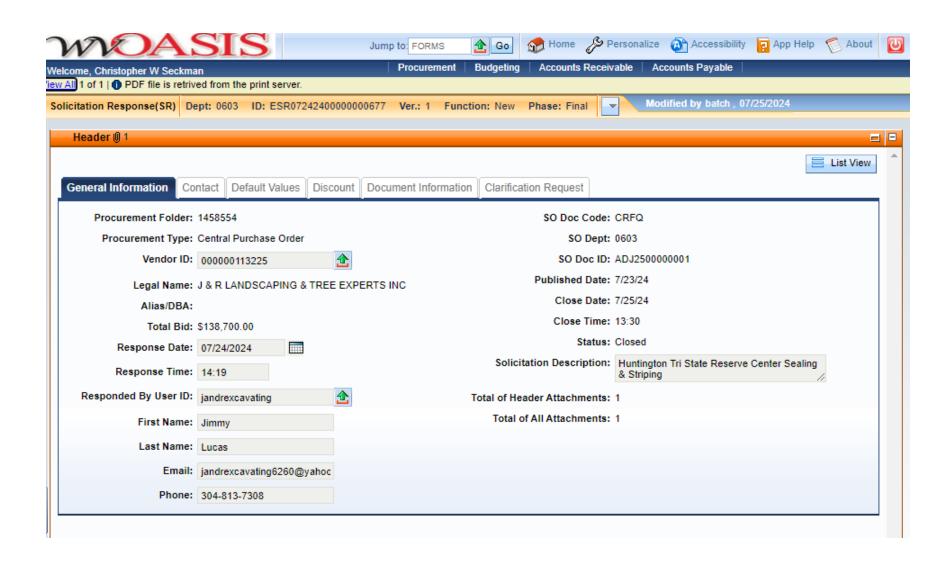


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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: 1458554

Solicitation Description: Huntington Tri State Reserve Center Sealing & Striping

Proc Type: Central Purchase Order

 Solicitation Closes
 Solicitation Response
 Version

 2024-07-25 13:30
 SR 0603 ESR07242400000000677
 1

VENDOR

000000113225

J & R LANDSCAPING & TREE EXPERTS INC

Solicitation Number: CRFQ 0603 ADJ2500000001

Total Bid: 138700 **Response Date:** 2024-07-24 **Response Time:** 14:19:45

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:
 Jul 25, 2024
 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	Huntington Tri State Reserve Center Sealing				138700.00
	& Striping				

Comm Code	Manufacturer	Specification	Model #	
72141100				

Commodity Line Comments:

Extended Description:

BASE BID (Per documentation)- Provide and furnish all labor, materials, tools, expendable equipment and all services to complete parking lot sealing & striping services per the attached specifications and documentation. Contractor MUST field verify this area.

Date Printed: Jul 25, 2024 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

Proc Folder:

1458554

Doc Description: Huntington Tri State Reserve Center Sealing & Striping

Reason for Modification:

Addendum No. 1

Proc Type:

Central Purchase Order

Date Issued

Solicitation Closes

Solicitation No

Version

2024-07-23

2024-07-25 13:30

CRFQ 0603

ADJ2500000001

2

BID RECEIVING LOCATION

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

VENDOR

Vendor Customer Code:

000000113225

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- President

Vendor Contact Phone: 304 813 7308

Extension:

FOR INFORMATION CONTACT THE BUYER

David H Pauline 304-558-0067

david.h.pauline@wv.gov

Vendor

Signature X

FEIN#

20-5083168

DATE

07/23/2024

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

EXHIBIT A CRFQ # ADJ2500000001

ALL LABOR, MATERIALS, EQUIPMENT, AND SUPPLIES NECESSARY TO PROVIDE PAVEMENT SEALING & STRIPING SERVICES FOR THE PARKING LOT(S) AT THE Huntington Tri-State Reserve Center 2194 Booth Drive Kenova, WV 25530

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: JAK Landscaping and Tree Experts 2.00
VENDOR ADDRESS	: 375 Timber Ridge LN
	Keyser WV 26726
TELEPHONE:	304 813 7308
FAX NUMBER:	304 788 3825
E-MAIL ADDRESS:	Jandrexcavating 6260@ yahoo, com
WV CONTRACTOR'S LICENSE NO.:	WV031662
CONTRACT OVE Huntington Tri State I One humbred (\$ 138,700	Reserve Center facility per the attached documentation. Thirtycight thousand seven hundred dollars *** (Contract bid to be written in words and numbers.)
Failure to use this bid	form may result in bid disqualification.
SIGNATURE: NAME: TITLE:	DATE: 07/24/2024 President President

CONTRACTOR LICENSE



TOP LICENSING NUMBER:

WEST VIRGINIA

WV031662

CLASSIFICATION:

EXCAVATION SPECIALTY 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

JANUARY 13, 2024

JANUARY 13, 2025

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.

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ ADJ2500000001

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.

Ad	dendum	Numbers Received:		
(Ch	eck the b	ox next to each addendum	received)	
		Addendum No. 1		Addendum No. 6
		Addendum No. 2		Addendum No. 7
		Addendum No. 3		Addendum No. 8
		Addendum No. 4		Addendum No. 9
	П	Addendum No. 5	П	Addendum No. 10

Addendum No. 5

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.

> J+R Landscaping and Tree Experts IN Authorized Signature

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

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.

(Address) 375 Timber F	Ridge Lane Keyser WV 26726
(Phone Number) / (Fa	x Number) 304 813 7308 / 304 788 3825

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)	
(Signature of Authorized Representative) Jimmy E Lucas JR President 07/23/2024	
(Printed Name and Title of Authorized Representative) (Date) 304 813 7308 304 788 3825	
(Phone Number) (Fax Number)	
Jandrexcavating6260@yahoo.com	

(Email Address)

Subcontractor List Submission (Construction Contracts Only)

J & R Landscaping and Tree Experts INC

License Number if Required by
W. Va. Code § 21-11-1 et. seq.
The state of the s

Attach additional pages if necessary

Bidder's Name:

REQUEST FOR QUOTATION – CRFQ ADJ25*01 Huntington Tri-State Reserve Center Sealing & Striping Parking Lot(s)

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 Lucas TR

Telephone Number: 3048137308

Fax Number: 3047883835

Email Address: Jandrexawating 62600 Qyahancom

a. Liquidated Damages: Contractor shall pay liquidated damages in the amount of \$1,500.00 per day of delay, plus a one-time fixed cost of \$1,250.00 for Staff Judge Advocate review for work not completed after contract completion date. This clause shall in no way be considered exclusive and shall not limit the State or Agency's right to pursue any other available remedy.

BID BOND

KNOW ALL MEN BY THESE PRESENTS,	That we, the undersigned, J & R Landscaping and Tree Experts, Inc.
	Keyser, WV 26726 , as Principal, and NGM Insurance Company
	3431, a corporation organized and existing under the laws of the State of
	of, as Surety, are held and firmly bound unto the State
	e Percent (5%) of the Bid Amount (\$ 5%) for the payment of which,
	nd ourselves, our heirs, administrators, 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 Administration a certain bid or propos	al, attached hereto and made a part hereof, to enter into a contract in writing for
Huntington Tri State	Reserve Center Sealing & Striping
NOW THEREFORE,	
(a) If said bid shall be rejected, or	
(b) If said bid shall be accepted and	the Principal shall enter into a contract in accordance with the bid or proposal
attached hereto and shall furnish any other bonds a	nd insurance required by the bid or proposal, and shall in all other respects perform d, then this obligation shall be null and void, otherwise this obligation shall remain in
full force and effect. It is expressly understood and	agreed that the liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of this obligation as	herein stated.
The County for the value received hereby	stipulates and agrees that the obligations of said Surety and its bond shall be in no
way impaired or affected by any extension of the ti	ime within which the Obligee may accept such bid, and said Surety does hereby
waive notice of any such extension.	
WITNESS the following signatures and sea	als of Principal and Surety, executed and sealed by a proper officer of Principal and
	dividual, this 25th day of July, 20 24
Surety, or by Principal individually if finiteinal is an in and Principal Seal	
STATE OF THE PROPERTY OF THE P	J & R Landscaping and Tree Experts, Inc.
Principal Seal	(Name of Principal)
Sp Sc22 N	Bu de la companya de
- NS 0 = E Z 202 5 5	(Must be President, Vice President, or
THE STANGE OF TH	Duly Authorized Agent)
San	President
A CANCELLAND	(Title)
JUNE OUNO COM	
Susativ Cool	NGM Insurance Company
Surety Seal	(Name of Surety)
Surety Seal 1923	$\sim 10^{10}$
	(/ PANN)
Man A and apple	XXX
THE PROPERTY OF THE PARTY OF TH	John D. Weisbrot, 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.





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 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-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, Melissa McDade, Steven Varga -

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 by the Directors of NGM Insurance Company at a meeting duly called and held on the 2nd day of December 1977.

Voted: That the signature of any officer authorized by the By-Laws and the company seal may be affixed by 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 Assistant Secretary and its corporate seal to be hereto affixed this 24th day of August, 2023.

NGM INSURANCE COMPANY By:

Assistant Secretary

State of Wisconsin, County of Dane.

On this 24th day of August, 2023, before the subscriber a Notary Public of State of Wisconsin in and for the County of Dane duly commissioned and qualified, came Lauren K. Powell 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 Madison, Wisconsin this 24th day of August,

2023.

I, Andrew Rose, Vice President of NGM Insurance Company, do hereby certify that the above and foregoing is a true and 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 Madison, Wisconsil and 25th day of July , 2024 .

WARNING: Any unauthorized reproduction or alteration of this document is prohibited. TO CONFIRM VALIDITY of the attached bond please call 1-603-354-5281. TO SUBMIT A CLAIM: Send all correspondence to 55 West Street, Keene, NH 03431 Attn: Bond Claim Dept. or call our Bond Claim Dept. at 1-603-358-1437.





Sertify that at the Annual Meeting of the Directors of the NGM Insurance Company duly called and held at Jacksonville, Florida on March 17th, 2024, the fellowing efficers were elected and remain in office:

CHRISTOPHER R. LISTAU	PRESIDENT
LAUREN K. POWELL	SECRETARY
TROY P. VAN BEEK	TREASURER
ANDREW 8. ROSE, THERESA E. BREUNIG-SILBERNAGEL	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, 2023.

ADMITTED ASSETS

leserve	for Losses
leserve	for Loss Adjustment Expenses
evieze	for Unearned Premiums
eserve	for Other Underwriting Expenses
eserve	for Taxes, Licenses, and Fees

IN WITNESS THEREOF I hereunto subscribe my name and affix the seal of said company this <u>1 %</u> day of March <u>2024</u>

Bends at Amertized Values \$ 112,215,280
Stocks at Market Value
First Mortgage Loans
Real Estate
Cash in Office and Banks(3,700,949)
Short Term Investments
Agent's Balance (Less than 90 Days) \$311,290,700
Accrued Interest
Other Assets
TOTAL ADMITTED ASSETS \$713,976,744

Reserve for Losses
Reserve for Loss Adjustment Expenses
Reserve for Unearned Premiums
Reserve for Other Underwriting Expenses
Reserve for Taxes, Licenses, and Fees
Loss Drafts in Transit
Other Liabilities \$44,218,563
Total Liabilities \$ 97,590,382
Policyholders' Surplus
TOTÁL \$713,976,744

LIABILITIES

Securities as deposited by law, included above = \$5,705,300

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

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-in-fact at any time and revoke the power and authority given to them."

Subscribed and swom to before me on this _R_deay of March 2024

Aaron Bochniak

Commission Expires May 21, 2027

WHITE HAR BOCHNING

OF WIS

Secretary

1923

68-1191 (3/21)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/8/23

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 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 nor	1 ANIMALE TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	
PRODUCER EE4007 CHANEY - BUSKIRK AGENCY INC	CONTACT NAME: Kelly Courtney PHONE (AG, No. Ext): 304-721-4733 E-MAIL ADDRESS: kelly@chancybuskirk.com	60-8556
PO BOX 50 WILEY FORD, WV 26767	INSURER(S) AFFORDING COVERAGE	NAIC #
WILET FORD, WV 20707	INSURER A: Eric Insurance Company	26263
INSURED	INSURER B: Eric Insurance Property & Casualty Company	26830
J & R Landscaping &	INSURER C: Eric Insurance Exchange	26271
Tree Experts Inc	INSURER D: Eric Insurance Company of New York	16233
375 Timber Ridge Ln	INSURER 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 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.

EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ MED EXP (Any	INSR	XCLUSIONS AND CONDITIONS OF SUCH	ADDL SU	DBR POLICY NUMBER		POLICY EXP (MM/DD/YYYY)	LIMIT	S	
B GENL AGGREGATE LIMIT APPLIES PER: X POLICY PRO. LOC OTHER: AUTOMOBILE LIABILITY X ANY AUTO B X COMPONED AUTOS ONLY AUTOS ONLY Garage X UMBRELLA LIAB X OCCUR B EXCESS LIAB CLAIMS-MADE X UMBRELLA LIAB X OCCUR B X UMBRELLA LIAB X OCCUR CARRENTON S EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION ANY PROPERTY OF PRO. S ANY ANY AUTO Q35 5570012 11/5/23 11/5/24 AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY CARRENT S AGGREGATE S AGGREGATE S AGGREGATE S AGGREGATE S AGGREGATE S EACH OCCURRENCE S AGGREGATE S EL EACH ACCIDENT S EL L DISEASE - EA EMPLOYEE S	LTR	TYPE OF INSURANCE X COMMERCIAL GENERAL LIABILITY	INSD W	VVD POLICY NOMBER				s	1,000,00
B GENL AGGREGATE LIMIT APPLIES PER: X POLICY JECT LOC OTHER: AUTOMOBILE LIABILITY X ANY AUTO B X AUTO ONLY AUTOS ONLY Garage X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION'S WORKERS COMPENSATION ANY PORPIETOR PARTINER/EXECUTIVE OFFICE/RMEMBER EXCLUDED? VI MANY AUTO ANY POPRIETOR PARTINER/EXECUTIVE OFFICE/RMEMBER EXCLUDED? VI MANY AUTO ANY POPRIETOR PARTINER/EXECUTIVE OFFICE/RMEMBER EXCLUDED? VI MANY AUTO ONLY ANY PROPRIETOR PARTINER/EXECUTIVE OFFICE/RMEMBER EXCLUDED? VI MANY AUTO ONLY ANY PROPRIETOR PARTINER/EXECUTIVE OFFICE/RMEMBER EXCLUDED?		CLAIMS-MADE X OCCUR			Q35 5500014 11/5/23		PREMISES (Ea occurrence)	S	5,00
GENERAL AGGREGATE S GENERAL AGGREGATE S PRODUCTS - COMPIOP AGG S S COMBINED SINGLE LIMIT S AUTOMOBILE LIABILITY X ANY AUTO B X AUTOS ONLY AUTOS ONLY AUTOS ONLY X AUTOS ONLY Garage X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPERTY DAMAGE CLAIMS-MADE Q35 5570012 11/5/23 11/5/24 GENERAL AGGREGATE S PRODUCTS - COMPIOP AGG S S COMBINED SINGLE LIMIT S BOOILY INJURY (Per person) S BOOILY INJURY (Per person) S PROPERTY DAMAGE S PROPERTY DAMAGE S PROPERTY DAMAGE S AGGREGATE S AGGREGATE S AGGREGATE S AGGREGATE S EACH OCCURRENCE S AGGREGATE S S EACH OCCURRENCE S AGGREGATE S EL EACH ACCIDENT S EL EACH ACCIDENT S EL DISEASE - EA EMPLOYEE S	5		x	O35 5500014		11/5/24		s	1,000,00
Record R	B	A POLICE OF PRODUCE OF	1				GENERAL AGGREGATE	\$	2,000,00
OTHER: AUTOMOBILE LIABILITY X ANY AUTO B X OWNED AUTOS ONLY X NON-OWNED AUTOS ONLY Garage X UMBRELLA LIAB X OCCUR B EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? MANA PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? MANA PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	80	7 000	14				PRODUCTS - COMP/OP AGG	\$	2,000,00
AUTOMOBILE LIABILITY X ANY AUTO B X OWNED AUTOS ONLY AUTOS ONLY AUTOS ONLY Garage X UMBRELLA LIAB X OCCUR B EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? MANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? MANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?					me like to the	1. 1. 5. 5.		\$	
X ANY AUTO B X OWNED AUTOS ONLY X HIRED AUTO SONLY X AUTO ONLY X OCCUR B EXCESS LIAB CLAIMS-MADE DED RETENTION S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N/A Q09 5730068 9/7/23 9/7/24 BODILY INJURY (Per person) S BODILY INJURY (Per person					12/10/20	15 50	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,00
B X OWNED AUTOS ONLY AUTOS ONLY AUTOS ONLY SCHEDULED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY S OCCUR B EXCESS LIAB					1000		BODILY INJURY (Per person)	\$	
B X AUTOSONLY HIRED AUTOSONLY S NON-OWNED AUTOSONLY S PROPERTY DAMAGE S PEACH OCCURRENCE S AGREGATE S S S S S S S S S S S S S S S S S S S		CHEDITED CHEDITED	13/3	009 5730068	9/7/23	9/7/24	BODILY INJURY (Per accident)	\$	The second
Garage X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/RM/EMBER EXCLUDED? MANUAL PROPRIETOR/PARTNER/EXECUTIVE OFFICE/RM/EMBER EXCLUDED? MANUAL PROPRIETOR/PARTNER/EXECUTIVE OFFICE/RM/EMBER EXCLUDED? MANUAL PROPRIETOR/PARTNER/EXECUTIVE OFFICE/RM/EMBER EXCLUDED? MANUAL PROPRIETOR/PARTNER/EXECUTIVE OFFICE/RM/EMBER EXCLUDED?	В	X AUTOSONLY AUTOS NON-OWNED		007 3730000		11.55	PROPERTY DAMAGE (Per accident)	\$	
X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) N/A PER OTH- STATUTE ER EL EACH ACCIDENT S EL DISEASE - EA EMPLOYEE S		AUTO ONLY	50				The state of the s	\$	CV TOWN
B EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/RIMEMBER EXCLUDED? (Mandatory in NH) N/A REL EACH ACCIDENT S EL DISEASE - EA EMPLOYEE \$		2.5					EACH OCCURRENCE	s	5,000,00
DED RETENTIONS S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) EL DISEASE - EA EMPLOYEE \$	1	A 000001		Q35 5570012	11/5/23	11/5/24	AGGREGATE	s	5,000,00
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) EL DISEASE - EA EMPLOYEE \$								\$	
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEBER EXCLUDED? (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$			1	alk egypte in the egypte to the area.	3-2-		PER OTH- STATUTE ER		
OFFICER/MEMBER EXCLUDED? [EL. DISEASE - EA EMPLOYEE \$ [Mandatory in NH]		AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	22 1				E.L. EACH ACCIDENT	s	
(Mandatory in NH) E.L. DISEASE - POLICY LIMIT S E.L. DISEASE - POLICY LIMIT S	19		N/A				E.L. DISEASE - EA EMPLOYEE	s	- 19
DESCRIPTION OF OPERATIONS below		(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	

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

CERTIFICATI	E HOLDER
-------------	----------

State of WV Department of Admin. Purchasing Division 2019 Washington St.E. B15 Charleston, WV 25305

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

Kelly Courtney

© 1988-2015 ACORD CORPORATION. All rights reserved.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MINDOPPPP)

11/09/23

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AFFRIMATIVELY 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.

11000	IMPORTANT: If the certificate holds If BUBROGATION IS WAIVED, subje- this certificate does not confer rights	et to t	the terms and conditions i	of the pol of such en	lcy, certain ; dorsement(s	policies may):	NAL INSURED provision require an endorseme	ons or b	e andorsed. tatement on
Pri	HODUCER			RAME: Bill Deadrick					
h	HD-ATLANTIC GROUP			7,718,71	o, Est): (304)	257-4616	IAO, Ha	(304):	257-2069
P	O Box 700			E-MAIL ACOPH	4-111-1-00-		group.com		
P	etersburg, WV 26847			1100010		SUBER(S) AFTO	ROING COVERAGE		HAIG #
				PARAMETER	en A: Travel				
IN	IUREO			THE REAL PROPERTY.		W. C. Charles		MANAGEMENT OF THE	
	J & R Landscaping and	4 Tone	Evenete Inc	-	MAURER B				
	J & R Tree Service	1100	a experte, me	INBUR				nacional more	
				Meuni				un accompliant of	
	375 Timber Ridge Lane	,		MBURN	ER E :				
10000	Keyser, WV 26726		WV 26726	MBURI	ERF				
	THIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY F CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	B OF REQUIF PERT POLICE	REMENT, TERM OR CONDITI TAIN, THE INSURANCE AFFO	HAVE BEI ION OF AN ORDED BY	THE POLICIE	OR OTHER	DOCUMENT WITH RESP D HEREIN IS SUBJECT	TO ALL	WHICH THIS
J.Yi			WVD POLICY NUMBER	R	(MM/DD/YYYY)		LIMI	78	
	COMMERCIAL GENERAL LIABILITY				1200		EACH OCCURRENCE	5	
	CLAIMS-MADE OCCUR				17 14	142011	PREMISES (Ea occurrence)	\$	
					Sub-		MED EXP (Any one person)	5	
							PERSONAL & ADV INJURY	5	
	GEN'L AGGREGATE LIMIT APPLIES PER:				48		GENERAL AGGREGATE	8	
	POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	5	
	OTHER: AUTOMOBILE LIABILITY	-			-		COMBINED SINGLE LIMIT	1	
	POMP .	16			(A) (A)		(Ea accident)	-	
	ANY AUTO OWNED SCHEDULED						BODILY INJURY (Per person)	5	
	AUTOS ONLY AUTOS				F	7 47	BODILY INJURY (Per accident	-	Special resistance or projection of
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	5	
		111						5	
	UMBRELLA LIAB OCCUR				The state of		EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	5	
	DED RETENTIONS				19			5	
iconic	WORKERS COMPENSATION					177	X PER OTH-	1	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE				10/08/23	10/08/24	E.L. EACH ACCIDENT		1 000 000
A	OFFICER/MEMBER EXCLUDED?	NIA	6JUB-6R08783-6-22	2			TOO OF THE BUILDING AND THE COLORS AND THE BUILDING AND T	1	1,000,000
	(Mandatory in NH) If yos, describe under						E.L. DISEASE - EA EMPLOYE	The State of the S	1,000,000
-	DÉSCRIPTION OF OPERATIONS below	-					E.L. DISEASE - POLICY LIMIT	\$	1,000,000
ESC	RIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (AC	CORD 181, Additional Remarks Sch	edule, may b	e attached if mor	e space la requir	red)		
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (AC	CORD 101, Additional Remarks Sch	edute, may b	e attached if mor	a space la requi	red)		
ER	TIFICATE HOLDER			CANC	ELLATION		100000000000000000000000000000000000000		1 6 6 7 78
State of West Virginia WV Purchasing Division 2019 Washington Street, East Bldg 15 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.					LED BEFORE LIVERED IN
				AUTHORIZED REPRESENTATIVE Bill Dradrick					



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

$_{\rm I,}$ $\underline{\rm Jimmy~E~Lucas~JR}_{\rm ,~after~being~first~duly~sworn,~depose~and~state~as~follows:}$					
1. I am an employee of J & R Landscaping and Tree Experts INC; and,					
(Company Name)					
2. I do hereby attest that J & R Landscaping and Tree Experts INC					
2. I do hereby attest that (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: Jimmy E Lucas JR					
Signature:					
Title: President					
Company Name: J & R Landscaping and Tree Experts INC					
Date: 07/23/2024					
STATE OF WEST VIRGINIA,					
COUNTY OF Mineral , TO-WIT:					
Taken, subscribed and sworn to before me this 23 day of July . 24					
By Commission expires Nov 17, 2025					
(Seal) OFFICIAL SEAL Notary Public, State of West Virginia SHAUNA R. COOK 375 Timber Ridge Lane Keyser, W. V. Spare Lane My Commission Expires Nov. 17, 2025 My Commission Expires Nov. 17, 2025					



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 Landscaping + Tree Expert
Company Address Rt 1 Box 11ZF

Somewhere, North Carolina 21111 kyse, w 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.
- b. Random testing
- 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 provide substance abuse testing and related services to \(\int \frac{1}{2} \) Landseaping + Tree Experts (Company Name) hereafter referred to as the Company, and as the Company has requested such services on this the \(\frac{17}{17}\) day of \(\frac{AuGust}{17}\), 20\(\frac{10}{17}\).

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 Day 1125 Kyse, w 26726	SAME
Ula (Mail)	
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
12	8-17-10
Signature of Authorized Company Agent	Date
D. Awell	8-17-10
Signature of Authorized Agent of PNSI	Date

Please return all pages of the signed Agreement

F:wpdocs\subabuse\agree Effective 03/10/04 Revised 07/20/09