



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.

## Header 3

List View

## General Information

## Contact

## Default Values

## Discount

## Document Information

Procurement Folder: 316825

SO Doc Code: CRFQ

Procurement Type: Central Purchase Order

SO Dept: 0310

Vendor ID: 000000206725

SO Doc ID: DNR1700000055

Legal Name: CARPENTER RECLAMATION INC

Published Date: 5/31/17

Alias/DBA:

Close Date: 6/8/17

Total Bid: \$66,304.89

Close Time: 13:30

Response Date: 06/08/2017

Status: Closed

Response Time: 11:52

Solicitation Description: Plum Orchard Dam Maintenance Project

Total of Header Attachments: 3

Total of All Attachments: 3



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

State of West Virginia  
Solicitation Response

Proc Folder : 316825

Solicitation Description : Plum Orchard Dam Maintenance Project

Proc Type : Central Purchase Order

Date issued	Solicitation Closes	Solicitation Response	Version
	2017-06-08 13:30:00	SR 0310 ESR06081700000006168	1

**VENDOR**

000000206725

CARPENTER RECLAMATION INC

Solicitation Number: CRFQ 0310 DNR17000000055

Total Bid : \$66,304.89

Response Date: 2017-06-08

Response Time: 11:52:18

Comments: WV Contractors License #: WV007728

**FOR INFORMATION CONTACT THE BUYER**

Guy Nisbet  
(304) 558-2596  
guy.l.nisbet@wv.gov

Signature on File

FEIN #

DATE

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Dam Construction Service	0.00000			\$66,304.89

Comm Code	Manufacturer	Specification	Model #
72141203			

Extended Description :	Vendor to enter Total Bid Amount on OASIS commodity line and attach or submit Pricing Sheet before bid opening date and time.
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**ADDENDUM ACKNOWLEDGEMENT FORM**

**SOLICITATION NO.:** 17-55 DNR

**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.

Carpenter Reclamation, Inc.  
Company  
Kulley Carpenter  
Authorized Signature  
6-8-17  
Date

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

Revised 6/8/2012

## SIGNATURE PAGE

**DESIGNATED CONTACT:** The Vendor appoints the individual identified in this section as the Contract Administrator and point of contact for matters relating to this contract.

Kelley Carpenter - President

Printed Name and Title

PO Box 13015 Chas., WV 25360

Address

304 984-1115 304 984-2770

Telephone Number and Fax Number

rcarpen103@aol.com

E-Mail Address

**CERTIFICATION AND SIGNATURE:** By 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 Department that cannot be unilaterally withdrawn; that the combined service and goods proposed meets the mandatory requirements in the Solicitation for the project, 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 the 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 agency of the State that may require registration.

Carpenter Reclamation, Inc.

Company

Kelley Carpenter - President

Printed Name and Title of Authorized Representative

Kelley Carpenter

Signature

PO Box 13015 Chas., WV 25360

Address

304 984-1115 304 984-2770

Telephone Number and Fax Number

rcarpen103@aol.com

E-Mail Address



**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, Kelley Carpenter, after being first duly sworn, depose and state as follows:

1. I am an employee of Carpenter Reclamation, Inc.; and,  
 (Company Name)
2. I do hereby attest that Carpenter Reclamation, Inc.  
 (Company Name)

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

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

Printed Name: Kelley Carpenter

Signature: Kelley Carpenter

Title: President

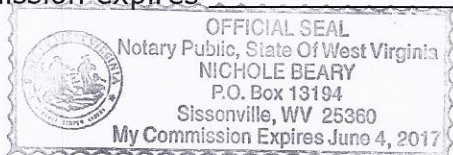
Company Name: Carpenter Reclamation, Inc.

Date: 8-1-17 KC

Taken, subscribed and sworn to before me this 1 day of June, 2017.

By Commission expires June 4 2017

(Seal)



Nichole Beary  
 (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.**

WV Department of Environmental Protection

# PROCUREMENT AFFIDAVIT

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: Carpenter Reclamation, Inc.

Authorized Signature: Kelly Carpenter Date: 6-1-17

State of West Virginia

County of Kanawha, to-wit:

Taken, subscribed, and sworn to before me this 1 day of June, 2017.

My Commission expires June 4, 2017.

**AFFIX SEAL HERE**



**NOTARY PUBLIC**

Nichole Beary  
Procurement Affidavit (Revised 06/06/2016)

AML CONTRACTOR INFORMATION FORM

You must complete this form for your AML contracting officer to request an eligibility evaluation from the Office of Surface Mining to determine if you are eligible to receive an AML contract. This requirement applies to contractors and their sub-contractors and is found under OSM's regulations at 30 CFR 874.16. When possible, please type your information onto this form to reduce errors on our end. **NOTE: Signature and date this form is signed must be recent (within the last month) to be considered for a current bid**

Part A: General Information

Business Name: Carpenter Reclamation, Inc. Tax Payer ID No.: 55-0693493  
Address: PO Box 13015  
City: Charleston State: WV Zip Code: 25360 Phone: 304-984-1115  
Fax No.: 304-984-2770 E-mail address: rcarpen103@aol.com

Part B: Legal Structure

☒ Corporation ☐ Sole Proprietorship ☐ Partnership ☐ LLC  
☐ Other (please specify) \_\_\_\_\_

Part C: Certifying and updating information in the Applicant/Violator System (AVS). Select only one of the following options, follow the instructions for that option, and sign below.

I, Kelley Carpenter, have the express authority to certify that:  
(print name)

1. ☒ Information on the **attached** Entity Organizational Family Tree (OFT) from AVS is accurate, complete, and up-to-date. If you select this option, you **must** attach an Entity OFT from AVS to this form. Sign and date below and do not complete Part D.
2. ☐ Part of the information on the **attached** Entity OFT from AVS is missing or incorrect and must be updated. If you select this option, you **must** attach an Entity OFT from AVS to this form. Use Part D to provide the missing or corrected information. Sign and date below and complete Part D.
3. ☐ Our business currently is not listed in AVS. If you select this option, you must provide all information required in Part D. Sign and date below and complete Part D.

6-1-17<sup>KC</sup> Kelley Carpenter 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>.**

**Part D.**Contractor's Business Name: Carpenter Reclamation, Inc.

If the current Entity OFT information for your business is incomplete or incorrect in AVS, or if there is no information in AVS for your business, you must provide all of the following information as it applies to your business. Please make as many copies of this page as you require.

- Every officer (President, Vice President, Secretary, Treasurer, etc.);
- All Directors;
- 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	<u>N/A</u>	Position/Title	<u></u>
Address	<u></u>	Telephone #	<u></u>
	<u></u>	% of Ownership	<u></u>
Begin Date:	<u></u>	Ending Date:	<u></u>
Name	<u></u>	Position/Title	<u></u>
Address	<u></u>	Telephone #	<u></u>
	<u></u>	% of Ownership	<u></u>
Begin Date:	<u></u>	Ending Date:	<u></u>
Name	<u></u>	Position/Title	<u></u>
Address	<u></u>	Telephone #	<u></u>
	<u></u>	% of Ownership	<u></u>
Begin Date:	<u></u>	Ending Date:	<u></u>
Name	<u></u>	Position/Title	<u></u>
Address	<u></u>	Telephone #	<u></u>
	<u></u>	% of Ownership	<u></u>
Begin Date:	<u></u>	Ending Date:	<u></u>

**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.



# AVS OFT Report - 4/5/2010 12:56:36 PM

All OFT's where the selected entity is listed as an entity or related entity

Entity Selected (140618) Carpenter Reclamation Inc

## Parent Entity

(140618) Carpenter Reclamation Inc  
(140618) Carpenter Reclamation Inc  
(140618) Carpenter Reclamation Inc  
(140618) Carpenter Reclamation Inc

## Description

President  
Shareholder  
Shareholder  
Vice President

## Related Entity

(140616) Kelley Carpenter  
(140616) Kelley Carpenter  
(140617) Mary Carpenter  
(140617) Mary Carpenter

## % Ownership

50%  
50%

## Begin Date

10/1/1989  
10/1/1989  
10/1/1989  
10/1/1989

## End Date

Current Information

K. Carpenter

KC

6-1-17



WEST VIRGINIA  
CONTRACTOR  
LICENSING  
BOARD

# CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV007728

Classification:

GENERAL ENGINEERING

CARPENTER RECLAMATION INC  
DBA CARPENTER RECLAMATION INC  
PO BOX 13015  
CHARLESTON, WV 25360-0015

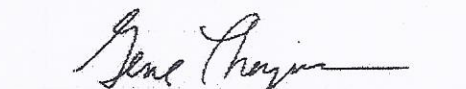
Date Issued

Expiration Date

OCTOBER 14, 2016

OCTOBER 14, 2017

  
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 is being performed. This license number must appear in all advertisements, on all bid submissions and on all fully executed and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.

## Pricing Page / Plum Orchard Dam Project

Item No.	Description	Unit of Measure	Estimated Quantity	Unit Price	Extended Cost
1	Mobilization and demobilization (Limited to 10% of Total Bid Amount)	Lump Sum	1	5,000.00	5,000.00
2	Construction Layout (Limited to 5% of Total Bid Amount)	Lump Sum	1	2,500.00	2,500.00
3	Site Preparation	Acre	0.9	20,000.00	18,000.00
4	Stabilized construction Entrance	Each	2	2,500.00	5,000.00
5	15" Diameter HDPE CPP (Temporary)	Linear Foot	30	40.00	1,200.00
6	Silt Fence	Linear Foot	415	2.00	830.00
7	Wattles	Linear Foot	193	4.00	772.00
8	Seeding and Mulching	Acre	0.9	4,000.00	3,600.00
9	Unclassified Excavating	Cubic Yard	67	0.01	0.67
10	Soil Cover (Fill)	Cubic Yard	222	0.01	2.22
11	No.57 Stone (Fill)	Ton	475	40.00	19,000.00
12	Geotextile	Square Yard	1180	2.00	2,360.00
13	8" Diameter SDR 35 Perforated PVC Pipe	Linear Foot	130	40.00	5,200.00
14	8" Diameter SDR 35 solid PVC Pipe	Linear Foot	17	20.00	340.00
15	Cleanout	Each	2	1,000.00	2,000.00
16	8" Diameter Animal Guard	Each	1	500.00	500.00
				<b>TOTAL BID AMOUNT:</b>	<b>66,304.89</b>

The WV DNR reserves the right to request additional information and supporting documentation regarding Unit Prices when the Unit Price appears to be unreasonable.

**BID BOND**

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, CARPENTER RECLAMATION, INC.  
of P.O. BOX 13015, SISSONVILLE, WV 25360, as Principal, and GREAT AMERICAN INSURANCE COMPANY  
of 301 EAST 4TH STREET CINCINNATI, OH 45202-4201, a corporation organized and existing under the laws of the State of OHIO  
with its principal office in the City of CINCINNATI, as Surety, are held and firmly bound unto the State  
of West Virginia, as Obligee, in the penal sum of FIVE PERCENT (5%) OF THE (\$ AMOUNT OF THE 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  
DNR1700000055, Plum Orchard Dam Maintenance in Fayette County

**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 8th day of June, 20 17.

Principal Seal

CARPENTER RECLAMATION, INC.

(Name of Principal)

By Kelly Carpenter

(Must be President, Vice President, or  
Duly Authorized Agent)

Kelly Carpenter  
(Title) President

GREAT AMERICAN INSURANCE COMPANY

(Name of Surety)

Surety Seal

William A. Kantlehner, III  
William A. Kantlehner, III Attorney-in-Fact

**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.**

# GREAT AMERICAN INSURANCE COMPANY®

Administrative Office: 301 E 4TH STREET • CINCINNATI, OHIO 45202 • 513-369-5000 • FAX 513-723-2740

The number of persons authorized by  
this power of attorney is not more than TWELVE

No. 0 20646

## POWER OF ATTORNEY

**KNOW ALL MEN BY THESE PRESENTS:** That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

Name	Address	Limit of Power
STEVEN M. GARRETT	DIANE L. PHELPS	ALL OF
WILLIAM A. KANTLEHNER, III	CHRISTOPHER E. VON ALLMEN	LOUISVILLE, KENTUCKY
THOMAS J. MITCHELL	ANDREW G. WINDHORST, JR.	\$100,000,000
ROGER A. NEAL	ROSS E. JOHNSON	
DEBORAH A. YATES	ANDREA CORTES	
JEFFREY A. BROWN	RYAN P. MITCHELL	

This Power of Attorney revokes all previous powers issued on behalf of the attorney(s)-in-fact named above.

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 25TH day of MARCH, 2015.

Attest

GREAT AMERICAN INSURANCE COMPANY



*Atty L C. B.*  
Assistant Secretary

*David C. Kitchin*  
Divisional Senior Vice President

STATE OF OHIO, COUNTY OF HAMILTON - ss:

DAVID C. KITCHIN (877-377-2405)

On this 25TH day of MARCH, 2015, before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.



**JENNIFER MARIE RIPPY**  
Notary Public, State of Ohio  
My Commission Expires  
June 20, 2019

*Jennifer Marie Rippy*

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

**RESOLVED:** That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisional Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

**RESOLVED FURTHER:** That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

## CERTIFICATION

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this 8TH

day of JUNE

2017



*Atty L C. B.*  
Assistant Secretary