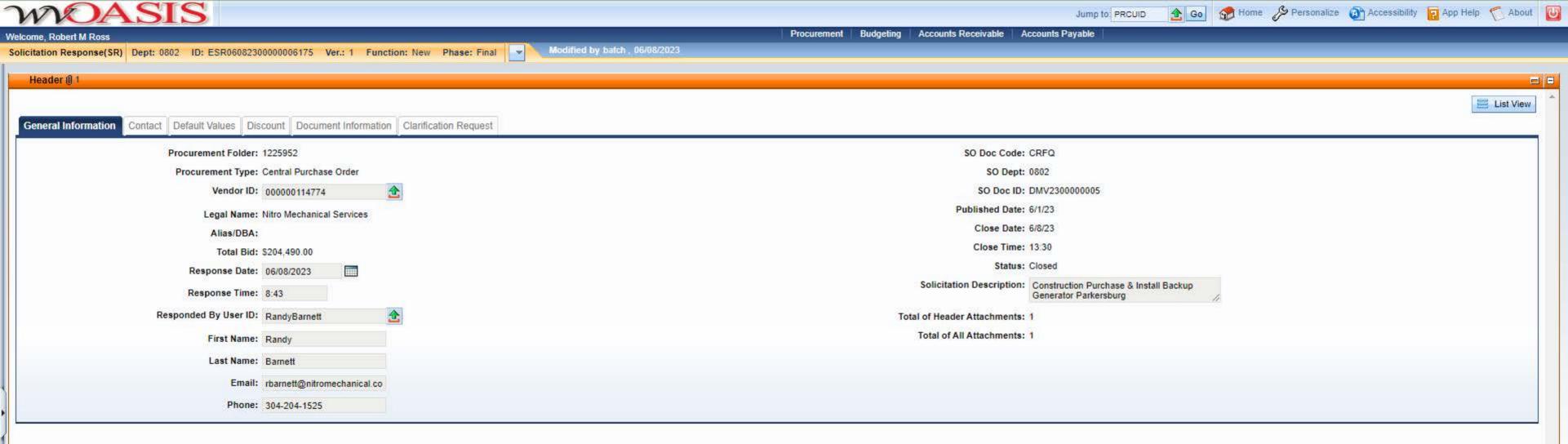


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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: 1225952

Solicitation Description: Construction Purchase & Install Backup Generator Parkersburg

Proc Type: Central Purchase Order

 Solicitation Closes
 Solicitation Response
 Version

 2023-06-08 13:30
 SR 0802 ESR06082300000006175
 1

VENDOR

000000114774

Nitro Mechanical Services

Solicitation Number: CRFQ 0802 DMV2300000005

Total Bid: 204490 **Response Date:** 2023-06-08 **Response Time:** 08:43:19

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:
 Jun 8, 2023
 Page: 1
 FORM ID: WV-PRC-SR-001 2020/05

Line Cor	mm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
	rchase/Installation of Backup Generator rkersburg RO	1.00000	EA	204490.000000	204490.00

Comm Code	Manufacturer	Specification	Model #	
26111601				

Commodity Line Comments:

Extended Description:

Purchase/Installation of Backup Generator Parkersburg RO Please reference Exhibit "A" Pricing Page. See Attached.

 Date Printed:
 Jun 8, 2023
 Page: 2
 FORM ID: WV-PRC-SR-001 2020/05

BID BOND

KNOW	ALL MEN BY THESE PR		•				
of	Nitro	WV				ia Indemnity Insurance	
Company of	Bala Cynwyd,	PA		.00		ng under the laws of the State of	
PA	with its principal office i	n the City ofBala	a Cynwyd	, as Suret	y, are held	and firmly bound unto the State	
of West Virginia	i, as Obligee, in the penal :	sum of Five Percent of	Amount Bid		(\$ 5%	for the payment of which	
well and truly to	be made, we jointly and s	everally bind ourselves	s, our heirs, ad	ministrators,	executors, :	successors and assigns.	
The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the							
Department of A	Administration a certain bid	l or proposal, attached	hereto and m	ade a part hei	eof, to ente	er into a contract in writing for	
Purchase and	Installation of a Back-	up Generator for the	WV DMV F	arkersburg	Regional	Office	
NOM	THEREFORE,						
(a)	If said bid shall be rejec	ted, or					
(b)	If said bid shall be acc	epted and the Princip	al shall enter	into a contra	act in accor	rdance with the bid or proposa	
attached hereto	o and shall furnish any other	er bonds and insurance of said bid, then this o	e required by to obligation shall	ne bid or prop be null and v	oid, otherw	hall in all other respects perform ise this obligation shall remain in	
full force and el	ffect. It is expressly under	rstood and agreed that	the liability o	the Surety for	or any and	all claims hereunder shall, in no	
event, exceed to	he penal amount of this ob	ligation as herein state	d.				
The C	usahu far tha walua rasaliya	nd haraby etinulator ar	d sames that	the obligation	e of eaid S	urety and its bond shall be in no	
way impaired o	r affected by any extension	on of the time within w	hich the Obli	gee may acc	ept such bi	d, and said Surety does hereby	
waive notice of	any such extension.						
MITME	SS the following signatur	oe and epale of Princin	al and Surety	executed an	d sealed by	a proper officer of Principal and	
	incipal individually if Princi				lune	2023	
Surety, or by Pr	incipal individually il Princi	paris an municulai, uns	<u></u>	01	dilo		
Principal Seal				Nitro Con	struction	Services , Inc.	
riincipal Seal						me of Principal)	
				By W	1//	Lanua	
				2 (M	ust be Pres	ident, Vice President, or	
				1	Duly A	uthorized Agent)	
				1/1/2	11	- Survey	
				7	1	(Fille) President	
				P030000 00 76 7		100 D	
Surety Seal				Philadelp		nity Insurance Company	
2					(Na	me of Surety)	
				By ()	land sour	& Lulas	
				Tammy S. Se	ibe, Licensey	Attacage in Fact	
				WV Resident	Agent	Attomey-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.

PHILADELPHIA INDEMNITY INSURANCE COMPANY

One Bala Plaza, Suite 100 Bala Cynwyd, PA 19004-0950

Power of Attorney

KNOW ALL PERSONS BY THESE PRESENTS: That PHILADELPHIA INDEMNITY INSURANCE COMPANY (the Company), a corporation organized and existing under the laws of the Commonwealth of Pennsylvania, does hereby constitute and appoint <u>Douglas P. Taylor</u>, Andrew K. Teeter, Kimberly L. Miles, <u>Tammy S. Selbe and Jessica J. Bentley</u>, its true and lawful Attorney-in-fact with full authority to execute on its behalf bonds, undertakings, recognizances and other contracts of indemnity and writings obligatory in the nature thereof, issued in the course of its business and to bind the Company thereby, in an amount not to exceed \$50,000,000.

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of PHILADELPHIA INDEMNITY INSURANCE COMPANY on the 14th of November, 2016.

RESOLVED:

That the Board of Directors hereby authorizes the President or any Vice President of the Company: (1) Appoint Attorney(s) in Fact and authorize the Attorney(s) in Fact to execute on behalf of the Company bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof and to attach the seal of the Company thereto; and (2) to remove, at any time, any such Attorney-in-Fact and revoke the authority given. And, be it

FURTHER RESOLVED:

That the signatures of such officers and the seal of the Company may be affixed to any such Power of Attorney or certificate relating thereto by facsimile, and any such Power of Attorney so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the Company in the future with respect to any bond or undertaking to which it is attached.

IN TESTIMONY WHEREOF, PHILADELPHIA INDEMNITY INSURANCE COMPANY HAS CAUSED THIS INSTRUMENT TO BE SIGNED AND ITS CORPORATE SEALTO BE AFFIXED BY ITS AUTHORIZED OFFICE THIS 5TH DAY OF MARCH, 2021.



(Seal)

John Glomb, President & CEO Philadelphia Indemnity Insurance Company

On this 5th day of March, 2021 before me came the individual who executed the preceding instrument, to me personally known, and being by me duly sworn said that he is the therein described and authorized officer of the PHILADELPHIA INDEMNITY INSURANCE COMPANY; that the seal affixed to said instrument is the Corporate seal of said Company; that the said Corporate Seal and his signature were duly affixed.

Commonwealth of Pennsylvanis - Notary Seat Vanessa Mckenzie, Notary Public Montgomery County My commission expires November 3, 2024 Commission number 1366394

Member, Pennsylvan in Association of Notaries

Notary Public:

Vanessa mcKenzie

residing at:

Bala Cynwyd, PA

My commission expires:

November 3, 2024

I, Edward Sayago, Corporate Secretary of PHILADELPHIA INDEMNITY INSURANCE COMPANY, do hereby certify that the foregoing resolution of the Board of Directors and the Power of Attorney issued pursuant thereto on the 5th day March, 2021 are true and correct and are still in full force and effect. I do further certify that John Glomb, who executed the Power of Attorney as President, was on the date of execution of the attached Power of Attorney the duly elected President of PHILADELPHIA INDEMNITY INSURANCE COMPANY.

In Testimony Whereof I have subscribed my name and affixed the facsimile seal of each Company this 8th day of June , 2023



Edward Sayago, Corporate Secretary

PHILADELPHIA INDEMNITY INSURANCE COMPANY



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

Proc Folder: 1225952

Doc Description: Construction Purchase & Install Backup Generator Parkersburg

Reason for Modification:

Addendum No. 1

Proc Type:

Central Purchase Order

 Date Issued
 Solicitation Closes
 Solicitation No
 Version

 2023-06-01
 2023-06-08
 13:30
 CRFQ
 0802
 DMV2300000005
 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: Nitro Construction Services, Inc.

Address: 4300 First Avenue Nitro, WV 25143

Street: 4300 First Avenue

City: Nitro

State: WV

Country: USA

Zip: 25143

Principal Contact: Wes Yingst

Vendor Contact Phone: 304-204-1500

Extension: 304-204-1350

FOR INFORMATION CONTACT THE BUYER

David H Pauline 304-558-0067

david.h.pauline@wv.gov

Vendor (

Signature X

FEIN# 20-8844160

DATE 618123

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

Date Printed: Jun 1, 2023 Page: 1 FORM ID: WV-PRC-CRFQ-002 2020/05

ADDITIONAL INFORMATION

Addendum No. 1

- 1) To publish mandatory pre-bid meeting sheets, see attached.
- 2) To respond to vendor technical questions, see attached.
- 3) Bid opening remains June 8, 2023, at 1:30 pm., est.

No other changes.

INVOICE TO		SHIP TO	
DIVISION OF MOTOR VEHICLES		DIVISION OF MOTOR VEHICLES	
5707 MACCORKLE AVE. S. SUITE 200	E.,	PARKERSBURG DMV	
		601 LUBECK AVE	
CHARLESTON	WV	PARKERSBURG WV	/
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Purchase/Installation of Backup Generator	1.00000	EA		0004 400 00
	Parkersburg RO				\$204,490.00

Comm Code	Manufacturer	Specification	Model #	
26111601				

Extended Description:

Purchase/Installation of Backup Generator Parkersburg RO

Please reference Exhibit "A" Pricing Page. See Attached.

SCHEDULE OF EVENTS

<u>Line</u>	Event	Event Date
1	Mandatory Pre-Bid Meeting at 10:00 am., est.	2023-05-24
2	Vendor Technical Questions Due By 11:00 am., est.	2023-05-31

	Document Phase	Document Description	Page 3
DMV2300000005		Construction Purchase & Install Backup Generator Parkersburg	

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: DMV2300000005

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.

necess	ary revi	sions to my proposal, plans an	d/or sp	ecification, etc.		
		umbers Received: x next to each addendum recei	ved)			
		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	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.					
				Nitro Construction Services, Inc.		
			0	Company Authorized Signature		
				6 8 23 Date		

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

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name:	Nitro Construction Services, Inc.	
Check this project.	box if no subcontractors will perfo	rm more than \$25,000.00 of work to complete the
Subcontractor Name	e	License Number if Required by
- 6		W. Va. Code § 21-11-1 et. seq.
<u> </u>		
	FI.	

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.

(Printed Name and Title) Wes Yingst, Project Manager	_
(Address) 4300 First Avenue Nitro, WV 25143	_
(Phone Number) / (Fax Number) 304-204-1500 / 304-204-1350	_
(Email address) wyingst@nitrocs.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 the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that this bid or offer was made without prior understanding, agreement, or connection with any entity submitting a bid or offer for the same material, supplies, equipment or services; that this bid or offer is in all respects fair and without collusion or fraud; that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; 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.

Company (C	CU TOO	
Wes Yings)	rized Representative) (0 2 3 Pitle of Authorized Representative) (Date) -204-1350	
(Phone Number) (Fa		

REQUEST FOR QUOTATION CRFQ DMV23*05 BACKUP POWER GENERATOR

- 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:	Wes Yingst
Telephone Number:	304-204-1500
Fax Number: 304-2	04-1350
Email Address: wyi	ngs@nitrocs.com



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

I, Carey Marra-Huffman after being first duly sworn, depose and state as follows:
I am an employee of Nitro Construction Services, Inc.
2. I do hereby attest that Nitro Construction Services, Inc. (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: Carey Marra-Huffman
Signature: <u>Caucy Mana-Huffman</u> Title: Corporate Safety Director
Company Name: Nitro Construction Services, Inc.
Date: L\8\23
STATE OF WEST VIRGINIA,
COUNTY OF Putnam, TO-WIT:
Taken, subscribed and sworn to before me this 8 day of 1 .
By Commission expires durust 5 2023
(Seal)
OFFICIAL SEAL Notary Public, State Of West Virginia FATINA WITHROW 57 Spruce Drive Scott Depot, WV 25560 My Commission Expires August 05, 2023 Rev. July 7, 2017

CONTRACTOR LICENSE





WV042601

CLASSIFICATION:

ELECTRICAL
GENERAL BUILDING
HEATING, VENTILATING & COOLING
PIPING
SPECIALTY
LOW VOLTAGE SYSTEMS
SPRINKLER AND FIRE PROTECTION

NITRO CONSTRUCTION SERVICES INC DBA NITRO MECHANICAL SERVICES 4300 1ST AVE #2 NITRO, WV 25143-1001

DATE ISSUED

EXPIRATION DATE

JUNE 13, 2023

JUNE 13, 2024

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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/28/2022

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.

If SUBROGATION IS WAIVED, subject to the terms and conditions of the this certificate does not confer rights to the certificate holder in lieu of s	ne policy, certain policies may require an endorsement. A	statement on		
PRODUCER	CONTACT Willis Towers Watson Certificate Center			
Willis Towers Watson Northeast, Inc.	NAME: PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378			
c/o 26 Century Blvd	E-MAIL ADDRESS: certificates@willis.com			
P.O. Box 305191 Nashville, TN 372305191 USA		NAIC#		
Nabitylile, IN 3/2303191 ODA	INSURER(S) AFFORDING COVERAGE INSURER A: Arch Insurance Company	11150		
	INSURER B: Starr Indemnity & Liability Company	38318		
NSURED Nitro Construction Services, Inc	INSURER B: Starr Indemnity & Liability Company	30310		
4300 1st Avenue	INSURER C:			
Nitro, WV 25143	INSURER D:			
	INSURER E :			
	INSURER F:			
COVERAGES CERTIFICATE NUMBER: W27421387	REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HA INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORD EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE INSE!	OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO ED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL BEEN REDUCED BY PAID CLAIMS.	OWHICH THIS		
TYPE OF INSURANCE INSD WVD POLICY NUMBER	POLICY EFF POLICY EXP (MM/DD/YYYY) LIMITS			
X COMMERCIAL GENERAL LIABILITY	EACH OCCURRENCE \$ DAMAGE TO RENTED	2,000,000		
CLAIMS-MADE X OCCUR	PREMISES (Ea occurrence) \$	2,000,000		
A	MED EXP (Any one person) \$	5,000		
ZAGLB9222206	01/01/2023 01/01/2024 PERSONAL & ADV INJURY \$	2,000,000		
GEN'L AGGREGATE LIMIT APPLIES PER:	GENERAL AGGREGATE \$	4,000,000		
POLICY X PRO- X LOC	PRODUCTS - COMP/OP AGG \$	4,000,000		
OTHER:	\$			
AUTOMOBILE LIABILITY	COMBINED SINGLE LIMIT (Ea accident) \$	5,000,000		
X ANY AUTO	BODILY INJURY (Per person) \$			
A OWNED SCHEDULED ZACAT9243306 AUTOS ONLY	01/01/2023 01/01/2024 BODILY INJURY (Per accident) \$			
X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY	PROPERTY DAMAGE (Per accident) \$			
AUTOS GILLI	\$			
X UMBRELLA LIAB X OCCUR	EACH OCCURRENCE \$	10,000,000		
EXCESS LIAB CLAIMS-MADE 1000588155231	01/01/2023 01/01/2024 AGGREGATE \$	10,000,000		
DED X RETENTION\$ 10,000	\$			
WORKERS COMPENSATION	X PER OTH-			
AND EMPLOYERS' LIABILITY A ANYPROPRIETOR/PARTNER/EXECUTIVE	EL FACH ACCIDENT S	1,000,000		
OFFICER/MEMBER EXCLUDED? N/A ZAWCI9402606 (Mandatory in NH)	01/01/2023 01/01/2024 E.L. DISEASE - EA EMPLOYEE \$	1,000,000		
If yes, describe under DESCRIPTION OF OPERATIONS below	E.L. DISEASE - POLICY LIMIT \$	1,000,000		
DESCRIPTION OF OPERATIONS USION	ELESION IN THE PROPERTY OF THE			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedu	le, may be attached if more space is required)			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedul	ne, may be attached if more space is required;			
	CONTRACTOR CONTRACTOR			
CERTIFICATE HOLDER	CANCELLATION	CANCELLATION		
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCE THE EXPIRATION DATE THEREOF, NOTICE WILL BE D ACCORDANCE WITH THE POLICY PROVISIONS.			
	AUTHORIZED REPRESENTATIVE			

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Evidence of Insurance