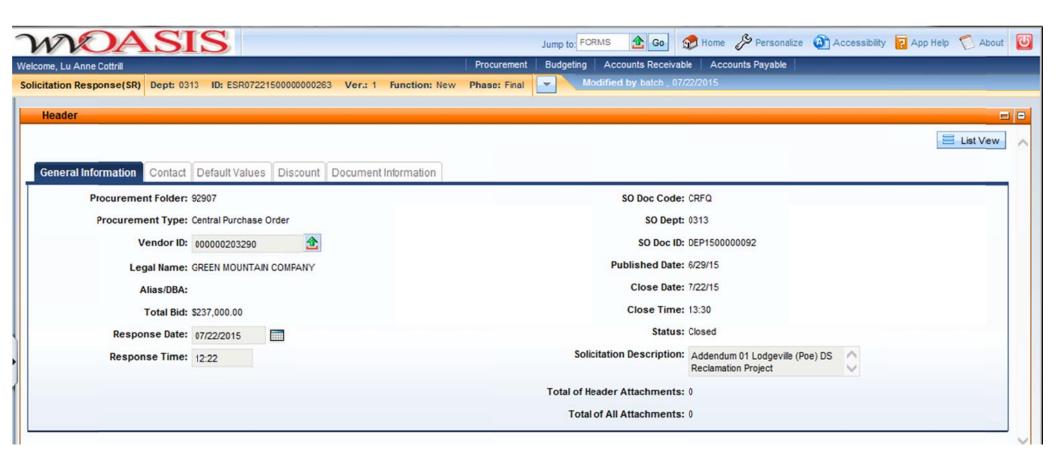


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

Bid Fax: 304-558-3970

The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at *wvOASIS.gov*. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at *WVPurchasing.gov* with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.





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

# **State of West Virginia Solicitation Response**

Proc Folder: 92907

Solicitation Description: Addendum 01 Lodgeville (Poe) DS Reclamation Project

Proc Type: Central Purchase Order

Date issued	Solicitation Closes	Solicitation No	Version
	2015-07-22 13:30:00	SR 0313 ESR07221500000000263	1

### VENDOR

000000203290

**GREEN MOUNTAIN COMPANY** 

FOR INFORMATION CONTACT THE BUYER

Beth Collins (304) 558-2157 beth.a.collins@wv.gov

Signature X FEIN # DATE

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

Page: 1 FORM ID: WV-PRC-SR-001

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Mobilization & Demobilization	1.00000	LS	\$1,000.00	\$1,000.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Extended Des	(Cannot be more than	10% of Total Amoun	t Bid)		
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Construction Layout Stakes	1.00000	LS	\$1,000.00	\$1,000.00
	•				
Comm Code	Manufacturer	Specification		Model #	
77111603					
Line	Comm Ln Desc	Qty 1.00000	Unit Issue	Unit Price \$1,000.00	Ln Total Or Contract Amount \$1,000.00
	Quality Control	1.00000		ψ1,000.00	ψ1,000.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Extended Des	(Cannot be more than	3% of Total Amount	Bid)		
	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
Line	Site Preparation	1.00000	LS	\$23,000.00	\$23,000.00
4	Site Freparation				
	Manufacturer	Specification		Model #	
4		Specification		Model #	
4 Comm Code	Manufacturer		t Bid)	Model #	
Comm Code 77111603	Manufacturer		t Bid)	Model #	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
5	Temporary Access Road Stone	130.00000	TON	\$30.00	\$3,900.00
	remporary Access Road Stone	100.00000	1011	ψ00.00	ψ5,500.00
Comm Code	Manufacturer	Specification		Model #	
77111603	Manufacturer	Ореспісаціон		Wodel #	
Extended Des	Temporary Access Roa	ad Stone			
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	Gravel Road Rehabilitation	110.00000	TON	\$30.00	\$3,300.00
Comm Code	Manufacturer	Specification		Model #	
77111603		•			
Extended Des	Gravel Road Rehabilita	ation			
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
Line 7	Comm Ln Desc  Demolition of Structures and Removal	<b>Qty</b> 1.00000	Unit Issue	<b>Unit Price</b> \$42,685.00	Ln Total Or Contract Amount \$42,685.00
7	Demolition of Structures and Removal	1.00000		\$42,685.00	
7 Comm Code	Demolition of Structures and				
7 Comm Code	Demolition of Structures and Removal	1.00000		\$42,685.00	
7 Comm Code 77111603	Demolition of Structures and Removal  Manufacturer	1.00000 Specification		\$42,685.00	
	Demolition of Structures and Removal  Manufacturer	1.00000 Specification		\$42,685.00	
Comm Code 77111603 Extended Des	Demolition of Structures and Removal  Manufacturer  scription : Demolition of Structure	Specification ss and Removal	LS	\$42,685.00 Model #	\$42,685.00
Comm Code 77111603 Extended Des	Demolition of Structures and Removal  Manufacturer  scription : Demolition of Structure  Comm Ln Desc	1.00000  Specification  s and Removal	LS Unit Issue	\$42,685.00  Model #  Unit Price	\$42,685.00  Ln Total Or Contract Amount
Comm Code 77111603 Extended Des	Demolition of Structures and Removal  Manufacturer  scription : Demolition of Structure  Comm Ln Desc	Specification  Specification  S and Removal  Qty 610.00000	LS Unit Issue	\$42,685.00  Model #  Unit Price	\$42,685.00  Ln Total Or Contract Amount
Comm Code 77111603 Extended Des	Demolition of Structures and Removal  Manufacturer  Scription: Demolition of Structure  Comm Ln Desc  Silt Fence	1.00000  Specification  s and Removal	LS Unit Issue	\$42,685.00  Model #  Unit Price \$3.00	\$42,685.00  Ln Total Or Contract Amount

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
9	Straw Wattles	1600.00000	LF	\$5.00	\$8,000.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Extended Des	Straw Wattles				
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
10	Stabilized Construction Entrance	50.00000	TON	\$60.00	\$3,000.00
Comm Code	Manufacturer	Specification		Model #	
77111603		оростояноп			
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
Line	Comm Ln Desc Rock Check Dam	<b>Qty</b> 3.00000	Unit Issue	<b>Unit Price</b> \$600.00	Ln Total Or Contract Amount \$1,800.00
11 Comm Code	Rock Check Dam  Manufacturer	3.00000		\$600.00	
11 Comm Code 77111603	Rock Check Dam  Manufacturer	3.00000  Specification		\$600.00	
Comm Code 77111603 Extended Des	Manufacturer  Scription: Rock Check Dam	3.00000	EA	\$600.00 Model #	\$1,800.00
Comm Code 77111603 Extended Des	Manufacturer  Scription: Rock Check Dam  Comm Ln Desc  Revegetation	3.00000 Specification  Qty 3.75000	EA Unit Issue	\$600.00  Model #  Unit Price \$3,000.00	\$1,800.00  Ln Total Or Contract Amount
Comm Code 77111603 Extended Des	Manufacturer  Scription: Rock Check Dam  Comm Ln Desc	3.00000  Specification	EA Unit Issue	\$600.00  Model #  Unit Price	\$1,800.00  Ln Total Or Contract Amount

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
13	6 Ft. Wide Grouted RipRap "VEE" Channel	505.00000	LF	\$90.00	\$45,450.00
Comm Code	Manufacturer	Specification		Model #	
77111603		·			
Extended Des	scription : 6 Ft. Wide Grouted RipRa	p "VEE" Channel			
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
14	6 Ft. Wide Grass Lined "VEE" Channel	153.00000	LF	\$15.00	\$2,295.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
15	18" HDPE Pipe	70.00000	LF	\$90.00	\$6,300.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Extended Des	scription: 18" HDPE Pipe				
Line	Comm Ln Desc	Qty 1,00000	Unit Issue	Unit Price \$10,000,00	Ln Total Or Contract Amount
Line 16	Comm Ln Desc  Grouted RipRap "VEE" Channel Road Crossing	<b>Qty</b> 1.00000	Unit Issue EA	<b>Unit Price</b> \$10,000.00	Ln Total Or Contract Amount \$10,000.00
16 Comm Code	Grouted RipRap "VEE" Channel				
	Grouted RipRap "VEE" Channel Road Crossing	1.00000		\$10,000.00	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
17	3' x 3' Underdrain	125.00000	LF	\$90.00	\$11,250.00
Comm Code	Manufacturer	Specification		Model #	
77111603					
Extended Des	scription: 3' x 3' Underdrain				
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
18	Underdrain Conveyance Pipe	5.00000	LF	\$40.00	\$200.00
Comm Code	Manufacturer	Specification		Model #	
77111603		·			
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
<b>Line</b> 19	Comm Ln Desc  Type "G" Inlet	<b>Qty</b> 5.00000	Unit Issue VF	<b>Unit Price</b> \$800.00	Ln Total Or Contract Amount \$4,000.00
19 Comm Code	Type "G" Inlet  Manufacturer	5.00000		\$800.00	
19 Comm Code 77111603	Type "G" Inlet  Manufacturer	5.00000		\$800.00	
Comm Code 77111603 Extended Des	Manufacturer  Scription: Type "G" Inlet	5.00000  Specification	VF	\$800.00 Model #	\$4,000.00
Comm Code 77111603 Extended Des	Type "G" Inlet  Manufacturer  scription : Type "G" Inlet  Comm Ln Desc	5.00000  Specification	VF	\$800.00  Model #  Unit Price	\$4,000.00  Ln Total Or Contract Amount
Comm Code 77111603 Extended Des	Manufacturer  Scription: Type "G" Inlet  Comm Ln Desc  Piezometer Abandonment	Specification  Qty 1.00000	VF	\$800.00  Model #  Unit Price \$2,700.00	\$4,000.00  Ln Total Or Contract Amount

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
21	4 Ft. Wide Grass Lined Swell	130.00000	LF	\$8.00	\$1,040.00
Comm Code	Manufacturer	Specification		Model #	
77111603					

Extended Description :	4 Ft. Wide Grass Lined Swell

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
22	Unclassified Excavation	10400.00000	CY	\$5.00	\$52,000.00

Comm Code	Manufacturer	Specification	Model #	
77111603				

Extended Description : Unclassified Excavation

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

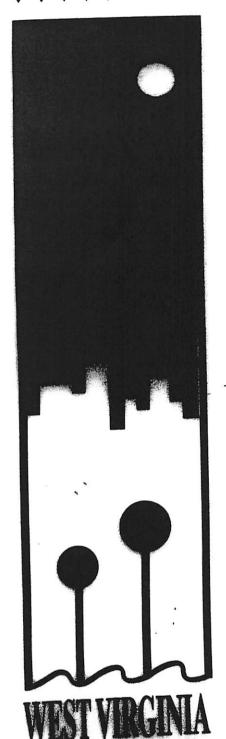
1. CONTRACTOR'S LICENSE: West Virginia Code § 21-11-2 requires that all persons desiring to perform contracting work in this state be licensed. The West Virginia Contractors Licensing Board is empowered to issue the contractor's license. Applications for a contractor's license may be made by contacting 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: GREEN MOUNTAIN COMPANY

Contractor's License No. WV 002057

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



15 -

# **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV002057

Classification:

GENERAL ENGINEERING SPECIALTY

> GREEN MOUNTAIN COMPANY DBA GREEN MOUNTAIN COMPANY 511 50TH STREET CHARLESTON, WV 25304

**Date Issued** 

**Expiration Date** 

AUGUST 21, 2014

AUGUST 20, 2015

Authorized Company Signature

Chair, West Virginia Contractor Licensing Board

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where work performed. This license number must appear in all advertisements, on all bid submissions and on all fully e and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions Virginia Code, Chapter 21, Article 11.

Contractor's Business Name:	Green Mountain Company
-----------------------------	------------------------

If the current Entity OFT information for your business is incomplete or incorrect in AVS, or a 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.

Name Address	Tele	tion/Title  phone #  f Ownership
Begin Date:	End	ing Date:
Name Address	Tele % 0	ition/Title  ephone #  f Ownership
Begin Date:	End	ling Date:
Name Address Begin Date:	T'ele	ition/Title ephone # of Ownership ding Date:
Name Address	Tel	sition/Title dephone # of Ownership ding 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 Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, Constitution Ave., NW, Washington, D.C. 20240.

•

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

	me: <u>Green Mountain Company</u> Tax Payer ID No.: <u>55-0580174</u> 1 50 <sup>th</sup> Street	
City:C	State: <u>WV Zip Code:25304</u> Phone: (304)925-0253 (304)925-9230 E-mail address:gmtk16@aol.com	
Part B: L	al Structure	
	tion ( ) Sole Proprietorship ( ) Partnership ( ) LLC ease specify)	
	tifying and updating information in the Applicant/Violator System (AVS). Select of obliving options, follow the instructions for that option, and sign below.	nly
I, <u>Rodney</u> (print nar	y. Clay , have the express authority to certify that:	
(	formation on the <b>attached</b> Entity Organizational Family Tree (OFT) from AVS is accuranglete, and up-to-date. If you select this option, you <b>must</b> attach an Entity OFT from A this form. Sign and date below and do <u>not</u> complete Part D.	
	rt of the information on the <b>attached</b> Entity OFT from AVS is missing or incorrect and e updated. If you select this option, you <b>must</b> attach an Entity OFT from AVS to this for se Part D to provide the missing or corrected information. Sign and date below and compart D.	rm.
	r business currently is not listed in AVS. If you select this option, you must provide all formation required in Part D. Sign and date below and complete Part D.	
07/22/15	President	
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 800-643-9748 or from the AVS website at https://avss.osmre.gov.



#### **Parent Entity**

(139758) Green Mountain Company (139758) Green Mountain Company

### AVS OFT Report - 5/23/2013 9:33:04 AM

### All OFT's where the selected entity is listed as an entity or related entity Entity Selected (139758) Green Mountain Company

Description ExtDesc	Related Entity	% Ownership	Begin Date	End Date
Vice President	(139754) David H Bowman	Ownership	3/1/1993	
Chairman of the Board	(139752) Rodney W Clay		12/1/1988	
Director	(139752) Rodney W Clay		12/1/1988	
President	(139752) Rodney W Clay		12/1/1985	
Shareholder	(139752) Rodney W Clay	100%	12/1/1985	
Treasurer	(139752) Rodney W Clay		12/1/1988	
Secretary	(139753) Tammy J Clay		4/1/1987	

Almalle

PRESIDENT

### 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.

SPETA MOUNTAIN COMPANY

(Company)

PRESIDENT

(Authorized Signature) (Representative Name, Title)

304925-0253 (9230) 07/22/15 (Phone Number) (Fax Number) (Date)



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

	e of west virginia, <sub>NTY of</sub> Kanawha, <sub>To-wit:</sub>				
I, <u>R</u>	I, Rodney W. Clay, after being first duly sworn, depose and state as follows:				
1.	I am an employee of Green Mountain Company ; and, (Company Name)				
2.	I do hereby attest that Green Mountain Company (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 a	By:  By:  President				
	Company Name: Green Mountain Company				
	Date: 07/22/15				
Taken, subscribed and sworn to before me this $\frac{22}{\text{day of}} \frac{\text{July}}{\text{day of}}$ , $\frac{2015}{\text{day of}}$ . By Commission expires $\frac{\text{April 06, 2019}}{\text{day of}}$					
(Seal)	OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA DAVID H. BOWMAN 722 GORDON DR. CHARLESTON, WV 25303 My commission expires April 6, 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.

RFQ No.	DEP1500000092
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### 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.

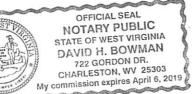
"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership 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 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.

### WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Green Mountain Compamy	1		
Authorized Signature: 4	Rutt	Date:07/22/15	
State of WW			
County of Kanawha , to-wit:			
Taken, subscribed, and sworn to before me this $\frac{22}{}$	day of July	, 20 <mark>15</mark> .	
My Commission expires April 06,	, 20 <u>19</u> .		0
AFFIX SEAL HERE	NOTARY PUBLIC	David H.	Burns

ALTIX SEAL HERE



Purchasing Affidavit (Revised 07/01/2012)

## State of West Virginia Purchasing Division

### CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

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.

<u>Instructions:</u> 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 Identifi	cation:		
Contract Number:			
Contract Purpose	:		
Agency Requesti	ng Work:		
should check eac  Informatio 21-1D-5 w  Name of the successor  Average in Drug test	content: The attached report must include h box as an indication that the required information indicating the education and training services provided; the laboratory certified by the United States that performs the drug tests; number of employees in connection with the results for the following categories including ests: (A) Pre-employment and new hires; form.	ormation has been included vice to the requirements of Department of Health and e construction on the public the number of positive te	d in the attached report.  West Virginia Code §  Human Services or its  improvement;  sts and the number of
Vandor Cantast	luformotion:		
Vendor Contact			204 005 0052
Vendor Name:	Green Mountain Company	Vendor Telephone:	304-925-0253
Vendor Address:	511 50th Street	Vendor Fax: 304	304-925-0253 -925-9230
	Charleston WV 25304		

Agency <u>DEP</u>
REQ P.O# <u>DEP1500000092</u>
(DEP17202)

### **BID BOND**

KNOW ALL MEN BY TH	ESE PRESENTS, That we, the undersign	ned, <u>Green Mountain Company</u>
	Charleston WV 25304	, as Principal, and Ohio Farmers Insurance Company
of One Park Circle W	estfield Center OH a corpora	ation organized and existing under the laws of the State of
Ohio with its principa	office in the City of Westfield Center	, as Surety, are held and firmly bound unto the State
of West Virginia, as Obligee, in the	penal sum of Five Percent	(\$ 5% ) for the payment of which,
well and truly to be made, we joint	ly and severally bind ourselves, our heir	s, administrators, executors, successors and assigns.
Department of Administration a ce		rincipal has submitted to the Purchasing Section of the and made a part hereof, to enter into a contract in writing for County WV,
according to plans and specification	ins.	
NOW THEREFORE,		
agreement created by the accepta	cepted and the Principal shall enter into bonds and insurance required by the bid nce of said bid, then this obligation shall derstood and agreed that the liability of t	a contract in accordance with the bid or proposal attached or proposal, and shall in all other respects perform the be null and void, otherwise this obligation shall remain in full the Surety for any and all claims hereunder shall, in no event,
The Surety, for the value way impaired or affected by any exwaive notice of any such extension	tension of the time within which the Obli	that the obligations of said Surety and its bond shall be in no igee may accept such bid, and said Surety does hereby
IN WITNESS WHEREOF	Principal and Surety have hereunto set	their hands and seals, and such of them as are corporations
		ts to be signed by their proper officers, this
30th day of June		
Principal Corporate Seal	*	Green Mountain Company (Name of Principal)  By Rodney W. Clay (Must be President or
		Vice President)
		President
		(Title)
Surety Corporate Seal		\$0000000
ou. dry our portate dear		Ohio Farmers Insurance Company (Name of Surety)
		***
		Sheila W. M. Corniel
		Sheila D. McCormicRttorney-in-Fact

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

THIS POWER OF ATTORNEY SUPERCEDES ANY PREVIOUS POWER BEARING THIS SAME POWER # AND ISSUED PRIOR TO 01/02/15, FOR ANY PERSON OR PERSONS NAMED BELOW.

General Power of Attorney

CERTIFIED COPY

POWER NO. 4751892 01

### Westfield Insurance Co. Westfield National Insurance Co. Ohio Farmers Insurance Co.

Westfield Center, Ohio

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medina County, Ohio, do by these

presents make, constitute and appoint ROSS E. JOHNSON, H. RANDOLPH NEVILLE, PATRICK B. KEE, SHEILA D. MCCORMICK, TAYLOR R. JOHNSON, JOINTLY OR SEVERALLY

and State of WV its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, of CHARLESTON place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings, or other instruments or contracts of

LIMITATION: THIS POWER OF ATTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.

GUARANTEE, OR BANK DEPOSITORY BONDS.
and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY:

"Be It Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact. may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary."

"Be it Further Resolved, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile

power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting

held on February 8, 2000).

In Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their National Surety Leader and Senior Executive and their corporate seals to be hereto affixed this 02nd day of JANUARY A.D., 2015 .

Seals Affixed State of Ohio

County of Medina

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

Dennis P. Baus, National Surety Leader and Senior Executive

On this 02nd day of JANUARY A.D., 2015, before me personally came Dennis P. Baus to me known, who, being by me duly sworn, did depose and say, that he resides in Wooster, Ohio; that he is National Surety Leader and Senior Executive of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Notarial Seal Affixed

State of Ohio County of Medina

David A. Kotnik, Attorney at Law, Notary Public My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

I, Frank A. Carrino, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this 30th day of 2015

SS.:





Frank A. Carrino, Secretary

## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

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

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

### Addendum Numbers Received:

(Check the box next to each addendum received)

[	V	Addendum No. 1	[	]	Addendum No. 6
[	]	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 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.

Company

PRESIDENT

Authorized Signature

07/22/15

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

Revised 6/8/2012