

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

#### Request for Quotation

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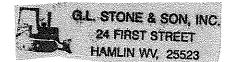
RFO NUMBER DEP15305

CHUCK BOWMAN 304-558-2157

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**ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R **601 57TH STREET SE** CHARLESTON, WV 25304 304-926-0499

DATE PRINTED TERMS OF SALE SHIP VIA F.O.B. FREIGHTTERMS 01/26/2011 BID OPENING DATE 03/15/2011 BID **OPENING TIME** 01:30PM CAT. LINE QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT 0001 JΒ 962-73 429815,00 1 RECLAMATION: RESTORATION OF LAND & OTHER PROPERTIES THE WEST VIRGINIA PURCHASING DIVISION, FOR THE WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION, IS SOLICITING BIDS FROM QUALIFIED CONTRACTORS FOR A CONTRACT TO PROVIDE ALL LABOR AND MATERIALS FOR THE RECLAMATION OF 5.5-ACRE ABANDONED MINE PROJECT KNOWN A THE "WAYNE KISLING HIGHWALL AND POND" PROJECT LOCATED NEAR DOLA, WEST VIRGINIA, (HARRISON COL). A MANDATORY ON SITE PREBID CONFERENCE SHALL BE HELD ON 02/17/11 a 10:00 AM. ALL INTERESTED PARTIES ARE REQUIRED TO ATTEND THIS MEETING. FAILURE TO ATTEND TH MANDATORY PRE-BID SHALL RESULT IN DISQUALIFICATION OF NO ONE PERSON MAY REPRESENT MORE THAN ONE ALSO, PREBIDS WILL INVOLVE EXTENSIVE FOOT BIDDER. TRAVEL OVER DIFFICULT TERRAIN AND/OR DURING INCLEMENT WEATHER. AN ATTENDANCE SHEET WILL BE MADE AVAILABLE FOR ALL THIS WILL SERVE AS THE POTENTIAL BIDDERS TO COMPLETE. OFFICIAL DOCUMENT VERIFYING ATTENDANCE AT THE MANDATORY PRE-BID. FAILURE TO PROVIDE YOUR COMPANY AND REPRESENTATIVE NAME ON THE ATTENDANCE SHEET WILL RESULT IN DISQUALIFICATION OF THE BID. THE STATE WILL NOT ACCEPT ANY OTHER DOCUMENTATION TO VERIFY ATTENDANCE. THE BIDDER IS RESPONSIBLE FOR ENSURING THEY HAVE COMPLETED THE INFORMATION REQUIRED ON THE ATTENDANCE THE PURCHASING DIVISION AND THE STATE AGENCY WILL NOT ASSUME ANY RESPONSIBILITY FOR A BIDDER'S FAILURE TO COMPLETE THE PRE-BID ATTENDANCE SHEET. IN SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATUR -824-3800 ADDRESS CHANGES TO BE NOTED ABOVE 5-052-5089-00

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

## GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- 1. Awards will be made in the best interest of the State of West Virginia.
- 2. The State may accept or reject in part, or in whole, any bid.
- 3. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
- 4. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods this Purchase Order/Contract becomes void and of no effect after June 30.
- 5. Payment may only be made after the delivery and acceptance of goods or services.
- 6. Interest may be paid for late payment in accordance with the West Virginia Code.
- 7. Vendor preference will be granted upon written request in accordance with the West Virginia Code.
- 8. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 9. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 10. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern the purchasing process.
- 11. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
- 12. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
- 13. HIPAA BUSINESS ASSOCIATE ADDENDUM: The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and is hereby made part of the agreement. Provided that the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
- 14. CONFIDENTIALITY: The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf.
- 15. LICENSING: Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, and the West Virginia Insurance Commission. The vendor must provide all necessary releases to obtain information to enable the director or spending unit to verify that the vendor is licensed and in good standing with the above entities.
- 16. ANTITRUST: In submitting a bid to any agency for the State of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the State of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, or person or entity submitting a bid for the same material, supplies, equipment or services and is in all respects fair and without collusion or Fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

#### INSTRUCTIONS TO BIDDERS

- 1. Use the quotation forms provided by the Purchasing Division. Complete all sections of the quotation form.
- 2. Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as **EQUAL** to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
- 3. Unit prices shall prevail in case of discrepancy. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- 4. All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130

5. Communication during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited (W.Va. C.S.R. §148-1-6.6).



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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

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**ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

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DATE PRINTED TERMS OF SALE SHIP VIA FOB. FREIGHTTERMS 01/26/2011 BID OPENING DATE: 03/15/2011 BID OPENING TIME 01:30PM CAT. LINE QUANTITY UOP ITEM:NUMBER UNITPRICE AMOUNT ANY INFORMATION PROVIDED IN SPECIFICATION MANUALS, OR ANY OTHER SOURCE, VERBAL OR WRITTEN, WHICH CONTRADICTS OR ALTERS THE INFORMATION PROVIDED FROM THE SOURCES AS DESCRIBED IN THE ABOVE PARAGRAPH IS VOID AND OF NO EFFECT. (1) NOTICE TO PROCEED: THE CONSTRUCTION WORK SPECIFIED HEREIN IS TO BE COMPLETED WITHIN 365 CALENDAR DAYS AFTER THE OFFICIAL NOTICE TO PROCEED IS RECEIVED. IN THE EVENT THAT A PRE-CONSTRUCTION CONFERENCE IS REQUIRED, THE NOTICE TO PROCEED SHALL BE THE SPECIFIC DATE ESTABLISHED IN THE PRE-CONSTRUCTION CONFERENCE. (2) GUARANTEE AND MAINTENANCE: (A) THE MATERIALS AND WORKMANSHIP AFFECTED BY THE CONTRACTOR ARE SUBJECT TO THE GUARANTEE ESTABLISHE BY CUSTOM OF THE RESPECTIVE TRADES. IN THE ABSENCE OF A TRADE GUARANTEE CUSTOM OR A SPECIAL GUARANTEE PROVISION, THE WORK, BOTH AS TO THE MATERIALS AND WORKMANSHIP, SHALL UPON ACCEPTANCE OF FINAL PAYMENT BY THE CONTRACTOR BE CONSIDERED GUARANTEED BY THE CONTRACTOR FOR ONE YEAR FROM THE DATE OF THE ACCEPTANC NEITHER THE FINAL ACCEPTANCE NOR THE OF THE WORK. FINAL PAYMENT SHALL RELIEVE THE CONTRACTOR OF RESPONSIBILITY FOR NEGLIGENCE OR FAULTY MATERIALS, AND FOR DEFECTS APPEARING WITHIN THE GUARANTEE PERIOD SHALL BE REMEDIED AT THE EXPENSE OF THE CONTRACTOR UPON WRITTEN NOTICE. DURING THE ONE-YEAR GUARANTEE PERIOD, THE (B). CONTRACTOR WILL MAINTAIN THE PROJECT TO THE CONDITIONS EXISTING AT THE DATE OF THE ACCEPTANCE OF THE WORK. ANY FAILURES DUE TO THE NEGLIGENCE OR WORKMANSHIP OF CONTRACTOR IN ANY OF THE WORK THAT DEVELOPS DURING THE GUARANTEE PERIOD SHALL BE CORRECTED BY THE CONTRACTOR SEE REVERSE SIDE FOR TERMS AND CONDITIONS. DATE TELEPHONE SIGNATURE

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DATE PRINTED TERMS OF SALE SHIP VIA F.O.B. FREIGHT TERMS 01/26/2011 BID OPENING DATE: 03/15/2011 **BID OPENING TIME** 01:30PM LINE QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT OR HIGHWAYS, OR THE INSTALLATION OF ANY HEATING OR COOLING OR VENTILATING PLANTS OR OTHER EQUIPMENT, OR THE SUPPLY OF AND MATERIALS FOR SUCH PROJECTS, PURSUANT TO A CONTRACT WITH THE STATE OF WEST VIRGINIA FOR WHICH BIDS WERE SOLICITED ON OR AFTER JUNE 6, 2001. "STEEL PRODUCTS" MEANS PRODUCTS ROLLED, FORMED, В. SHAPED, DRAWN, EXTRUDED, FORGED, CAST, FABRICATED OR OTHERWISE SIMILARLY PROCESSED, OR PROCESSED BY A COMBINATION OF TWO OR MORE OF SUCH OPERATIONS, FROM STEEL MADE BY THE OPEN HEARTH, BASIC OXYGEN, ELECTRIC FURNACE, BESSEMER OR OTHER STEEL MAKING PROCESS. С. "UNITED STATES" MEANS THE UNITED STATES OF AMERICA AND INCLUDES ALL TERRITORY, CONTINENTAL OR INSULAR, SUBJECT TO THE JURISDICTION OF THE UNITED STATES. THE DIRECTOR OF THE PURCHASING DEPARTMENT MAY, IN 2. WRITING, AUTHORIZE THE USE OF FOREIGN STEEL PRODUCTS IF: THE COST FOR EACH CONTRACT ITEM USED DOES NOT EXCEED ONE TENTH OF ONE PERCENT (.1%) OF THE TOTAL CONTRACT COST OR TWO THOUSAND FIVE HUNDRED DOLLARS (\$2,500.00), WHICHEVER IS GREATER. FOR THE PURPOSES OF THIS SECTION, THE COST IS THE VALUE OF THE STEEL PRODUCT AS DELIVERED TO THE PROJECT OR, THE DIRECTOR OF THE PURCHASING DIVISION DETERMINES THAT SPECIFIED STEEL MATERIALS ARE NOT PRODUCED IN THE UNITED STATES IN SUFFICIENT QUANTITY OR OTHERWISE ARE NOT REASONABLY SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE TELEPHONE DATE

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TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

# Request for Quotation DEP1530

DEP15305

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ADDRESS:CORRESPONDENCE:TO:A TTENTION:OF: CHUCK BOWMAN

304-558-2157

**ENVIRONMENTAL PROTECTION** DEPARTMENT OF DFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

DATE PRIN	TEO	TEF	RMS OF SALE	SHIP V	IA .	F.O.B	FREIGHTTERMS
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Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

# Request for Quotation

DEP15305

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\*\*\*ADDRESSICORRESPONDENCE TO ATTENTION OF CHUCK BOWMAN 304-558-2157

**ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

# Request for Quotation

RFO NUMBER DEP15305

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ADDRESS CORRESPONDENCE TO A TENTION OF

CHUCK BOWMAN 304-558-2157

**ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

### Request for Quotation

REC NUMBER
DEP 15305

PAGE

ADDRESS:CORRESPONDENCE TO A FEED TION OF

CHUCK BOWMAN 304-558-2157

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ENVIRONMENTAL PROTECTION
DEPARTMENT OF
OFFICE OF AML&R
601 57TH STREET SE
CHARLESTON, WV
25304 304-926-0499

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

# Request for Quotation

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PAGE 14

ADDRESS CORRE	SPONDENCE TO ATTENTION OF
HUCK BOWMAN	
304-558-2157	

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ENVIRONMENTAL PROTECTION
DEPARTMENT OF
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# WAYNE KISLING HIGHWALL & POND DEP15305

Contractor's 8id Sheet

Company Name: George L. Stone, Inc.
Address: 24 First Street Hamlin, WV 25523

The DEP reserves the right to request additional information and supporting documentation regarding unit prices when the unit price appears to be unreasonable.

ITEM				INTERDOTOR	AMOUNT
NO.	Qty	Unit	DESCRIPTION	UNIT PRICE	AMOUNT
L.O	1	LS	Mobilization and Demobilization (Limited to 5% of Total Bid)	LS	\$16,000.00
2.0	jed Pad	LS.	Construction Layout (Limited to 5% of Total Bid)	LS	\$16,000.00
3.0	devel	LS	Quality Control (Limited to 3% of Total Bid)	LS	\$2,000.00
4.0	į	LS	Site Preparation (Limited to 10% of Total Bid)	LS	\$20,000.00
4.1	980	LF	Temporary Fencing	\$2.75	\$2,695.00
4.2		EA	16' Farm Gate	\$500.00	\$500.00
4.3	25	TN	Gravel Road Rehabilitation	\$50.00	\$1,250.00
4,4	345	TN	Access Road Stone	\$25.00	\$8,625.00
5.0	2,125	LF	Silt Fence Sediment/Erosion Control	\$3.00	\$6,375.00
5.1	1	EA	Stone Construction Entrance	\$3,000.00	\$3,000.00
5.2	2	EA	Stone Check Dams	\$500.00	\$1,000.00
6.0	1.90	<del>,</del> ,	Revegetation (Pond Site)	\$3,000.00	\$5,700.00
6.1	3.60		Revegetation (Embankment Borrow Site)	\$2,500.00	\$9,000.00
7.0	192	LF	6' Grouted Riprap Channel (Channel A)	\$50.00	\$9,600.00
7.1	169	<del>.</del>	8' Grouted Riprap Channel (Channel B)	\$55.00	\$9,295.00
7.2	730		6' Grass Lined Channel (Channel C)	\$5.00	\$3,650.00
7.3	2	EA	Splash Pad	\$500.00	\$1,000.00
7.4	l	LF	18" HDPE Culvert	\$20.00	\$800,00
8.1	18,500		Unclassified Excavation (Embankment Borrow Site)	\$7.05	\$130,425.00
8.2	7,000		Shot Rock Fill	\$25.00	\$175,000.00
11.1	150	LF	4' x 4' Underdrain (12" PVC SDR 35)	\$50.00	\$7,500.00
11.2	20	LF	Underdrain Conveyance Pipe (12" PVC SDR 35)	\$20.00	\$400.00
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OMB #1029-0119 Expiration Date: 1/31/13

### 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 to determine if you are eligible to receive an AML contract. This requirement applies to contractors and their sub-contractors and is found under OSM's regulations at 30 CFR 874.16.

IMPORTANT! In order to certify in Part C to the accuracy of existing information in AVS, you must obtain a copy of your business' Entity OFT. To obtain an Entity OFT, contact the AVS Office, toll-free, at 800-643-9748 or from the AVS website at https://avss.osmre.gov.

Pa	rf	n

Contractor's Business Name: 6 L Stone Inc.

If the current Entity OFT information for your business is incomplete or incorrect in AVS, or if there is no information in AVS for your business, you must provide all of the following information as it applies to your business. Please make as many copies of this page as you require.

- Every officer (President, Vice President, Secretary, Treasurer, etc.);
- All Directors;
- All persons performing a function similar to a Director;
- Every person or business that owns 10% or more of the voting stock in your business;
- Every partner, if your business is a partnership;
- · Every member and manager, if your business is a limited liability company; and
- Any other person(s) who has the ability to determine the manner in which the AML reclamation project is being conducted.

Emilee Stone	Position/Title President
	Telephone # $304-824-3800$ % of Ownership $304-824-3800$
H#MIN WV 23523	% of Ownership 100% Ending Date:
C. Allen Stone 24 First Street	Position/Title V-President Telephone # 824-3800
	% of Ownership
	Ending Date:
Millard Gilkerson 24 First Street	Position/Title V-President Telephone # 304894-3500
1444 11 00 33213	% of Ownership Ending Date:
Christina Gainer Pobr344 HAMIM WU 25523	Position/Title Sec/TReasurer Telephone # 3048243800 % of Ownership CX Ending Date:
	7701 Lynn Ave Hamlin WV 25523  C. Allen Stone 24 First Street Hamlin WV 25523  Millard Gilkerson 24 First Street Hamlin WV 25523  Christina Gainer Pobr344

#### PAPERWORK REDUCTION STATEMENT

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501) requires us to inform you that: Federal Agencies may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. This information is necessary for all successful bidders prior to the distribution of AML funds, and is required to obtain a benefit.

Public reporting burden for this form is estimated to range from 15 minutes to 1 hour, with an average of <u>22 minutes</u> per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, Constitution Ave., NW, Washington, D.C. 20240.

Instructions for Completing AML Contractor Form OMB #1029-01191

Part A: General Information. Part A should be completed by the AML Contractor.

Part B: Legal Structure. Part B should be completed by the AML Contractor.

Part C: Certifying and updating information in the Applicant/Violator System (AVS). Part C should be completed by the AML Contractor, selecting the statement that best describes their situation.

If information is accurate, complete and up-to-date, then check the first statement and sign and date. Attach the Entity OFT printout to the OMB #1029-0119 form and submit the form and attachment to the AML Contracting Officer your business is working with. <sup>2</sup>

Upon reviewing an Entity OFT printout, if you discover the information contained in AVS is not accurate, complete and up-to-date, then check the second statement and complete Part D to provide missing or corrected information that needs reflected in AVS. Attach the Entity OFT printout to the OMB #1029-0119 form and submit the form and attachment to the AML Contracting Officer your business is working with.

If your business does not appear to have any information in AVS, then check the third statement and complete Part D. Submit the OMB #1029-0119 form to the AML Contracting Officer your business is working with.

#### Part D:

If current Entity OFT information for your business is incomplete, incorrect, or if you believe there is no information currently in the AVS for your business, you must complete Part D. Submit the OMB #1029-0119 form to the AML Contracting Officer your business is working with.

<sup>&</sup>lt;sup>1</sup> If you need any assistance completing OMB #1029-0119, please contact the AVS Office at 800.643.9748.

<sup>&</sup>lt;sup>2</sup> You may obtain your business' Entity OFT for certification purposes two ways. One way is to contact the AVS Office at 800.643.9748 and request the information. The second way is to access the AVS from your personal computer by visiting <a href="https://avss.osmre.gov">https://avss.osmre.gov</a>. Click "Access AVS", and then Login as Guest. Place your cursor on the "Entity" Module and "Click". Type your business name in search box and press enter key. If more than one entity record appears, select your company and then "Click" on the "relationship" tab to display your Entity OFT information. Print the Entity OFT from AVS.

#### **BID BOND**

KNOV	V ALL MEN BY THESE	PRESENTS, That we, the unc	dersigned, George L Stone, Inc.
of			a, as Principal, and Great American Insurance
Company of	Cincinnati ,	<b>Ohio</b> , a co	progration organized and existing under the laws of the State of
Ohio	with its principal off	ice in the City ofCincinn	ati, as Surety, are held and firmly bound unto the State
of West Virginia	a, as Obligee, in the pe	nal sum of <b>Five percent</b>	of bid (\$ 5% of Amount Bid for the payment of which,
well and truly to	be made, we jointly a	nd severally bind ourselves, ou	r heirs, administrators, executors, successors and assigns.
The C	ondition of the above o	bligation is such that whereas t	the Principal has submitted to the Purchasing Section of the
Department of	Administration a certair	n bid or proposal, attached here	eto and made a part hereof, to enter into a contract in writing for
Wayne Ki	sling Highwall	and Pond	
		Marine Civil 1	
NOW	THEREFORE,		
	said bid shall be reject	ed. or	
(b) If	said bid shall be accep	ted and the Principal shall ente	er into a contract in accordance with the bid or proposal attached
hereto and shal	I furnish any other bon	ds and insurance required by the contraction of said hid, then this obligation	ne bid or proposal, and shall in all other respects perform the shall be null and void, otherwise this obligation shall remain in full
force and effect	i. It is expressly under	stood and agreed that the liabili	ity of the Surety for any and all claims hereunder shall, in no event,
	al amount of this obliga		
Th - 0-			that the abligations of said County and its bond shall be in a
			rees that the obligations of said Surety and its bond shall be in no e Obligee may accept such bid, and said Surety does hereby
	any such extension.		,
		· ·	to set their hands and seals, and such of them as are corporations
	•	·	resents to be signed by their proper officers, this
15th day of	March	, 20_11	
Principal Corpor	rate Seal		George L Stone, Inc.
. *			
			(Must be President or
			/ / Vice President)
			P
			(Title)
0 1 0			Court American Tourness Communication
Surety Corporat	e Seal		Great American Insurance Company (Name of Surety)
	# 		anena / /asseg
A.*			Attorney-in-Fact Clarence C. Massey
IMPORTANT -	Surety executing bon	ıds must be licensed in West	Virginia to transact surety insurance. Raised corporate seals
	l, a power of attorney		-

**GREAT AMERICAN INSURANCE COMPANY®** 

Administrative Office: 580 WALNUT STREET • CINCINNATI, OHIO 45202 • 513-369-5000 • FAX 513-723-2740

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

No. 0 18867

#### POWER OF ATTORNEY

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

Name

Address

Limit of Power

THOMAS H. VOELTZ

DANA N. CONLEY

BOTH OF ASHLAND, KY

ALL

J. MICHAEL WELLMAN

THOMAS C.PHIPPS

BOTH OF ASHLAND, KY

\$75,000,000

THOMAS H. BOTTOMS, JR.

CLARENCE C. MASSEY

BOTH OF HUNTINGTON, WV

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

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate

officers and its corporate seal hereunto affixed this

21ST

day of

MAY

2009

Attest

GREAT AMERICAN INSURANCE COMPANY



STATE OF OHIO, COUNTY OF HAMILTON - ss:

DAVIBIE: KITEHSEY 1595-466 46625 ident

On this 21ST day of MAY 2009, before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.

KAREN L. GROSHEIM
NOTARY PUBLIC, STATE OF OHIO
This Power of Attom Compliance Explines 93 rate following resolutions adopted by the Board of Directors of Great American Insurance Company by the minimous written consent dated June 9, 2008.

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

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

#### CERTIFICATION

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

Signed and sealed this

15th

day of

March

2011





### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/10/11

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)

certificat	e holder in lieu of such endorse						
PRODUCER			CONTACT NAME:				
Peoples Insurance Agency, LLC dba Putnam Insurance Agency 304-522-6563 101 Fifth Ave, PO Box 2388 Huntington, WV 25724-2388 Clarence C. Massey		304-522-6563	PHONE   FAX (A/C, No, Ext): (A/C, No):				
			E-MAIL ADDRESS:				
		PRODUCER CUSTOMER ID #: GEORGE1					
			INSURER(S) AFFORDING COVERAGE	<b>≛</b>	NAIC#		
INSURED	George L Stone Inc		INSURER A: Ohio Casualty Group		24074		
	24 First Street Hamlin, WV 25523-1162		INSURER B:		ļ		
			INSURER C:				
			INSURER D:		ļ		
			INSURER E:				
			INSURER F :				
COVERAG	ES CERTI	FICATE NUMBER:	REVISION N	JMBER:			
			E BEEN ISSUED TO THE INSURED NAMED ABO				
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.							

ADDL SUBR INSR WVD INSR LTR POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) LIMITS TYPE OF INSURANCE POLICY NUMBER 1,000,000 GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED BKA54471276 05/10/10 05/10/11 100,000 X COMMERCIAL GENERAL LIABILITY PREMISES (Ea occurrence) CLAIMS-MADE | X | OCCUR 5,000 MED EXP (Any one person) \$ 1,000,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ PRO-JECT \$ POLICY COMBINED SINGLE LIMIT **AUTOMOBILE LIABILITY** \$ 1,000,000 (Ea accident) 05/10/10 05/10/11 BA054471276 Α ANY AUTO BODILY INJURY (Per person) S ALL OWNED AUTOS BODILY INJURY (Per accident) \$ Χ SCHEDULED AUTOS PROPERTY DAMAGE \$ Х (Per accident) HIRED AUTOS \$ Х NON-OWNED AUTOS \$ 1,000,000 Х **UMBRELLA LIAB** Х EACH OCCURRENCE OCCUR EXCESS LIAB 1,000,000 CLAIMS-MADE AGGREGATE \$ 05/10/11 05/10/10 USO54471276 DEDUCTIBLE \$ Х RETENTION NONE \$ WC STATU-TORY LIMITS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? SEPARATE INSURANCE E.L. EACH ACCIDENT N/A CERTIFICATE E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT 254,150 BKA54471276 05/10/10 05/10/11 Sched Equ Inland Marine

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Evidence of insurance.

CERTII	FICATE	HOLDER

State of West Virginia Dept of Environmental Protecti Office of Abandoned Mine Lands Charleston, WV

#### 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

The Metho

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### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/10/11

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Ç	ertificate noider in lieu of such endors	eme	nt(s)							
PRODUCER 304-522- Peoples Insurance Agency, LLC dba Putnam Insurance Agency			1-522-6555	CONTACT NAME:						
			304-522-6563			PHONE FAX (A/C, No, Ext): (A/C, No):				
101 Fifth Ave, PO Box 2388				E-MAIL ADDRES	SS:					
	ntington, WV 25724-2388 rence C. Massev				PRODU	SS: CER MER ID #: GEO	RGE1			
Ciarcine C. Massey				!				NAIC#		
INSU	URED George L Stone Inc			INSURER A : Brickstreet Insurance						
	24 First Street				INSURER B:					
Hamlin, WV 25523-1162					INSURER C:					
-			al de la companya de la companya de la companya de la companya de la companya de la companya de la companya de			INSURER D:				
					INSURE					
					INSURE					
CO	VERAGES CER	TIFI	CATE	E NUMBER:	IIIOOILE			REVISION NUMBER:		
	HIS IS TO CERTIFY THAT THE POLICIES				/E BEE	N ISSUED TO			HE POL	ICY PERIOD
IN	NDICATED. NOTWITHSTANDING ANY RE	QUIF	REME	NT, TERM OR CONDITION	OF AN'	CONTRACT	OR OTHER I	DOCUMENT WITH RESPE	CT TO	WHICH THIS
	CERTIFICATE MAY BE ISSUED OR MAY FEXCLUSIONS AND CONDITIONS OF SUCH F							HEREIN IS SUBJECT TO	) ALL	THE TERMS,
INSR		ADDL	SUBR	8	DELIVI	POLICY EFF (MM/DD/YYYY)		LIMIT	e	
LTR	TYPE OF INSURANCE GENERAL LIABILITY	INSR	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)			
								DAMAGE TO RENTED	\$	
	COMMERCIAL GENERAL LIABILITY							PREMISES (Ea occurrence)	\$	
	CLAIMS-MADE OCCUR							MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$	
								GENERAL AGGREGATE	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG	\$	
	[POLICY] JECT   LOC							COMBINED SINGLE LIMIT	\$	
	AUTOMOBILE LIABILITY							(Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	ALL OWNED AUTOS		-					BODILY INJURY (Per accident)	\$	
	SCHEDULED AUTOS							PROPERTY DAMAGE	\$	
	HIRED AUTOS							(Per accident)	9	
	NON-OWNED AUTOS			•					\$	
			ļ						\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DEDUCTIBLE								\$	
	RETENTION \$								\$	
	WORKERS COMPENSATION	N/A					X WC STATU- TORY LIMITS X OTH- ER			
Α	AND EMPLOYERS' LIABILITY  ANY PROPRIETOR/PARTNER/EXECUTIVE			WC10002205-07 BROAD FORM APPLII	ES	08/13/10	08/13/11	E.L. EACH ACCIDENT	\$	1,000,000
	(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	if yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000
DES	SCRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	Attach /	ACORD 101, Additional Remarks S	chedule,	if more space is	required)			
Evid	dence of West Virginia workers comp	pens	satio	n insurance.						
^_	DTIFICATE UOI DED				CANC	ELLATION				
UE	RTIFICATE HOLDER				CANU	LLATION				
					SHO	ULD ANY OF 1	THE ABOVE D	ESCRIBED POLICIES BE C	ANCELL	ED BEFORE
State of West Virginia				THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
Dept of Environmental Protecti Office of Abandoned Mine Lands Charleston, WV										
			AUTHORIZED REPRESENTATIVE							
			TI MA							
					-	1///	11155			



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

84-0-c 11. 3
STATE OF WU
COUNTY OF LIN CON TO-WIT:
I, Allen Stone, after being first duly sworn, depose and state as follows:
1. I am an employee of <u>GLStone Lnc.</u> ; and, (Company Name)
2. I do hereby attest that 6 hone Inc (Company Name)
maintains a valid written drug free workplace policy and that such policy is in compliance with <b>West Virginia Code</b> §21-1D-5.
The above statements are sworn to under the penalty of perjury.
By: (Company Name)
Title: 7-14-11
Taken, subscribed and sworn to before me this 4th day of Monnable
By Commission expires Sept. 2, 2020
(Seal) State of West Virginia Notacy Public Williams
THIS AFFTDAVIT MUST BE SUBRIFIED WITH THE
COMPLY WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF
THE BID.  Rev March 2009

RFQ No.	
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### STATE OF WEST VIRGINIA Purchasing Division

### PURCHASING AFFIDAVIT

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate.

#### DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

EXCEPTION: The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

Under penalty of law for false swearing (West Virginia Code §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

acknowledges the information with the	•
WITNESS THE FOLLOWING SIGNATURE	
Vendor's Name: 6 6 tone the	2-14-11
Authorized Signature: Date:	3 / / / /
State of	
County of Lincoln to-wit:	2011
Taken, subscribed, and sworn to before me this Hay of March	, 20 <u>//</u>
My Commission expires 2026	
AFFIX SEAL HERE NOTARY PUBLIC NOTARY PUBLIC	wnita Zgnot
######################################	O
COFFICIAL SEAL STATE OF WEST VIRGINIA RETURN PUBLIC Shannita Euror	
661 Dig taurel Road  Search and AVV 25506  By Course Secretary 2, 2020	
######################################	Purchasing Affidavit (Revised 12/15/0