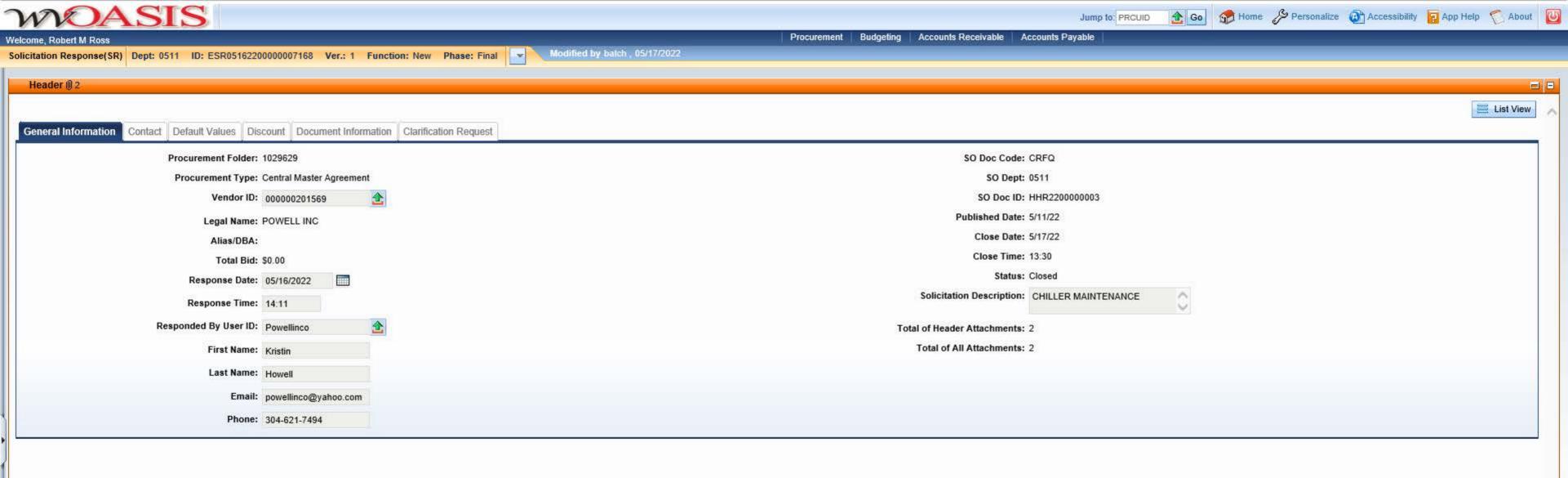
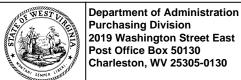


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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

SEMPER LIBERTY	

Solicitation Description: CHILLER MAINTENANCE
Proc Type: Central Master Agreement

1029629

 Solicitation Closes
 Solicitation Response
 Version

 2022-05-17 13:30
 SR 0511 ESR05162200000007168
 1

VENDOR

000000201569 POWELL INC

**Proc Folder:** 

Solicitation Number: CRFQ 0511 HHR2200000003

Total Bid: 0 Response Date: 2022-05-16 Response Time: 14:11:47

Comments:

#### FOR INFORMATION CONTACT THE BUYER

Crystal G Hustead (304) 558-2402 crystal.g.hustead@wv.gov

Vendor Signature X FEIN#

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

Date Printed: May 17, 2022 Page: 1 FORM ID: WV-PRC-SR-001 2020/05

DATE

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Preventative Maintenance	0.00000	HOUR	37498.000000	0.00

Comm Code	Manufacturer	Specification	Model #	
72151003				

#### **Commodity Line Comments:**

#### **Extended Description:**

Pricing to be included on Exhibit D

Date Printed: May 17, 2022 Page: 2 FORM ID: WV-PRC-SR-001 2020/05



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	Fol	der-	
100	1 0	uei.	

1029629

Doc Description: CHILLER MAINTENANCE

Reason for Modification:

**Proc Type:** 

Central Master Agreement

13:30

Date Issued 2022-04-25 2022-05-17

**Solicitation Closes** 

Solicitation No CRFQ 0511

HHR2200000003

Version

**BID RECEIVING LOCATION** 

**BID CLERK** 

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

**VENDOR** 

Vendor Customer Code: 000000 201569

Vendor Name : POWCII Inc.

Address: 170 Strington Rd

Street:

city: Belington

State: WV

Country: USA

Zip: 26250

Principal Contact : COCI Allen

Vendor Contact Phone: 304 -838-8123

Extension:

FOR INFORMATION CONTACT THE BUYER

Crystal G Hustead (304) 558-2402

crystal.g.hustead@wv.gov

Vendor

Signature & Cal

FEIN#55-0490737

DATE 5/16/23

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

Date Printed: Apr 25, 2022

Page: 1

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



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:	1029629		Reason for Modification:
Doc Description	on: CHILLER MAINTENANG Central Master Agreeme		ADDENDUM 1 PROVIDE ANSWERS TO VENDOR QUESTIONS AND PUBLISH PRE-BID SIGN-IN SHEETS
Date Issued	Solicitation Closes	Solicitation No	Version
2022-05-11	2022-05-17 13:30	CRFQ 0511 HHR2200000003	2

**BID RECEIVING LOCATION** 

**BID CLERK** 

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

VENDOR

Vendor Customer Code: 0000000A01569

Vendor Name: Powell Inc.

Address: 170 Stringtown Rd

Street: ?

City: Belington

State: WV

Country: USA

Zip: 20250

Principal Contact : Carl Allen

Vendor Contact Phone: 304.838-8123

Extension:

FOR INFORMATION CONTACT THE BUYER

Crystal G Hustead (304) 558-2402

crystal.g.hustead@wv.gov

Vendor

Signature X

FEIN# 55.0490737

DATE 5/16/00

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

Date Printed: May 11, 2022

Page: 1

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

## SOLICITATION NUMBER: CRFQ HHR2200000003 Addendum Number: 1

The purpose of this addendum is to modify the solicitation identified as CRFQ HHR2200000003 ("Solicitation") to reflect the change(s) identified and described below.

A	aa	lica	ble	Add	endum	Category:

[]	Modify bid opening date and time
[]	Modify specifications of product or service being sought
[x]	Attachment of vendor questions and responses
[x]	Attachment of pre-bid sign-in sheet
[]	Correction of error
[]	Other

Description of Modification to Solicitation: To answer Vendor questions.

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith and is specifically incorporated herein by reference.

#### Terms and Conditions:

- 1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
- 2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: HHR2200000003

**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	e bo	x next to each addendum rece	ivec	d)	
	[1/]		Addendum No. 1	[	]	Addendum No. 6
	[	]	Addendum No. 2	[	]	Addendum No. 7
	[	]	Addendum No. 3	[	]	Addendum No. 8
	[	]	Addendum No. 4	[	]	Addendum No. 9
	[	]	Addendum No. 5	[	]	Addendum No. 10
further discuss	unc ion	iersi hele	tand that any verbal representa d between Vendor's representa	ation ativ	n ma es a peci	denda may be cause for rejection of this bid. I ade or assumed to be made during any oral and any state personnel is not binding. Only the fications by an official addendum is binding.
						Company
					a	218elle

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

5/16/33

Authorized Signature

Date



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/26/2022

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.

PRO	f SUBROGATION IS WAIVED, subje his certificate does not confer rights t DDUCER	ct to the o the cert	ificate holder in lieu of such e	endorsement(s VTACT Suzann	).		t. As	tatement on
332	hur Krenzel Lett Insurance Group 77 Winfield Rd.			;, No, Ext):	Control of the contro	FAX (A/C, No):		
Wir	nfield, WV 25213		ADI	AIL DRESS: <b>smetz@</b>	aklinsuran	ce.com		
						RDING COVERAGE		NAIC#
				URER A : Erie In:				26830
INS	URED		INS	URER B : ENCOV	A/Brickstree	t Mutual Insurance Comp	any	12372
	Powell, Inc. PO Box 306		INS	URER C :				
	Barboursville, WV 25504		INS	URER D :				
	•			URER E :				
	V/504050			URER F:				
			NUMBER:			REVISION NUMBER:		
INSR	THIS IS TO CERTIFY THAT THE POLICIENDICATED. NOTWITHSTANDING ANY REPORT OF MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	EQUIREMI PERTAIN, POLICIES.	ENT, TERM OR CONDITION OF THE INSURANCE AFFORDED LIMITS SHOWN MAY HAVE BEE	F ANY CONTRA BY THE POLIC N REDUCED BY	CT OR OTHE CIES DESCRIE PAID CLAIMS	R DOCUMENT WITH RESPE BED HEREIN IS SUBJECT TO 3.	CT TC	MUICH THIC
A		ADDL SUBR	POLICY NUMBER	(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	3	4 000 000
-	CLAIMS-MADE X OCCUR		043 5450409	7/4/0004	7/4/0000	EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000
	OCCUR NO COUR		Q43-5150108	7/1/2021	7/1/2022		\$	1,000,000 5,000
							\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						\$	2,000,000
	X POLICY PRO- LOC						\$	2,000,000
	OTHER:						\$	2,000,000
Α	AUTOMOBILE LIABILITY			7/1/2021	7/1/2022	COMBINED SINGLE LIMIT	\$	1,000,000
	X ANY AUTO		Q07-5140025				\$	
	OWNED SCHEDULED AUTOS ONLY			11112021		BODILY INJURY (Per person)  BODILY INJURY (Per accident)	\$	Tra
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY					PROPERTY DAMAGE	\$ \$	
	AS TOO SHE!						\$	
Α	X UMBRELLA LIAB X OCCUR						\$	4,000,000
	EXCESS LIAB CLAIMS-MADE		Q31-5170019	7/1/2021	7/1/2022		s	4,000,000
	DED RETENTION \$						s	
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X PER OTH-	*********	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A	WCB1008659	12/3/2021	12/3/2022	E.L. EACH ACCIDENT	s	1,000,000
	(Mandatory in NH)  If yes, describe under					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	DESCRIPTION OF OPERATIONS below		- Anna Avena			E.L. DISEASE - POLICY LIMIT	\$	1,000,000
1010								
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI of of coverage.	ES (ACORD	101, Additional Remarks Schedule, ma	y be attached if mo	re space is requi	red)		
100	or or coverage.							
						A	messaya -	
CE	RTIFICATE HOLDER		CA	NCELLATION				
	Health and Human Resource One Davis Surve 2504	s Office o	4 I TI	HE EXPIRATION	N DATE TH	ESCRIBED POLICIES BE CA IEREOF, NOTICE WILL B CY PROVISIONS.	NCEL E DE	LED BEFORE LIVERED IN
	Charleston, WV 25301		AUT	HORIZED REPRESE	NTATIVE			
			0	·				
			A	Suzanne M	ieta			



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

I, <u>C</u>	ari Allen	, after being first duly sworn, depose and state	e as follows:
1.	I am an employee of	Powell Inc ; and, (Company Name)	
2.	I do hereby attest that _	Powell Inc (Company Name)	
		for a drug-free workplace policy and that such with <b>West Virginia Code</b> §21-1D.	plan and
The a	bove statements are swor	n to under the penalty of perjury.	
		Printed Name: Carl Allen	
		Signature: Lal Selle	
		Title: Head of operations	
		Company Name: Povell Inc	
		Date: 5/16/29	
STAT	E OF WEST VIRGINIA,		
COUN	ITY OF Barbour	, TO-WIT:	
Taker	n, subscribed and sworn to	before me this 10th day of May	_ <i>6606</i>
Ву Со	ommission expires June	3,2024	
(Seal	)	(Notary Public)	
	OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC KRISTIN HOWELL 170 Stringtown Road Belington WV 26250 My Commission Expires:06/03/26	(Hotally Fublic)	Rev. July 7, 2017

Rev. July 7, 2017

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

Bidder's Name: Powell Inc.	
Check this box if no subcontractors will perform project.	rm more than \$25,000.00 of work to complete the
Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.
l l	

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) Cal Sella Heart of operations
(Printed Name and Title) Carl Allen Head of Operations
(Address) 170 Stringtown Rd Belington W 2020
(Phone Number) / (Fax Number) <u>304-601-7494</u>
(email address) Powell inco eyahas com
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.
Powell Inc
(Company) Cal Sella Hand of Operations
(Authorized Signature) (Representative Name, Title)  COLUMN Head of Operations 5/14/2022
(Printed Name and Title of Authorized Representative) (Date) 304・104・7494
(Phone Number) (Fax Number)
Powellineo Quahas.com
(Èmail Address)

#### REQUEST FOR QUOTATION CRFQ HHR2200000003 Chiller Maintenance

#### **EXHIBIT D - PRICING PAGES**

Preventive Maintenance:

Monthly Charge	x	12 months	=	Total Yearly Charge
\$ 404.∞	x	12	=	\$ 484800
Corrective Maintenance:				
Hourly Labor Rate	x	Estimated Hours	=	Total Labor Cost
\$ 0/0.00	x	200	=	\$ 18'000'00
Estimated Parts Cost	x	Multiplier	=	Total Parts Cost
\$10,000.00	x	1.35	=	\$ 13,5000
Freeze Protection:				
Hourly Labor Rate	x	Estimated Hours	==	Total Labor Cost
\$_9O	x	10	=	\$ 900,00
Estimated Parts Cost	x	Multiplier	=	Total Parts Cost
\$1,000.00	x	1.05	=	\$ 1,250.00
		Total Cost *		\$ 37,49B. <sup>CO</sup>

<sup>\*</sup> Total Cost is calculated by adding the Total Yearly Cost, Total Labor Cost, and the Total Parts Cost.

#### THE AMERICAN INSTITUTE OF ARCHITECTS



AIA Document A310

## **Bid Bond**

(NOW ALL MEN BY THESE PRESENTS	, that we	Powell, Inc	
6882 Merritts Cree	ek Road, Huntington,	WV 25702	
(Here insert full ran	me and address or legal title of Con	tractor)	-
s Principal, hereinafter called the Principal, and _	RLI Insurance Co	ompany	
10 100	dbergh Dr. Peoria, IL 6 967 Peoria, IL 61612-	rt full name and address or legal title of Su	rety)
corporation duly organized under the laws of the	State of	Illinois	
s Surety, hereinafter called the Surety, are held a			
Health la	and Human Resource	S wner)	
		n, WV 25301	
One Davis oquare, 1	rtoom 110, Chancoto	11, *** 20001	
as Obligee, hereinafter called the Obligee, in the s	um of		
	housand and No/100		
Dollars ( <u>50,000</u> ), for the payment of said Surety, bind ourselves, our heirs, executors	i which sum well and , administrators, suc	truly to be made, the said cessors and assigns, joi	d Principal and the ntly and severally,
irmly by these presents.			
AU IEDEA C. the Drive in all has submitted a hid for		act for Chiller Maintenand	ce
WHEREAS, the Principal has submitted a bid for _	(Here insert	full name and address and description of	project)
at One Davis Square, Charleston, WV 26250		A	
•			
NOW, THEREFORE, if the Obligee shall accept Contract with the Obligee in accordance with the specified in the bidding or Contract Documents with Contract and for the prompt payment of labor and the failure of the Principal to enter such Contract Obligee the difference not to exceed the penalty I amount for which the Obligee may in good faith of	e terms of such bid, ith good and sufficier material furnished in the and give such bone hereof between the a contact with another	and give such bond or it surety for the faithful pe in the prosecution thereof d or bonds, if the Princip imount specified in said b	bonds as may be rformance of such , or in the event of
bid, then this obligation shall be null and void; other	erwise to remain in fu	ll force and effect.	id and such larger
bid, then this obligation shall be null and void; othe	erwise to remain in fu	ll force and effect.	id and such larger
bid, then this obligation shall be null and void; other	erwise to remain in fu	II force and effect.  —.  Powell, Inc	id and such larger
bid, then this obligation shall be null and void; othe	erwise to remain in fu	II force and effect.	id and such larger
bid, then this obligation shall be null and void; othe	erwise to remain in fu	II force and effect.  —.  Powell, Inc	id and such larger
bid, then this obligation shall be null and void; othe	erwise to remain in fu	II force and effect.  —.  Powell, Inc	id and such larger
bid, then this obligation shall be null and void; othe	erwise to remain in fu  y , 2022  Carl Allen	Powell, Inc (Principal)	id and such larger k covered by said  (Seal)
bid, then this obligation shall be null and void; othe	erwise to remain in fu $y$ , 2022 $-\left\{ \begin{array}{c} 2022 \\ 2023 \end{array} \right.$	Powell, Inc (Principal)	id and such larger k covered by said  (Seal)
bid, then this obligation shall be null and void; othe	erwise to remain in fu  y , 2022  Carl Allen	Powell, Inc (Principal)	id and such larger k covered by said  (Seal)

INSTITUTE OF ARCHITECTS, 1735 N.Y. AVE., N.W., WASHINGTON, D.C. 20006

### **POWER OF ATTORNEY**

#### RLI Insurance Company Contractors Bonding and Insurance Company

9025 N. Lindbergh Dr. Peoria, IL 61615 Phone: 800-645-2402

#### Know All Men by These Presents:

That this Power of Attorney is not valid or in effect unless attached to the bond which it authorizes executed, but may be detached by the approving officer if desired.

That RLI Insurance Company and/or Contractors Bonding and Insurance Company, each an Illinois corporation, (separately and						
together, the "Company") do hereby make, constitute and appoint:						
Michael A. Cvechko, Deborah K. Keene, jointly or severally						
in the City of Philippi, State of West Virginia full power and authority hereby conferred, to sign, execute, acknowledge a	its true and lawful Agent(s) and Attorney(s) in Fact, with and deliver for and on its behalf as Surety, in general, any and all					
bonds and undertakings in an amount not to exceed						
( <u>\$25,000,000.00</u> ) for any single obligation.						
The acknowledgment and execution of such bond by the said Attorney in Fa executed and acknowledged by the regularly elected officers of the Company	act shall be as binding upon the Company as if such bond had been y.					
RLI Insurance Company and/or Contractors Bonding and Insurance following is a true and exact copy of a Resolution adopted by the Board of D	e Company, as applicable, have each further certified that the Directors of each such corporation, and is now in force, to-wit:					
"All bonds, policies, undertakings, Powers of Attorney or other obligation the Company by the President, Secretary, any Assistant Secretary, Treasur of Directors may authorize. The President, any Vice President, Secretary, Attorneys in Fact or Agents who shall have authority to issue bonds, policies all is not necessary for the validity of any bonds, policies, undertakings, signature of any such officer and the corporate seal may be printed by face	etary, any Assistant Secretary, or the Treasurer may appoint ties or undertakings in the name of the Company. The corporate Powers of Attorney or other obligations of the corporation. The					
	ractors Bonding and Insurance Company, as applicable, have ent with its corporate seal affixed this 24th day of					
August , 2021 .	RLI Insurance Company Contractors Bonding and Insurance Company					
THE OWN OF AND WAS ASSETTED TO THE OWN OF TH	Contractors Bonding and Insurance Company					
O CORPORATE CORPORATE	B.t. W. F					
SEAL SEAL	By: Vice President  Vice President					
State of Illinois						
County of Peoria SS	CERTIFICATE					
On this 24th day of August , 2021 , before me, a Notary Public, personally appeared Barton W. Davis , who being by me duly sworn, acknowledged that he signed the above Power of Attorney as the aforesaid officer of the RLI Insurance Company and/or Contractors Bonding and Insurance Company and acknowledged said instrument to be the voluntary act and deed of said corporation.  By:  Catherine D. Glover  Neigry Public	I, the undersigned officer of RLI Insurance Company and/or Contractors Bonding and Insurance Company, do hereby certify that the attached Power of Attorney is in full force and effect and is irrevocable; and furthermore, that the Resolution of the Company as set forth in the Power of Attorney, is now in force. In testimony whereof, I have hereunto set my hand and the seal of the RLI Insurance Company and/or Contractors Bonding and Insurance Company this day of,  RLI Insurance Company Contractors Bonding and Insurance Company					
CATHERINE D. GLOVER OFFICIAL SEAL PARKET Notary Public - State of Illinois My Commission Expires March 24, 2024	By: Jeffrey D. Fick.  Corporate Secretary					

## West Virginia Offices of the Insurance Commissioner



### **Certificate of Authority**

Whereas, RLI INSURANCE COMPANY, domiciled in the State of Illinois, has complied with all the requirements of the laws of this State so as to entitle it to transact its appropriate business in the State of West Virginia.

Therefore, I the undersigned, Insurance Commissioner of the State of West Virginia, pursuant to the authority vested in me by the laws of this State, do hereby authorize it to transact the business of insurance as defined in Chapter 33

Marine - Article 1, Section 10(d)
Surety - Article 1, Section 10(f)(1)
Accident & Sickness - Article 1, Section 10(b)
Fire - Article 1, Section 10(c)
Casualty - Article 1, Section 10(e)
Surety - Article 1, Section 10(f)(2)
Surety - Article 1, Section 10(f)(3)
Casualty - Article 1, Section 10(e)(14)

of the 1931 Code of West Virginia as amended, in the State of West Virginia in accordance with the laws thereof until midnight on the 31st day of May, 2022, unless this license be sooner revoked. Pursuant to W. Va. Code §33-3-2(c), the above authorization does not allow the insurer to transact a kind of insurance in this State unless duly authorized or qualified to transact such insurance in the state or country of its domicile.

In Testimony Whereof, I have hereunto set my hand and affixed my seal of office at the City of Charleston this 1st day of June, 2021.

James A. Dodrill Insurance Commissioner NAIC # 13056 SBS Company # 109404216



# **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV003726

#### Classification:

ELECTRICAL
HEATING, VENTILATING & COOLING
PLUMBING

POWELL INC
DBA POWELL INC
PO BOX 306
BARBOURSVILLE, WV 25504-0306

**Date Issued** 

**Expiration Date** 

SEPTEMBER 09, 2021

SEPTEMBER 09, 2022

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.