

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

State of West Virginia Request for Quotation 09 - Construction

Proc Folder: 244810

Doc Description: Addendum 1-OPEN END CONTRACT FOR CCTV MAINTENANCE

Proc Type: Central Master Agreement

Date Issued Solicitation Closes Solicitation No Version 2016-09-20 2016-09-27 CRFQ 0506 HHR1700000002 2 13:30:00

**BID CLERK** 

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

Vendor Name, Address and Telephone Number: Longs' Security Cornera Tystans LLC 102 38th ST SE. Charlatan W 25364

09/27/16 12:26:33 W Purchasina Division

FOR INFORMATION CONTACT THE BUYER

Jessica S Chambers (304) 558-0246

jessica.s.chambers@wv.gov

Signature X

FEIN # 20-388 | 880

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

Page: 1

FORM ID: WV-PRC-CRFQ-001

#### ADDITIONAL INFORMATION:

Addendum

Addendum No.01 issued to publish and distribute the attached information to the vendor community.

The West Virginia Purchasing division is soliciting bids on behalf of the West Virginia Department of Health and Human Resources (WV DHHR) Office of Safety, Security, and Loss Management to establish an open-end contract for Closed Circuit Television (CCTV) System Maintenance per the bid requirements, specifications, and terms and conditions that are apart of this solicitation and attached hereto.

No Girl Hotel The Contract			
BUYER - 304-957-0209			300000000000000000000000000000000000000
HEALTH AND HUMAN RES	SOURCES	STATE OF WEST VIR	RGINIA
OFFICE OF OPERATIONS		VARIOUS LOCATION	IS AS INDICATED BY ORDER
ONE DAVIS SQUARE, RM	115		
CHARLESTON	WV25301	No City	WV 99999
us		us	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Annual Preventative Maintenance - Various Locations	0.00000			\$ 5650.00

Comm Code	Manufacturer	Specification	Model #	
81112201				

#### **Extended Description:**

Annual Preventative Maintenance for various locations per the attached detailed specs. and exhibits.

See ExhibitC

### **EXHIBIT C - PRICING PAGES**

Preventive Maintenance:				
Location (See Exhibit B)				Annual Total Cost for PM
B1 (One Davis Square)			=	\$ 240.00
B2 (Diamond Building)			=	\$ 240.00
B3 (DHHR Parking Garage)	)		=	\$ 240.00
B4 (Kanawha County BCSE	()		=	\$ 240.00
B5 (OLS)			=	\$ 240.00
B6 (OCME)			=	\$ 240.00
B7 (OIG LSW)			=	\$ 240.00
B8 (OIG B6)			=	\$ 240.00
B9 (ONS)			=	\$ 240.00
B10 (DHHR Warehouse)			=	\$ 240.00
Corrective Maintenance: Hourly Labor Rate  \$30.00	x x	Estimated Hours	=	Total Labor Cost  \$ 3000.00
Vendor Manufactured Parts	x	Multiplier	===	Total Parts Cost
\$100.00	x	(M) 25	==	\$ 125.00
		ed when subtracting t		r's discount percentage, related 0% discount would calculate as
Non-Vendor Manufactured P	arts	x Multiplier	=	Total Parts Cost
\$100.00	X	(N) 1.25	=	\$ 125.00
				markup percentage, related in urkup would calculate as 1.00 +

\* Total Cost is calculated by adding the Total per site Preventive Maintenance Cost,
Total Labor Cost, the Total Vendor Manufactured Parts Cost, and the Non-Vendor
Manufactured Parts Cost.

Total Cost \*

s 5650.00

\*\*Quantities listed are for bidding purposes only. Actual quantities may differ.

## 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.

Adde	Addendum Numbers Received:									
Check the box next to each addendum received)										
•	1000,100,									
	[\	/]	Addendum No. 1	[	]	Addendum No. 6				
	[	]	Addendum No. 2	I	1	Addendum No. 7				
	[	]	Addendum No. 3	[	J	Addendum No. 8				
	[	]	Addendum No. 4	E	]	Addendum No. 9				
	]	]	Addendum No. 5	ſ	]	Addendum No. 10				

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

Longs Security Camera Syclems LLC

Company

Authorized Signature

9/27/2016

Date

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

Revised 6/8/2012

### 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:	Longe	Security	Comera	Systems	LLC	
Contractor's License	No. WV-	201010	-	υ		

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 public authority shall be the West Virginia Purchasing Division. For contracts of \$25,000 or less, the public authority shall be the agency issuing the contract. The report shall include:
- (1) Information to show that the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided;

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the
Contract Administrator and the initial point of contact for matters relating to this Contract.
Cleating Owner
(Name, Title) Alvan E Lung Owner
(Printed Name and Title) UP SE Charleston WV 25304
(Address) 304 925-0338 / 304-925-0338
(Phone Number) / (Fax Number)
(email address)
CERTIFICATION AND SIGNATURE: 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.
(Oct Dry Owner
(Authorized Signature) (Representative Name, Title)
Alan E Long Owner
(Printed Name and Title of Authorized Representative)
9/27/2016
(Date)
304-925-0338 / 925-0338
(Phone Number) (Fay Number)

### 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: Longs Security Camera Systems LLC
Authorized Signature: Date: 9/27/2016
State of West Viginia
County of <u>Hanawha</u> , to-wit:
Taken, subscribed, and sworn to before me this 17 day of Venture, 2016
My Commission expires December 16, 2020.
AFFIX SEAL HERE NOTARY PUBLIC Lame of Chipetter
HOTARY PUBLIC OFFICIAL SEAL Purchasing Affidavit (Revised 08/01/2015

State of West Virginia Comm. Exp. Dec 16, 2020 USI Insurance WV-73 Approved / Revised 08/01/15



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

STATE OF WEST VIRGINIA,
COUNTY OF KANDWINA, TO-WIT;
I, Alau E Long after being first duly sworn, depose and state as follows:
1. I am an employee of Large Sewin James Company Name)
2. I do hereby attest that Long become Gamera Systems LLC (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,
Printed Name: Alan E Long, Signature: Uln E Chy
Company Name: Lougs Security Camera Swens LLC
Date: 9/27/2016
Taken, subscribed and sworn to before me this 27th day of Jeptember, 2016.
By Commission expires Occimbed to, 2020
(Seal)  MOTARY PUBLIC OFFICIAL SEAL ANIME L CARPENTER State of West Virginia My Comm. Dec 16, 2020 USI Insurance USI Insurance  (Notary Public)
THIS AFEIGRATE MUSTER RESUBMITTED WITH THE BID IN ORDER TO COMPLY WITH WY CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF THE BID.

#### **BID BOND**

KNOW ALL MEN BY THESE PRE	SENTS, That we, the	ə undersigned, <u>Lo</u>	ong's Security	Camera System	LLC
Cincinnati	OH ,	a corporation org	anized and exist	ing under the laws	of the State of
with its principal office in	the City ofCi	ncinnati	, as Surety, are	held and firmly bot	and unto the State
Virginia, as Obligee, in the penal s	um of <u>Five Percent</u>	of Amount Bid	(\$	5%) for the	payment of which,
truly to be made, we jointly and se	verally bind ourselve	s, our heirs, admi	nistrators, execu	tors, successors an	d assigns.
The Condition of the above oblig	gation is such that v	whereas the Princ	ipal has submit	ted to the Purchas	ing Section of the
nent of Administration a certain bid	or proposal, attached	i hereto and made	a part hereof, to	enter into a contra	ct in writing for
End Contract for CCTV Mainte	nance, Charleston	, WV	<u> </u>		
NOW THEREFORE,					
(b) If said bid shall be accord hereto and shall furnish any other ement created by the acceptance and effect. It is expressly under	epted and the Princi or bonds and insurand of said bid, then this stood and agreed tha	ce required by the obligation shall be at the liability of the	bid or proposal, null and void, o	and shall in all othe therwise this obliga	er respects perform tion shall remain in
The Surety, for the value received paired or affected by any extension office of any such extension.	d, hereby stipulates and of the time within	and agrees that the which the Oblige	e obligations of s e may accept su	said Surety and its I uch bid, and said S	bond shall be in no lurety does hereby
WITNESS, the following signature	es and seals of Princi	ipal and Surety, e	xecuted and sea	led by a proper offic	cer of Principal and
or by Principal individually if Princip	oal is an individual, th	is 27th day o	of <u>Septemb</u>	per <u>, 2016</u>	
al Seal			Long's Securit	y Camera Syster (Name of Principal	
			By Clar	E m	
7					
					entj
			DWN		
				(Tide)	
Seal			By: Unl	(Name of Surety)	
	Cincinnati  with its principal office in Virginia, as Obligee, in the penal set truly to be made, we jointly and set truly to be made for CCTV Maintee  NOW THEREFORE,  (a) If said bid shall be rejected to be and effect. It is expressly under exceed the penal amount of this obligation of the surety, for the value received paired or affected by any extension of the surety, the following signature or by Principal individually if Principal Seal	Charleston	Charleston ,	Charleston	Cincinnati  OH

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 FIVE

No. 0 20767

POWER OF ATTORNEY

KNOWALL 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

Limit of Power

ANDREW K. TEETER DOUGLAS P. TAYLOR

JAIME L. CARPENTER

KIMBERLY L. MILES

KIMBERLY S. BURDETTE

CHARLESTON, WEST VIRGINIA

\$100,000,000

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 day of MARCH officers and its corporate seal hereunto affixed this

Attest

GREAT AMERICAN INSURANCE COMPANY

Divisional Senior Vice President

STATE OF OHIO, COUNTY OF HAMILTON - ss:

Assistant Secretary

DAVID C. KITCHIN (877-377-2405)

MARCH 2016, before me personally appeared DAVID C. KITCHIN, to me day of On this 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.



Votary Public, State of Ohio

Susan a Lohoust

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 Divisonal 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

27th

day of

September

2016



Assistant Secretary

#### STATE OF WEST VIRGINIA



## Offices of the Insurance Commissioner

EARL RAY TOMBLIN

MICHAEL D. RILEY
Insurance Commissioner

February 25, 2016

Longs' Security Camera Systems LLC 102 38th Street SE Charleston, WV 25304

RE: Exempt ID: WCEX19820

Dear Employer,

Your request for an extension/renewal of the opinion as to your exempt status the requirement to maintain West Virginia Workers' Compensation insurance has been received and processed. According to the information provided in your application, you have no employees who are required under West Virginia law to be provided West Virginia workers' compensation coverage. Therefore, the OIC is of the opinion, based on the information provided, that you are exempt from having to maintain West Virginia workers' compensation coverage.

This exemption opinion extension/renewal is valid until March 9, 2017, or until circumstances change which require you to maintain workers' compensation coverage, such as acquiring employees or a business reorganization. Hiring even one (1) employee not falling within the scope of this exemption would require you to obtain coverage. If such changes occur, you must either submit another request for exemption or obtain workers' compensation coverage. Failure to obtain the mandatory coverage can result in severe penalties such as an administrative fine up to \$10,000, financial responsibility for benefits paid from the uninsured fund for any accidents and losses during periods when you are not insured, and placement on the Employer Violator System, which can result in revocation of your business license and any other licenses, permits or certificates required to do business in West Virginia. Further, be reminded that in accordance with W.Va. Code §61-3-24e(5), it is a felony to knowingly and willingly make false statements respecting any information required to be provided under the WV Workers' Compensation Act. Upon conviction, the individual shall be confined in a penitentiary for up to three years, fined up to \$10,000, or both.

Please be advised that this exemption extension/renewal is advisory in nature and does not constitute any formal adjudication or legal conclusion as to the workers' compensation status of your company, it is based solely on the information you provided to us in your application. If the information provided in the application is incorrect, unclear or ambiguous, then this exemption may also be erroneous. It is important for anyone relying on this exemption to be aware of this. Additionally, this letter does not serve in lieu of a certificate of coverage in order to allow a prime contractor to avoid liability for employees of subcontractors under W.Va. Code §23-2-1d.

Should you find that you are in need of workers compensation coverage, you may apply for coverage from one of the approved carriers of workers compensation. A list of these carriers can be found on our website at <a href="https://www.wvinsurance.gov">www.wvinsurance.gov</a> underneath the box entitled Workers Compensation found in the center of the page. If you are unable to access the website for a list of these carriers, please feel free to contact our offices at (304) 558-6279, ext 1229.

Sincerety,

Employer Coverage
Office of the West Virginia Insurance Commissioner

ec/jc





## WEST VIKGINIA CONTRACTOR LICENSING BOARD

## **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV040102

**Classification:** 

LOW VOLTAGE SYSTEMS

LONGS SECURITY CAMERA SYSTEMS LLC DBA LONGS SECURITY CAMERA SYSTEMS LLC 102 38TH STREET SE CHARLESTON, WV 25304

**Date Issued** 

**Expiration Date** 

DECEMBER 30, 2016

DECEMBER 30, 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.



LONGSSEC1

#### ACORD...

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/26/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER CONTACT Teresa Alley USI Ins Svcs Sm C/L Bluefield PHONE (A/C, No, Ext): 276-979-1751 E-MAIL ADDRESS: teresa.alley@usi.biz FAX (A/C, No): 866-609-0867 745 S. College Ave Bluefleld, VA 24605 INSURER(S) AFFORDING COVERAGE NAIC# 276 979-1799 **INSURER A: Maxum Indemnity Company** 26743 INSURED INSURER B Long's Security System LLC INSURER C: 102 38th St. SE INSURER D : Charleston, WV 25304 INSURER E INSURER F :

CO		

#### **CERTIFICATE NUMBER:**

**REVISION NUMBER:** 

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS,

	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN WAT HAVE BEEN REDUCED BY PAID CLAIMS.								
INSR LTR	TYPE OF INSURANCE		ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S
Α	X	COMMERCIAL GENERAL LIABILITY			BDG005077603	12/20/2015	12/20/2016		\$1,000,000
		CLAIMS-MADE X OCCUR	i					DAMAGE TO RENTED PREMISES (Ea occurrence)	s100,000
	X	Bl/PD Ded: \$500						MED EXP (Any one person)	s1,000
	•		Ì					PERSONAL & ADV INJURY	\$1,000,000
	GEN	LAGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
		POLICY PRO-			<u> </u>			PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:					:		\$
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
		ANY AUTO		ł				BODILY INJURY (Per person)	\$
		ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
		HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
							<u></u>		\$
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	3
		EXCESS LIAB CLAIMS-MADE				1		AGGREGATE	\$
		DED RETENTION \$							\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A			1		E.L. EACH ACCIDENT	\$
	(Mai	ndatory in NH)	1117			1		E.L. DISEASE - EA EMPLOYEE	s
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
DESC	RIPT	ION OF OPERATIONS / LOCATIONS / VEHIC	LES	ACORE	101 Additional Remarks Schedule may	be attached if mo	ore space is requ	ired)	·

HHR1700000002; Open End Contract for CCTV Maintenance

#### CERTIFICATE HOLDER

CANCELLATION

Department of Administration **Purchasing Division** Attn: Bid Clerk, 2019 Washington St E Charleston, WV 25305

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2014 ACORD CORPORATION, All rights reserved.