



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.

Header 1

List View

- General Information
- Contact
- Default Values
- Discount
- Document Information
- Clarification Request

Procurement Folder: 1490158

Procurement Type: Central Purchase Order

Vendor ID: 000000205983

Legal Name: PETRUCCI BROTHERS LLC

Alias/DBA: REMIGIO PETRUCCI

Total Bid: \$735,000.00

Response Date: 05/26/2026

Response Time: 18:30

Responded By User ID: petruccibros

First Name: Amelia

Last Name: Petrucci

Email: amelia@petruccibros.com

Phone: 3046578639

SO Doc Code: CRFQ

SO Dept: 0310

SO Doc ID: DNR2600000019

Published Date: 5/14/26

Close Date: 5/27/26

Close Time: 13:30

Status: Closed

Solicitation Description: West Fork (Two Licks Rd) New Public Access Site

Total of Header Attachments: 1

Total of All Attachments: 1



| Line | Comm Ln Desc                 | Qty | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|------------------------------|-----|------------|------------|-----------------------------|
| 1    | Marine construction services |     |            |            | 735000.00                   |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 72000000  |              |               |         |

**Commodity Line Comments:** Base bid: \$735,000.00  
Additional: \$14,700.00  
A+B total: \$749,700.00

**Extended Description:**  
West Fork (Two Licks Rd) PAS



**Reason for Modification:**

Addendum #1 issued to publish pre-bid sign in sheet, agency responses to vendor submitted questions and revised Exhibit A Pricing Page.

**ADDITIONAL INFORMATION**

The West Virginia Purchasing Division is soliciting bids on behalf of the West Virginia Division of Natural Resources to establish a construction contract to build a new boat ramp and dock at West Fork - Two Licks Rd. per the attached specifications and terms and conditions.

**INVOICE TO** | **SHIP TO**

|   |  |  |  |
|---|--|--|--|
| DIVISION OF NATURAL RESOURCES<br>112 CALIFORNIA AVENUE<br>BLDG 4<br>CHARLESTON WV<br>US |  | STATE OF WEST VIRGINIA<br><br>JOBSITE - SEE SPECIFICATIONS<br><br>No City WV<br>US |  |
|---|--|--|--|

| Line | Comm Ln Desc                 | Qty | Unit Issue | Unit Price | Total Price |
|------|------------------------------|-----|------------|------------|-------------|
| 1    | Marine construction services |     |            |            |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 72000000  |              |               |         |

**Extended Description:**  
West Fork (Two Licks Rd) PAS

**SCHEDULE OF EVENTS**

| <u>Line</u> | <u>Event</u> | <u>Event Date</u> |
|-------------|--------------|-------------------|
|-------------|--------------|-------------------|

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFQ DNR26\*19**

**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)

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input type="checkbox"/> Addendum No. 2            | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3            | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4            | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5            | <input type="checkbox"/> 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 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.

Petrucchi Brothers LLC  
Company  
Remigio Petrucci  
Authorized Signature  
5/26/26  
Date

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

EXHIBIT A – PRICING PAGE  
**WV DNR Wildlife Section**  
**West Fork Public Access (Two Licks Rd.)**

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Name of Vendor:

PETRUCCI BROTHERS LLC

Address of Vendor:

PO BOX 44  
WAITMAN WILLEY RD.  
FARMINGTON, WV 26571

Phone Number of Vendor:

304 657 8639

WV Contractors License No.

**WV-** 004909

We, the undersigned, having examined the site and being familiar with the local conditions affecting the cost of the work and also being familiar with the general conditions to bidders, drawings, and specifications, hereby proposes to furnish all materials, equipment, and labor to complete all work in a workmanlike manner, as described in the Bidding documents.

**“A” Base Bid**

The Base Bid shall consist of all the work described in the Bidding Documents including the Plans, Project Manual, and any addendums not identified as an additive alternate.

**Total Base Bid:**

Lump sum for all labor, materials, and equipment necessary for a complete project.

**Written in numbers.**

\$735,000.00

**Total Base Bid: “A”**

Lump sum for all labor, materials, and equipment necessary for a complete project.

**Written in words.**

Seven hundred thirty-five thousand  
and zero cents

EXHIBIT A – PRICING PAGE  
**WV DNR Wildlife Section**  
**West Fork Public Access (Two Licks Rd.)**

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**“B” Unit Price Bid (Additional Items)**

| Item   | Unit | Quantity | Unit Price | Ext.                |
|--|------|----------|------------|---------------------|
| 1) Removal, disposal and replacement of unsuitable soils | CY   | 300      | \$44.00    | \$13,200.00, 3 days |
| 2) Additional Riprap                                     | TON  | 10       | \$150.00   | \$1,500.00, 1 day   |

**Total Unit Price Bid:**  
 Total of all unit price items.  
**Written in numbers.**

|             |
|-------------|
| \$14,700.00 |
|-------------|

**Total Unit Price Bid: “B”**  
 Total of all unit price items.  
**Written in words.**

|  |
|--|
| Fourteen thousand seven hundred dollars and zero cents |
|--|

**Total Bid**

**Total Bid:**  
 Base Bid plus Unit Price Bid.  
**Written in numbers.**

|              |
|--------------|
| \$749,700.00 |
|--------------|

**Total Bid: “A+B”**  
 Base Bid plus Unit Price Bid.  
**Written in words.**

|  |
|--|
| Seven hundred forty nine thousand seven hundred dollars and zero cents |
|--|

# THE CINCINNATI INSURANCE COMPANY

## Bid Bond

**CONTRACTOR** (Name, legal status and address):

Petrucci Brothers LLC  
5010 WAITMAN WILEY RD  
FARMINGTON, WV 26571

**SURETY** (Name, legal status and principal place of business):

**THE CINCINNATI INSURANCE COMPANY**  
**6200 S. GILMORE ROAD**  
**FAIRFIELD, OHIO 45014-5141**

**OWNER** (Name, legal status and address):

DIVISION OF NATURAL RESOURCES  
324 4TH AVE  
SOUTH CHARLESTON, WV 25303

This document has important legal consequences, Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

**BOND AMOUNT:**

**5% of bid**

**PROJECT** (Name, location or address, and Project number, if any):

establish a construction contract to build a new boat ramp and dock at West Fork - Two Licks Rd

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond the sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirements shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 26 day of May, 2026

Remigio Petrucci  
(Witness)

Petrucci Brothers LLC

(Principal)

(Seal)

(Title)

K. G. Johnson  
(Witness)

**THE CINCINNATI INSURANCE COMPANY**

(Surety)

(Seal)

Chyette Roberts  
(Title)

THE CINCINNATI INSURANCE COMPANY  
THE CINCINNATI CASUALTY COMPANY

Fairfield, Ohio

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That THE CINCINNATI INSURANCE COMPANY and THE CINCINNATI CASUALTY COMPANY, corporations organized under the laws of the State of Ohio, and having their principal offices in the City of Fairfield, Ohio (herein collectively called the "Companies"), do hereby constitute and appoint

Randall E Kerns, Michael W Mason, Nancy J Shipp, Carla J Dobbins, Lisa M McGuire, Vance Bunn, Mark E Sturm, Kathy Marcum, Jessica L.C. Adkins, Kimberly J Forinash, Elizabeth Roberts, Jessica Judy, Debra Michalski, Maximilian Cadorette, Liam Purkey, Mitch Price

of BRIDGEPORT, WV their true and legal Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign, execute, seal and deliver on behalf of the Companies as Surety, any and all bonds, policies, undertakings or other like instruments, as follows:

Eight Million Dollars and 00/100 (\$8,000,000.00)

This appointment is made under and by authority of the following resolutions adopted by the Boards of Directors of The Cincinnati Insurance Company and The Cincinnati Casualty Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the President or any Senior Vice President be hereby authorized, and empowered to appoint Attorneys-in-Fact of the Company to execute any and all bonds, policies, undertakings, or other like instruments on behalf of the Corporation, and may authorize any officer or any such Attorney-in-Fact to affix the corporate seal; and may with or without cause modify or revoke any such appointment or authority. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company.

RESOLVED, that the signature of the President or any Senior Vice President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Secretary or Assistant Vice-President and the Seal of the Company may be affixed by facsimile to any certificate of any such power and any such power of certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certified by certificate so executed and sealed shall, with respect to any bond or undertaking to which it is attached, continue to be valid and binding on the Company.

IN WITNESS WHEREOF, the Companies have caused these presents to be sealed with their corporate seals, duly attested by their President or any Senior Vice President this 16th day of March, 2021.



STATE OF OHIO )SS:  
COUNTY OF BUTLER )

THE CINCINNATI INSURANCE COMPANY  
THE CINCINNATI CASUALTY COMPANY

*Stephen A. Ventre*

On this 16th day of March, 2021 before me came the above-named President or Senior Vice President of The Cincinnati Insurance Company and The Cincinnati Casualty Company, to me personally known to be the officer described herein, and acknowledged that the seals affixed to the preceding instrument are the corporate seals of said Companies and the corporate seals and the signature of the officer were duly affixed and subscribed to said instrument by the authority and direction of said corporations.



*Keith Collett*

Keith Collett, Attorney at Law  
Notary Public – State of Ohio

My commission has no expiration date.  
Section 147.03 O.R.C.

I, the undersigned Secretary or Assistant Vice-President of The Cincinnati Insurance Company and The Cincinnati Casualty Company, hereby certify that the above is the Original Power of Attorney issued by said Companies, and do hereby further certify that the said Power of Attorney is still in full force and effect.

Given under my hand and seal of said Companies at Fairfield, Ohio, this 26<sup>th</sup> day of May, 2021



*Ed [Signature]*



# CONTRACTOR LICENSE

AUTHORIZED BY THE  
West Virginia Contractor  
Licensing Board

NUMBER: WV004909

**CLASSIFICATION:**

GENERAL BUILDING  
RESIDENTIAL  
SPECIALTY

PETRUCCI BROTHERS LLC  
PO BOX 44  
FARMINGTON, WV 26571-0327

**DATE ISSUED**

**EXPIRATION DATE**

**DECEMBER 13, 2025**

**DECEMBER 13, 2026**

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)

8/13/2025

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 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).

|   |   |                                    |
|---|---|------------------------------------|
| <b>PRODUCER</b><br>United Security Agency, Inc.<br>1207 Fairmont Ave<br>Fairmont WV 26554 | <b>CONTACT NAME:</b> Jessica L.C. Adkins  |                                    |
|   | <b>PHONE (A/C, No, Ext):</b> 304-363-1660 | <b>FAX (A/C, No):</b> 304-363-5956 |
| <b>E-MAIL ADDRESS:</b> jadkins@unitedsecurityagency.com                                   |   |                                    |
| <b>INSURER(S) AFFORDING COVERAGE</b>  |   | <b>NAIC #</b>                      |
| <b>INSURER A :</b> ERIE INSURANCE GROUP   |   | 26830                              |
| <b>INSURED</b><br>Petrucci Brothers, LLC.<br>P.O. Box 44<br>Farmington WV 26571           | <b>INSURER B :</b>                        |                                    |
|   | <b>INSURER C :</b>                        |                                    |
|   | <b>INSURER D :</b>                        |                                    |
|   | <b>INSURER E :</b>                        |                                    |
|   | <b>INSURER F :</b>                        |                                    |

**COVERAGES**

CERTIFICATE NUMBER: 179083203

REVISION NUMBER:

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.

| INSR LTR | TYPE OF INSURANCE  | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |                  |
|----------|--|-----------|----------|---------------|-------------------------|-------------------------|--|------------------|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |           |          | Q61-0435941   | 7/17/2025               | 7/17/2026               | EACH OCCURRENCE  | \$ 1,000,000     |
|          |  |           |          |               |                         |                         | DAMAGE TO RENTED PREMISES (Ea occurrence)  | \$ 1,000,000     |
|          |  |           |          |               |                         |                         | MED EXP (Any one person)   | \$ 5,000         |
|          |  |           |          |               |                         |                         | PERSONAL & ADV INJURY  | \$ 1,000,000     |
|          |  |           |          |               |                         |                         | GENERAL AGGREGATE  | \$ 2,000,000     |
|          |  |           |          |               |                         |                         | PRODUCTS - COMP/OP AGG   | \$ 2,000,000     |
|          |  |           |          |               |                         |                         |  | \$               |
| A        | <input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> NON-OWNED AUTOS      |           |          | Q07-6840020   | 7/18/2025               | 7/18/2026               | COMBINED SINGLE LIMIT (Ea accident)  | \$ 1,000,000     |
|          |  |           |          |               |                         |                         | BODILY INJURY (Per person)   | \$               |
|          |  |           |          |               |                         |                         | BODILY INJURY (Per accident)   | \$               |
|          |  |           |          |               |                         |                         | PROPERTY DAMAGE (Per accident)   | \$               |
|          |  |           |          |               |                         |                         |  | \$               |
| A        | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0   |           |          | Q31-6770063   | 7/17/2025               | 7/17/2026               | EACH OCCURRENCE  | \$ 1,000,000     |
|          |  |           |          |               |                         |                         | AGGREGATE  | \$ 1,000,000     |
|          |  |           |          |               |                         |                         |  | \$               |
| A        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below <input type="checkbox"/> Y <input checked="" type="checkbox"/> N/A   |           |          | Q92-0400643   | 8/4/2025                | 8/4/2026                | <input checked="" type="checkbox"/> PER STATUTE<br><input type="checkbox"/> OTH-ER | WV Broad Form EL |
|          |  |           |          |               |                         |                         | E.L. EACH ACCIDENT   | \$ 1,000,000     |
|          |  |           |          |               |                         |                         | E.L. DISEASE - EA EMPLOYEE   | \$ 1,000,000     |
|          |  |           |          |               |                         |                         | E.L. DISEASE - POLICY LIMIT  | \$ 1,000,000     |
| A        | Borrowed/Leased Equipment  |           |          | Q61-0435941   | 7/17/2025               | 7/17/2026               | Contractor's Equip   | 100,000          |

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

**CERTIFICATE HOLDER****CANCELLATION**

Petrucci Brothers, LLC.  
 PO Box 44  
 Farmington WV 26571

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

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

**STATE OF WEST VIRGINIA,**

**COUNTY OF** Marion **, TO-WIT:**

I, Remigio Petrucci, after being first duly sworn, depose and state as follows:

- I am an employee of Petrucci Brothers LLC; and,  
(Company Name)
- I do hereby attest that Petrucci Brothers LLC  
(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: Remigio Petrucci

Signature: Remigio Petrucci

Title: Owner

Company Name: Petrucci Brothers LLC

Date: 5/24/24

Taken, subscribed and sworn to before me this 26th day of May, 2024.

By Commission expires June 14, 2029

(Seal)

Gloria Cunningham  
(Notary Public)

