



Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
 Charleston, WV 25305-0130

State of West Virginia  
 Request for Quotation

Proc Folder: 28107

Doc Description: COMPLETE INSTALLATION OF A CCTV SYSTEM, PARTS, LABOR, WARRAN

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2014-09-25	2014-10-30 13:30:00	CRFQ 0506 WSH1500000003	1

**BID RECEIVING LOCATION**

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

**VENDOR**

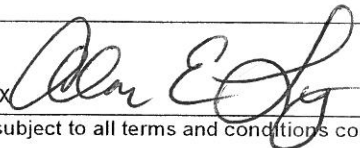
Vendor Name, Address and Telephone Number:  
 Longs Security Camera Systems LLC  
 102 38th ST SE.  
 Charleston WV 25304

10/30/14 01:23:16PM  
 West Virginia Purchasing Division

WV Contractor Licensing WV040102

FOR INFORMATION CONTACT THE BUYER

Robert Kilpatrick  
 (304) 558-0067  
 robert.p.kilpatrick@wv.gov

Signature X  FEIN # 20-3881880-001 DATE 10-30-2014

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

INVOICE TO		SHIP TO	
PROCUREMENT OFFICER - 304-269-1210 HEALTH AND HUMAN RESOURCES WILLIAM R SHARPE JR HOSPITAL 936 SHARPE HOSPITAL RD WESTON WV26452 US		PROCUREMENT OFFICER - 304-269-1210 HEALTH AND HUMAN RESOURCES WILLIAM R SHARPE JR HOSPITAL 936 SHARPE HOSPITAL RD WESTON WV 26452 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Purchase of parts, installation, and warranty of a CCTV Syst	1 Lot			\$180,000.00

Comm Code	Manufacturer	Specification	Model #
46171610			

Extended Description :

4.1.1 - 117 ea. Indoor Internet Protocol (IP) Cameras; 4.1.2 - 12 ea. Outdoor Internet Protocol (IP) Cameras; 4.1.3 - 2 ea. Network Video Recorder(s) NVRs); 4.1.4 - 11 ea. Desktop Computer with Monitor Stations; 4.1.5 - sufficient Network Switches to support the appropriate length of cabling; 4.1.6 - 1 lump sum Miscellaneous Materials for providing and installing CCTV to operational status; 4.1.7 All Labor necessary to complete project; 4.1.8 1 ea. One year Warranty on all Materials and Labor for entire CCTV System.

WSH1500000003	<b>Document Phase</b> Final	<b>Document Description</b> COMPLETE INSTALLATION OF A CCT V SYSTEM, PARTS, LABOR, WARRAN	<b>Page 3</b> <b>of 3</b>
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

# Longs' Security Camera Systems

102 38<sup>th</sup> Street SE

Charleston, West Virginia 25304

Phone: (304) 925-0338 Fax: (304) 925-0338 Email: [longsectv@suddenlink.net](mailto:longsectv@suddenlink.net)

16 years Experience \* BS Electronics Engineering Technology Degree \* Military Electronics Trained  
CCTV Analog and Digital \* Card Access \* School Intercom \* Security \* Patient Wondering

TO: Purchasing Division	Proposal ID: 10302014WSH
Attn: CRFQ 0506 WSH00000003	Date: 10-30-2014
2019 Washington St SE	Terms: Per Spec
Charleston, WV 25305	Sales Tax: Not Included
Phone: 304-558-0067	FOB: Job Site
Contact Robert Kirkpatrick	Proposal Expires: N/A

## SCOPE OF WORK

**Project Name: Complete Installation of a CCTV Systems, Parts, Labor and Warranty**

LSCS will:

Qty	Description
1	Software Central Management Software
4	NVR (256TB Total)- Cameras divide per NVR as needed
12	3 Mega Pixel Outdoor Vandal Proof Cameras w D/N
117	1.3 Mega Pixel Indoor Vandal Proof Camera w D/N
13	12 Vdc Power Supply
11	CCTV Designated Computers and designed to meet software requirements
11	Gigabit Switches
1	Lot Cable and Installation Materials
1	Lot Installation Labor
<b>Grand Total \$180,000.00</b>	

## TERMS AND CONDITIONS:

- As determined in owner specification
- LSCS not responsible for owners network
- Owner responsible for connecting CCTV system to resident network.
- LSCS responsible for all new network pertaining to the camera

Thank you,

Alan E. Long  
Owner

Long's Security Camera Systems

## ACCEPTANCE OF PROPOSAL

\_\_\_\_\_ Approval Signature \_\_\_\_\_ Signatures Title  
\_\_\_\_\_ Date \_\_\_\_\_ Purchase Order Number

**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: Long's Security Camera Systems LLC

Contractor's License No. WV040102

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 drug-free 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

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: WSH1500000003**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.


**Addendum Numbers Received:**

(Check the box next to each addendum received)

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input type="checkbox"/> Addendum No. 2            | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3            | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4            | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5            | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Longs Security Camera Systems LLC  
Company

  
Authorized Signature

10-30-2014  
Date

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

**CERTIFICATION AND 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.

Longs Security Camera Systems LLC  
(Company)

Alan E. [Signature] / Owner  
(Authorized Signature) (Representative Name, Title)

304-925-0338 / 304-925-0338  
(Phone Number) (Fax Number) (Date)

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, failure 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 exceeds 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.

**WITNESS THE FOLLOWING SIGNATURE:**Vendor's Name: Longs' Security Camera Systems LLCAuthorized Signature: [Signature] Date: 10/30/2014State of WVCounty of KANAWHA, to-wit:Taken, subscribed, and sworn to before me this 30 day of OCT, 2014My Commission expires 9/12/2019, 20  

AFFIX SEAL HERE

NOTARY PUBLIC

[Signature]

Purchasing Affidavit (Revised 07/01/2012)







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

STATE OF WEST VIRGINIA,  
COUNTY OF Kanawha, TO-WIT:

I, Alan E Long, after being first duly sworn, depose and state as follows:

1. I am an employee of Longs Security Camera Systems LLC; and,  
(Company Name)
2. I do hereby attest that Longs Security Camera Systems LLC  
(Company Name)

maintains a valid written drug free workplace policy and that such policy is in compliance with **West Virginia Code §21-1D**.

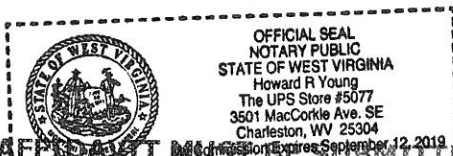
The above statements are sworn to under the penalty of perjury.

By: ALAN E Long  
 Title: OWNER  
 Company Name: Longs Security Camera Systems LLC  
 Date: 10/30/2014

Taken, subscribed and sworn to before me this 30 day of OCT, 2014.

By Commission expires 9/12/2019

(Seal)



Howard R Young  
(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.**

State of West Virginia  
Purchasing Division

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## CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

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In accordance with *West Virginia 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. That report must include each of the items identified below in the Required Report Content section.

**Instructions:** Vendor should complete this coversheet, attach it to the required report, and submit it to the appropriate location as follows: For contracts more than \$25,000, the report should be mailed to the West Virginia Purchasing Division at 2019 Washington Street East, Charleston, WV 25305. For contracts of \$25,000 or less, the vendor should mail the report to the public authority issuing the contract.

**Contract Identification:**

Contract Number: CRFQ 0506 WSH1500000003

Contract Purpose: Complete Installation of CCTV SYSTEM William R Sharpe Hospital

Agency Requesting Work: Health and Human Resources

**Required Report Content:** The attached report must include each of the items listed below. The vendor should check each box as an indication that the required information has been included in the attached report.

- Information indicating the education and training service to the requirements of *West Virginia Code* § 21-1D-5 was provided;
- Name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;
- Average number of employees in connection with the construction on the public improvement;
- Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.

**Vendor Contact Information:**

Vendor Name: Longs Security Camera Systems LLC Vendor Telephone: 304-925-0338

Vendor Address: 102 38th ST SE Vendor Fax: 304-925-0338  
Charleston WV 25304

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# Longs' Security Camera Systems LLC

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102 38<sup>th</sup> Street • Charleston, WV 25304 • Phone: 304 206-7131 • Fax: 304-925-  
E-mail: longscctv@Suddenlink.net

Subject: Certified Laboratory for Drug Free Workplace Screening

Drug-Free Workplace Testing Clarification Sheet

## **Education and Training**

### **Courses:**

Supervisors Drug Free Workplace Course

Reasonable Suspicion Course

Training Video: Supervising the Drug Free Workplace "Drugs Don't Work"

Total Time training annually: 2.5 hours

## **Drug Testing Report to:**

Physical Exams, Inc  
102 Patrick Street  
Charleston, WV 25387

Phone: 304-346-8213  
Fax: 304-346-8214

## **United States Department of Health and Human Services Certified Lab:**

Quest Diagnostics  
4610 Kanawha Ave SW,  
Charleston WV 25309

Phone (681) 205-8866

## **Average Number Employees Tested**

100% Employees Test Annually or as required by Company Policy

## **Drug Test Results**

Drug Test Results are provided by Physical Exams, Inc

Should you have any need for additional information or have questions, comments and/or concerns please call Alan Long at 304-206-7131 or longscctv@Suddenlink.net.

Thank you,

Alan E. Long  
Owner  
Longs' Security Camera Systems

# FORENSIC DRUG TESTING CUSTODY AND CONTROL FORM



656897631 7102609 SPECIMEN ID NO.

**STEP 1: COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE**

LAB ACCESSION NO.

<p><b>A. Employer Name, Address, I.D. No.</b>                  PHYSICAL EXAMS INC                  102 PATRICK STREET                  CHARLESTON WV 25307                  PH: 304-346-8213 FAX: 304-414-0065</p>	<p><b>B. MRO Name, Address, Phone and Fax No.</b> FORM ID: 8046-0020                  SARIN NURSE RD                  102 PATRICK ST                  CHARLESTON WV 25307                  PH: 304-346-8213 FAX: 304-346-8214</p>
<p><b>C. Donor SSN or Employee I.D. No.</b> 235-14-2571</p>	
<p><b>D. Donor Name:</b> Last: <u>Long</u> First: <u>Alan</u></p>	
<p><b>E. Donor ID Verified:</b> <input checked="" type="checkbox"/> Photo ID <input type="checkbox"/> Emp. Rep.</p>	
<p><b>F. Reason for Test:</b> <input checked="" type="checkbox"/> Pre-employment (1) <input type="checkbox"/> Random (3) <input type="checkbox"/> Reasonable Suspicion/Cause (5) <input type="checkbox"/> Post-Accident (2) <input type="checkbox"/> Promotion (22)  <input type="checkbox"/> Return to Duty (6) <input type="checkbox"/> Follow-up (23) <input type="checkbox"/> Other (specify) (99)</p>	
<p><b>G. Drug Tests to be Performed:</b></p> <p>( ) 87215K SAP 5-50/2K+NDH45/18 ( ) 27800H SAP 10-50/2K+NDH45/18 ( ) 89124H TRAMADOL-100/100 SCEN                  (X) 87811K SAP 10-50 DP+NDH45/1 ( ) 28600H SYNTHETIC STIMULANTS ( ) 10045H SYN GABAPENTIN 1                  ( ) 8840H ALCOHOL, ETHYL CU ( ) 89215K BUPRENORPHINE/A (0)</p>	
<p><b>H. Collection Site Name:</b> <u>PHYSICAL EXAMS INC</u> <b>Collection Site Code:</b> _____                  Address: <u>102 PATRICK ST</u> Collector Phone No.: <u>304-346-8213</u>                  City, State and Zip: <u>CHARLESTON WV 25307</u> Collector Fax No.: <u>304-346-8214</u></p>	

**STEP 2: COMPLETED BY COLLECTOR**

Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F?  Yes  No, Enter Remark

**Specimen Collection:**  Split  Single  None Provided (Enter Remark)  Observed (Enter Remark)

REMARKS

**STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5.**

**STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY**

I certify that the specimen given to me by the donor identified in the certification section on Copy 1 of this form was collected, labeled, sealed, and released to the Delivery Service noted in accordance with applicable requirements.

<p> (Print) Collector's Name (First, MI, Last)</p>	<p><u>120</u> AM Time of Collection</p> <p><u>10/29/14</u> Date (Mo./Day/Yr.)</p>	<p><b>SPECIMEN BOTTLE(S) RELEASED TO:</b>  <input checked="" type="checkbox"/> Quest Diagnostics Courier <input type="checkbox"/> FedEx  <input type="checkbox"/> Other _____                  Name of Delivery Service Transferring Specimen to Lab</p>
<p><b>RECEIVED AT LAB:</b> <input checked="" type="checkbox"/> _____                  Signature of Accessioner</p> <p>(Print) Accessioner's Name (First, MI, Last)</p>	<p><u>   </u> / <u>   </u> / <u>   </u> Date (Mo./Day/Yr.)</p>	<p><b>Primary Specimen Bottle Seal Intact</b> <b>SPECIMEN BOTTLE(S) RELEASED TO:</b>  <input type="checkbox"/> Yes  <input type="checkbox"/> No, Enter Remark _____</p>

**STEP 5: COMPLETED BY DONOR**

I certify that I provided my specimen to the collector; that I have not adulterated it in any manner; each specimen bottle used was sealed with a tamper-evident seal in my presence; and that the information and numbers provided on this form and on the label affixed to each specimen bottle is correct.

\_\_\_\_\_ Signature of Donor  
 \_\_\_\_\_ (PRINT) Donor's Name (First, MI, Last)  
 \_\_\_\_\_ Date (Mo./Day/Yr.)

Daytime Phone No. (304) 975-6338 Evening Phone No. (304) 975-6338 Date of Birth 8/9/68  
 Mo. Day Yr.

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## INSTRUCTIONS FOR COMPLETING FORENSIC DRUG TESTING CUSTODY AND CONTROL FORM

**NOTE:** Use ballpoint pen, press hard, print all information with the exception of signatures, and check all copies for legibility.

- A. Collector ensures that the Specimen ID number on the top of the CCF matches the specimen ID number on the labels/seals.
- B. Collector provides the required information in STEP 1 on the CCF. The collector provides the remark in STEP 2 if the donor refuses to provide his/her SSN or Employee ID number.
- C. Collector gives a collection container to the donor for providing a specimen.
- D. After the donor gives the specimen to the collector, the collector checks the temperature of specimen within 4 minutes and marks the appropriate temperature box in STEP 2 on the CCF. The collector provides a remark if the temperature is outside the acceptable range.
- E. Collector checks the split or single specimen collection box. If no specimen is collected, that box is checked and a remark is provided. If no specimen is collected, Copy 1 is discarded and the remaining copies are distributed as required.
- F. Donor watches the collector pouring the specimen from the collection container into the specimen bottle(s), placing the cap(s) on the specimen bottle(s) and affixing the label(s)/seal(s) on the specimen bottle(s).
- G. Collector dates the specimen bottle label(s) after they are placed on the specimen bottle(s).
- H. Donor initials the specimen bottle label(s) after the label(s) have been placed on the specimen bottle(s).
- I. Collector instructs the donor to read the certification statement in STEP 5 and to sign, print name, date, provide phone numbers and date of birth after reading the certification statement. If the donor refuses to sign the certification statement, the collector provides a remark in STEP 2 on Copy 1.
- J. Collector completes STEP 4 (i. e., provides signature, printed name, date, time of collection and name of delivery service), immediately places the sealed specimen bottle(s) and Copy 1 of the CCF in a leak-proof plastic bag, places the tracking label from the CCF on the specimen package, releases specimen package to the delivery service and distributes the other copies as outlined in the standard operating procedure manual as required.

### COMPLETING THE COLLECTION PROCESS:

Donor receives COPY 5 and may leave the collection site at this point.

Fax COPY 2 directly to the Medical Review Officer. Do NOT send to laboratory. File original with Collector's copy.

Retain COPY 3 for your records. Do NOT send to laboratory.

Forward COPY 4 to the employer. Do NOT send to laboratory.

LSM0027858

Agency Div Purchasing  
REQ. P.O.# \_\_\_\_\_

BID BOND

0506 - WSA150000003

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Longs Security Camera Systems, LLC  
of Charleston, West Virginia, as Principal, and RLI Insurance Company  
of Peoria, Illinois, a corporation organized and existing under the laws of the State of  
Illinois with its principal office in the City of Peoria, as Surety, are held and firmly bound unto the State  
of West Virginia, as Oblige, in the penal sum of 5% of Total Amount Bid for the payment of which,  
well and truly to be made, we jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the  
Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for  
Phased Installation of Security Camera System

NOW THEREFORE,

- (a) If said bid shall be rejected, or
- (b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal  
attached hereto and shall furnish any other bonds and insurances required by the bid or proposal, and shall in all other respects perform  
the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in  
full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no  
event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no  
way impaired or affected by any extension of the time within which the Oblige may accept such bid, and said Surety does hereby  
waive notice of any such extension.

WITNESS, the following signatures and seals of Principal and Surety, executed and sealed by a proper officer of Principal and  
Surety, or by Principal individually if Principal is an individual, this 30th day of October, 2014.

Principal Seal

Longs Security Camera Systems, LLC

(Name of Principal)

By: [Signature]  
(Must be President, Vice President, or  
Duty Authorized Agent)

Owner  
(Title)

RLI Insurance Company

(Name of Surety)

[Signature]  
Attorney-in-Fact Teresa L Alley

Surety Seal

**IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and  
must attach a power of attorney with its seal affixed.**



RLI Insurance Company  
 P.O. Box 3967 Peoria IL, 61612-3967  
 Phone: (309)692-1000 Fax: (309)683-1610

**POWER OF ATTORNEY**  
**RLI Insurance Company**

Bond No. LSM0027858

**Know All Men by These Presents:**

That the RLI Insurance Company, a corporation organized and existing under the laws of the State of Illinois, and authorized and licensed to do business in all states and the District of Columbia does hereby make, constitute and appoint: Teresa L Alvey in the City of Bluefield, State of Virginia, as Attorney In Fact, with full power and authority hereby conferred upon him/her to sign, execute, acknowledge and deliver for and on its behalf as Surety, in general, any and all bonds, undertakings, and recognizances in an amount not to exceed Ten Million and 00/100 Dollars (\$10,000,000.00) for any single obligation, and specifically for the following described bond.

Principal: Longs Security Camera Systems, LLC  
 Obligee: West Virginia Department of Administration Purchasing Div  
 Bond Amount: 5% of Total Amount Bid

The RLI Insurance Company further certifies that the following is a true and exact copy of a Resolution adopted by the Board of Directors of RLI Insurance Company, and now in force to-wit:

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

IN WITNESS WHEREOF, the RLI Insurance Company has caused these presents to be executed by its Vice President with its corporate seal affixed this 30th day of October, 2014.

ATTEST:

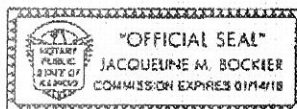
Cynthia S. Dohm  
 Cynthia S. Dohm Assistant Secretary



Roy C. Die  
 Roy C. Die Vice President

On this 30th day of October, 2014, before me, a Notary Public, personally appeared Roy C. Die and Cynthia S. Dohm, who being by me duly sworn, acknowledged that they signed the above Power of Attorney as Vice President and Assistant Secretary, respectively, of the said RLI Insurance Company, and acknowledged said instrument to be the voluntary act and deed of said corporation.

Jacqueline M. Bockler  
 Jacqueline M. Bockler Notary Public





State of West Virginia

## **PURCHASING DIVISION**

### **Construction Bid Submission Review Form**

*This list has been provided for informational purposes only and is not to be construed as a complete list of request for quotation or bidding requirements for any individual construction project. This list does not and cannot include every item, mistake or oversight that could cause a contractor's bid to be disqualified. Rather, this list is intended to draw attention to some of the most common problems that the Purchasing Division encounters in the bidding process for construction projects. All potential bidders must read the request for quotation, all additional documents, and all instructions relating thereto ("Bid Documents") in their entirety to identify the actual request for quotation and bidding requirements. Failure to read the Bid Documents in their entirety and comply with the stated requirements contained therein may result in bid disqualification.*

#### **Errors That Shall Be Reason for Immediate Bid Disqualification**

- ✓ 1. Failure to attend a mandatory pre-bid meeting
- ✓ 2. Failure to sign the bid
- ✓ 3. Failure to supply West Virginia contractor's license # on bid
- ✓ 4. Failure to supply a signed drug free workplace affidavit with the bid
- ✓ 5. Failure to supply a valid bid bond or other surety approved by the State of West Virginia
- ✓ 6. Failure to meet any mandatory requirement of the RFQ
- ✓ 7. Failure to acknowledge receipt of Addenda (only if stipulated as mandatory)
- ✓ 8. Failure to submit bid prior to the bid opening date and time
- ✓ 9. Federal debarment
- ✓ 10. State of West Virginia debarment or suspension

#### **Errors that May Be Reason for Bid Disqualification Before Contract Award**

1. Uncontested debt to the State exceeding \$1,000.00 (must be cured prior to award)
2. Workers' Compensation or Unemployment Compensation delinquency (must be cured prior to award)
3. Not registered as a vendor with the State (must be cured prior to award)
4. Failure to obtain required bonds and/or insurance
5. Failure to provide the sub-contractor listing within 1 business day of bid opening.
6. Failure to use the provided RFQ form (only if stipulated as mandatory).