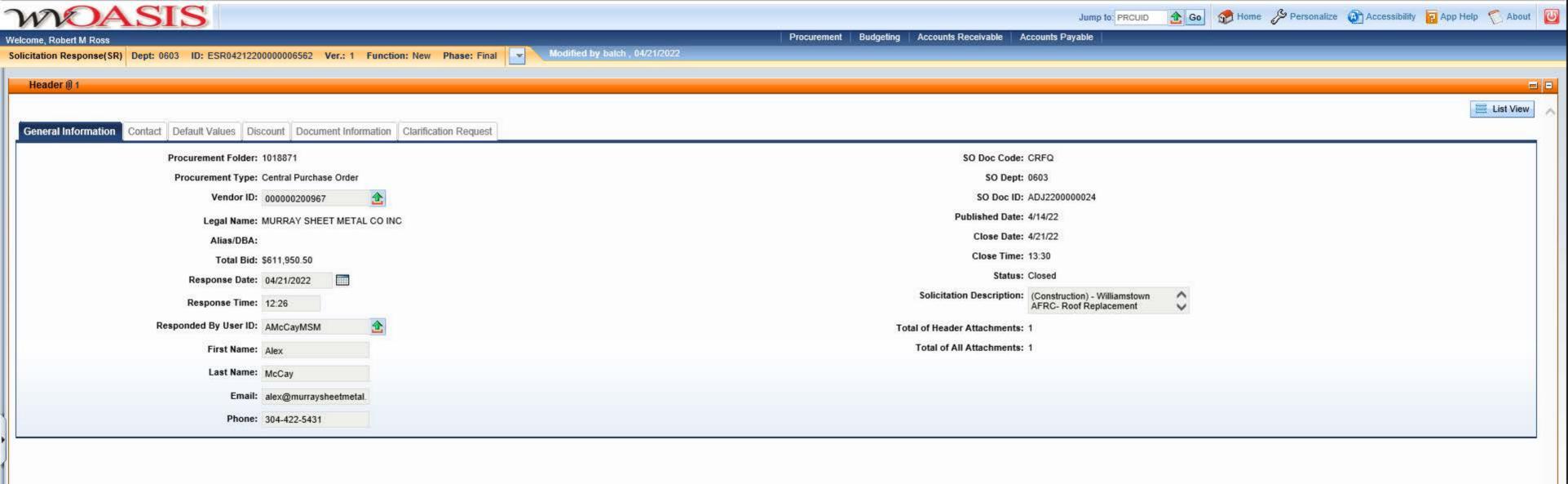
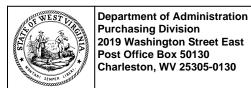


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

Bid Fax: 304-558-3970

The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at *wvOASIS.gov*. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at *WVPurchasing.gov* with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.





State of West Virginia Solicitation Response

Proc Folder: 1018871

Solicitation Description: (Construction) - Williamstown AFRC- Roof Replacement

Proc Type: Central Purchase Order

 Solicitation Closes
 Solicitation Response
 Version

 2022-04-21 13:30
 SR 0603 ESR04212200000006562
 1

VENDOR

000000200967

MURRAY SHEET METAL CO INC

Solicitation Number: CRFQ 0603 ADJ2200000024

Total Bid: 611950.5 **Response Date:** 2022-04-21 **Response Time:** 12:26:12

Comments:

FOR INFORMATION CONTACT THE BUYER

David H Pauline 304-558-0067 david.h.pauline@wv.gov

Vendor Signature X

FEIN#

DATE

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

 Date Printed:
 Apr 21, 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	Roof Replacement at AFRC Facility Williamstown				611920.00

Comm Code	Manufacturer	Specification	Model #	
72152601				

Commodity Line Comments: Soffit replacement is excluded.

Extended Description:

Contract Item#1- Labor, materials and all associated costs to remove and dispose of old roof, and to install a new EPDM roofing system or equal.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Decking Repair/Replacement (if necessary)				24.50

Comm Code	Manufacturer	Specification	Model #	
72152601				

Commodity Line Comments: unit price per sq ft

Extended Description:

Contract Item#2- Decking Repair/Replacement (Only If Needed) provide pricing on a Price Per Square Foot Installed basis.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	Wood Blocking Replacement (if necessary)				6.00

Comm Code	Manufacturer	Specification	Model #	
72152601				

Commodity Line Comments: Unit price per lineal ft.

Extended Description:

Contract Item#3- Wood Blocking Replacement (Only If Needed) provide pricing on a Price Per Lineal Foot Installed basis.

Date Printed: Apr 21, 2022 Page: 2 FORM ID: WV-PRC-SR-001 2020/05

BID BOND

	KNOW ALL MEN BY THESE PRESENTS,	That we, the unders	igned, <u>Murray</u>	Sheet Metal Co	o., Inc.
of	Parkersburg	wv	as Principa	, and Great Ame	ican Insurance Company
of	Cincinnati , OH	, a corpo	ration organize	d and existing und	er the laws of the State of
<u>OH</u>	with its principal office in the City	of Cincinnat	i, as S	urety, are held a	nd firmly bound unto the State
of West	Virginia, as Obligee, in the penal sum of Five	Percent of Amoun	t Bid	(\$5%) for the payment of which,
well and	I truly to be made, we jointly and severally bit The Condition of the above obligation is:				
Donario	nent of Administration a certain bid or propos		•		
•	Replacement of the Williamstown Nation		•		-
IXOOFF	replacement of the williamstown water	al Guard Afficing			
	NOW THEREFORE,		1		
the agre	(a) If said bid shall be rejected, or (b) If said bid shall be accepted and thereto and shall furnish any other bonds a ement created by the acceptance of said bid and effect. It is expressly understood and	nd insurance required, then this obligation	ed by the bid or n shall be null a	proposal, and sh and void, otherwis	all in all other respects performe this obligation shall remain in
way im	The Surety, for the value received, hereby paired or affected by any extension of the totice of any such extension.	stipulates and agree			
Walto	· ·		_		
125 0	WITNESS, the following signatures and sea	•	•	*	- '
	or by Principal Individually if Principal is an Ir	idividual, this $\angle 1S$	tday of	Apni	_,2022
A STATE OF THE STA	MERCHANICAL CONTRACTOR OF THE PROPERTY OF THE		Murre	y Sheet Metal	Co. Inn
Principa	al Seal		Ву_	(Nam)anda()(Must be President)	e of Principat)
11/11	WI TO THE PARTY OF		F	RESZOE	W7
Pania.					(Title)
32					
Surety	Seal		Great		rance Company
(8)				(Nan	ne of Surety)
			By:	My Re	Subsection Attorney-in-Fact

IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.

GREAT AMERICAN INSURANCE COMPANY® Administrative Office: 301 E 4TH STREET ■ CINCINNATI, OHIO 45202 ■ 513-369-5000 ■ FAX 513-723-2740

The number of persons authorized by this power of attorney is not more than SIX

No. 0 21746

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

Name

ANDREW K. TEETER DOUGLAS P. TAYLOR JAIME L. CARPENTER KIMBERLY L. MILES TAMMY S. SELBE JESSICA J. BENTLEY

Address ALL OF CHARLESTON, WEST VIRGINIA

GREAT AMERICAN

Limit of Power ALL \$100,000,000

This Power of Attorney revokes all previous powers issued on behalf of the attorney(s)-in-fact named above.

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this day of **FEBRUARY**

Attest

Assistant Secretary

Divisional Senior Vice President MARK VICARIO (877-377-2405)

Susan a Kohowst

STATE OF OHIO, COUNTY OF HAMILTON - ss: day of

2ND

FEBRUARY

2022 , before me personally appeared MARK VICARIO, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American

Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.



SUSAN A KOHORST Notary Public State of Ohio My Comm. Expires May 18, 2025

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisional Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, 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 officer 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.

CERTIFICATION

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this

21st

day of

April



CONTRACTOR LICENSE

AUTHORIZED BY THE

West Virginia Contractor Licensing Board

NUMBER:

RD

WEST VIRGINIA

PCTOR LICENSING

WV000006

CLASSIFICATION:

GENERAL BUILDING
GENERAL ENGINEERING
HEATING, VENTILATING & COOLING
PIPING
PLUMBING
ROOFING

MURRAYS SHEET METAL CO INC DBA MURRAYS SHEET METAL CO INC 3112 NORTH WESTERN PIKE PARKERSBURG, WV 26104

DATE ISSUED

EXPIRATION DATE

JANUARY 22, 2022

JANUARY 22, 2023

Authorized Signature

Chair, West Virginia Contractor Ucensing 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-transferable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.

CILMONK



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/24/2021

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.

t	his c	BROGATION IS WAIVED, subje- ertificate does not confer rights to	o the	cert	ificate holder in lieu of s	uch end	orsement(s)).	, require an em	2013GIIIGII		ACTORIGITE OIL
	DUCE	:R dPartners					Mark Ste			FAX	/20 11	245 0244
340	Mac	Corkle Ave. SE ton, WV 25314				(A/C, No	, Ext): (304)		edpartners.c		(304)	345-8014
J	11100	1011, 111 200 14				ADDRES			RDING COVERAGE			NAIC#
						INSURE		d Fire Insu				19682
INS	JRED						INSURER B : Travelers Property Casualty Co of Americ					25674
		Murray Sheet Metal Compar	w In	c		INSURER C: Twin City Fire Insurance Co.						29459
		3112 Northwestern Pike	.y,	٠.			INSURER D:					
		Parkersburg, WV 26104-110	5			INSURE						
						INSURE						
CC	VER	RAGES CER	TIFI	CATE	E NUMBER:	•			REVISION NU	MBER:		
li C	NDIÇ/	IS TO CERTIFY THAT THE POLICII ATED. NOTWITHSTANDING ANY R IFICATE MAY BE ISSUED OR MAY JSIONS AND CONDITIONS OF SUCH	EQUI PER	REMI	ENT, TERM OR CONDITION THE INSURANCE AFFOR	ON OF A	NY CONTRA	CT OR OTHER	R DOCUMENT W SED HEREIN IS S	ITH RESPE	ECT TO	WHICH THIS
INSF		TYPE OF INSURANCE	ADDL	SUBR				POLICY EXP (MM/DD/YYYY)		LIMIT	s	
A	X	COMMERCIAL GENERAL LIABILITY	Mico	1112			(MINUSOTT TTT)	(IIIIII)	EACH OCCURRE	NCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			42UENOE0085		4/1/2021	4/1/2022	DAMAGE TO REN PREMISES (Ea oc	TED currence)	\$	300,000 10,000
	-							MED EXP (Any one person)		\$	1,000,000	
									PERSONAL & ADV		\$	2,000,000
	GE	N'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-						GENERAL AGGRE		\$	2,000,000	
									PRODUCTS - COM	MP/OP AGG	\$	2,000,000
A	AHT	OTHER:					4/1/2021		COMBINED SING (Ea accident)	E LIMIT	\$	1,000,000
	X	ANY AUTO			42UENOE0086			4/1/2022			\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		OWNED AUTOS ONLY SCHEDULED AUTOS			420LNOL0000				BODILY INJURY (
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)		5		
		AUTOS ONLY							(Per accident)		\$	
В		UMBRELLA LIAB X OCCUR							EACH OCCURRE	NCE	\$	9,000,000
	Х	EXCESS LIAB CLAIMS-MADE			ZUP10N5285621NF	4/1/2021	4/1/2022	AGGREGATE	101	\$	9,000,000	
		DED X RETENTION\$ 10,000									s	
C	WOF	RKERS COMPENSATION DEMPLOYERS' LIABILITY							X PER STATUTE	OTH- ER	1	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE Y/N	N		42WEOE0084	4/1/2021	4/1/2021	4/1/2022	E.L. EACH ACCID		\$	1,000,000
	(Mar	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA	A EMPLOYEE	\$	1,000,000
	If yes	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - PO	DLICY LIMIT	\$	1,000,000
DES	CRIP1	TION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORI	D 101, Additional Remarks Sched	lule, may b	e attached if mo	re space is requi	red)			
EVIC	ience	e of Insurance.										
CE	RTIF	ICATE HOLDER				CANO	CELLATION					
		Murray Sheet Metal Co., Inc. 3112 Northwestern Pike	i			THE	EXPIRATIO	N DATE TI	DESCRIBED POL HEREOF, NOTIC CY PROVISIONS	CE WILL		
		Parkersburg, WV 26104				and the	RIZED REPRESE	ENTATIVE				

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 Identification:
Contract Number: AD5220006024
Contract Purpose: Lost Regionement - Williamstown National Grand Armory
Agency Requesting Work: Muttage W National Grand / W Porchasing Division
Required Report Content: The attached report must include each of the items listed below. The vendor should check each box as an indication that the required information has been included in the attached report.
☐ Information indicating the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided;
Mame of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;
☐ Average number of employees in connection with the construction on the public improvement;
□ Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.
Vendor Contact Information:
Vendor Name: Murray Sheet Metal Co. Inc. Vendor Telephone: (304)966-1514
Vendor Address: 3112 Northwestern Rike Vendor Fax: (304) 428-4623
Parkersburg, WV 26104 Vendor E-Mail: 6/cx@myraysheekmeta.c

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:

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THE TOTAL OF THE T	
Vendor's Name: Murray Sheet Metal Co. Inc.	
Authorized Signature: Alex	Date: <u>4-21-2022</u>
State of	
County of Wood, to-wit:	
Taken, subscribed, and sworn to before me this day of	, 20
My Commission expires	
AFFIX SEAL HERE Official Seal Offi	Purchasing Affidavit (Revised 01/19/2018)
My commission explication	

West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity: Muttay Sheet Mutal Address: 3112 Northwestern Pike
Parkersburg, WV 26104
Name of Authorized Agent: Alex McLay Address: 911 18th St, Vienna, WV 26105
Contract Number: AD3220000024 Contract Description: Poor Legiagnent - Williamstown
Governmental agency awarding contract: WV National Good / WV Porchasing Division
☐ Check here if this is a Supplemental Disclosure
List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (attach additional pages if necessary):
1. Subcontractors or other entities performing work or service under the Contract
☐ Check here if none, otherwise list entity/individual names below.
2. Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities)
☐ Check here if none, otherwise list entity/individual names below.
3. Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding legal services related to the negotiation or drafting of the applicable contract)
☐ Check here if none, otherwise list entity/individual names below.
Signature: Alexander Date Signed: 4-21-2022 Notary Verification
State of, County of:
I,, the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the penalty of perjury.
Taken, sworn to and subscribed before me this
To be completed by State Agency: Date Received by State Agency: Date submitted to Ethics Commission: Governmental agency submitting Disclosure: Notary Public's Signature Official Seal Notary Public's State of West Virginia Received by State Agency: Notary Public's State of West Virginia 392 Schultz Mill Road 392 Schultz Mill Road Washington, West Virginia 26181 Washington, West Virginia 26181



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

I, Alex McCay, after being first duly sworn, depose and state as follows:
1. I am an employee of Murray Sheet Metal Co. Inc.; and, (Company Name)
2. I do hereby attest that Murray Sheet Metal Co. Tac. (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.
Printed Name: Alex McCay
Signature: Aluph
Title: Estimator Project Manager
Company Name: Murray Sheet Metal Co. Inc.
Date: 4-21-2622
STATE OF WEST VIRGINIA,
COUNTY OF Wood, TO-WIT:
Taken, subscribed and sworn to before me this day of april, 2005.
By Commission expires 64. 2007
(Seal) Weinberg a Flate (Notary Public)

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ ADJ22*24

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. 14/5/22		Addendum No. 6		
X	Addendum No. 2 4 6/22		Addendum No. 7		
X	Addendum No. 3 4/14/22		Addendum No. 8		
	Addendum No. 4		Addendum No. 9		
	Addendum No. 5		Addendum No. 10		

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that 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.

Murray Sheet Metal Co. Inc.

Company

Authorized Signature

4-21-2022

Date

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

EXHIBIT A RFQ # ADJ2200000024

ALL LABOR, MATERIALS, EQUIPMENT, AND SUPPLIES NECESSARY TO REPLACE EPDM ADHERED ROOFING SYSTEM, AT WILLIAMSTOWN AFRC NATIONAL GUARD FACILITY 285 AVIATION DRIVE, WILLIAMSTOWN, WV 26187

BID FORM

The undersigned, hereafter called the Bidder, being familiar with and understanding the bidding documents; and being familiar with the site and all local conditions affecting the Project, hereby proposes to furnish labor, material, equipment, supplies, and transportation to perform the work as described in the bidding documents

BIDDERS COMPANY	NAME: Murray Sheet Metal Co. Inc.
VENDOR ADDRESS:	3112 Northwestern Pike
	Parkersburg, WV 26104
TELEPHONE:	(304) 966-1514
FAX NUMBER:	(304) 428-4623
E-MAIL ADDRESS:	alex@murraysheetmetal.com
WV CONTRACTOR'S LICENSE NO.	W000006
	RALL TOTAL COST:
	Eleven Thousand Nine Hundred Twenty Dollars and zero Conts.
(\$ GII, 920.00)*** (Contract bid to be written in words and numbers.)
DECKING REPAIR/RI	EPLACEMENT PRICE PER SQUARE FOOT INSTALLED (ONLY If needed to e):
Twen	ty-Four Dollars and Fifty cents
	per sq/ft installed) *** (Unit cost to be written in words and numbers.)
WOOD DI OOVING I	ODICE DED LINEAU FOOT INCTALLED (ONLY Knowledge to replace due to demage)
	PRICE PER LINEAL FOOT INSTALLED (ONLY If needed to replace due to damage):
	Dollars and Zero Cents
(\$ <u>6</u> . <u>=</u>	per In/ft installed) *** (Unit cost to be written in words and numbers.)

	. November 2015 Parts State	
Failure to use t	his bid form may result in bid disqualification.	11 - 🗏
SIGNATURE:	Huph	DATE: <u>4-21-202</u> 2
NAME:	Alex Micay	
	(Pléase Print)	
TITLE:	Estimator / Project Munager	