

2400 Ritter Drive Daniels, WV 25832 PH: 304-763-4573

Fax: 304-763-4591 www.aspen-golf.com

Bid Opening Time:

### **Aspen Corporation**



То:	Beth Collins WV Purchasing Divis 2019 Washington St P.O. Box 50130 Charleston, WV 253	reet, East	From:	Brian Knight	
Fax:	304-558-3970		Pages:	23 (counting cover)	
Phone:	304-558-2157		Date:	5-7-2015	
Re:	DEP 17114 Pierpo	ont Refuse	CC:	File	
☐ Urgen	t 🛘 For Review	☐ Please Com	ment	☐ Piease Reply	☐ Please Recycle
• Comm	ents:	· · · · · · · · · · · · · · · · · · ·		<del> </del>	<del> </del>
Buyer:		Beth Collins			
RFQ. N	NO.	DEP17114			
Bid Op	ening Date:	May 7, 2015	ı		

05/07/15 11:33:14 WV Purchasing Division

IMPORTANT: The information contained in this facsimile transmission is only for the use of the individual or entity named above and may contain information that is privileged, confidential or exempt or protected from disclosure under applicable law. If the reader of this transmission is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone and return the original message to us at the above address via the U.S. Postal Service. Thank you.

1:30 PM

**Request for Quotation** 

Proc Folder: 68724

Doc Description: Addendum 02: Modification of Pierpont Refuse Solicitation

Proc Type: Central Purchase Order

)ate Issued	Solicitation Closes	Solicitation	No	Version
2015-04-22	2015-05-07 13:30:00	CRFQ	0313 DEP1500000048	3

IID RECEIVING LOCATION

3ID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV

25305

JS

fendor Name, Address and Telephone Number:

Aspen Corporation 2400 Ritter Drive

Daniels, WV 25832

304-763-4573

Total Bid: \$236,240.00

OR INFORMATION CONTACT THE BUYER

Beth Collins 304) 558-2157

eth.a.collins@wv.gov

lignature X

FEIN# 550627766001

DATE May 7, 2015

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

Page: 1

FORM ID: WV-PRC-CRFQ-001

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1.	Mobilization & Demobilization	1.00000	LS	\$10,000.00	\$10,000.00
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US

omm Code	Manufacturer	Specification	Model#	
7111603				

### xtended Description:

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.ump Sum) (Cannot exceed 10% of Total Bid)

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ENVIRONMENTAL PROTECTION DFFICE OF AML&R		ENVIRONMENTAL PROTECTION OFFICE OF AML&R	
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Ine	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price	
2	Construction Layout	1.00000	LS	\$1,000.00	\$1,000.00	

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### xtended Description:

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3	Quality Control	1.00000	LS	\$1,000.00	\$1,000.00

3047634591	Aspen Corporation			11:23:32 p.m.	05-06-2015	4 /23
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	cess Road Resurfacing	265.00000	TON	· · · · · · · · · · · · · · · · · · ·		
, Ac	cess Road Resurracing			\$40.00 	\$10,600.0	
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7111603						-
xtended Descri	otion :					<u></u>
ccess Road Re leference 4.2						

05-06-2015 5/23 11:23:45 p.m. 3047634591 Aspen Corporation F --- 16 NVOICETO A SECURITION OF A SEC YSHIP TO 2 **ENVIRONMENTAL PROTECTION ENVIRONMENTAL PROTECTION** OFFICE OF AML&R OFFICE OF AML&R 601 57TH ST SE 601 57TH ST SE **CHARLESTON** WV25304 CHARLESTON WV 25304 US US Qty Unit Issue Unit Price Total Price Line Comm Ln Desc 6 3380.00000 LF Straw Wattles \$13,520.00 \$4.00 Model # Manufacturer Specification omm Code 7111603 Extended Description: Itraw Wattles leference 5.1 **ENVIRONMENTAL PROTECTION ENVIRONMENTAL PROTECTION** 

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OFFICE OF AML&R **DFFICE OF AML&R 601 57TH ST SE** 601 57TH ST SE

WV25304 **CHARLESTON** WV 25304 CHARLESTON

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Unit Price Total Price Qty Unit Issue Comm Ln Desc Line 1420.00000 LF Silt Fence \$5,680.00 \$4.00

Specification Model # omm Code Manufacturer 7111603

Extended Description:

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SHIP TO NVOICE TO **ENVIRONMENTAL PROTECTION** ENVIRONMENTAL PROTECTION OFFICE OF AML&R OFFICE OF AML&R 501 57TH ST SE 601 57TH ST SE

WV25304 CHARLESTON CHARLESTON WV 25304

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Une	Comm Ln Desc	Qty	Unit lasue	Unit Price	Total Price
8	Triangular Silt Dikes	20.00000	EA	\$100.00	\$2,000.00

3047634	591 Aspen Corporation			11:23:59 p.m.	05-06-2015	6 /23
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]	Temporary Sediment Traps	1.00000		\$5,000.00	\$5,000.0	<u> </u>
omm Cod	e Manufacturer	Spec	ification	Model #		
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10	Permanent Erosion Control Matting	65.00000	5Y	\$5.00	\$325.00	
omm Cod	e Manufacturer	Spec	lfication	Model #		
7111602	- HIMTOTA AMI AT	2,000				

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omm Code	Manufacturer	Specification	Model #	
7111602				1

xtended Description :

ermanent Erosion Control Matting teference 5.5

Page: 5

rine	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price	
11	Rock Check Dams	0.00000	EA	\$0.00	\$0.00	
le .						=

Comm Code	Manufacturer	Specification	Model #	
7111603				

### Extended Description:

**lock Check Dams** 

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CHARLESTON	WV25304	CHARLESTON	WV 25304	
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
12	Stabilized Construction Entrance	2.00000	EA	\$2,000.00	\$4,000.00

omm Code	Manufacturer	Specification	Model #	
7111603	•			

### extended Description :

itabilized Construction Entrance

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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price	
13	Revegetation	4.50000	ACRE	\$2,000.00	\$9,000.00	

304763459	91 Aspen Corpo	ration		11:24:26 p.m.	05-06-2015	8 /23
Comm Code	Manufacturer	Specif	fication	Model #		
7111603						
Extended De	escription :	· · · · · · · · · · · · · · · · · · ·		···		
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.Ine	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price	
14	Type 1 Channel	815.00000	LF	\$5.00	\$4,075.00	
omm Code	Manufacturer	Specif	ication	Model #		
7111603						
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.ine	Comm Ln Desc	Qty	Unit issue	Unit Price	Total Price	
5	Type 2 Channel	20.00000	LF	\$200.00	\$4,000.00	
omm Code	Manufacturer	Specifi	Ication	Model #	<del></del>	
7111603	Manuactulei	Эресп	ionzioli	Wodel W		

xtended Description:

ncludes Optional Soil Borrow Areas) See Note leference 7.2

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
18	Unclassified Excavation	6520.00000	CY	\$2.00	\$13,040.00

US

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304763459	1 Aspen Corporation			11:24:53 p.m.	05-06-2015	10 /23
Comm Code	Manufacturer	Speci	fication	Model #		
7111603		-		<del>-</del> ,	·	·-
Extended De	scription :	<del>~.</del>	····			
Inclassified Reference B	Excavation 0		· · · · · · · · · · · · · · · · · · ·			
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19	Wet Bat Gate Mine Seal	1.00000	£Α	\$12,000.00	\$12,00	0.00
omm Code	Manufacturer	Speci	lication	Model #		
7111603						
xtended De:	scription :					
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ine	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Pri	ce
0	Wet Bat Gate Mine Seal with Conveyance Pipe	3.00000	EA	\$15,000.00	\$45,00	0.00
omm Code	Manufacturer	Specil	ication	Model #	<u> </u>	
7111603		·			· · · · · · · · · · · · · · · · · · ·	

xtended Description:

Vet Bat Gate Mine Seal with Conveyance Pipe leference 9.2

Page: 10

3047634591	Aspen Corporation			11:25:20 p.m.	05-06-2015	12 /23
Comm Code	Manufacturer	Speci	fication	Model #		
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Extended Des	_					<del>-</del> -
per plan view Reference 12	racre) .0					
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ENVIRONME OFFICE OF	ENTAL PROTECTION AML&R		ENVIRONMENTAL PRO	OTECTION		
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Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Tota	! Price
24	36" Diameter HDPE Bat Gate Pipe	400.00000	LF	\$50.00	\$20	,000.00
Comm Code	Manufacturer	Specif	lication	Model #		
77111603						<del></del>
Extended Des	cription :	<u> </u>				<u> </u>
6" Diameter Reference 9.4	HDPE Bat Gate Pipe					
MADICETIO		LANCE THE PROPERTY	SHIPSTONATED	Service of the service	Programme Age Top	entra programma de la constante
ENVIRONME OFFICE OF A	ENTAL PROTECTION AML&R		ENVIRONMENTAL PRO	DTECTION		
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Line	Comm Ln Desc	Qty	Unit issue	Unit Price	Tota	l Price
	36" Diameter HDPE Bat Gate	8.00000	EA	\$1,200.00	\$9,0	500.00
omm Code	Manufacturer	Specif	Ication	Model #		
7111603	)					

extended Description : 6" Diameter HDPE Bat Gale Reference 9.5

11:25:32 p.m. 05-06-2015 13 /23

3047634591 Aspen Corporation

	Document Phase	Document Description	Page
DEP1500000048	Final	Addendum 02: Modification of P lerpont	12 of
		Refuse Solicitation	12

### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

Agency Environmental Protection	•
REQ.P.O#_DEP 17114	_

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*		Dir	BOND
KNO\	W ALL MEN BY THES	SE PRESENTS. That we, the	undersigned, Aspen Corporation
of	2400 Ritter Drive	Daniels, WV 258	, as Principal, and Lexon Insurance Company
of 11	0002 Shelbyville Road Suite 100		corporation organized and existing under the laws of the State of
Texas		· <del>· · · · · · · · · · · · · · · · · · </del>	KY, as Surety, are held and firmly bound unto the State
		_	of Amount Bid (\$ 5% of Bid ) for the payment of which,
			our heirs, administrators, executors, successors and assigns.
	(		
The C	Condition of the above	obligation is such that where	as the Principal has submitted to the Purchasing Section of the
Department of	Administration a certe	iln bld or proposal, attached h	ereto and made a part hereof, to enter into a contract in writing for
DEP 17114	- Pierpont Refuse	Pile in Wyoming County	
MOW	THEREFORE,		
	said bid shall be rejec	eled or	
(b) If	said bid shall be acce	pted and the Principal shall e	nter into a contract in accordance with the bid or proposal attached
hereto and shall	Il furnish any other bo	nds and insurance required b	y the bid or proposal, and shall in all other respects perform the
agreement crea	ited by the acceptanc	e of said bid, then this obligat retood and agreed that the lis	on shall be null and vold, otherwise this obligation shall remain in full bility of the Surety for any and all claims hereunder shall, in no event,
		gation as herein stated.	
The Si	urety, for the value red	ceived, hereby stipulates and	agrees that the obligations of said Surety and its bond shall be in no
	r anected by any exter any such extension,	nsion of the time within which	the Obligee may accept such bid, and sald Surety does hereby
IN WIT	'NESS WHEREOF, P	rincipal and Surety have here	eunio set their hands and seals, and such of them as are corporations
have caused the	eir corporate seals to	be affixed hereunto and thes	presents to be signed by their proper officers, this
16th day of	April	20 <u>15</u>	
	ia.		
Principal Corpo	rate Seal		Aspen Corporation
*			(Name of Principal)
11 6 1 8			By War
,			(Must be President or
Į:			// vice President)
ME STATE			Resident
	1		(Tkle)
Curalu Carnardi	`:( a`9aàl		Lexon Insurance Company
Surety Corporal	e Qeal		(Name of Surety)
	3		
300	N.		B Delege
1885 CA	3		Dine He Char
47.7			Bonnie J. Woltham Attorney-in-Fact

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance. Raised corporate seals must be affixed, a power of attorney must be attached.

### **ACKNOWLEDGMENTS**

2. County of			io-wi
6.1		, a Notary Public in and	
4. county and state aforesaid, do hereby certify that			<b>-</b>
whose name is signed to the foregoing writing, has this day	acknowledged the	same before me in my said county.	
5. Given under my hand this	day of	20	,
6. Notary Sezi	7:		
		(Notary Public)	
B. My commission expires on the	day of	20	
laterand describes Dringing I is Comparation			
Acknowledgment by Principal if Corporation			
STATE OF WEST VIRGINIA			
10. County of RALEIGH			
		, a Notary Pubsc in and	
12. county and state aforespid, do hereby certify that			
		signed the foregoing wr	
4 ASPEN CORPORATION		а согр	oration
6. Notary Seal State Of West Vinginia NOTARY PUBLIC ANITA A. CHEEK	<b>1</b> 7:—	(Notary Public)	
	day of	March 20 19	
SOPHIA WV 25921 8. My commission expires on the commission emigra parch 3, 201	day of		
50PHIA WV 25921  8. My commission expires on the commission emires farch 3, 201  cknowledgment by Surety	day of		
50PHIA WV 25921  8. My commission expires on the commission emires Parch 3, 201  cknowledgment by Surety  9. STATE OF Kentucky	day of		to-wit
SOPHIA WV 25921  8. My commission expires on lifty commission expires parch 3, 201  Acknowledgment by Surety  9. STATE OF Kentucky  9. County of Jefferson	day of	March 20 19	tọ-wit
50PHIA WV 25921  8. My commission expires on the commission emires farch 3, 201  cknowledgment by Surety  9. STATE OF Kentucky  0. County of Jefferson  1. I. Barbera Duncan			tọ-wit
SOPHIA WV 25921  8. My commission explies on life commission explices farch 3, 201  cknowledgment by Surety  9. STATE OF Kentucky  9. County of Jefferson  1. I, Barbara Duncan  2. county and state aforesaid, do hereby certify that Bornie J		March 20 19	to-wit
SOPHIA WV 25921  8. My commission explies on life commission explies arch 3, 201  9. STATE OF Kentucky  10. County of Jefferson  11. I, Barbara Duncan  12. county and state aforesaid, do hereby certify that Bornie J.  13. Who 25, Attorney-In-Fact		Marcle 20 19	to-will
SOPHIA WV 25921  8. My commission explies on life commission explies darch 3, 201  4. cknowledgment by Surety  9. STATE OF Kentucky  9. COURTY Of Jefferson  1. I, Barbera Duncan  12. county and state aforesaid, do hereby certify that Bornie J.  13. Who 25, Attornay-In-Fact	, Worthern	Ma vcl. 20 19	to-will for the
SOPHIA WV 25921  8. Why commission explies on life commission explies arch 3, 2011  4. CKNOWledgment by Surety  9. STATE OF Kentucky  9. COUNTY Of Jefferson  11. I, Barbers Duncan  12. county and state aforesaid, do hereby certify that Bornie J.  13. Who 35, Atternsy-In-Fact  14. Lexen Insurance Company.  15. has this day, in my said county, before me, acknowledged	. werthern the said writing to	Ma vcl. 20 19	to-will for the
SOPHIA WV 25921  8. Why commission explies on life commission explies arch 3, 2011  4. CKNOWledgment by Surety  9. STATE OF Kentucky  9. COUNTY Of Jefferson  11. I, Barbers Duncan  12. county and state aforesaid, do hereby certify that Bornie J.  13. Who 35, Atternsy-In-Fact  14. Lexen Insurance Company.  15. has this day, in my said county, before me, acknowledged	. Wortham  the said writing to	, a Notary Public in and signed the foregoing with the act and deed of the sald corporation.	to-will
8. My commission explies on life commission explies arch 3, 2019  4. cknowledgment by Surety  9. STATE OF Kentucky  9. County of Jefferson  11. I, Barbara Duncan  12. county and state aforesaid, do hereby certify that Bornio J.  13. Who as, Attorney-In-Fact  14. Lexon insurance Company.  15. Given under my hand this 18th	the said writing to day of A	, a Notary Public in and signed the foregoing with the act and deed of the sald corporation.	to-will
8. My commission explies on life commission explies arch 3, 2019  4. cknowledgment by Surety  9. STATE OF Kentucky  9. County of Jefferson  11. I, Barbara Duncan  12. county and state aforesaid, do hereby certify that Bornio J.  13. Who as, Attorney-In-Fact  14. Lexon insurance Company.  15. Given under my hand this 18th	the said writing to day ofA		to-will for the
SOPHIA WV 25921  SOPHIA WV 25921  Acknowledgment by Surety  STATE OF Kentucky  COUNTY Of Jefferson  L. Berbera Duncan  County and state aforesaid, do hereby certify that Bornio J.  Lexon Insurance Company.  has this day, in my said county, before me, acknowledged  Society of Jefferson  Lexon Insurance Company.  has this day, in my said county, before me, acknowledged  Society of Jefferson  Soc	the said writing to day ofA	, a Notary Public in and signed the Euregoing write act and deed of the said corporation.  Babara Purcen (Notary Public)	to-will for the
SOPHIA WV 25921  SOPHIA WV 25921  Acknowledgment by Surety  STATE OF Kentucky  COUNTY Of Jefferson  Learning and State eforeseid, do hereby certify that Borning  Lexon Insurance Company.  Lexon Insurance Company.  As this day, in my said county, before me, acknowledged  Society State of the county of the coun	the said writing to day ofA	, a Notary Public in and signed the Euregoing write act and deed of the said corporation.  Babara Purcen (Notary Public)	to-will for the

### POWER OF ATTORNEY

Lx-236615

05-06-2015

## **Lexon Insurance Company**

KNOW ALL MEN BY THESE PRESENTS, that LEXON INSURANCE COMPANY, a Texas Corporation, with its principal office in Louisville, Kentucky, does hereby constitute and appoint: Brook T. Smith, Raymond M. Hundley, Jason D. Cromwell, James H. Martin, Barbara Duncan, Sandra L. Fusinetti, Mark A. Guidry, Jill Kemp, Jackie C. Koestel, Lynnette Long, Amy Meredith, Deborah Neichter, Jessica Nowlin, Shervon Quinn, Bonnie J. Wortham its true and lawful Attomey(s)-In-Fact to make, execute, seal and deliver for, and on its behalf as surety, any and all bonds, undertakings or other writings obligatory in nature of a bond.

This authority is made under and by the authority of a resolution which was passed by the Board of Directors of LEXON INSURANCE COMPANY on the 1st day of July, 2003 as follows:

Resolved, that the President of the Company is hereby authorized to appoint and empower any representative of the Company or other person or persons as Attorney-In-Fact to execute on behalf of the Company any bonds, undertakings, policies, contracts of indemnity or other writings obligatory in nature of a bond not to exceed \$ 4,000,000.00, Four Million dollars, which the Company might execute through its duly elected officers, and affix the seal of the Company thereto. Any said execution of such documents by an Attorney-In-Fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company. Any Attorney-In-Fact, so appointed, may be removed for good cause and the authority so granted may be revoked as specified in the Power of Attorney.

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

IN WITNESS THEREOF, LEXON INSURANCE COMPANY has caused this instrument to be signed by its President, and its Corporate Seal to be affixed this 21st day of September, 2009.

LEXON INSURANCE COMPANY

Campbell President

### ACKNOWLEDGEMENT

On this 21<sup>st</sup> day of September, 2009, before me, personally came David E. Campbell to me known, who be duly swom, did depose and say that he is the President of LEXON INSURANCE COMPANY, the corporation described in and which executed the above instrument; that he executed said instrument on behalf of the corporation by authority of his office under the By-laws of said corporation.



AMY L. TAYLOR Notary Public-State of Tennessee **Davidson County** Mv Commission Expires 01-09-16

CERTIFICATE

i, the undersigned, Assistant Secretary of LEXON INSURANCE COMPANY, A Texas Insurance Company, DO HEREBY CERTIFY that the original Power of Attorney of which the forgoing is a true and correct copy, is in full force and effect and has not been revoked and the resolutions as set forth are now in force.

Signed and Seal at Mount Juliet, Tennessee this 16th Day of 120 12.

Andrew Smith **Assistant Secretary** 

"WARNING: Any person who knowingly and with intent to defraud any insurance company or other person, files and application for insurance of claim containing any materially faise information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties."

**Aspen Corporation** 

### ADDITIONAL TERMS AND CONDITIONS (Construction Contracts Only)

1. CONTRACTOR'S LICENSE: West Virginia Code § 21-11-2 requires that all persons desiring to perform contracting work in this state be licensed. The West Virginia Contractors Licensing Board is empowered to issue the contractor's license. Applications for a contractor's license may be made by contacting the West Virginia Division of Labor. West Virginia Code § 21-11-11 requires any prospective Vendor to include the contractor's license number on its bid. Failure to include a contractor's license number on the bid shall result in Vendor's bid being disqualified. Vendors should include a contractor's license number in the space provided below.

Contractor's Name: As	PEN CORPORATION
Contractor's License No.	WV000653

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a Award Document.

- 2. DRUG-FREE WORKPLACE AFFIDAVIT: W. Va. Code § 21-1D-5 provides that any solicitation for a public improvement contract requires each Vendor that submits a bid for the work to submit at the same time an affidavit that the Vendor has a written plan for a drugfree workplace policy. To comply with this law, Vendor must either complete the enclosed drug-free workplace affidavit and submit the same with its bid or complete a similar affidavit that fulfills all of the requirements of the applicable code. Failure to submit the signed and notarized drug-free workplace affidavit or a similar affidavit that fully complies with the requirements of the applicable code, with the bid shall result in disqualification of Vendor's bid. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.
  - 2.1.DRUG-FREE WORKPLACE POLICY: Pursuant to W. Va. Code § 21-1D-4, Vendor and its subcontractors must implement and maintain a written drug-free workplace policy that complies with said article. The awarding public authority shall cancel this contract if: (1) Vendor fails to implement and maintain a written drug-free workplace policy described in the preceding paragraph, (2) Vendor fails to provide information regarding implementation of its drug-free workplace policy at the request of the public authority; or (3) Vendor provides to the public authority false information regarding the contractor's drug-free workplace policy. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.
- 3. DRUG FREE WORKPLACE REPORT: Pursuant to W. Va. Code § 21-1D-7b, no less than once per year, or upon completion of the project, every contractor shall provide a certified report to the public authority which let the contract. For contracts over \$25,000, the

Revised 08/08/2014

WV-73 Rev. 08/2013



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

STATE OF WEST VIRGINIA,
COUNTY OF RALEIGH , TO-WIT:
I, Double Advise, after being first duly sworn, depose and state as follows:
1. I am an employee of Aspen Corregion ; and, (Company Name)
2. I do hereby attest that ASPEN CORPORATION (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.
The above statements are sworn to under the penalty of perjury.
By: Wan All
Title: // Widin
Company Name: ASPEN CORPORATION
Date: MAY 7, 2015
Taken, subscribed and sworn to before me this The day of May, 2015.
By Commission expires March 3, 2019
OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC ANITA A. CHEEK PO BOX 1388 SOPHIA, WV 25921 My commission cyclres Metch 3, 2019  (Notary Public)

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. August 2013

OMB #1029-0119 Expiration Date: 1/31/16

### 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. When possible, please type your information onto this form to reduce errors on our end. NOTE: Signature and date this form is signed must be recent (within the last month) to be considered for a current bid

Part A: General Information
Business Name: Aspen Corporation Tax Payer ID No.: 55-0627766  Address: 2400 Ri-Hen Dr.  City: Daniels State: UV Zip Code: 25832 Phone: 304.763.4573  Fax No.: 304.763.4591 E-mail address: dadkins@ Aspen-901f.com
Part B: Legal Structure
( Corporation ( ) Sole Proprietorship ( ) Partnership ( ) LLC ( ) Other (please specify)
Part C: Certifying and updating information in the Applicant/Violator System (AVS). Select only one of the following options, follow the instructions for that option, and sign below.
I, Ronnie L. AdKins, have the express authority to certify that: (print name)
1Information 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.
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 is not listed in AVS. If you select this option, you must provide all information required in Part D. Sign and date below and complete Part D.
V.Date Signature Title
Date Signature Title
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 200-643-9742 or from the AVS website at https://www.orme.gov

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Part D.

Contractor's Business Name: Aspen Corporation

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:

Aspen Corporation

- 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.

Name Address Begin Date:	Donnie Adkins 2400 Ritter Dr. Daniels IDV 25832 1982	Position/Title Telephone # % of Ownership Ending Date:	President 304:743:4573 50% NA
Name Address Begin Date:	Ronnie Adkins 2400 Ritter Dr. Daniels HUW 25832	Position/Title Telephone # % of Ownership Ending Date:	Vice Pres. Sec. Treas. 304:7163:4573 5070 NA
Name Address Begin Date:		Position/Title Telephone # % of Ownership Ending Date:	
Name Address Begin Date:		Position/Title Telephone # % of Ownership Ending Date:	

### 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 22 minutes 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 Clearence Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, Constitution Ave., NW, Washington, D.C. 20240.

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ DEP1500000048

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.

	umbers Received: ox next to each adden	đum received)			
$\boxtimes$	Addendum No. 1		Addendum No. 6		
$\boxtimes$	Addendum No. 2		Addendum No. 7		
	Addendum No. 3		Addendum No. 8		
	Addendum No. 4		Addendum No. 9		
	Addendum No. 5		Addendum No. 10	)	
I further unde discussion he	hat failure to confirm rstand that any verbe ld between Vendor's on issued in writing	al representation representatives	n made or assumed to and any state perso	to be made dur onnel is not bis	ring any oral nding. Only
ASPEN	CORPORATION				
Company Authorized Si	enature				
May 7, Date	2015				
NOTE: This document pro-	s addendum acknow cessing.	vledgement she	ould be submitted	with the bid	to expedite

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### **CERTIFICATIONAND SIGNATURE PAGE**

By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid, offer or proposal for review and consideration; 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.

304-763-4573/304-763-4591/MAY7, 2015 (Phone Number) (Fax Number) (Date)

Revised 08/08/2014

REQ No. DEP1500000048

# STATE OF WEST VIRGINIA Purchasing Division

### **PURCHASING AFFIDAVIT**

MANDATE: Under W. Va. Code §5A-3-10a, 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: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

**EXCEPTION:** The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. 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.

### **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.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, fallure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"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.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (*W. Va. Code* §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

# Vendor's Name: A SPEN CORDINATION Authorized Signature: Date: MAY 7, 2015 State of WST VIVIALU County of County o

PO BOX 1398

BOFF (A. WV 25921

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