



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: 1737765

Procurement Type: Central Master Agreement

Vendor ID: 000000180496

Legal Name: AQUAFIX SYSTEMS INC

Alias/DBA:

Total Bid: \$1,050,000.00

Response Date: 08/29/2025

Response Time: 13:40

Responded By User ID: aquafix

First Name: Michael

Last Name: Jenkins

Email: mjj@aquafix.com

Phone: 3043291056

SO Doc Code: CRFQ

SO Dept: 0313

SO Doc ID: DEP2600000005

Published Date: 8/19/25

Close Date: 9/4/25

Close Time: 13:30

Status: Closed

Solicitation Description: Granulated Lime (Open-End) AML Northern Counties

Total of Header Attachments: 1

Total of All Attachments: 1



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: 1737765
Solicitation Description: Granulated Lime (Open-End) AML Northern Counties
Proc Type: Central Master Agreement

Solicitation Closes	Solicitation Response	Version
2025-09-04 13:30	SR 0313 ESR08292500000001463	1

VENDOR
000000180496
AQUAFIX SYSTEMS INC

Solicitation Number: CRFQ 0313 DEP2600000005
Total Bid: 1050000
Response Date: 2025-08-29
Response Time: 13:40:26
Comments:

FOR INFORMATION CONTACT THE BUYER
Joseph (Josh) E Hager III
(304) 558-2306
joseph.e.hageriii@wv.gov

Vendor		
Signature X	FEIN#	DATE

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	1/8" X 0 Granulated Lime delivered less than 20 tons	1000.0000	TON	350.000000	350000.00

Comm Code	Manufacturer	Specification	Model #
11111608			

Commodity Line Comments:

Extended Description:

Granulated Lime delivered to sites in partial load of one (1) to twenty (20) ton.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	1/8" x 0 Granulated Lime delivered as full load 20+ tons	1000.0000	TON	350.000000	350000.00

Comm Code	Manufacturer	Specification	Model #
11111608			

Commodity Line Comments:

Extended Description:

Granulated Lime delivered to sites as full load (20 tons plus), which may be split among projects.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	1/4" X1/8" Granulated Lime delivered less than 20 tons	500.00000	TON	350.000000	175000.00

Comm Code	Manufacturer	Specification	Model #
11111608			

Commodity Line Comments:

Extended Description:

Granulated Lime delivered to sites in partial load of one (1) to twenty (20) ton.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
4	1/4" X 1/8" Granulated Lime delivered as full load 20+ tons	500.00000	TON	350.000000	175000.00

Comm Code	Manufacturer	Specification	Model #
11111608			

Commodity Line Comments:

Extended Description:

Granulated Lime delivered to sites as full load (20 tons plus), which may be split among projects.



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
Chemicals

Proc Folder: 1737765

Doc Description: Granulated Lime (Open-End) AML Northern Counties

Reason for Modification:

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2025-08-19	2025-09-04 13:30	CRFQ 0313 DEP2600000005	1

BID RECEIVING LOCATION

BID CLERK
DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON WV 25305
US

VENDOR

Vendor Customer Code: 000000180496

Vendor Name: AQUAFIX SYSTEMS INC

Address:

Street: 301 MAPLE LANE

City: KINGWOOD

State: WV

Country: US

Zip: 26537

Principal Contact: MICHAEL JENKINS

Vendor Contact Phone: 304 329-1056

Extension:

FOR INFORMATION CONTACT THE BUYER

Joseph (Josh) E Hager III
(304) 558-2306
joseph.e.hageriii@wv.gov

Vendor
Signature X

Michael Jenkins

FEIN#

36-4529453

DATE

8-29-25

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

REQUEST FOR QUOTATION
Granulated Lime (Open-End) AML
Northern Counties

8. VENDOR DEFAULT:

8.1 The following shall be considered a vendor default under this Contract:

8.1.1 Failure to provide Contract Items in accordance with the requirements contained herein.

8.1.2 Failure to comply with other specifications and requirements contained herein.

8.1.3 Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.

8.1.4 Failure to remedy deficient performance upon request.

8.2 The following remedies shall be available to Agency upon default:

8.2.1 Immediate cancellation of the Contract.

8.2.2 Immediate cancellation of one or more release orders issued under this contract.

8.2.3 Any other remedies available in law or equity.

9. MISCELLANEOUS:

9.1 No Substitutions: Vendor shall supply only Contract Items submitted in response to the Solicitation unless a contract modification is approved in accordance with the provisions contained in this Contract.

9.2 Vendor Supply: Vendor must carry sufficient inventory of the Contract Items being offered to fulfill its obligations under this Contract. By signing its bid, Vendor certifies that it can supply the Contract Items contained in its bid response.

9.3 Reports: Vendor shall provide quarterly reports and annual summaries to the Agency showing the Agency's items purchased, quantities of items purchased, and total dollar value of the items purchased. Vendor shall also provide reports, upon request, showing the items purchased during the term of this Contract, the quantity purchased for each of those items, and the total value of purchases for each of those items. Failure to supply such reports may be grounds for cancellation of this Contract.

9.4 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: MICHAEL JENKINS

Telephone Number: 304 329-1056

Fax Number: 304 329-1217

Email Address: myj @ AQUAFIX.COM

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.:

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. 1
- ☐ Addendum No. 2
- ☐ Addendum No. 3
- ☐ Addendum No. 4
- ☐ Addendum No. 5

- ☐ Addendum No. 6
- ☐ Addendum No. 7
- ☐ Addendum No. 8
- ☐ Addendum No. 9
- ☐ 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.

AQUAFIX SYSTEMS INC

Company


Authorized Signature

Date

8-29-25

NOTE: This addendum acknowledgment 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.

(Printed Name and Title) MICHAEL J JENKINS

(Address) 301 MAPLE LANE, KINGWOOD, WV 26537

(Phone Number) / (Fax Number) 304 329-1056 304 329-1217

(email address) mjj@aquafix.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.

AQUAFIX SYSTEMS INC

(Company) _____


(Signature of Authorized Representative)

MICHAEL J JENKINS PRESIDENT

(Printed Name and Title of Authorized Representative) (Date)

304 329-1056 304 329-1217

(Phone Number) (Fax Number)

mjj@aquafix.com

(Email Address)

ABANDONED MINE LANDS (AML) CONTRACTOR INFORMATION FORM

You must complete this form for your AML contracting officer to request an eligibility evaluation from the Office of Surface Mining Reclamation and Enforcement (OSMRE) to determine if you are eligible to receive an AML contract. This requirement can be found under OSMRE's regulations at 30 CFR 874.16. **NOTE:** This form must be signed and **dated within 30 days** of submission to be considered for a current bid.

Part A: General Information

Business Name: AQUAFIX SYSTEMS INC
Tax ID #: 36-4529453
Address: 301 MAPLE LANE
City, State, & Zip: KINGWOOD, WV 26537
Phone Number: 304 329-1056
Email Address: mjt@aquafix.com

Part B: Obtain an Organizational Family Tree (OFT) from the Applicant Violator System (AVS)

If you plan to certify the existing AVS information or submit updates under Part C, you must include an OFT. Instructions for downloading an OFT from the AVS can be found at: <https://www.osmre.gov/sites/default/files/2022-02/OMB%201029-0119%20instructions.pdf>. If you require assistance you may contact the AVS Office by phone at: 800-643-9748, or by email at: avshelp@osmre.gov.

Part C: Certifying and updating information in the AVS

Select one of the options, follow the instructions for the selected option, sign, and date below.

I, Michael Jenkins, have express authority to certify that:
(Print Name)

- ☒ 1. Our business is listed in the AVS. The information is accurate, complete, and up to date. (If you select this option, you must attach an Entity OFT from the AVS to this form). Do not complete Part D.
- ☐ 2. Our business is in the AVS. The information needs to be updated. (If you select this option, you must attach an Entity OFT from the AVS to this form). Complete Part D to provide the missing or corrected information.
- ☐ 3. Our business is not listed in the AVS. The information needs to be added. Complete Part D to provide the information.

8-29-25
Date

Michael Jenkins
Signature

Pres
Title

U.S. Department of the Interior
Office of Surface Mining Reclamation and Enforcement
Applicant/Violator System



Entities

Previous Search

248015

Search

10 per page ▼

Entity Number: 248015
Last Name: Aquafix Systems Inc
* First Name:
Middle Name:
Alias:
Tax ID:
Memo:
Created: 9/17/2008
Updated: 9/17/2008
Source: lkeene@osmre.gov
Entity Type: Business
Locked: Y

Entity #	Entity Name	Suffix	First	Middle	Lock	Type	
248015	Aquafix Systems Inc				Y	Business	Select

Addresses

Relationships

Applications

Permits

Comments

Entity #	Parent Entity	Relationship	Entity #	Related Entity	First	% Own	Begin	End	Hold	Hold Source	Create	Update	Description	Source
248015	Aquafix Systems Inc	Owner	248014	Jenkins	Michael	100.00	3/4/2003		None		9/17/2008	9/17/2008		lkeene@osmre.gov
248015	Aquafix Systems Inc	President	248014	Jenkins	Michael	0.00	3/4/2003		None		9/17/2008	9/17/2008		lkeene@osmre.gov
248015	Aquafix Systems Inc	Director	248014	Jenkins	Michael	0.00	3/4/2003		None		9/17/2008	9/17/2008		lkeene@osmre.gov
248015	Aquafix Systems Inc	Secretary	248014	Jenkins	Michael	0.00	3/4/2008		None		9/17/2008	9/17/2008		lkeene@osmre.gov