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|--|--|
| Velcome, Lu Anne Cottrill                                    | Procurement Budgeting Accounts Receivable Accounts Payable                             |
| Solicitation Response(SR) Dept: 0804 ID: ESR0218160000003611 | Ver.: 1 Function: New Phase: Final Modified by batch , 02/18/2016                      |
| Header   |  |
|  | E List View  |
| General Information Contact Default Values Discount          | Document Information   |
| Procurement Folder: 150434                                   | SO Doc Code: CRFQ  |
| Procurement Type: Central Contract - Fixed Amt               | SO Dept: 0804  |
| Vendor ID: 000000214815                                      | SO Doc ID: RMA160000002  |
| Legal Name: CHESAPEAKE THERMITE WELDING                      | BLLC Published Date: 1/27/16   |
| Alias/DBA:   | Close Date: 2/18/16  |
| Total Bid: \$706,800.00                                      | Close Time: 13:30  |
| Response Date: 02/18/2016                                    | Status: Closed   |
| Response Time: 10:04   | Solicitation Description: Addendum No. 3 Construction Contract for South Branch Valley |
|  | Total of Header Attachments: 0   |
|  | Total of All Attachments: 0  |



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

## State of West Virginia Solicitation Response

| s           | roc Folder : 150434<br>colicitation Description : A<br>roc Type : Central Contra |          | n No. 3 Construction Contract for South Branch Va<br>d Amt | ley     |  |
|-------------|--|----------|--|---------|--|
| Date issued | Solicitation Closes  | Solicita | tion No  | Version |  |
|             | 2016-02-18<br>13:30:00   | SR       | 0804 ESR0218160000003611                                   | 1       |  |

# VENDOR

00000214815

CHESAPEAKE THERMITE WELDING LLC

## FOR INFORMATION CONTACT THE BUYER Melissa Pettrey

(304) 558-0094 melissa.k.pettrey@wv.gov

Signature X

FEIN #

DATE

| Line         | Comm Ln      | Desc              | Qty                   | Unit Issue   | Unit Price         | Ln Total Or Contract Amount |
|--------------|--------------|-------------------|-----------------------|--------------|--------------------|-----------------------------|
| 1            | Install Ties | s on SBVR         | 5000.00000            | EA           | \$117.500000       | \$587,500.00                |
| Comm Code    | Ма           | nufacturer        | Specification         |              | Model #            |                             |
| 30103612     |              |                   |                       |              |                    |                             |
| Extended Des | scription :  | Replace 5000 ties | on the SBVR between M | P 12-22. Thi | s includes tamping | g the installed ties.       |
|              |              |                   |                       |              |                    |                             |

| Line | Comm Ln Desc              | Qty        | Unit Issue | Unit Price | Ln Total Or Contract Amount |
|------|---------------------------|------------|------------|------------|-----------------------------|
| 2    | Gaging of Additional Ties | 1000.00000 | EA         | \$5.000000 | \$5,000.00                  |

| Comm Code          | Manufacturer           | Specification                          | Model #          |  |
|--------------------|------------------------|--|------------------|--|
| 72141603           |                        |  |                  |  |
|                    |                        |  |                  |  |
| Extended Descripti | on: Gaging of addition | nal ties - Estimate 20% of ties will r | need to be gaged |  |
|                    |                        |  |                  |  |
|                    |                        |  |                  |  |
|                    |                        |  |                  |  |

| Line | Comm Ln Desc        | Qty      | Unit Issue | Unit Price     | Ln Total Or Contract Amount |
|------|---------------------|----------|------------|----------------|-----------------------------|
| 3    | Continual Surfacing | 13.00000 | EA         | \$7,200.000000 | \$93,600.00                 |

| Comm Code            | Manufacturer          | Specification                       | Model #                     |  |
|----------------------|-----------------------|-------------------------------------|-----------------------------|--|
| 72141603             |                       |                                     |                             |  |
| Extended Description | n : Continual surfaci | ng of 13 miles of track on SBVR fro | om MP 39-52. Price per mile |  |

| Line         | Comm Ln Desc                    | Qty                    | Unit Issue      | Unit Price           | Ln Total Or Contract Amount |
|--------------|---------------------------------|------------------------|-----------------|----------------------|-----------------------------|
| 4            | Spot Surfacing on SBVR          | 3.00000                | EA              | \$6,900.000000       | \$20,700.00                 |
| Comm Code    | Manufacturer                    | Specification          |                 | Model #              |                             |
| 72141603     |                                 |                        |                 |                      |                             |
| Extended Des | scription : Spot tamping on SBV | R at Various locations | s. Total of 3 n | niles. Per mile unit | price.                      |

065

Agency\_\_\_State Rail Authority REQ.P.O#\_CRFQ 0804 RMA

160000002

#### **BID BOND**

|          | KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned,                | Chesapeake Thermite Welding, LLC  |
|----------|--|---|
|          | 1065 Possum Point Road, Port Haywood, VA 23138                           | United States Surety Company<br>, as Principal, and                           |
|          |  | organized and existing under the laws of the State of                         |
| Maryland |  | as Surety, are held and firmly bound unto the State<br>5% of total amount bid |
| of West  | Virginia, as Obligee, 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, ad | ministrators, 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 Contract for SVBRR; RMA 160000002

#### 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 insurance 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 Obligee 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 <u>18th</u> day of <u>February</u>, <u>20</u><sup>16</sup>.

Chesapeake Thermite Welding, LLC

(Name of Principal) R Must be President, Vice President, or **Duly Authorized Agent)** Tresident

United States Surety Company

Surety Seal

Principal Seal

(Name of Surety)

Attorney-in-Fact Gregory M. Allen

(Title)

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.

Bond No.: USSC600

(Acknowledgement of Surety Company)

Delaware

New Castle

STATE OF

SS:

COUNTY OF

On this 18<sup>th</sup> day of February , 20 16 , before me personally came Gregory M. Allen to me known, who being by me duly sworn, did depose and say that he resides in West Chester, PA he is the that Attorney-in-fact of United States Surety Company the corporation described in and which executed the within instrument; that he knows the seal of said corporation; that seal affixed to said instrument is such corporate seal; that is so affixed by the order of the Board of Directors of said corporation, and that he signed his / X her name thereto by like order; and that the liabilities of said company do not exceed its assets as ascertained in the manner provided by the laws of the West Virginia, and the said further said Sandra Lee Gilchrist

(Notary) that she is acquainted with Gregory M. Allen and knows him / X her to be the Attorney-In-Fact of said company; that the signature of the said Gregory M. Allen subscribed to the within instrument is in the genuine handwriting of the said Gregory M. Allen and was subscribed thereto by Gregory M. Allen and was subscribed thereto by like order of the Board of Directors, and in the presence of him / X her, the said.

Mahr

Sandra Lee Gilchrist Notary Public of New Castle County, My Commission Expires January 22, 2017

SANDRA LEE GILCHRIST NOTARY PUBLIC STATE OF DELAWARE My Commission Expires Jan. 22. 2017

#### UNITED STATES SURETY COMPANY STATUTORY STATEMENT OF ADMITTED ASSETS, LIABILITIES, CAPITAL AND SURPLUS (1) December 31, 2014

#### Admitted Assets

#### Lisbilities and Capital and Surplus

| Total admitted assets   | 57,839,268              | Total liabilities and capital and surplus      | 57,839,268          |
|---|-------------------------|--|---------------------|
|   | 7,212,252               |  | 37.018.134          |
| Cash held for others  | 51,636                  | Anapailine antina                              | 13,018,420          |
| State income tax receivable   | 16,787                  | Unassigned surplus                             | 13,019,428          |
| Receivables from parent, subsidiaries and affiliates                  | 3.080.088               | Additional paid-in and contributed capital     | 21,898,706          |
| Electronic data processing equipment and software                     | 2.932                   | Capital Stock                                  | 2,100.000           |
| Net deferred tox asset  | 969.272                 | Capital and Surplus:                           |                     |
| Reinsurance recoverable on paid losses                                | (16,183)                | a Orisn matchinkarz                            | 20,021,134          |
| Premium receivable  | 2,528,982               | Tobel inhibities                               | 20,821,134          |
| Investment income due and accrued                                     | 578.738                 | Payable to parent, subaldiaries and affiliates | 735,881             |
|   |                         | Amounts withheld or retained for others        | 1,443,756           |
|   |                         | Ceded reinsurance balance payable              | (10,601)            |
|   |                         | Advance premium                                | 6,711               |
|   |                         | Unearned premiums                              | 9,618,672           |
|   |                         | Federal taxes                                  | 1,518,179           |
| Todal Cash and Invested assets;                                       | 50,627,016              | Taxes, licenses, and fees                      | 1,058,080<br>91,058 |
| Total cash and invested assets:                                       | 1,068,751<br>50,627,016 | Commission payable<br>Accrued expenses         | 143,918             |
| Fixed Maturkies, at amortized cost<br>Cash and short term investments | 49,558,265              | Unpaid loss and loss adjustment expense        | 6,215,480           |
| Investments:  | 10 550 005              | Liabilities:                                   | 0.047.400           |
|   |                         |  |                     |

(1) - In accordance with the statutory financial statements as filed on March 1, 2015.

I, Peter W. Carman, Chief Financial Officer of United States Surely Company, hereby certify that to the best of my knowledge and belief, the foregoing is a kull and true Statutory Statement of Admitted Assets, Liabilities and Capital and Surplus of the Company as of December 31, 2014, prepared in conformity with accounting practices prescribed or permitted by the Maryland Insurance Administration. The foregoing statement should not be taken as a complete statement of financial condition of the Company. Such a statement is available upon written request at the Company's home office located at 20 West Aylesbury Road, Timonium, Maryland 21093.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seat of the Corporation at Timonium, Maryland.

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. ,

Peter W. Carman Chief Financial Officer

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|--|--|---|--|
|  | <ul> <li>A state of the sta</li></ul>   | ная прозначая рабо рабо стра<br>продакция продакция на про<br>продакция продакция про<br>простояния про адрестьорана<br>святе срад продакция<br>продакция продакция<br>страная рабрая   | $\sum_{\substack{i=1,\dots,n\\ i \in [n]}}^{n} \sum_{\substack{i=1,\dots,n\\ i \in [n]}}^{n} $ |
|  | POWER OF A   | TTORNEY   |  |
|  | MERICAN CONTRACTORS INDEMNITY CO   |   |  |
|  | UNITED STATES SURETY COMPANY U.  | S. SPECIALTY INSURANCE COMPANY  |  |
| KNOW ALL MEN BY TH   | HESE PRESENTS: That American Con   | ntractors Indemnity Company a Califo  | mia cornoration Texas  |
| Bonding Company, an assu corporation and U.S. Specia   | med name of American Contractors Inc.<br>Ity Insurance Company, a Texas corpora  | demnity Company, United States Surety   | Company, a Maryland  |
| constitute and appoint:  | Bruce M. Allen, Karen L. Allen, Kenn   | neth C. Turner, Gregory M. Allen  | 8  |
|  |  |   |  |
| its true and lawful Attorney(  | (s)-in-fact, each in their separate capacity   | if more than one is named above with  | full nower and authority   |
|  | e, place and stead, to execute, acknowled  |   |  |
|  | ontracts of suretyship to include rider  | rs, amendments, and consents of sure  | ty, providing the bond   |
| penalty does not exceed  | ******Unlimited*   |   |  |
|  | all expire without further action on Decision of Direct solutions adopted by the Boards of Direct  |   | y is granted under and by  |
|  | any Vice-President, any Assistant Vice-President,  |   | and in herebury stated with Bill   |
| power and authority to appoint any provisions:   | one or more suitable persons as Attorney(s)-in-Fac   | ct to represent and act for and on behalf of the Con  | npany subject to the following   |
| Attorney-in-Fact may be given ful  | I power and authority for and in the name of and or  | h behalf of the Company, to execute, acknowledge  | and deliver, any and all bonds,  |
| percentages and/or final estimates of  | nts or indemnity and other conditional or obliga<br>on engineering and construction contracts, and any   | and all notices and documents canceling or termi  | nating the Company's liability   |
| thereunder, and any such instrument  | ts so executed by any such Attorney-in-Fact shall b  | e binding upon the Company as if signed by the Pr   | esident and sealed and effected  |
| by the Corporate Secretary.  | of any authorized officer and seal of the Company I  | heretofore or bereatter affined to day power of att   | mey or any certificate relating  |
| thereto by facsimile, and any power  | r of attorney or certificate bearing facsimile signatu   | are or facsimile seal shall be valid and binding upo  | n the Company with respect to  |
| any bond or undertaking to which it  | is attached.   | en μ. μ   | 월달한 · 관광구 · 프로   |
| IN WITNESS WHEREOF, 1  | The Companies have caused this instrume  | ent to be signed and their corporate seals  | to be hereto affixed, this   |
| 1st day of December, 2014.   |  |   |  |
|  | MERICAN CONTRACTORS INDEMNITY CO   |   | · · · · · · · · · · · · · · · · · · ·  |
| Corporate Seals  | UNITED STATES SURETY COMPANY U.S   | S. SPECIALTY INSURANCE COMPANY  |  |
| A RACTOR   | ES SURE  |   |  |
|  |  | By: PR  |  |
| Di GEPT. 24, 1990  |  | Daniel P. Aguilar, Vice Pre   | sident   |
| ALFORNIA I   | Manufantanti and the office of the second se   |   |  |
| A notary public or other officer   | completing this certificate verifies only the ic   | lentity of the individual who signed the  |  |
| - Egympening States and an and and  | ate is attached, and not the truthfulness, accura  | acy, or validity of that document.  | All and a second   |
| State of California<br>County of Los Angeles SS:   | (886.5.4) Di   |   |  |
|  |  | 8   | 2  |
|  | 14, before me, Maria G. Rodriguez-Wong, a not<br>, Texas Bonding Company, United States Sure   |   |  |
| the basis of satisfactory evidence   | e to be the person whose name is subscribed to t   | the within instrument and acknowledged to me  | that he executed the same in   |
| - his authorized canacity and that h   | ov his signature on the instrument the person or   |   | avanitad the instrument  |
|  | by ms signature of the main priorit che person, or   | the entity upon behal for which the person acted  | , executed the manufacture.  |
| I certify under PENALTY OF PE  | ERJURY under the laws of the State of Californi  |   | 电辐射运行 化化学管理 医白色的   |
|  | ERJURY under the laws of the State of Californi  | a that the foregoing paragraph is true and correct  | 电辐射运行 化化学管理 医白色的   |
| I certify under PENALTY OF PE  | ERJURY under the laws of the State of Californi  | MARIA G. RODRIGUEZ-WONG   | 电辐射运行 化化学管理 医白色的   |
| I certify under PENALTY OF PE  | ERJURY under the laws of the State of Californi  | MARIA G. RODRIGUEZ-WONG<br>Commission # 2049771<br>Notary Public California   | 电辐射运行 化化学管理 医白色的   |
| I certify under PENALTY OF PE<br>WITNESS my hand and official s  | ERJURY under the laws of the State of Californi<br>seal.   | ia that the foregoing paragraph is true and correct<br>MARIA G. RODRIGUEZ-WONG<br>Commission # 2049771  | 电辐射运行 化化学管理 医白色的   |
| I certify under PENALTY OF PE<br>WITNESS my hand and official s  | ERJURY under the laws of the State of Californi<br>seal.   | MARIA G. RODRIGUEZ-WONG<br>Commission # 2049771<br>Notary Public / Chiffornia<br>Los Angeles County   | · · · · · · · · · · · · · · · · · · ·  |
| I certify under PENALTY OF PE<br>WITNESS my hand and official s<br>Signature<br>I, Michael Chalekson , Assistan  | ERJURY under the laws of the State of Californi<br>seal.   | MARIA G. RODRIGUEZ-WONG<br>Commission # 2049771<br>Notary Public Chifornia<br>Los Angeles County<br>My Commission Expires Dai 20, 2017  | t.<br>understand being and the second being and the s   |
| I certify under PENALTY OF PE<br>WITNESS my hand and official s<br>Signature.  | ERJURY under the laws of the State of Californi<br>seal.<br>(Seal)<br>Int Secretary of American Contractors Indemnito<br>ompany, do hereby certify that the above and  | MARIA G. RODRIGUEZ-WONG<br>Commission # 2049771<br>Notary Public Celtronia<br>Los Angeles County<br>My Commany, Texas Bonding Company, Unite<br>foregoing is a true and correct copy of a Pow   | t.<br>difference of the second s   |
| I certify under PENALTY OF PE<br>WITNESS my hand and official s<br>Signature.  | ERJURY under the laws of the State of Californi<br>seal.   | MARIA G. RODRIGUEZ-WONG<br>Commission # 2049771<br>Notary Public Celtronia<br>Los Angeles County<br>My Commany, Texas Bonding Company, Unite<br>foregoing is a true and correct copy of a Pow   | t.<br>difference of the second s   |
| I certify under PENALTY OF PE<br>WITNESS my hand and official s<br>Signature<br>I, Michael Chalekson , Assistan<br>and U.S. Specialty Insurance Cc<br>said Companies, which is still in<br>full force and effect   | ERJURY under the laws of the State of Californi<br>seal.<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Seal)<br>(Sea | ARRIA G. RODRIGUEZ-WONG<br>Commission # 2049771<br>Notary Public Chifornia<br>Los Angeles County<br>My Comm. Expres Dei 20, 2017<br>ty Company, Texas Bonding Company, Unite<br>foregoing is a true and correct copy of a Pow<br>tions of the Boards of Directors, set out in the   | t.<br>and States Surety Company<br>er of Attorney, executed by<br>Power of Attorney are in   |
| I certify under PENALTY OF PE<br>WITNESS my hand and official s<br>Signature<br>I, Michael Chalekson , Assistan<br>and U.S. Specialty Insurance Cc<br>said Companies, which is still in<br>full force and effect.<br>In Witness Whereof, I have h  | ERJURY under the laws of the State of Californi<br>seal.<br>(Seal)<br>(Seal)<br>and Secretary of American Contractors Indemnito<br>ompany, do hereby certify that the above and<br>in full force and effect; furthermore, the resolu-<br>hereunto set my hand and affixed the seal   | ARRIA G. RODRIGUEZ-WONG<br>Commission # 2049771<br>Notary Public Chifornia<br>Los Angeles County<br>My Comm. Expres Dei 20, 2017<br>ty Company, Texas Bonding Company, Unite<br>foregoing is a true and correct copy of a Pow<br>tions of the Boards of Directors, set out in the   | t.<br>allowing the second   |
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### 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)

| Addendum No. 1   | Addendum No. 6  |
|------------------|-----------------|
| Addendum No. 2   | Addendum No. 7  |
| X 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.

Chesapeake Thermite Welding, LLC dba CTW

Company Authorized Signature

2-17-16 Date

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

### CERTIFICATIONAND SIGNATURE PAGE

By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated 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.

Chesapeake Thermite Welding, LLC dba CTW

(Company) Donna Anderson President (Authorized Signature) (Representative Name, Title)

804-725-1111 804-725-1065 2-17-16 (Phone Number) (Fax Number) (Date)

Revised 10/27/2015



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

| STATE OF WEEK VIRGINIA,  |
|--|
| COUNTY OF Mathews, TO-WIT:   |
| I, Donna Anderson, after being first duly sworn, depose and state as follows:  |
| 1. I am an employee of <u>Chesapeake Thermite Welding, LLC dba CTW</u> ; and,<br>(Company Name)  |
| 2. I do hereby attest that Chesapeake Thermite Welding, LLC dba CTW (Company Name)   |
| maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with <b>West Virginia Code</b> §21-1D. |
| The above statements are sworn to under the penalty of perjury.  |

| Pr                                | inted Name: Donna Anderson   |
|-----------------------------------|--|
|                                   |  |
| Si                                | ghature: 2 Junio mander of on  |
| Tit                               | tle: President   |
| Co                                | ompany Name: Chesapeake Thermite Welding, LLC dba CTW                  |
| Da                                | ate: 2-17-2016   |
|                                   | YNN MIX'   |
| Taken, subscribed and sworn to be | fore me this <u>17th</u> day of <u>February</u> , <u>2016</u> , NOTARY |
| By Commission expires             | ∩31.2014<br>★ REG. #7521667<br>★ MY COMMISSION                         |
| (Seal)                            | Packet Kym Auto Outo Outo AUTU OF WEATTH                               |
|                                   | (Notary Public)  |
| THIS AFFIDAVIT MUST BE SUB        | MITTED WITH THE BID IN ORDER TO COMPLY                                 |
| WITH WV CODE PROVISIONS.          | FAILURE TO INCLUDE THE AFFIDAVIT WITH THE                              |
| <b>BID SHALL RESULT IN DISQUA</b> | LIFICATION OF THE BID.   |

Rev. August 1, 2015

# 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 FOLLOW     | WING SIGNATURE:                      |                          |   |
|------------------------|--------------------------------------|--------------------------|---|
| Vendor's Name: Ches    | apeake Thermite Welding,             | LLC dba CTW              |   |
| Authorized Signature:  | and man and                          | Date                     | 2-17-16                                   |
| State of Virginia      |                                      |                          |   |
| County of Mathews      | , to-wit:                            |                          |   |
| Taken, subscribed, and | sworn to before me this <u>17</u> da | <sub>y of</sub> February | , 20 <u>16</u>                            |
| My Commission expires  | March 31                             | , 201 4.                 |   |
| AFFIX SEAL HERE        | NOTARY PUBLIC                        | NOTARY PUBLIC TOC        | Purchasing Affidavit (Revised 08/01/2015) |
|                        | A REG. #7521667                      |                          | ,, ,, ,, ,, ,, ,                          |
|                        | 1/1/1/11/11/11                       |                          |   |

### CERTIFICATIONAND SIGNATURE PAGE

By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated 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.

Chesapeake Thermite Welding, LLC dba CTW

(Company) Donna Anderson President (Authorized Signature) (Representative Name, Title)

804-725-1111 804-725-1065 2-17-16 (Phone Number) (Fax Number) (Date)

Revised 10/27/2015



# *I, Natalie E. Tennant, Secretary of State of the State of West Virginia, hereby certify that*

CHESAPEAKE THERMITE WELDING, LLC

was duly authorized under the laws of this state to transact business in West Virginia as a foreign limited liability company on February 22, 2013.

The company is filed as an at-will company, for an indefinite period.

I further certify that the LLC (PLLC) has not been revoked by the State of West Virginia nor has a Certificate of Cancellation been issued.

Therefore, I hereby issue this

# **CERTIFICATE OF AUTHORIZATION**

Validation ID:4WV82\_FP3FH

Given under my hand and the Great Seal of the State of West Virginia on this day of February 16, 2016

Secretary of State

TOT WEST UI HORAL STUME TOTOME TOTO

Notice: A certificate issued electronically from the West Virginia Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Validation Page of the Secretary of State's Web site, https://apps.wv.gov/sos/businessentitysearch/validate.aspx entering the validation ID displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate.



# **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

| C<br>B      | THIS CERTIFICATE IS ISSUED AS A M<br>CERTIFICATE DOES NOT AFFIRMATIV<br>BELOW. THIS CERTIFICATE OF INSU<br>REPRESENTATIVE OR PRODUCER, AM | /ELY OF<br>JRANCE               | NEGATIVELY AMEND,<br>DOES NOT CONSTITUT                                 | EXTEND OR ALTI   | ER THE CO                                | UPON THE CERTIFICAT<br>VERAGE AFFORDED B                         | Y THE         | LDER. THIS<br>E POLICIES |
|-------------|---|---------------------------------|---|--|--|--|---------------|--------------------------|
| tl          | MPORTANT: If the certificate holder i<br>he terms and conditions of the policy,<br>certificate holder in lieu of such endors              | certain p                       | olicies may require an er   |  |  |  |               |                          |
|             | ODUCER  | ement(3)                        |   | CONTACT<br>NAME: Melissa                                 | Milyo Smith                              | 1  |               |                          |
|             | mmercial Insurance Associates   |                                 |   | PHONE<br>(A/C, No, Ext): 615-51                          |  | = 4 1/   | 615-5         | 15-6050                  |
|             | 3 Powell Court, Suite 100<br>entwood TN 37027   |                                 |   | É-MAIL<br>ADDRESS: msmith@                               | com-ins.co                               | m  |               |                          |
| _           |   |                                 |   |  |  | DING COVERAGE  |               | NAIC #                   |
|             |   |                                 |   | INSURER A : Progres                                      | sive Northe                              | n Ins Co   |               | 38628                    |
|             |   | HESA-2                          |   | INSURER в : Westche                                      |  |  |               | 10172                    |
|             | esapeake Thermite Welding LLC<br>D. Box 129   |                                 |   | INSURER C: RSUI Indemnity Company                        |  |  |               | 22314                    |
|             | rt Haywood VA 23138   |                                 |   | INSURER D : America                                      |  |  |               | 31895                    |
|             | -   |                                 |   | INSURER E : Hanove                                       | r Insurance                              | Company  |               | 22292                    |
|             |   |                                 |   | INSURER F :  |  |  |               |                          |
|             | OVERAGES CERTIFY THAT THE POLICIES  |                                 | NUMBER: 789332224   | VE BEEN ISSUED TO  |  | REVISION NUMBER:<br>D NAMED ABOVE FOR TH                         | HE POL        | ICY PERIOD               |
| II<br>C     | NDICATED. NOTWITHSTANDING ANY RE<br>CERTIFICATE MAY BE ISSUED OR MAY F<br>EXCLUSIONS AND CONDITIONS OF SUCH F                             | QUIREME<br>ERTAIN,<br>POLICIES. | NT, TERM OR CONDITION<br>THE INSURANCE AFFORDI<br>LIMITS SHOWN MAY HAVE | OF ANY CONTRACT<br>ED BY THE POLICIES<br>BEEN REDUCED BY | OR OTHER I<br>S DESCRIBEI<br>PAID CLAIMS | DOCUMENT WITH RESPEC   | ст то         | WHICH THIS               |
| INSR<br>LTR |   | ADDL SUBR                       | POLICY NUMBER   | POLICY EFF<br>(MM/DD/YYYY)                               | POLICY EXP<br>(MM/DD/YYYY)               | LIMIT  | s             |                          |
| В           | X COMMERCIAL GENERAL LIABILITY  |                                 | G2744491A002  | 4/22/2015  | 4/22/2016                                | EACH OCCURRENCE<br>DAMAGE TO RENTED                              | \$1,000       | ,000                     |
|             | CLAIMS-MADE X OCCUR   |                                 |   |  |  | PREMISES (Ea occurrence)   | \$100,0       | 00                       |
|             | · · · · · · · · · · · · · · · · · · ·   |                                 |   |  |  | MED EXP (Any one person)   | \$5,000       |                          |
|             |   |                                 |   |  |  | PERSONAL & ADV INJURY  | \$1,000       | ,                        |
|             | GEN'L AGGREGATE LIMIT APPLIES PER:  |                                 |   |  |  | GENERAL AGGREGATE  | \$2,000       | ,                        |
|             | POLICY X PRO-<br>JECT LOC   |                                 |   |  |  | PRODUCTS - COMP/OP AGG   | \$2,000<br>\$ | ,000                     |
| A           |   |                                 | 04462830-6  | 1/6/2016   | 1/6/2017                                 | COMBINED SINGLE LIMIT  | °<br>\$1.000  | 000                      |
|             |   |                                 | 04402030-0  | 1/0/2010   | 1/0/2011                                 | (Ea accident)<br>BODILY INJURY (Per person)                      | \$1,000       | ,000                     |
|             | ALL OWNED X SCHEDULED<br>AUTOS NON-OWNED  |                                 |   |  |  | BODILY INJURY (Per accident)                                     | \$            |                          |
|             | X HIRED AUTOS X AUTOS   |                                 |   |  |  | PROPERTY DAMAGE<br>(Per accident)                                | \$            |                          |
|             |   |                                 |   |  |  |  | \$            |                          |
| С           | UMBRELLA LIAB X OCCUR   |                                 | NHA071571   | 4/22/2015  | 4/22/2016                                | EACH OCCURRENCE  | \$5,000       | ,000                     |
|             | X EXCESS LIAB CLAIMS-MADE   |                                 |   |  |  | AGGREGATE  | \$5,000       | ,000                     |
|             | DED RETENTION \$  |                                 |   |  |  |  | \$            |                          |
| D           | WORKERS COMPENSATION<br>AND EMPLOYERS' LIABILITY Y / N  |                                 | AVWCVA2391772015  | 4/22/2015  | 4/22/2016                                | X PER OTH-<br>STATUTE ER   |               |                          |
|             |   | N/A                             |   |  |  | E.L. EACH ACCIDENT   | \$1,000       | ,000                     |
|             | (Mandatory in NH)   |                                 |   |  |  | E.L. DISEASE - EA EMPLOYEE                                       |               |                          |
| E           | If yes, describe under<br>DESCRIPTION OF OPERATIONS below   |                                 |   |  |  | E.L. DISEASE - POLICY LIMIT                                      | \$1,000       |                          |
|             | Equipment Floater<br>ACV<br>Deductible: \$1,000   |                                 | IH5A28331201  | 4/22/2015  | 4/22/2016                                | Leased / Rented Equip  | \$200,00      | 00                       |
| DES         | SCRIPTION OF OPERATIONS / LOCATIONS / VEHICL  | ES (ACORE                       | 0 101, Additional Remarks Schedu  | lle, may be attached if mor                              | e space is requi                         | ed)  |               |                          |
| CF          | RTIFICATE HOLDER  |                                 |   | CANCELLATION   |  |  |               |                          |
|             | State of West Virginia, Dep<br>Purchasing Division<br>2019 Washington Street Ea<br>P.O. Box 50130   | ist                             | of Administration,  | SHOULD ANY OF  | I DATE THE<br>TH THE POLIC               | ESCRIBED POLICIES BE C.<br>EREOF, NOTICE WILL E<br>Y PROVISIONS. |               |                          |
|             | Charleston WV 25305-0130  | J                               |   | NA   |  |  |               |                          |

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# Exhibit "A" Price Sheet

| Line | Description                                | Unit of  | Unit      | Quantity | Extended   |
|------|--|----------|-----------|----------|------------|
| ltem | Replace Crossties and Surfacing on SBVR    | Measure  | Cost      | Needed   | Cost       |
| 1    | Replace 5,000 crossties between MP 12 - 22 | Each     | 117.50    | 5,000    | 587,500.00 |
|      | (This includes tamping of this area)       |          |           |          |            |
| 2    | Gaging of additional Ties                  | Each     | 5.00      | 1,000    | 5,000.00   |
| 3    | Continual Surfacing between MP 39-52       | Per Mile | 7,200.00  | 13       | 93,600.00  |
| 4    | Spot tamping at various locations          | Per Mile | 6,900.00  | 3        | 20,700.00  |
|      |  | J        | Total Bid | Amount:  | 706,800.0  |