



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

State of West Virginia
Request for Quotation
19 - Highways

Proc Folder: 716802

Doc Description: ADDENDUM 1 VENTRAC OEM OR EQUAL PARTS (7020C017)

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2020-05-28	2020-06-04 13:30:00	CRFQ 0803 DOT2000000166	2

BID RECEIVING LOCATION:

BID CLERK
DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON WV 25305
US

VENDOR

Vendor Name, Address and Telephone Number:

BID RECEIVED LATE

BUYER Crystal Husted

WITNESS Linda Harper

DISQUALIFIED

RECEIVED
2020 JUN -4 PM 2:21
WV PURCHASING
DIVISION

FOR INFORMATION CONTACT THE BUYER

Crystal G Husted
(304) 558-2402
crystal.g.husted@wv.gov

Signature X B.L.B. FEIN # 25 1859017 DATE 6-4-20

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

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: DOT2000000166

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)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> 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.

Frey Tree Specialist & Landscaping DBA.
Sunset Outdoor Supply
Company

[Signature]
Authorized Signature

6-4-20
Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.
Revised 6/8/2012

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 exceeds 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: Frey Tree Specialist & Landscaping DBA Sunset Outdoor Supply

Authorized Signature: [Signature] Date: 6-4-20

State of WV

County of Monongalia, to-wit:

Taken, subscribed, and sworn to before me this 4 day of June, 2020

My Commission expires 1/12/21, 20

AFFIX SEAL HERE

NOTARY PUBLIC [Signature]

P004
 # 4/ 6
 JUN 4 2020 02:19pm
 ;3047772471

Received: 3047772471
 06-04-20; 02:10PM; Sunset Outdoor Supply

VENDOR: <i>Frey Tree Supplies</i>	CRFQ DOT200000166
VENTRAC OEM or Equal Parts - REVISED Pricing Page	

Discount Percentage** -15.00% (Please enter as a negative. Example discount of 5% should be -5.0%)
 Markup Percentage** 0.00%

Item No.	VENTRAC OEM Part number	"Or Equal" Parts	Estimated Unit Quantity	Unit (for calculation purposes)	Catalog Unit Price	Units Provided for Catalog Price	**Discount/Markup** Percentage	Adjusted Unit Price	Item Total Cost
1	Part No. 55.0023 Description: BEARING, BALL	Part No. Description:	4	EACH	\$ 8.10	1.00	-15.00%	\$ 6.89	\$27.54
2	Part No. 81B045 Description: DRIVE BELT	Part No. Description:	2	EACH	\$ 18.98	1.00	-15.00%	\$ 16.13	\$32.27
3	Part No. 91.0814-8 Description: BOLT 1/2X20X1	Part No. Description:	5	EACH	\$ 7.87	1.00	-15.00%	\$ 6.69	\$33.45
4	Part No. 79.0048 Description: BLADE	Part No. Description:	6	EACH	\$ 24.58	1.00	-15.00%	\$ 20.89	\$125.36
5	Part No. 83.H165-2 Description: BUSHING	Part No. Description:	2	EACH	\$ 13.64	1.00	-15.00%	\$ 11.59	\$23.19
6	Part No. 53.0141 Description: CASTER, WHEEL 6X2	Part No. Description:	2	EACH	\$ 31.65	1.00	-15.00%	\$ 26.90	\$53.81
7	Part No. 64.0688 Description: GUARD, SPINDLE	Part No. Description:	2	EACH	\$ 5.42	1.00	-15.00%	\$ 4.61	\$9.21
8	Part No. 83.BK50H Description: PULLEY, 5"	Part No. Description:	2	EACH	\$ 33.59	1.00	-15.00%	\$ 28.55	\$57.10

Item No.	VENTRAC OEM Part number	Part number	"Or Equal" Parts	Estimated Unit Quantity	Unit (for calculation purposes)	Catalog Unit Price	Units Provided for Catalog Price	**Discount/Markup** Percentage	Adjusted Unit Price	Item Total Cost
9	Part No. 87.0225 Description: SPINDLE, ASM RH	Part No. Description:		2	EACH	\$ 131.92	1.00	-15.00%	\$ 112.13	\$224.26
10	Part No. 41.0048 Description: SPRING, EXT	Part No. Description:		2	EACH	\$ 11.08	1.00	-15.00%	\$ 9.42	\$18.84
11	Part No. 50.0183 Description: YOKE CASTER	Part No. Description:		2	EACH	\$ 53.08	1.00	-15.00%	\$ 45.12	\$90.24
12	Part No. 21.0119 Description: FILTER HEAD	Part No. Description:		3	EACH	\$ 67.30	1.00	-15.00%	\$ 57.21	\$171.62
13	Part No. 23.0145 Description: STEERING CYLINDER	Part No. Description:		4	EACH	\$ 177.98	1.00	-15.00%	\$ 151.28	\$605.13
14	Part No. 21.0080 Description: HYDRAULIC PUMP	Part No. Description:		4	EACH	\$ 1,099.90	1.00	-15.00%	\$ 934.92	\$3,739.66
15	Part No. 47.0351 Description: LEVER PARK BRAKE	Part No. Description:		3	EACH	\$ 120.08	1.00	-15.00%	\$ 102.07	\$306.20
Total Bid Amount									\$5,517.87	

CONTRACT MANAGER: BRAD BURNS

TELEPHONE NUMBER: 304-777-2194

FAX NUMBER: 304-777-2471

E-MAIL ADDRESS: SUNSETOUTDOORSUPPLY@GMAIL.COM



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/04/2020

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 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).

PRODUCER United Security Agency, Inc. 486 Old Cheat Road Morgantown WV 26508		CONTACT NAME: Victoria Evans PHONE (A/C No. Ext): 304-848-2628 FAX (A/C No.): 304-842-7321 E-MAIL ADDRESS: vevans@unitedsecurityagency.com	
INSURED FREYTRE-01 Frey Tree Specialist and Landscaping, Inc dba Sunset Outdoor Supply 2184 Cheat Road Morgantown WV 26508		INSURER(S) AFFORDING COVERAGE INSURER A: Motorist Mutual Insurance Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 14621	

COVERAGES **CERTIFICATE NUMBER:** 1159137088 **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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		3328812540	2/28/2018	2/28/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		3328812540	2/28/2018	2/28/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	3328812540	2/28/2018	2/28/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER WV Broad Form EL E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

CERTIFICATE HOLDER

CANCELLATION

State of WV
 1900 Kanawha Blvd E, Bldg 5
 Charleston WV 25305

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

Victoria Evans