

AMERICAN MOLDED PLASTIC, INC.**P.O. BOX 434****3876 NEWTON FALLS BAILEY ROAD****NEWTON FALLS, OHIO 44444****PH:330-872-3838****FAX: 330-872-3325**

SEALED BID: Guardrail Mounted Delineator Post
BUYER: Mark Atkins, File # 33
SOLICITATION NO: CRFQ 0803 DOT 1700000087
BID OPENING DATE: June 21, 2017
BID OPENING TIME: 1:30pm EST
FAX NUMBER: 304-558-3970

06/14/17 10:55:03
WU Purchasing Division

FAXED JUN 14 2017



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

State of West Virginia
Request for Quotation
19 - Highways

Proc Folder: 335137

Doc Description: GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POSTS

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2017-06-05	2017-06-21 13:30:00	CRFQ 0803 DOT1700000087	1

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

VENDOR
Vendor Name, Address and Telephone Number: AMERICAN MOLDED PLASTIC, INC.
P.O. BOX 434
3876 NEWTON FALLS BAILEY ROAD
NEWTON FALLS, OHIO 44444

FOR INFORMATION CONTACT THE BUYER
Mark A Atkins
(304) 558-2307
mark.a.atkins@wv.gov

Signature X *N. RAY ALLEN* FEIN # 34-1637329 DATE 6/08/2017

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

ADDENDUM PART 1

The West Virginia Purchasing Division is soliciting bids on behalf of the West Virginia Division of Highways (WVDOT) to establish an open-end contract for Guardrail Mounted Flexible Delineator Posts, per the attached documents.

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		STATE OF WEST VIRGINIA VARIOUS LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POSTS	4000.00000	EA	\$8.75	\$35,000.00

Comm Code	Manufacturer	Specification	Model #
48161508	AMERICAN MOLDED PLASTIC, INC.		AMP-17-1W-WV

Extended Description :

PER EACH, COMPLETE GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POST, WHITE, 1-WAY REFLECTIVE WHITE, TO INCLUDE POST AND RETROREFLECTIVE SHEETING (APPLIED)

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		STATE OF WEST VIRGINIA VARIOUS LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POSTS	200.00000	EA	\$9.25	\$1,850.00

Comm Code	Manufacturer	Specification	Model #
48161508	AMERICAN MOLDED PLASTIC, INC.		AMP-17-1W-1R-WV

Extended Description :

COMPLETE GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POST, WHITE, 2-WAY REFLECTIVE WHITE / RED, TO INCLUDE POST AND RETROREFLECTIVE SHEETING (APPLIED).

INVOICE TO: VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER No City WV99999 US		SHIP TO: STATE OF WEST VIRGINIA VARIOUS LOCATIONS AS INDICATED BY ORDER No City WV 99999 US	
---	--	---	--

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POSTS	1500.00000	EA	\$8.75	\$13,125.00

Comm Code	Manufacturer	Specification	Model #
46161508	AMERICAN MOLDED PLASTIC, INC.		AMP-17-1Y-WV

Extended Description :

COMPLETE GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POST, YELLOW, 1-WAY REFLECTIVE FL. YELLOW, TO INCLUDE POST AND RETROREFLECTIVE SHEETING (APPLIED).

INVOICE TO: VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER No City WV99999 US		SHIP TO: STATE OF WEST VIRGINIA VARIOUS LOCATIONS AS INDICATED BY ORDER No City WV 99999 US	
---	--	---	--

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POSTS	500.00000	EA	\$9.25	\$4,625.00

Comm Code	Manufacturer	Specification	Model #
46181508	AMERICAN MOLDED PLASTIC, INC.		AMP-17-2Y-WV

Extended Description :

COMPLETE GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POST, YELLOW, 2-WAY REFLECTIVE FL. YELLOW / FL. YELLOW, TO INCLUDE POST AND RETROREFLECTIVE SHEETING (APPLIED).

INVOICE TO: VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER No City WV99999 US		SHIP TO: STATE OF WEST VIRGINIA VARIOUS LOCATIONS AS INDICATED BY ORDER No City WV 99999 US	
---	--	---	--

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POSTS	200.00000	EA	9.25	\$1,850.00

Comm Code	Manufacturer	Specification	Model #
46161508	AMERICAN MOLDED PLASTIC, INC.		AMP-17-1Y-1R-WV

Extended Description :

COMPLETE GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POST, YELLOW, 2-WAY REFLECTIVE FL. YELLOW / RED, TO INCLUDE POST AND RETROREFLECTIVE SHEETING (APPLIED).

SCHEDULE OF EVENTS

<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	Technical Questions due by:	2017-06-12

DOT1700000087	Document Phase Final	Document Description GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POSTS	Page 5 of 5
---------------	--------------------------------	---	-----------------------

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

BID SCHEDULE

CRFQ 0803 DOT1700000087

The following estimated quantities are for bid purposes only. Actual quantities will be determined by needs of the West Virginia Division of Highways and may be increased or decreased.

Item Number	Estimated Quantity	Unit of Measure	Description	Unit Cost	Total	UNSPSC Code
Guardrail Mounted Flexible Delineator Posts						
1	4000	ea	Per each, Complete Guardrail Mounted Flexible Delineator Post, White, 1-way reflective white, To include post and retroreflective sheeting (applied)	\$ 8.75	\$ 35,000.00	46161508
2	200	ea	Per each, Complete Guardrail Mounted Flexible Delineator Post, White, 2-way reflective white/red, To include post and retroreflective sheeting (applied)	\$ 9.25	\$ 1,850.00	46161508
3	1500	ea	Per each, Complete Guardrail Mounted Flexible Delineator Post, Yellow, 1-way reflective fl. yellow, To include post and retroreflective sheeting (applied)	\$ 8.75	\$ 13,125.00	46161508
4	500	ea	Per each, Complete Guardrail Mounted Flexible Delineator Post, Yellow, 2-way reflective fl. yellow/fl. yellow, To include post and retroreflective sheeting (applied)	\$ 9.25	\$ 4,625.00	46161508
5	200	ea	Per each, Complete Guardrail Mounted Flexible Delineator Post, Yellow, 2-way reflective fl. yellow/red, To include post and retroreflective sheeting (applied)	\$ 9.25	\$ 1,850.00	46161508
GRAND TOTAL →					\$ 56,450.00	

06/14/2017 09:25 3308723325

Received:3308723325

AMERICAN MOLDED PLAS

Jun 14 2017 10:50am

PAGE 07

P007

PRODUCT COMPLIANCE CHECKLIST FORM

This form must be completed in its' entirety by the vendor, and should be submitted as part of the vendor's bid package.

GUARDRAIL MOUNTED FLEXIBLE DELINEATOR POSTS

1) Flexible Delineator Post manufacturer: AMERICAN MOLDED PLASTIC, INC.

2) Trade name(s) and model number(s) of Delineator Posts to be supplied: AMP-17-600-WV

3) Delineator Post APL lab approval number: 1433968A

4) Manufacturer(s) and Series number(s) of sheeting(s) to be utilized: 3-M

5) Sheeting APL lab approval number(s): 3-M 4090 WHITE, 3-M 4092 RED, 4081 FL YELLOW

6) Markers supplied are either white or yellow, as specified, and shall accommodate front and back, as specified, a three (3) inch wide by nine (9) inch tall piece of white, fluorescent-yellow, or red sheeting?

Yes	No
X	

7) Markers are supplied with sheeting pre-installed by the manufacturer?

Yes	No
X	

10) All items on Bid Schedule have been filled out in their entirety?

Yes	No
X	

PRINT NAME: N. RAY ALLEN

SIGN NAME: *N. Ray Allen*

NAME OF VENDOR: AMERICAN MOLDED PLASTIC, INC.

DATE: 6/08/2017

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: AMERICAN MOLDED PLASTIC, INC.

Authorized Signature: *N. Ray Allen* Date: 6-13-17

State of OHIO

County of Trumbull, to-wit:

Taken, subscribed, and sworn to before me this 13 day of June, 2017.

My Commission expires 6/27, 2020

AFFIX SEAL HERE

NOTARY PUBLIC

Beverly A Jones

Purchasing Affidavit (Revised 08/01/2015)



BEVERLY A. JONES, Notary Public
STATE OF OHIO
My Commission Expires June 27, 2020

WV-10

Approved / Revised
12/16/15

State of West Virginia

VENDOR PREFERENCE CERTIFICATE

Certification and application is hereby made for Preference in accordance with *West Virginia Code, §5A-3-37*. (Does not apply to construction contracts). *West Virginia Code, §5A-3-37*, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the *West Virginia Code*. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Vendor Preference, if applicable.

1. **Application is made for 2.5% vendor preference for the reason checked:**
 Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
 Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification;
 Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; or,
 Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
2. **Application is made for 2.5% vendor preference for the reason checked:**
 Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
3. **Application is made for 2.5% vendor preference for the reason checked:**
 Bidder is a nonresident vendor that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's bid; or,
4. **Application is made for 5% vendor preference for the reason checked:**
 Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5. **Application is made for 3.5% vendor preference who is a veteran for the reason checked:**
 Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
6. **Application is made for 3.5% vendor preference who is a veteran for the reason checked:**
 Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
7. **Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with *West Virginia Code §5A-3-59* and *West Virginia Code of State Rules*.**
 Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) rescind the contract or purchase order; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Bidder hereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: AMERICAN MOLDED PLASTIC, INC.

Signed: D. Ray Allen

Date: 6/08/2017

Title: PRESIDENT

*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.



AMERMOL-01

D1JROBERTS

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/07/2017

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 have ADDITIONAL INSURED provisions or 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 Leonard Insurance Services 4244 Mt. Pleasant St. NW, Suite 200 North Canton, OH 44720	CONTACT NAME: Deborah Zimmerman PHONE (A/C, No, Ext): (330) 266-1966 FAX (A/C, No): (330) 498-9946 E-MAIL ADDRESS: dzimmerman@AssuredPartnersOH.com
	INSURER(S) AFFORDING COVERAGE: INSURER A: State Auto Companies INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED American Molded Plastics, Inc. P O Box 434 Newton Falls, OH 44444-9746	

COVERAGES **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 MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR. LTR.	TYPE OF INSURANCE	ADDITIONAL INSURED	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Emp Liab \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. JECT <input type="checkbox"/> LOC OTHER:		BOP2704340	09/23/2016	09/23/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREM (SEC. 6A occurrences) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP. AGG \$ 2,000,000 COMBINED SINGLE LIMIT (Eq. accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HYBRID AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		BOP2704340	09/23/2016	09/23/2017	BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0		CXS2112291	09/23/2016	09/23/2017	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER West Virginia Dept. of Transportation 1900 Kanawha Blvd. E. Rm. A737 Charleston, WV 25305	CANCELLATION 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 <i>Linda R. [Signature]</i>
--	---

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.

N. RAY ALLEN PRESIDENT
 (Name, Title)

JOE ALLEN SHOP FOREMAN
 (Printed Name and Title)

P.O. BOX 434 3876 NEWTON FALLS BAILEY ROAD
 (Address) NEWTON FALLS, OHIO 44444

(330)872-3838 fax: (330)872-3325
 (Phone Number) / (Fax Number)

americanmoldedplastic@earthlink.net
 (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.

American Molded Plastic, Inc.
(Company)

N. Ray Allen
(Authorized Signature) (Representative Name, Title)

N. RAY ALLEN PRESIDENT
(Printed Name and Title of Authorized Representative)

June 14, 2017
(Date)

(330)872-3838 fax: (330)872-3325
(Phone Number) (Fax Number)

**CRFQ 0803 DOT1700000087
REQUEST FOR QUOTATION
Guardrail Mounted Flexible Delineator Posts**

7.2 The following remedies shall be available to Agency upon default.

7.2.1 Immediate cancellation of the Contract.

7.2.2 Immediate cancellation of one or more release orders issued under this Contract.

7.2.3 Any other remedies available in law or equity.

8. MISCELLANEOUS:

8.1 No Substitutions: Vendor shall supply only Contract Items submitted in response to the Solicitation unless a contract modification is approved in accordance with the provisions contained in this Contract.

8.2 Vendor Supply: Vendor must carry sufficient inventory of the Contract Items being offered to fulfill its obligations under this Contract. By signing its bid, Vendor certifies that it can supply the Contract Items contained in its bid response.

8.3 Reports: Vendor shall provide quarterly reports and annual summaries to the Agency showing the Agency's items purchased, quantities of items purchased, and total dollar value of the items purchased. Vendor shall also provide reports, upon request, showing the items purchased during the term of this Contract, the quantity purchased for each of those items, and the total value of purchases for each of those items. Failure to supply such reports may be grounds for cancellation of this Contract.

8.4 Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: RAY ALLEN OR JOE ALLEN

Telephone Number: (330)872-3838

Fax Number: (330)872-3325

Email Address: americanmoldedplastic@earthlink.net