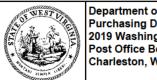


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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.





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

# State of West Virginia Solicitation Response

Proc Folder: 1036440

Solicitation Description: Tree Trimming & Removal
Proc Type: Central Purchase Order

 Solicitation Closes
 Solicitation Response
 Version

 2022-06-09 13:30
 SR 0403 ESR06072200000007714
 1

**VENDOR** 

000000113225

J & R LANDSCAPING & TREE EXPERTS INC

Solicitation Number: CRFQ 0403 DBS2200000010

**Total Bid:** 73120 **Response Date:** 2022-06-07 **Response Time:** 20:24:13

Comments:

FOR INFORMATION CONTACT THE BUYER

Joseph E Hager III (304) 558-2306 joseph.e.hageriii@wv.gov

Vendor Signature X

FEIN# DATE

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

Date Printed: Jun 9, 2022 Page: 1 FORM ID: WV-PRC-SR-001 2020/05

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Tree Trimming & Removal				73120.00

Comm Code	Manufacturer	Specification	Model #	
70111503				

# **Commodity Line Comments:**

# **Extended Description:**

Tree Trimming & Removal Base Bid (All-inclusive lump sum bid for all Contract Services)



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

### State of West Virginia Centralized Request for Quote Construction

Proc Folder:	1036440	Marie Control of the Marie	Reason for Modification:
Doc Description:	Tree Trimming & Remova		Addendum #1 issued to publish pre-bid sign in and agency responses to vendor questions.
Proc Type:	Central Purchase Order		
Date Issued	Solicitation Closes	Solicitation No	Version
2022-06-03	2022-06-09 13:30	CRFQ 0403 DBS2200000010	2

## **BID RECEIVING LOCATION**

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON WV 25305

US

### VENDOR

**Vendor Customer Code:** 

Vendor Name : J & R Landscaping and Tree Experts INC

Address: 375

Street: Timber Ridge Lane

City: Keyser

State: WV Country: USA Zip: 26726

Principal Contact : Jimmy E Lucas JR

Vendor Contact Phone: 304 813 7308 Extension:

FOR INFORMATION CONTACT THE BUYER

Joseph E Hager III (304) 558-2306

joseph.e.hageriii@wv.gov

Vendor Signature X FEIN#

abject to all terms and conditions contained in this solicitation

Date Printed: Jun 3, 2022

Page: 1

20-5083168

FORM ID: WV-PRC-CRFQ-002 2020/05

DATE

06/06/2022

### ADDITIONAL INFORMATION

The West Virginia Department Purchasing Division on behalf of the West Virginia Schools for the Deaf and The Blind (WVSDB), located at 301 East Main Street, Romney, WV 26757, to establish a contract for tree trimming and removal services per the attached specifications and terms and conditions.

INVOICE TO	SHIP	ГО	
DEPARTMENT OF EDUCATION	DEPAI EDUC	RTMENT OF ATION	
BLDG 6, RM 700		E OF SPECIAL ATION	
1900 KANAWHA BLVD E		(ANAWHA BLVD E, 6 RM 750	
CHARLESTON WV	CHAR	LESTON WV	
US	US		

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Tree Trimming & Removal	1	LS		\$73,120.00
1	free mining a removal		LS		

Comm Code	Manufacturer	Specification	Model #	
70111503				

# **Extended Description:**

Tree Trimming & Removal Base Bid (All-inclusive lump sum bid for all Contract Services)

## SCHEDULE OF EVENTS

SCHEDULE OF EVENTS			
Line	Event	Event Date	
1	Mandatory Pre-Bid 1:00 PM	2022-05-26	
0	Q&A Deadline @ 4:00 PM	2022-06-02	
2	Q&A Deadille @ 4.00 1 W		

	Document Phase	Document Description	Page 3
DBS2200000010	Final	Tree Trimming & Removal	

# ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

# Subcontractor List Submission (Construction Contracts Only)

project.			
Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.		
	With the code of the first step		

Attach additional pages if necessary

**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)

[Printed Name and Title)

[Printed Name and Title)

[Address)

[Address]

[Phone Number]

[Fax Number)

[Fax Number)

[Summy E Lucas JR-President

[Address]

[Phone Number]

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation/Contract 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/Contract for that product or service, 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.

By signing below, I further certify that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law; and that pursuant to W. Va. Code 5A-3-63, the entity entering into this contract is prohibited from engaging in a boycott against Israel.

J & R Landsacaping and Tree Experts INC	
(Company) - Jimmy E Lucas - President	
(Authorized Signature) (Representative Name, Title)	
(Printed Name and Title of Authorized Representative) (Date) 304 813 7308-304 788 3825	
(Phone Number) (Fax Number) Jandrexcavating6260@yahoo.com	
T 1411 - )	

(Email Address)

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0403 DBS2200000010

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	n 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 further understand that any verbal rediscussion held between Vendor's rep	e receipt of addenda may be cause for rejection of this bid. presentation made or assumed to be made during any oral resentatives and any state personnel is not binding. Only added to the specifications by an official addendum is
J & R Landscaping and Tree	e Experts INC
Company	
Authorized Signature	
Ø6/06/2022	
Date	

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

# REQUEST FOR QUOTATION TREE TRIMMING & REMOVAL

- 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: Jimmy E Wicas JR

Telephone Number: (304) 813 7308

Fax Number: (304) 788 5832

Email Address: jandr excavating loaloof yahoo.com

# REQUEST FOR QUOTATION TREE TRIMMING & REMOVAL

### EXHIBIT A - Pricing Page

West Virginia Schools for the Deaf and Blind, located at 301 East Main Street, Romney, WV 26757.

Tree Trimming and Removal Services

Name of Bidder.

J+R Landscaping and Tree Experts INC

The Bidder, being familiar with and understanding the Bidding Documents and also having examined the site and being familiar with all local conditions affecting the project hereby proposes to furnish all labor, material, equipment, supplies and transportation and to perform all Work in accordance with the Bidding Documents within the time set forth for the sum of:

Base Bid (All-inclusive lump sum bid for all Contract Services):

\$ 73,120,00 (Commodity Line 1)

(Show amount in both words and numbers)

Seventy three thousand one hundred twenty
(Show amount in both words and numbers) dollars and zero cents



# WEST VIRGINIA CONTRACTOR LICENSING BOARD

# CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV031662

Classification:

EXCAVATION LANDSCAPING ASPHALT DEMOLITION

> J & R LANDSCAPING TREE EXPERTS INC DBA J & R LANDSCAPING TREE EXPERTS INC 375 TIMBER RIDGE LANE KEYSER, WV 26726

Date Issued

**Expiration Date** 

JAMUARY 13, 2022

JANUARY 13, 2023

Authorized Company Signature

Chair, West Virginia Contractor Licensing Board

A copy of this license must be readily available for inspection by the Board on every job site where contracting 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 is non-transferrable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.



# STATE OF MARYLAND DEPARTMENT OF NATURAL RESOURCES FOREST SERVICE



# Certificate of Registration as a Licensed Tree Expert

This is to certify that

Jimmy Edward Lucas

# J & R LANDSCAPING & TREE EXPERTS, INC.

375 Timber Ridge Lane

Keyser, WV 26726

Miller World Helper and the training the berger more many

naving met the requirements in the Maryland Code is hereby Licensed and qualified to practice as a tree expect and to engage in the business of the treatment and care of trees in the state of Maryland.

Issued this \_\_\_\_\_\_ Twentieth \_\_\_\_\_\_ day of \_\_\_\_\_\_ January 2022

This license expires December 31, 2023 and is renewable yearly thereafter upon payment of the proper fee, or revoked by the Department for non-compliance with the terms of the Tree Expert Law.

Houston Sha.

Anne Hairston-Strang

Acting Director/State Forester

AC	ORI	D
	-	

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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 DEPRESENTATIVE OR PROCURED AND THE CERTIFICATE HOLDER.

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) 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).

statement on this certificate does not confer rights to the certificate ho	Ider in lieu of such endorsement(s).			
PRODUCER EE4007 CHANEY - BUSKIRK AGENCY INC	NAME: Kelly Courtney PHONE PHONE ANC. No. Eart: 304-721-4733  FAX. No.: 304-460-8556			
PO BOX 50	ADDRESS; kelly@chancybuskirk.com  POSURER(S) AFFORDING COVERAGE	MAIC #		
WILEY FORD, WV 26767		26263		
	BESURER A: Eric Insurance Company			
INSURED	DESURER B: Eric Insurance Property & Casualty Company	26271		
J & R Landscaping &	PRIMER C: Eric Insurance Exchange	20271		
Tree Experts Inc	INSURER D: Eric Insurance Company of New York	16233		
375 Timber Ridge Ln	ызынен E: Flagship City Insurance Company	35585		
Keyser, WV 26726	INSURER F:			

COVERAGES

CERTIFICATE NUMBER: N/A

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 INDICATED. NOTWITHSTANDING ANY PERTIAN, 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.

	CLUSIONS AND CONDITIONS OF SUCH	ADDL SUBR		POLICY EFF		LIMIT	3		
NSR	TYPE OF INSURANCE	INSO WYD	POLICY NUMBER	(MANUFOCK EAT)	The state of the s	EACH OCCURRENCE	\$	1,000,00	
	X COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence)	s	1,000,00	
	CLAMS-MADE X OCCUR		Q35 5500014			MED EXP (Any one person)	5	5,00	
				035 5500014 11/5	11/5/21	11/5/22	PERSONAL & ADV BUURY	5	1,000,00
В		X				GENERAL AGGREGATE	\$	2,000,00	
	GENTL AGGREGATE LIMIT APPLIES PER					PRODUCTS - COMPIOP AGG	5	2,000,00	
	X POLICY PRO- JECT LOC						3		
	OTHER			+		COMBINED SINGLE LIMIT (Fa accident)	\$	1,000,00	
	AUTOMOBILE LIABILITY					BODILY INJURY (Per person)	\$		
	X ANY AUTO		000 6770068	9/7/21	9/7/22	BODILY INJURY (Per accident)	3		
В	X OWNED ALITOS ONLY ALITOS NON-OWNED		Q09 5730068 9/7/21	277721		PROPERTY DAMAGE (Per accident)	3		
	X AUTO ONLY X AUTOS ONLY						\$		
	Garage					EACH OCCURRENCE	\$	5,000,00	
	X UMBRELLA LIAB X OCCUR		Q35 5570012	11/5/21	11/5/22	AGGREGATE	2	5,000,00	
B	EXCESS LIAB CLAIMS-MADE						\$		
	DED RETENTION \$	-+-				PER STATUTE ER			
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY Y / N					E.L. EACH ACCIDENT	3		
- 1		NIA				EL DISEASE - EA EMPLOYEE	5		
- 1	Disputatory in NPB					E.L. DISEASE - POLICY LIMIT	\$		
	f yes, describe under DESCRIPTION OF OPERATIONS below	-							
- 1									
	BPTION OF OPERATIONS / LOCATIONS / VEHICL		Additional Remarks Schoolule, III	ny be attached if mon	space is require	ed)			

State of West Virginia Dept of Administratin Purchasing Div. 2019 Washington St E 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.

Kelly Courtray

CANCELLATION

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ACORD 25 (2016/03)

CERTIFICATE HOLDER

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# CERTIFICATE OF LIABILITY INSURANCE

04/04/22

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(les) 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 CONTACT Bill Deadrick
PHONE E. (304)257-4616 this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). [AC, Ho]: (304)257-2069 MID-ATLANTIC GROUP ADDRESS billd@midatlanticgroup.com HAIC # PO Box 700 INSURER(S) AFFORDING COVERAGE Petersburg, WV 26847 INSURER A: Travelers INSURER B INSURED INSURER C J & R Landscaping and Tree Experts, Inc DESURER D J & R Tree Service OVSURER E 375 Timber Ridge Lane INSURER F WV 26726 Keyser, WV 26726 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD 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. REVISION NUMBER: COVERAGES POLICY NUMBER TYPE OF INSURANCE INSD WVD EACH OCCURRENCE DAMAGE TO RENTED PREMISES (EA OCCUPENCE) COMMERCIAL GENERAL LIABILITY CLAIMS-MADE MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE GENT, AGGREGATE LIMIT APPLIES PER PRODUCTS - COMPIOP AGG \$ JECT . POLICY COMBINED SINGLE LIMIT (Ea acodert) OTHER AUTOMOBILE LIABILITY BODILY INJURY (Per person) 5 ANY AUTO BODRY NULRY (Per accident) 5 SCHEDULED AUTOS NON-OWNED AUTOS ONLY OWNED AUTOS ONLY PHOPERTY DAMAGE 4 AUTOS ONLY 5 EACH OCCURRENCE 5 UMBRELLA LIAB OCCUR 5 AGGREGATE EXCESS LIAB CLAINS MADE DED RETENTIONS X STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 1,000,000 E.L. EACH ACCIDENT ANY PROPRIETGRIPARTHER EXECUTIVE OFFICERAMMER EXCLUDED? (Mandatury in NH) 10/08/21 10/08/22 1,000,000 6JUB-6R08783-6-21 EL DISEASE - EA EMPLOYEE S 1,000,000 EL DISEASE - POLICY LIMIT \$ If yes, describe under DESCRIPTION OF OPERATIONS bei DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space in required)

CERTIFICATE HOLDER

State of West Virginia Department of Administration **Purchasing Division** 2019 Washington St. East - 401 25205

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

Department of Administration
Agency Purchasing Division
REQ.P.O#\_CREQ 0403
DBS2200000010

### **BID BOND**

KNOW ALL MEN BY	THESE PRESENTS, That we, the u	indersigned, J & R Landscaping and Tree Experts, Inc.
of Keyser	West Virginia	
of Keene	, New Hampshire, a	corporation organized and existing under the laws of the State of
of West Virginia, as Obligee, in	1 470 10431741104114	of the Bid (\$ Total Amount of the Bid ) for the payment of which
vell and truly to be made, we	jointly and severally bind ourselves,	our heirs, administrators, executors, successors and assigns.
The Condition of the	above obligation is such that wherea	s the Principal has submitted to the Purchasing Section of the
Department of Administration	a certain bid or proposal, attached he	ereto and made a part hereof, to enter into a contract in writing for
West \	/irginia Schools for the Deaf and	The Blind - Tree Trimming & Removal
nereto and shall furnish any of agreement created by the accorde and effect. It is expresslexceed the penal amount of the Surety, for the valvay impaired or affected by arwaive notice of any such external IN WITNESS WHERI	pe rejected, or the accepted and the Principal shall end ther bonds and insurance required by the peptance of said bid, then this obligation of the liable o	Inter into a contract in accordance with the bid or proposal attached the bid or proposal, and shall in all other respects perform the ion shall be null and void, otherwise this obligation shall remain in fulbility of the Surety for any and all claims hereunder shall, in no even agrees that the obligations of said Surety and its bond shall be in no the Obligee may accept such bid, and said Surety does hereby the second of their hands and seals, and such of them as are corporation.
	eals to be affixed hereunto and these	e presents to be signed by their proper officers, this
9th_day ofJune	, 20 22	
Principal Corporate Seal	and Too GEAL WIND SEAL WIN	By (Must be President or Vice President)  PCES OF A
THE PARTY OF THE P	The state of the s	(Title) NGM Insurance Company
Surety Corporate Seather Co.	NO COL	(Name of Surety)
15	923	Stall
		John D. Weisbrot Attorney-in-Fact

IMPORTANT – Surety experiment from must be licensed in West Virginia to transact surety insurance. Raised corporate seals must be affixed, a power must be attached.



# POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That NGM Insurance Company, a Florida corporation having its principal office in the City of Jacksonville, State of Florida, pursuant to Article IV, Section 2 of the By-Laws of said Company, to wit:

"Article IV, Section 2. The board of directors, the president, any vice president, secretary, or the treasurer shall have the power and authority to appoint attorneys-in-fact and to authorize them to execute on behalf of the company and affix the scal of the company thereto, bonds, recognizances, contracts of indemnity or writings obligatory in the nature of a bond, recognizance or conditional undertaking and to remove any such attorneys-in-fact at any time and revoke the power and authority given to them.

does hereby make, constitute and appoint John D. Weisbrot, Nancy Nigro

its true and lawful Attorneys-in-fact, to make, execute, seal and deliver for and on its behalf, and as its act and deed, bonds, undertakings, recognizances, contracts of indemnity, or other writings obligatory in nature of a bond subject to the following limitation:

1. No one bond to exceed Five Million Dollars (\$5,000,000)

and to bind NGM Insurance Company thereby as fully and to the same extent as if such instruments were signed by the duly authorized officers of NGM Insurance Company; the acts of said Attorney are hereby ratified and confirmed.

This power of attorney is signed and sealed by facsimile under and by the authority of the following resolution adopted

facsimile to any power of attorney or special power of attorney or certification of either given for the execution of any bond, undertaking, recognizance 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 office 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

IN WITNESS WHEREOF, NGM Insurance Company has caused these presents to be signed by its Vice President, General Counsel and Secretary and its corporate seal to be hereto affixed this 7th day of January, 2020.

NGM INSURANCE COMPANY By:

Kimbuly K. Law Kimberly K. Law Vice President, General Counsel and Secretary

State of Florida,

On this 7th day of January, 2020, before the subscriber a Notary Public of State of Florida in and for the County of Duval duly commissioned and qualified, came Kimberly K. Law of NGM Insurance Company, to me personally known to be the officer described herein, and who executed the preceding instrument, and she acknowledged the execution of same, and being by me fully sworn, deposed and said that she is an officer of said Company, aforesaid: that the seal affixed to the preceding instrument is the corporate seal of said Company, and the said corporate seal and her signature as officer were duly affixed and subscribed to the said instrument

by the authority and direction of the said Company; that Article IV, Section 2 of the By-Laws of said Company is now in force. IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at Jacksonville, Florida this 7th days and affixed my official seal at Jacksonville, Florida this 7th days and affixed my official seal at Jacksonville, Florida this 7th days and affixed my official seal at Jacksonville, Florida this 7th days are sealed at Jacksonville

2020.

Lock Pente

I, Nancy Giordano-Ramos, Vice President of NGM Insurance Company, do hereby certify that the above and for going is correct copy of a Power of Attorney executed by said Company which is still in full force and effect. IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said Company at Jacksonville, Florida in PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS

2022 9th day of

> WARNING: Any unauthorized reproduction or alteration of this document is prohibited. TO CONFIRM VALIDITY of the attached bond please call 1-800-225-5646 TO SUBMIT A CLAIM: Send all correspondence to 55 West Street, Keene, NH 03431 Attn: Bond Claims.





certify that at the Annual Meeting of the Directors of the NGM Insurance Company duly called and held at Jacksonville, Florida on March 11th, 2021, the following officers were elected and remain in office:

CHRISTOPHER R. LISTAU	CHIEF EXECUTIVE OFFICER AND PRESIDENT
THERESA E. BREUNIG-SILBERNAGEL	
KIMBERLY K. LAW	VICE PRESIDENT, GENERAL COUNSEL & SECRETARY
JOESEPH D. FREITAS	
DAVID S. MEDVIDOFSKY	SENIOR VICE PRESIDENT, PRODUCT OPERATIONS
RUBERT T. HETZEL, SARAH C. BOURDEAU, PRI	JELFS, KEVIN A COMIER, NANCY L. GIORDANO-RAMOS, IYESH A. PATEL, STEVEN C. KILINGERMANN, JR, VICE PRESIDENTS

I further certify that the following statement of the Company is true as taken from the records of said Company as of December 31, 2020.

### **ADMITTED ASSETS**

Bonds at Amortized Values	\$ 135,493,927
Stocks at Market Value	162,994,249
First Mortgage Loans	
Real Estate	
Cash in Office and Banks	
Short Term Investments	
Agent's Balance (Less than 90 Days)	
Accrued Interest	578,933
Other Assets	277,701,627
TOTAL ADMITTED ASSETS	856,727,885

### LIABILITIES

Reserve for Losses	0
Reserve for Loss Adjustment Expenses	
Reserve for Unearned Premiums	0
Reserve for Other Underwriting Expenses	
Reserve for Taxes, Licenses, and Fees	5,383,121
Loss Drafts in Transit	0
Other Liabilities	
Total Liabilities	208,446,547
Policyholders' Surplus	648,281,338
TOTAL	\$ 856,727,885

Securities as deposited by law, included above = \$ 5,523,585

I further certify that the following is true and exact excerpt from Article IV, Section 2 of the By-Laws of NGM Insurance Company which is still valid and existing.

The board of directors, the president, any vice president, secretary, or the treasurer shall have the power and authority to appoint attorneys-in-fact and to authorize them to execute on behalf of the company and affix the seal of the company thereto, bonds, recognizances, contracts of indemnity or writings obligatory in the nature of a bond, recognizance or conditional undertaking and to remove any such attorneys-infact at any time and revoke the power and authority given to them."

Subscribed and sworn to before me on this 16 day of March, 2021

Notary Public State of Florida Lisa K Penton My Commission GG 928597 Expires 12/17/2023

Kimberly K. Law

Vice President, General Counsel & Secretary

IN WITNESS THEREOF I hereunto subscribe my name and affix the seal of said company this \_ [c\_ day of March\_2o2]

68-1191 (3/21)

# 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.

<u>Instructions:</u> 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 Identifi	cation:	
Contract Number	CRFQ 0403 DBS200000010	
	Tree Trimming & Removal	The manager are the figure and control to
	ing Work: West Virginia Department of	of Education
Required Report should check eac	t Content: The attached report must includ h box as an indication that the required info	e each of the items listed below. The vendor rmation has been included in the attached report.
	n indicating the education and training servings provided;	ice to the requirements of West Virginia Code §
☐ Name of t successor	he laboratory certified by the United States that performs the drug tests;	Department of Health and Human Services or its
☐ Average r	number of employees in connection with the	construction on the public improvement;
☐ Drug test negative t (D) Rando	ests: (A) Pre-employment and new hires; (	g the number of positive tests and the number of B) Reasonable suspicion; (C) Post-accident; and
Vendor Contact	Information:	
Vendor Name:	Jimmy E Lucas JR	Vendor Telephone: 304-813-7308
Vendor Address:	375 Timber Ridge Lane	Vendor Fax: 304-788-3825
	Keyser, WV 26726	Vendor E-Mail: Jandrexcavating6260@yahoo.com



# Professional Nursing Service, Inc. 709 Simmons Street Goldsboro, North Carolina 27530

Phone: (919) 735-0094

E-Mail pnssa@pnsi.biz

Month Day, Year

Name, Title

Company Name J+R Landscaphy + Tree Expert Company Address Pt 1 Box 112 F Somewhere, North Carolina 21111 Kyser, WY 26726

Re: Proposal For Substance Abuse / Employment Screening Services

Dear Whomever:

Professional Nursing Service, Inc., proposes to assume total responsibility for screening. chain of custody processing, laboratory analysis, medical review and provide reporting services for your company's substance abuse testing program.

The scope of this proposal will apply to all of your company locations throughout the country. Testing will be provided under the following circumstances:

- Pre-employment testing a.
- Random testing b.
- Reasonable suspicion testing C.
- Return to duty and follow up testing on a required basis, and d.
- Regulatory commercial drivers license requirements (DOT testing and program management.)

A detailed proposal is provided as an attachment to this letter.

Sincerely yours,

Derek Walls

Territory Manager

F: wpdocs subabuse newprop Effective 03-10-04 Revised 03/01/07



# Professional Nursing Service, Inc.

709 Simmons Street Goldsboro, NC 27530 Phone:(919)735-0094 E-Mail:pnssa@pnsi.biz

> "Absolute Assurance" for your Workplace Substance Abuse Needs

### Agreement

Professional Nursing Service, Inc. agrees to prove testing and related services to 5+& Landseaping	ride sub	stance a	buse
(Company Name) hereafter referred to as the C	ompany,	and as	the
Company has requested such services on thi of AUGUST , 2000	s the		day

The Company agrees to pay for the substance abuse testing and related services set out in the proposal; PNSI shall promptly bill the Company for the sums due and the sums shall be due upon receipt of the invoice. All unpaid balances, after 30 days, shall accrue interest at a rate of 1.5% per month.

The Company agrees to notify PNSI sites, if utilized, for appointment times.

The Company agrees to adhere to the HIPAA, State and Federal regulations pertaining to their Substance Abuse Program needs. If the Company becomes noncompliant, the Company will be removed from our program and that will terminate this agreement.

PNSI will e-mail all results to your designated employer representative. The Company will need to provide the name, code name, and e-mail address to which results are to be sent. The Company shall assign an alternate in case of absence or illness.

The Company shall notify PNSI if it has not received communication in a timely manner, as PNSI will not be able to determine if such has been received. This is due to the fact that technology has not yet been provided that would allow for acknowledgment. For example, if the company was expecting test results within three days and none had been received, the company representative would contact PNSI and PNSI would investigate. PNSI could determine from the program history data that the results were or were not E-mailed from

If any person or agent signs this Agreement on behalf of the Company, said person or agent certifies that they have authority to enter into this Agreement for and on behalf of the Company and to make the Company financially responsible for the sums due hereunder.

Physical address:	Mailing Address:
8+1 Box 1125 Kyse, w 26726	Same
Primary e-mail address for reporting of results	Secondary e-mail address for reporting of results
Primary e-mail address for billing	Secondary e-mail address for billing
Primary contact & Code word for reporting of results	Secondary contact & Code word for reporting of results
1/2	8-17-10
Signature of Authorized Company Agent	Date
Dunk Walle	8-17-10
Signature of Authorized Agent of PNSI	Date

Please return all pages of the signed Agreement

F:wpdocs\subabuse\agree Effective 01/10/04 Revised 07/20/09

### 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:  J & R Landscaping and Tree	Experts Inc
Vendor's Name:	06/06/2022
Authorized Signature:	Date:
State of	
County of to-wit:	June
Taken, subscribed, and sworn to before me this day	y of, 20_22.
My Commission expires NOV 17	2025
AFFIX SEAL HERE OFFICIAL SEAL	NOTARY PUBLIC ALLIN UK. DX
Notary Public, State of West Virginia SHAUNA R. COOK	Purchasing Affidavit (Revised 01/19/2018)

375 Timber Ridge Lane Keyser, WV 26726 mmission Expires Nov. 1



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

ı, <u>Jir</u>	nmy E Lucas JR, after being first duly sworn, depose and state as follows:
1.	I am an employee of J & R Landscaping and Tree Experts INC; and,
2.	I do hereby attest that J & R Landscaping and Tree Experts Inc (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 al	bove statements are sworn to under the penalty of perjury.
	Printed Name: Jimmy E Lucas JR  Signature: Title: President  Company Name: J & R Landscaping and Tree Experts INC  Date: 06/06/2022
STATE	OF WEST VIRGINIA,
COUN	TY OF Mineral , TO-WIT:
	, subscribed and sworn to before me this <u>06</u> day of <u>June</u> , <u>2022</u>
By Co	OFFICIAL SEAL Notary Public, State of West Virginia SHAUNA R. COOK 375 Timber Ridge Lane Keyser, W. V. 66726 My Commission Expires Nov. 17, 2025