

PO Box 745 Sumsen WV : Phoneses: (385) 750-42

FAX TRANSMITAL FORM

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ERROR REPORT (JUL. 21, 2011, 11:30AM) *

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NOTICE REQ.

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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston WV 25205 0120 Charleston, WV 25305-0130

26435

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DEP15454

304-558-2157

25304

CHUCK BOWMAN

*322161804 COWGIRL UP INC PO BOX 243

SIMPSON WV

304-739-4397

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

304-926-0499

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*322161804

PO BOX 243

SIMPSON WV

COWGIRL UP INC

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

26435

304-739-4397

Request for RECONUMBER Quotation

DEP15454

ADDRESSIONALESPONDENCE TO A TENTION OF

CHUCK BOWMAN <u>304-558-2157</u>

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

304-926-0499

25304 DATEPRINTED TERMS OF SALE SHIP VIA f \$ 10 00 00 FO.8; FREIGHTTEAMS 05/26/2011 BID OPENING DATE: <u>07/12/2011</u> BID OPENING TIME 01:30PM LINE QUANTITY UOP TEM NUMBER UNITABICE AMOUNT ADDITION, WE REQUEST THAT ALL POTENTIAL BIDDERS INCLUDE THEIR EMAIL ADDRESS AND FAX NUMBER. ALL POTENTIAL BIDDERS ARE REQUESTED TO ARRIVE PRIOR TO THE STARTING TIME FOR THE PRE-BID. BIDDERS WHO ARRIVE LATE, BUT PRIOR TO THE DISMISSAL OF THE TECHNICAL PORTION OF THE PRE-BID, WILL BE PERMITTED TO SIGN IN. BIDDERS WHO ARRIVE AFTER CONCLUSION OF THE TECHNICAL PORTION OF THE PRE-BID, BUT DURING ANY SUBSEQUENT PART OF THE PRE-BIID, WILL NOT BE PERMITTED TO SIGN THE ATTENDANCE SHEET. DIRECTIONS TO PREBID: TRAVEL NORTH ON RT. 52 TOWARDS WELCH. AT KEYSTONE, TAKE A LEFT JUST BEFORE THE BRIDGE. PROCEED STRAIGHT UP THE HILL ON ELK HORN DRIVE. AT THE TOP OF THE HILL TAKE A LEFT ONTO HERMANSON AVENUE. SITE 1 IS ABOVE THE CHURCH PARKING LOT ON THE RIGHT. PLANS AND SPECIFICATIONS MAY BE OBTAINED FROM WVDEP, OFFICE AML&R, 601 57TH ST., SE, CHARLESTON, WV 25304, PH. 304-926-0485 UPON PAYMENT OF \$15.00 NON-REFUNDABLE PAYMENT MUST BE MADE BY CHECK OR MONEY ORDER. NO CASH WILL BE ACCEPTED. EXHIBIT 5 WEST VIRGINIA CODE 21-10-5 PROVIDES THAT: ANY SOLICI-TATION FOR A PUBLIC IMPROVEMENT CONSTRUCTION CONTRACT REQUIRES EACH VENDOR THAT SUBMITS A BID FOR THE WORK TO SUBMIT AT THE SAME TIME AN AFFIDAVIT OF COMPLAINCE WITH THE BID. THE ENCLOSED DRUG-FREE WORKPLACE AFFIDAVIT MUST BE SIGNED AND SUBMITTED WITH THE BID AS EVIDENCE OF THE VENDOR'S COMPLIANCE WITH THE PROVISIONS OF ARTICLE ID, CHAPTER 21 OF THE WEST SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE

TELEPHONE

esident

ADDRESS CHANGES TO BE NOTED ABOVE



304-739-4397

Request for ... Quotation

DEP15454

PAGE

CHUCK BOWMAN 304-558-2157

***322161804** COWGIRL UP INC PO BOX 243

SIMPSON WY 26435

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

304-926-0499

DATEPHIN		TEF	IMS OF SAL	E	SHIP	VIA	E.O.B.	FREIGHTTERMS
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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 REGNUMBER Quotation

DEP15454

ADDRESS CORRESPONDENCE TO ATTENUE OF THE

CHUCK BOWMAN 304-558-2157

*322161804 COWGIRL UP INC PO BOX 243

304-739-4397

SIMPSON WV 26435

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

DATEPHINTED TERMS: OF SALE EREIGHTTERMS SHIP VIA FOB. 05/26/2011 BID OPENING DATE: 07/12/2011 BID OPENING TIME 01:30PM LINE QUANTITY UOP AMOUNT ITEM NUMBER UNITPRICE IF THE ORIGINAL OMB #1029-0119 IS NOT ATTACHED TO THE BIDDING DOCUMENTS YOU CAN CONTACT THE AVS OFFICE AT 800-643-9748 OR WWW.AVS.DSMRE.GDV ***************************** CONTRACTORS LICENSE WEST VIRGINIA STATE CODE 21-11-2 REQUIRES THAT ALL PERSONS DESIRING TO PERFORM CONTRACTING WORK IN THIS STATE MUST BE LICENSED. THE WEST VIRGINIA CONTRACTORS LICENSING BOARD IS EMPIOWERED TO ISSUE THE CONTRACTORS LICENSE. APPLICATIONS FOR A CONTRACTORS LICENSE MAY B MADE BY CONTACTING THE WEST VIRGINIA DIVISION OF LABOR, CAPITOL COMPLEX, BUILDING 3, ROOM 319, CHARLESTON, WV 25305, PHL 304-558-7890. WEST VIRGINIA STATE CODE 21-11-11 REQUIRES ANY PROSPECTIVE BIDDER TO INCLUDE THE CONTRACTORS LICENSE NUMBER ON THEIR BID. BIDDER TO COMPLETE: CONTRACTORS NAME: CONTRACTORS LICENSE #: THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FURNISH A COPY OF THEIR CONTRACTORS LICENSE PRIOR TO ISSUANCE OF A PURCHASE ORDER/CONTRACT. APPLICABLE LAW THE WEST VIRGINIA STATE CODE, PURCHASING DIVISION RULES & REGULATIONS, AND THE INFORMATION PROVIDED IN THE "REQUEST FOR QUOTATION" ISSUED BY THE PURCHASING DIVISION IS THE SOLE AUTHORITY GOVERNING THIS PROCUREMENT. SEE REVERSESIDE FOR TERMS AND CONDITIONS SIGNATURE TELEPHONE タル39 フ ADDRESS CHANGES TO BE'NOTED ABOVE 800101563 esi den 7 WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



Request for Quotation

DEP15454

PAGE

ADDRESS:60:11:ESPENDENDENDENDAMENDONICE

CHUCK BOWMAN 304-558-2157

***322161804** COWGIRL UP INC PO BOX 243

304-739-4397

SIMPSON WV 26435 **ENVIRONMENTAL PROTECTION** DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 304-926-0499 25304

TERMS OF SALE F.O.B FREIGHT TERMS DATE PRINTED SHIP VIA 05/26/2011 BID OPENING DATE 01:30PM 07/12/2011 BID OPENING TIME LINE CUANTITY ITEM NUMBER UNIT PRICE AMOUNT UOP AT ITS EXPENSE. THE ONE-YEAR GUARANTEE PERIOD SHALL NOT BE (C) CONSTRUED AS BEING AN EXTENSION OF THE PERFORMANCE TIME ALLOTTED FOR WORK UNDER THE CONTRACT. GUARANTEES CONCERNING REVEGETATION MAY BE (D) FURTHER DEFINED IN THE TECHNICAL SPECIFICATIONS CONTAINED HEREIN. (3) TERMINATION: (1) THIS CONTRACT MAY BE CANCELLED IN WHOLE OR IN PART IN WRITING BY THE DIRECTOR OF PURCHASING, WITHOUT PREJUDICE TO ANY OTHER RIGHT OF REMEDY IT MAY HAVE, PROVIDED THAT THE CONTRACTOR IS GIVEN NOT LESS THAN THIRTY CALENDAR DAYS WRITTEN NOTICE, (DELIVERED BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED) OF INTENT TO TERMINATE. IT SHALL BE THE RESPONSIBILITY OF THE SUCCESSFUL (4) VENDOR TO: OBTAIN ALL NECESSARY DIVISION OF HIGHWAYS (A) PERMITS FOR ALL TRANSPORTATION OF EQUIPMENT AND MATERIALS TO AND FROM THE JOB SITE. OBTAIN ANY AND ALL REQUIRED CONSTRUCTION **(B)** PERMITS OR RELATED JOB PERMITS. (5) TECHNICAL SPECIFICATIONS: ALL WORK UNDER THIS CONTRACT SHALL BE IN ACCORDANCE WITH THE SPECIFICATIONS PREPARED FOR THE RECLAMATION OF THE "KEYSTONE (AVERY) LANDSLIDE DRAIANGE" PROJECT PLANS & SPECS ARE INCORPORATED HERE IN BY REFERENCE AND ALL PROVISIONS, CLAUSES AND CONDITIONS THEREIN ARE MADE PROPERLY A PART OF THIS CONTRACT, AND CONSISTS OF 16 DRAWINGS AS PREPARED BY E. L. ROBINSON ENGINEERING. (6) PAYMENTS AND COMPLETION: SEE REVERSE SIDE FOR TEAMS AND CONDITIONS: SIGNATURE 9/11 4397 ADDRESS CHANGES TO BE NOTED ABOVE 800101203 resident

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



*322161804

PO BOX 243

SIMPSON WV

COWGIRL UP INC

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

26435

304-739-4397

Request for Quotation

DEP15454

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



Quotation

DEP15454

****Address correspondence 10:Afriention of

CHUCK BOWMAN 304-558-2157

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

*322161804 304-739-4397 COWGIRL UP INC PO BOX 243 SIMPSON WV 26435

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Request for Quotation

DED15/5/

PAGE

CHUCK BOWMAN 304-558-2157 NTION OF

304-739-4397

*322161804 COWGIRL UP INC

PO BOX 243

SIMPSON WV 26435

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. FREIGHT TERMS
05/26/2011	BID OPENING TIME 01:30PM
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State of West Virginia
Department of Administration
Purchasing Division

Request for Quotation

DEP15454

PAGE 11



304-739-4397

Request for PEONUMBER DEP15454

DEP15454

ADDRESS:CORRESPONDENCE TO A HENTION OF

CHUCK BOWMAN 304-558-2157

***322161804** COWGIRL UP INC PD BOX 243

SIMPSON WV 26435 ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

304-926-0499

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1 1 1		PONDING	TO RE	Q. INSE	RT NAME AND	ADDRESS	S IN SPACE ABOVE LA	ABELED 'VENDOR'

KEYSTONE (AVERY) LANDSLIDE-DRAINAGE

PER ADDENDUM NO. 1

Contractor's Bid Sheet

Vendors Name:	COWGIRL	WP	1N G	
			1	•

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

		<u> </u>		 	T
ITEM NO.	QUANTITY	DESCRIPTION .		UNIT PRICE	AMOUNT
	<u> </u>	Mobilization & Demobilization (Lump Sum)			\$ 24,000 \$ 10,000 \$ 6,000
1.1	LS	(Cannot exceed 10% of the Total Amount Bid)		LS	s 24,000
		Construction Layout (Lump Sum)			00
2.1	LS	(Cannot exceed 5% of Total Amount Bid)		LS	\$ 10,000
		Quality Control (Lump Sum)			20
3.1	LS	(Cannot exceed 3% of Total Amount Bid)		LS	\$ 6,000
		Clearing and Grubbing (Lump Sum)		1	111
4.1	LS	(Cannot exceed 5% of Total Amount Bid)		LS	\$ 14,000
5.1	700LF	Silt Fence (Per Linear Foot)		\$,300	\$ 2,1000
5.2	100 LF	Super Silt Fence (Per Linear Foot)		\$ 620	S 600°
5.3.	3 EA	Stabilized Construction Entrance (Per Each)		\$ 1800	\$ 5,400 %
6.1	2 ACRE	Revegetation (Per Acre)			
7.1	955 LF	Type I Grouted Riprap Ditch (Per Linear Foot)		S 3800	\$ 55,390
7.2	575 LF	18" HDPE Culvert (Per Linear Foot)		\$ 8400	
7.3	5 EA	Manhole (Per Each)			3 /3,000
7.4	2 EA	Modified Type 'G' Drop Inlet (Per Each)			s 24,000 =
7.5	2 EA	Low Water Crossing (Per Each)	<u> </u>	· · · · · · · · · · · · · · · · · · ·	\$ 720000
7.6	100 LF	Underdrain (Per Linear Foot)		S 50	\$ 5,0000
7.7	I EA	Culvert Clean Out (Per Each)		5 /000 00	\$ 1,000
10.1	6 EA	Wet Mine Seal (Per Each)		S 7.200	3 35,200
10.2	400 LF	Mine Seal Conveyance Pipe (Per Linear Foot)		5 422	\$ /6.800°

****			*************************************		
		TOTAL		K	s 296,790 °C

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.

Part A. K	General Information
City: 🕰	Name: COWAIT LO TYC. Tax Payer ID No.: ROO101563 PO COX 243 NOSON State: NV Zip Code: 21-35 Phone: 30-134-1367 20-139-440 E-mail address: TW. CONGICILO Dearthlink. Det
Part B:	Legal Structure
() Corp	oration () Sole Proprietorship () Partnership () LLC r (please specify)
Select ob	Certifying and updating information in the Applicant/Violator System (AVS). lly one of the following options, follow the instructions for that option, and sign below.
I,	(print name), have the express authority to certify that:
	Information on the attached Entity Organizational Family Tree (OFT) from AVS is accurate, complete, and up-to-date. If you select this option, you must attach an Entity OFT from AVS to this form. Sign and date below and do not complete Part D.
1	Part of the information on the attached Entity OFT from AVS is missing or incorrect and must be updated. If you select this option, you must attach an Entity OFT from AVS to this form. Use Part D to provide the missing or corrected information. Sign and date below and complete Part D.
3	Our business currently has no information in AVS. If you select this option, you must provide all information required in Part D. Sign and date below and complete Part D.
Date	This Woodle President Signature Title
AVS, yo	TANT! In order to certify in Part C to the accuracy of existing information in ou must obtain a copy of your business' Entity OFT. To obtain an Entity OFT, the AVS Office, toll-free, at 800-643-9748 or from the AVS website at axes, osmre, gov.

	1		·	
Part D.	ζ.			
		MAITLINE	a Tax	_
Contract	U. J. 2 227-1-1-		•	
there is no informati require.	ent Entity OFT information for information in AVS for your on as it applies to your busines	s. Please make as	many copies of th	
• E	very officer (President, Vice Pr	resident, Secretary	Treasurer, etc.);	
د ه	I Directors:			
	ly forming a function	on similar to a Dir	ector;	·
o F	very person or business that ov	vas 10% or more	of the voting stock	in your business,
_	if your business i	s a narthership.		
_	to a send en proper sit i	VOUE BUSINESS IS A	limited liability co	impany; and
· e A	ny other person(s) who has the	e ability to determ	ine the manner in '	which the AMIL
T 1	clamation project is being con	ducted.		para and a second
•				
Name			Position/Title	
Address		<u>.</u>	Telephone #	
			% of Ownership	
Begin D	åte:		Ending Date:	<u> </u>
_	; ;		Position/Title	
Name			Telephone #	
Address			% of Ownership	
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m - sin D	hto:		Ending Date:	
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Address			Telephone #	
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2-5		TP MOTEST PETER STATE	ATEMENT	
	PAPER	WORK REDUCTION ST	· · · · · · · · · · · · · · · · · · ·	not conduct of snonsor, and a
The Papero person is no necessary f	ork Reduction Act of 1995 (44 U.S.C. 3501) required to respond to, a collection of informal successful bidders prior to the distribution	requires us to inform you to nation unless it displays a on of AML funds, and is re	hat: Federal Agencies may currently valid OMB contro quired to obtain a benefit.	l number. This information is
	hursen for this form is estimated to rang	s from 15 minutes to 1 hor	ir, with an average of 22 m	inutes per response, including time

Public reporting burden for this form is estimated to range from 15 minutes to 1 hour, with an average of 22 minutes per response, including the for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the for reviewing the form. You may direct comments regarding the formation collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, Constitution Ave., NW, Washington, D.C. 20240.



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

STATE OF WY	
COUNTY OF TAYLOR	_, to-wit:
	fter being first duly sworn, depose and
state as follows:	Cantairl lo Tre ; and,
1. I am an employee of	(Company Name)
2. I do hereby attest that	Congirl Up, Fre (Company Name)
maintains a valid written d policy is in compliance wit	rug free workplace policy and that such n West Virginia Code §21-1D-5.
The above statements are sworn	to under the penalty of perjury.
The above statements are the	Company Name)
	By: Inia Phrodder
	Title: President
	Date:
	before me this 1914 day of July
Taken, subscribed and sworr es	annou 26 - 2511 a
E DE MODERNA TREMEN TERRES LIDEA FRANCISTO SANTRO TERRES ANTRE A PROPERTIE DE LA COMPANSIONA DEL COMPANSIONA DEL COMPANSIONA DE LA COMPANS	MARY 28, 2016
OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC BARBARA SPENCER Route 1 Box 673 Empirel of WV 26347	Barbara Spencer
My commission expires February 28, 2016	THE RID IN ORDER TO

THIS AFFIDAVIT MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF THE BID.

Rev March 2009

ERROR REPORT (JUL. 21. 2011 11:37AM) * * *

FAX HEADER 1: FAX HEADER 2:

WV DIV OF PURCH 3045583970

FILE USER NAME	ADDRESS	MODE	TIME	PAGE	RESULT	
1733	304 626 1051	RED	5 23"	P. 14	E	
	PAGE NOT RECEIVED	QUICK	QUICK SERVICE CODE			
	P. 14	06	-00			

C :CONFIDENTIAL
L :SEND LATER
D :DETAIL
X :EXTRA SUPER FINE
+ :ROUTING

:TRANSFER :FORWARDING :FINE :COLOR :RECEPT. NOTICE REQ.

P : POLLING E : ECM O : 300dp; !\$:REMOTE TRANSFER A : RECEPT. NOTICE