

#### Subcontractor List Submission (Construction Contracts Only)

Bidder's Name: Tri-State Roofing & Sheet Metal Company

X

Check this box if no subcontractors will perform more than \$25,000.00 of work to complete the project.

Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.
N/A	
	-

Attach additional pages if necessary

Revised 01/09/2020

**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) Kenneth E. Hanson, Vice-President (Printed Name and Title) 221 Plum Run Road, Ridgeley, WV 26753-7311 (Address) 304 738 0502 / 304 738 0505 (Phone Number) / (Fax Number) khanson@tri-stateservice.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.

Tri-State Roofing & Sheet Metal Company

(Company) KnAGAmm

(Authorized Signature) (Representative Name, Title)

Kenneth E. Hanson, Vice-President

(Printed Name and Title of Authorized Representative)

03/10/2020

(Date)

304 738 0502 / 304 738 0505

(Phone Number) (Fax Number)

Revised 01/09/2020

#### ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ DOT2000000120

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)

> 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.

Tri-State Roofing & Sheet Metal Company

Company

Authorized Signature

03/10/2020

Date

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

Int Etter



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

#### STATE OF WEST VIRGINIA,

Mineral , TO-WIT: COUNTY OF

I, <u>Kenneth E. Hanson</u>, after being first duly sworn, depose and state as follows:

- 1. (Company Name)
- I do hereby attest that \_\_\_\_\_\_ Tri-State Roofing & Sheet Metal Company 2. (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.

ignati	Ire: KAUT
itle:	Vice-President
	ny Name: Tri-State Roofing & Sheet Metal Company

Taken, subscribed and sworn to before me this 10th day of

By Commission expires \_\_\_\_04/05/2021

(Seal)



Heather Les adam (Notary Public)

Rev. July 7, 2017

## 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: Tri-State R	oofing & Sheet Metal C	Company	
Authorized Signature:	Kut CA	m	Date: 03/10/2020
State of			
County of	, to-wit:		9 ×
Taken, subscribed, and sworn	to before me this 10th d	ay ofMarch	<b>. 20</b> 20.
My Commission expires	April 5th	<b>20</b> <u>20</u> .	
AFFICIENCIAL HER OFFICIAL SEAL	CIANA	NOTARY PUBLIC _	Hather Les adam
STATE OF WEST VIR Heather Lee Adar Th-State Roofing & She 221 Plum Run Roo Ridgeley, W2 20753	ns t Metal d		Purchasing Affidavit (Revised 01/19/2018

Agency Division of Highways REQ.P.O# DOT2000000120

#### BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersig	ned, Tri - State Roofin	ig and Sheet Metal Company
of 221 Plum Run Road, Ridgeley WV 26753	, as Principal, and	Travelers Casualty and Surety
Company of of <u>119 Virginia Street W.</u> Charleston WV 25302 <sub>a corpora</sub>	tion organized and existi	ng under the laws of the State of
America with its principal office in the City of Hartford		eld and firmly bound unto the State
of West Virginia, as Obligee, in the penal sum of Five Percent	(\$ 5%	) for the payment of which,
well and truly to be made, we jointly and severally bind ourselves, our heir	s, administrators, executo	ors, successors and assigns.

The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for CRFQ\_DOT200000120, Roof replacement - Randolph County HQ

according to plans and specifications.

#### NOW THEREFORE.

(a) If said bid shall be rejected, or

(b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no way impaired or affected by any extension of the time within which the Obligee may accept such bid, and said Surety does hereby waive notice of any such extension.

IN WITNESS WHEREOF, Principal and Surety have hereunto set their hands and seals, and such of them as are corporations have caused their corporate seals to be affixed hereunto and these presents to be signed by their proper officers, this

10th day of March 20 20

Principal Corporate Seal

Tri - State Roofing and Sheet Metal Company

Name of Principal) Bv (Must be President or

Vice President)

(Title)

Travelers Casualty and Surety Company of America (Name of Surety)

Taylor R. Johnson Htorney-in-Fact

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance. Corporate seals must be affixed, and a power of attorney must be attached.

Surety Corporate Seal



#### **Travelers Casualty and Surety Company of America Travelers Casualty and Surety Company** St. Paul Fire and Marine Insurance Company

#### POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint TAYLOR R JOHNSON of Charleston

, their true and lawful Attorney-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, West Virginia conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 3rd day of February, 2017.



State of Connecticut

City of Hartford ss.

By:

Robert L. Raney, Senior Vice President

On this the 3rd day of February, 2017, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021



Marie C. Tetreault, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this 10th



Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880. Please refer to the above-named Attorney-in-Fact and the details of the bond to which the power is attached.

	4 <i>C</i>	CORD™	CERT	IFI	CA			Y INSU	JRANC	CE	•	/2019
C B R	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											
th	this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).								ent on			
JS	J Smith Lanier & Co Lexington PO Box 2030						CONTACT NAME:         Roxanne Cameron           PHONE (A/C, No, Ext):         800-796-3567         FAX (A/C, No):         859-254-8020           E-MAIL ADDRESS:         rcameron@jsmithlanier.com					
360 East Vine Street, Ste 200 Lexington, KY 40588					INSURER(S) AFFORDING COVERAGE NAIC #					NAIC #		
INSU	INSURED						INSURER A : Woothold insurance company 21112					
			ofing & Sheet	Meta	al Co	mpany	INSURE	RC:				
		of Maryland 221 Plum Ru					INSURE	RD:				
		Ridgeley, W					INSURE	RE:				
	/= >						INSURE	RF:				
_		AGES				NUMBER: RANCE LISTED BELOW HAY				REVISION NUMBER:		
IN CI E)	DICA ERTIF KCLU	TED. NOTWITHST	ANDING ANY RESUED OR MAY F	QUIR PERTA POL	EMEN AIN, T ICIES	T, TERM OR CONDITION O THE INSURANCE AFFORDEI LIMITS SHOWN MAY HAV	F ANY D BY T	CONTRACT O HE POLICIES N REDUCED	R OTHER DOO DESCRIBED F BY PAID CLAI	CUMENT WITH RESPEC HEREIN IS SUBJECT TC	т то ₩⊦	IICH THIS
INSR LTR		TYPE OF INSU		ADDL INSR	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIM	ITS	
Α	X	COMMERCIAL GENER	X OCCUR			CMM5942244		04/30/2019	04/30/2020	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,00 \$500,	0,000 ,000
	Χ	PD Ded:5,000								MED EXP (Any one person)	\$10,0	00
										PERSONAL & ADV INJURY	\$1,00	0,000
	GEN	J'L AGGREGATE LIMIT	APPLIES PER:						-	GENERAL AGGREGATE	· · ·	0,000
		POLICY JECT	LOC						-	PRODUCTS - COMP/OP AGO		0,000
		OTHER:									\$	
Α	<u> </u>	OMOBILE LIABILITY				CMM5942244		04/30/2019	04/30/2020	COMBINED SINGLE LIMIT (Ea accident)	Ψ,	0,000
	X		SCHEDULED						-	BODILY INJURY (Per person)		
	×	OWNED AUTOS ONLY HIBED	AUTOS NON-OWNED						-	BODILY INJURY (Per acciden PROPERTY DAMAGE		
	X	HIRED AUTOS ONLY X	AUTOS ONLY						-	(Per accident)	\$	
		Drive Oth Car									\$	
Α	X	UMBRELLA LIAB	X OCCUR			CMM5942244		04/30/2019	04/30/2020	EACH OCCURRENCE	,	0,000
			CLAIMS-MADE	-					-	AGGREGATE		0,000
	WOF	DED RETENTI								PER OT STATUTE ER	\$  -	
	AND	EMPLOYERS' LIABILI	TY V/N							E.L. EACH ACCIDENT	\$	
		PROPRIETOR/PARTNE ICER/MEMBER EXCLUE	DED?	N / A						E.L. DISEASE - EA EMPLOY		
	If yes	s, describe under CRIPTION OF OPERAT	IONS below							E.L. DISEASE - POLICY LIMI		
	DLO										Ψ	
DES	CRIPT	ION OF OPERATIONS	/ LOCATIONS / VEHIC	LES (	ACORE	0 101, Additional Remarks Sched	ule, may	be attached if mo	ore space is requi	ired)		
CEF	RTIF	ICATE HOLDER					CANC	ELLATION				
		For Informa	ation Purposes	Only	/		THE	EXPIRATION	N DATE THE	SCRIBED POLICIES BE ( REOF, NOTICE WILL		
							ACC	ORDANCE W	THE PO	LICY PROVISIONS.		
AUTHORIZED REPRESENTATIVE												

A Maria P
© 1988-2015 ACORD CORPORATION. All rights reserved.

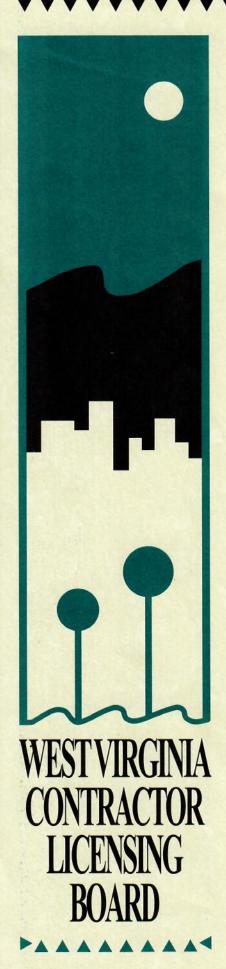


## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 11/21/2019

CI BI	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.									
lf	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 rights to the certificate holder in lieu of such endorsement(s).									
		the c	ertifi	cate holder in lieu of such	CONTAC					
-					NAME: PHONE	Jenniner		FAX	(00.4)	200,0000
	Intain State Insurance Agency				(A/C, No E-MAIL	, ⊑∧().	20-2000	FAX (A/C, No):	(304)	720-2002
-	6 Kanawha Blvd. E.				ADDRE	ss: <sup>jdrake@n</sup>	nountainstatein	surance.com		
	e 100									NAIC #
Charleston WV 25301-2949					INSURE	RA: BrickStre	eet Mutual Ins (	Co		12372
INSURED					INSURER B :					
Tri State Roofing & Sheet Metal Company of MD					INSURE	RC:				
221 Plum Run Road					INSURER D :					
					INSURER E :					
	Ridgeley			WV 26753	INSURE	RF:				
CO\	VERAGES CER	TIFIC	ATE I	NUMBER: 1920 Liab				REVISION NUMBER:		
IN CE EX	HIS IS TO CERTIFY THAT THE POLICIES OF I DICATED. NOTWITHSTANDING ANY REQUI ERTIFICATE MAY BE ISSUED OR MAY PERT/ KCLUSIONS AND CONDITIONS OF SUCH PC	REME AIN, TH	NT, TE HE INS S. LIM	ERM OR CONDITION OF ANY SURANCE AFFORDED BY THE	CONTR/ E POLICI	ACT OR OTHEF ES DESCRIBE ED BY PAID CI	R DOCUMENT \ D HEREIN IS S LAIMS.	WITH RESPECT TO WHICH T	THIS	
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	rs	
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
								MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	
									\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$	
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
	AUTOS UNLT AUTOS UNLT								\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$							AGGREGATE	φ e	
	WORKERS COMPENSATION							X PER STATUTE X OTH- ER	WV Co	ode 23-4-2
	AND EMPLOYERS' LIABILITY Y / N ANY PROPRIETOR/PARTNER/EXECUTIVE								<mark>\$</mark> 1,00	0.000
A	OFFICER/MEMBER EXCLUDED?	N/A		WCB1008473		08/21/2019	08/21/2020	E.L. EACH ACCIDENT	\$ 1,00	
	If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$ 1,00	
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ .,	-,
DESC	L CRIPTION OF OPERATIONS / LOCATIONS / VEHICLI	S (AC	ORD 1	01, Additional Remarks Schedule,	may be a	tached if more s	pace is required)	1	1	
CER					CANC	ELLATION				
	Verification of Insurance				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					DBEFORE
					AUTHO	RIZED REPRESEI	NTATIVE			
		Senjulich								

© 1988-2015 ACORD CORPORATION. All rights reserved.



# **CONTRACTOR LICENSE**

Authorized by the

## West Virginia Contractor Licensing Board

### Number:

WV053077

#### **Classification:**

HEATING, VENTILATING & COOLING ROOFING SIDING SHEET METAL

> TRI STATE ROOFING & SHEET METAL COM DBA TRI STATE ROOFING & SHEET METAL COM 221 PLUM RUN ROAD RIDGELEY, WV 26753

**Date Issued** 

**Expiration Date** 

DECEMBER 23, 2019

DECEMBER 23, 2020

Authorized Company Signature

Chair, West Virginia Contractor Licensing Board

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where work is being performed. This license number must appear in all advertisements, on all bid submissions and on all fully executed and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.