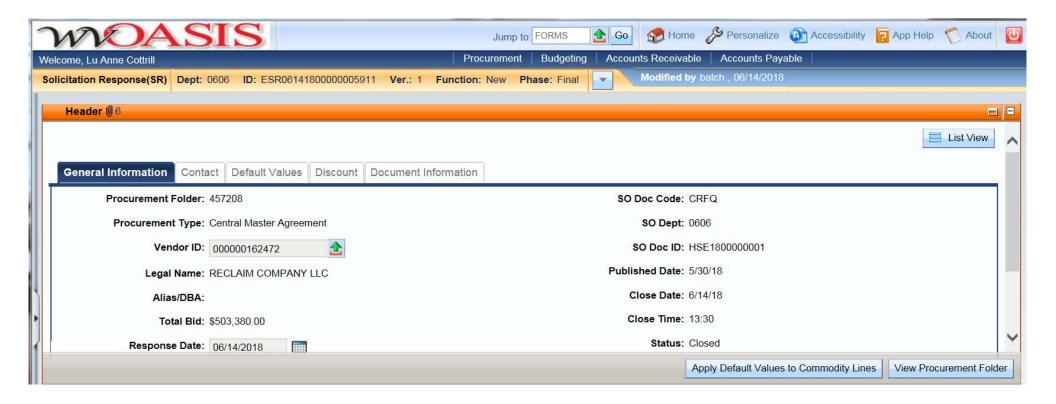
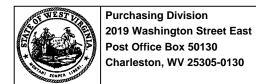


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

Bid Fax: 304-558-3970

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





State of West Virginia Solicitation Response

Proc Folder: 457208

Solicitation Description: FLOOD DEMOLITION AND RECLAMATION

Proc Type: Central Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2018-06-14 13:30:00	SR 0606 ESR06141800000005911	1

VENDOR

000000162472

RECLAIM COMPANY LLC

Solicitation Number: CRFQ 0606 HSE1800000001

Total Bid: \$503,380.00 **Response Date:** 2018-06-14 **Response Time:** 11:53:28

Comments:

FOR INFORMATION CONTACT THE BUYER

Crystal Rink (304) 558-2402 crystal.g.rink@wv.gov

Signature on File FEIN # DATE

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

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

1 DEMOLITION AND RECLAMATION			\$503,380.00	
Comm Code	Manufacturer	Specification	Model #	
00000000				
Extended Description : DEMOLITION AND RECLAMATION				

Unit Issue

Unit Price

Ln Total Or Contract Amount

Qty

Line

Comm Ln Desc



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: 457208

Doc Description: FLOOD DEMOLITION AND RECLAMATION

Proc Type: Central Master Agreement

 Date Issued
 Solicitation Closes
 Solicitation No
 Version

 2018-05-30
 2018-06-14 13:30:00
 CRFQ
 0606 HSE1800000001
 1

BID RECEIVING LOCATION

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV

25305

US

VENDOR

Vendor Name, Address and Telephone Number:

Reclaim Company LLC P.O. Box 2162 Fairmont, WV-26555 304-366-7070

FOR INFORMATION CONTACT THE BUYER

Crystal Rink (304) 558-2402 crystal.g.rink@wv.gov

Signature X

FEIN # 26-0627949

DATE 6/13/2018

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

Page: 1

FORM ID: WV-PRC-CRFQ-001

ADDITIONAL INFORMATION:

THE STATE OF WEST VIRGINIA PURCHASING DIVISION FOR THE AGENCY, WEST VIRGINIA HOMELAND SECURITY AND EMERGENCY MANAGEMENT, IS SOLICITING BIDS TO ESTABLISH A CONTRACT FOR FLOOD DEMOLITION AND RECLAMATION SERVICES PER THE ATTACHED DOCUMENTS.

INVOICE TO		SHIP TO	SHIP TO		
ACCOUNTING TECHNICIA	N 304-558-5380	ACCOUNTING TECHNICIA	AN 304-558-5380		
HOMELAND SECURITY & BLDG 1 RM EB80	EMERGENCY MANAGEMENT	HOMELAND SECURITY & BLDG 1 RM EB80	HOMELAND SECURITY & EMERGENCY MANAGEMENT BLDG 1 RM EB80		
1900 KANAWHA BLVD E		1900 KANAWHA BLVD E	1900 KANAWHA BLVD E		
CHARLESTON	WV25305-0360	CHARLESTON	WV 25305-0360		
us		us			

Line	Comm Ln Desc	Qty		Unit Issue	Unit Price	Total Price
1	DEMOLITION AND RECLAMATION		85			503,380.00

Comm Code	Manufacturer	Specification	Model #	
00000000				
1				

Extended Description:

DEMOLITION AND RECLAMATION

SCHEDULE OF EVENTS

<u>Line</u>	Event	Event Date
1	QUESTION DEADLINE 10AM EST	2018-06-04

REQUEST FOR QUOTATION CRFQ HSE1800000001 Demolition and Reclamation Services

EXHIBIT A - Pricing Page

CRFQ HSE1800000001

EXHIBIT A - Pricing Page

Item	Units	Description	Estimated Quantities	Unit Price	Total Price
001	Square Foot	Demolition and removal of Non-Foundational Homes. Line item includes removal of any personal property debris	16,000	6.25	100,000
002	Square Foot	Demolition and removal of Single and multistory Foundational Structures. Line Item includes removal of any personal property debris	26,000	16.08	257,280
003	Square Foot	Filling in of basements and Crawl Spaces and resecting	8,000	2.45	19,600
004	Per House	Inspection, sempling, testing and documenting of structures identified by the county for demolition. Line item includes inspection, sampling, testing and documentation of Personal Property Debris that have already been demolished.	16	50	8,800
005	Per House	Removal of asbestos containing material from identified structures, containment of the asbestos containing materials and transportation to an approved and properly fectured sanitary landfill. Line item includes asbestos removal, containment, and transportation of Personal property debris that have already been demolished.	16	5,100	81,600
006	Each	Filling in and scaling off of wells	В	1,250	10,000
007	Each	Removal of and filling in of old septic tanks	12	1,300	15,600
008	Each	Removal of Natural Gas or Puel Oil tanks used for heating.	5	2,100	10,500
			Total Bid Amount	=3	S 503,380

	Vender Information		
Company N			
Contract M.	steve Gabbert		
Address:	P.O Box, 2162, Fairmont, WV-26555		
- 58011			
Phone:	304-366-7070		
Fax:	304-816-0194		
Email:	sgabbert@reclaimco.com		
Authorized	Signature		

Subcontractor List Submission (Construction Contracts Only)

Bidder's N	lame:	Reclaim Company LLC	
X Ch	eck this	box if no subcontractors will n	erform more than \$25,000.00 of work to complete the
	oject.		
Subcontrac	tor Nam	е	License Number if Required by W. Va. Code § 21-11-1 et. seq.
	-		
-			
			92
	-		
		•	
L			

Attach additional pages if necessary

Rfw

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.

Angela Mitchell, Contract Administrator	
(Name, Title) Robert J Williams III President	
(Printed Name and Title) P.O Box 2162, Fairmont, WV-26555	
(Address) 304-366-7070 / 304-816-0194	
(Phone Number) / (Fax Number)	
amitchell@reclaimco.com	
(cmail 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.

Reclaim Company LLC	
(Company) President	
(Authorized Signature) (Representative Name, Title)	
Robert J Williams III President	
(Printed Name and Title of Authorized Representative)	-
6/13/18	
(Date)	
(304-366-7070) (304-816-0194)	
(Phone Number) (Fax Number)	

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ HSE1800000001

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 Keceived:	
(Check the box next to each addendum received	ed) Not Received any Addendum
Addendum No. 1 Addendum No. 2 Addendum No. 3	Addendum No. 6 Addendum No. 7 Addendum No. 8
Addendum No. 4	Addendum No. 9
Addendum No. 5	Addendum No. 10
I further understand that any verbal represents	t of addenda may be cause for rejection of this bid ation made or assumed to be made during any oral lives and any state personnel is not binding. Only the specifications by an official addendum is
Reclaim Company LLC	
Company	
Authorized Signature	
6/13/18	
Date	

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

West Virginia Ethics Commission



Disclosure of Interested Parties to Contracts

Pursuant to W. Va. Code § 6D-1-2, a state agency may not enter into a contract, or a series of related contracts, that has/have an actual or estimated value of \$100,000 or more until the business entity submits to the contracting state agency a Disclosure of Interested Parties to the applicable contract. In addition, the business entity awarded a contract is obligated to submit a supplemental Disclosure of Interested Parties reflecting any new or differing interested parties to the contract within 30 days following the completion or termination of the applicable contract.

For purposes of complying with these requirements, the following definitions apply:

"Business entity" means any entity recognized by law through which business is conducted, including a sole proprietorship, partnership or corporation.

"interested party" or "interested parties" means:

- (1) A business entity performing work or service pursuant to, or in furtherance of, the applicable contract, including specifically sub-contractors;
- (2) the person(s) who have an ownership interest equal to or greater than 25% in the business entity performing work or service pursuant to, or in furtherance of, the applicable contract. (This subdivision does not apply to a publicly traded company); and
- (3) the person or business entity, if any, that served as a compensated broker or intermediary to actively facilitate the applicable contract or negotiated the terms of the applicable contract with the state agency. (This subdivision does not apply to persons or business entities performing legal services related to the negotiation or drafting of the applicable contract.)

"State agency" means a board, commission, office, department or other agency in the executive, judicial or legislative branch of state government, including publicly funded institutions of higher education: Provided, that for purposes of W. Va. Code § 6D-1-2, the West Virginia Investment Management Board shall not be deemed a state agency nor subject to the requirements of that provision.

The contracting business entity must complete this form and submit it to the contracting state agency prior to contract award and to complete another form within 30 days of contract completion or termination.

This form was created by the State of West Virginia Ethics Commission, 210 Brooks Street, Suite 300, Charleston, WV 25301-1804. Telephone: (304)558-0664; fax: (304)558-2169; e-mail: ethics@wv.gov; vvebsite: www.dov.

West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Contracting Busine	ss Entity: Reclaim Company LLC	Address:	P.O Box 2162, Fairm	ont, WV-2 <u>6555</u>
Authorized Agent:	Robert J Williams III	Address:	P.O Box 2162, Fairmo	ont, WV-26555
Contract Number:	HSE1800000001	Contract Descrip	fLOOD DEMOLI	TION AND RECLAMATION
Governmental ager	cy awarding contract: Department	of administration purchasi	ng division, Charleton, W	<u> </u>
	is is a Supplemental Disclosure)C	
	erested Parties to the contract which bry below (attach additional pages		ably anticipated by th	e contracting business
	or other entities performing wo		he Contract	
	entity who owns 25% or more of none, otherwise list entity/individua	= -	ot applicable to pub	licly traded entities)
services related	entity that facilitated, or negot to the negotiation or drafting o none, otherwise list entity/individua	f the applicable cont		ract (excluding legal
Signature:	Software Man	Data Sign	ed: 6/13/2018	· · · · · · · · · · · · · · · · · · ·
Notary Verifica	tion			
State of West Virgin	nia	. County of Marion		:
Robert J Willisentily listed above, I penalty of perjury.			authorized agent of the in is being made und	e contracting business fer cath and under the
Taken, swom to and	subscribed before me this	linter 5	ine Control of the Co	2018
To be completed by State Received by State submitted to Et Governmental agent	tate Agency:	Notery Pt	iblic'i dignature	

NOTARY PUBLIC OFFICIAL SEAL WINTER SAPP
State of West Virginie
My Commission Expires
February 9, 2022
PO Bez 1754 Falmont, WV 26555

Revised October 7, 2017

State of West Virginia Purchasing Division

CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

in secondance with West Virginia Code § 21-1D-7b, no less than once per year, or upon completion of the project, every contractor shall provide a certified report to the public authority which let the contract. That report must include each of the liams identified below in the Required Report Content section.

Instructions: Vendor should complete this coversheet, attach it to the required report, and submit it to the appropriate location as follows: For contracts more than \$25,000, the report should be mailed to the West Virginia Purchasing Division at 2019 Washington Street East, Charleston, WV 25305. For contracts of \$25,000 or less, the vendor should mail the report to the public authority issuing the contract.

Contract ideatific	ention:												
Contract Number:	HSE1800000001												
Contract Purpose:	Demolition and reclamation services at various locations throughout the State of WV												
Agency Requestir	gency Requesting Work: HOMELAND SECURITY AND EMERGENCY MANAGEMENT												
information 21-10-6 w	Content: The attached report must include each box as an indication that the required informal indicating the education and training service to provided; ne laboratory certified by the United States Deportment performs the drug tests; umber of employees in connection with the con	ion has been included in the atlantad report. o the requirements of West Vinginia Code § artment of Health and Human Services or its											
	results for the following categories including the												
negative to (D) Rando	ests: (A) Pre-employment and new hires; (B) R	essonable suspicion; (C) Post-socidant; and											
Vendor Contact	lefernetiers												
Vendor Name:	Reclaim Company LLC	Vendor Telephona: 304-366-7070											
Vendor Address:	_P.O Box 2162	Vandar Fax: 304-816-0194											
	Fairmont,WV-26555	Vendor E-Mail: info@reclaimco.com											



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

STATE OF WEST VIRGINIA, COUNTY OF Marion , TO-WIT: I. Robert J Williams III , after being first duly sworn, depose and state as follows: Reclaim Company LLC 1. I am an employee of ___ ; and, (Company Name) I do hereby attest that Reclaim Company LLC 2. (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: Robert Williams III Signature: President Title: Company Name: Reclaim Company LLC Date: 6/13/18 2018 Taken, subscribed and sworn to before me this 13th day of June By Commission expires (Seal) NOTARY PUBLIC OFFICIAL SEAL WINTER SAPP State of West Virgin

Rev. July 7, 2017

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL CONTRACTS: 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, panalty, 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: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, 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: Reclaim Company LLC	
Authorized Signature:	Date: 6/13/18
State of West Virginia	
County of Marion to-wit:	
Taken, subscribed, and sworn to before me this 13thday	of June , 20 18 .
My Commission expires 292	
AFFIX SEAL HERE	NOTARY PUBLIC MANAGEMENT AND

Purchasing Affidavit (Revised 01/19/2018)

NOTARY PUBLIC OFFICIAL SEAL WINTER SAPP
State of West Virginia
My Commission Expires
February 9, 2022
PO Box 1754 Feirment, WV 26555

BID BOND --

	KNOW ALL MEN BY THE	SE PRESENTS, That we, the	underzigned, 🦰	Reclaim Co	mpany, LLC
	of Fairmont	West Virginia		, sa Principal	The Guarantee Company of North America USA
	of Southfield	7	corporation of	ganized and e	posting under the izwe of the State of
Michig	an with its principal	office in the City of Southfie	<u>ld</u>	, as Surety,	are held and firmly bound unto the State
of West \	/irginia, as Obligee, in the	penal sum of Five Percent of	Amount Bid	<u>(35%</u>) for the payment of which,
		•			ecutors, successors and assigns.
	No. of the Control of	ne university and a		•	mitted to the Purchasing Section of the
		amation, HSE180000000		a a barr nerec	of, to enter into a contract in writing for
110001	DOMESTIC TO COLO	111011, 11021000000			
		- W WW			
	NOW THEREFORE.				
	NOW MENERONE,				
	(a) If said bid shail bi (b) If said bid shail		المامة المام ا		t in accordance with the bid or proposal
attached the agree	hereto and shall furnish a sment created by the acce	my other bonds and insurance ptance of said bid, then this of	required by the digation shall be	bid or propos null and vok	sal, and shell in all other respects perform d, otherwise this obligation shall ramain in
		y understood and agreed that this obligation as herein stated		he Surety for	any and all claims hereunder shall, in no
20.000			•		
way imp		edension of the time within w			of said Surety and its bond shall be in no t such bid, and said Surety does hereby
	MITNERS the following e	ionatume and spale of Drincin	al and Gurahi a	warutad and	sealed by a proper officer of Principal and
		if Principal is an Individual, this			
outety, c	и од птински инимонацу (LEUCHE PERU INCINIONAL MIS	day or	-	, 20
Principal	Soal			Reclaim C	Company, LLC
1 Iumpu	0021				(Name of Principal)
				Ву	Sp Hotel
				(Mus	st be President, Vice President, pr
				~	Duly Authorized Agent)
					resident
					(Title)
Suraty S	eel			The Guara	ntee Company of North America USA
y v					(Name of Surety)
				1.1	- 11
				ILI	INALL A BUDILT
				Wendy A.	Bright Attorney-in-Fact

IMPORTANT — Surety executing bonds must be licensed in West Yirginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.



The Guarantee Company of North America USA Southfield, Michigan

POWER OF ATTORNEY

NOW ALL BY THESE PRESENTS: That THE GUARANTEE COMPANY OF NORTH AMERICA USA, a corporation organized and existing under the laws of the State of Michigan, having its principal office in Southfield, Michigan, does hereby constitute and appoint

Josephine M. Streyle, Barbara A. Leeper, Patti K. Lindsey, Jay Black, Brian F. Jeffe, Brian G. Hartman, Wendy A. Bright, Alexandra Machnik Seubert & Associates, Inc.

its true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise.

The execution of such instrument(s) in pursuance of these presents, shall be as binding upon THE GUARANTEE COMPANY OF NORTH AMERICA USA as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at the principal office.

The Power of Attorney is executed and may be certified so, and may be revoked, pursuant to and by authority of Article IX, Section 9.03 of the By-Laws adopted by the Board of Directors of **THE GUARANTEE COMPANY OF NORTH AMERICA USA** at a meeting held on the 31st day of December, 2003. The President, or any Vice President, acting with any Secretary or Assistant Secretary, shall have power and authority:

- 1. To appoint Attorney(s)-in-fact, and to authorize them to execute on behalf of the Company, and attach the Seal of the Company thereto, bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof; and
- 2. To revoke, at any time, any such Attorney-in-fact and revoke the authority given, except as provided below
- 3. In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and authority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.
- 4. In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

Further, this Power of Attorney is signed and sealed by facsimile pursuant to resolution of the Board of Directors of the Company adopted at a meeting duly called and held on the 6th day of December 2011, of which the following is a true excerpt:

RESOLVED that the signature of any authorized officer and the seal of the Company may be affixed by facsimile to any Power of Attorney or certification thereof authorizing the execution and delivery of any bond, undertaking, contracts of indemnity and other writings obligatory in the nature thereof, and such signature and seal when so used shall have the same force and effect as though manually affixed.

IN WITNESS WHEREOF, THE GUARANTEE COMPANY OF NORTH AMERICA USA has caused this instrument to be signed and its corporate seal to be affixed by its authorized officer, this 1st day of March, 2018.

The American

STATE OF MICHIGAN County of Oakland

Stephen C. Ruschak, President & Chief Operating Officer

THE GUARANTEE COMPANY OF NORTH AMERICA USA

State Checkut

Randall Musselman, Secretary

parametrum.

On this 1st day of March, 2018 before me came the individuals who executed the preceding instrument, to me personally known, and being by me duly sworn, said that each is the herein described and authorized officer of The Guarantee Company of North America USA, that the seal affixed to said instrument is the Corporate Seal of said Company; that the Corporate Seal and each signature were duly affixed by order of the Board of Directors of said Company.



Cynthia A. Takai Notary Public, State of Michigan County of Oakland

My Commission Expires February 27, 2024
Acting in Oakland County

IN WITNESS WHEREOF, I have hereunto set my hand at The Guarantee Company of North America USA offices the day and year above written

Cynthia a. Takai

I, Randall Musselman, Secretary of THE GUARANTEE COMPANY OF NORTH AMERICA USA, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by THE GUARANTEE COMPANY OF NORTH AMERICA USA, which is still in full force and effect.

CONTRACTOR CONTRACTOR OF THE PROPERTY OF THE P

IN WITNESS WHEREOF, I have thereunto set my hand and attached the seal of said Company this 14th day of June

paracefrume

2018

Randall Musselman, Secretary



Mr. Crystal Rink
DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON, WV-25305

RE: Vendor Preference

PROJECT: FLOOD DEMOLITION AND RECLAMATION(HSE1800000001)

Dear Mr. Crystal

Reclaim Company, LLC appreciates the opportunity to submit this proposal to the department of administration purchasing division, Charleton, WV for the project "FLOOD DEMOLITION AND RECLAMATION".

We are MBE/DBE certified demolition and asbestos abatement contractor located in Fairmont WV. As mentioned in specification (15. Vendor preferences) we would like to be the preferred local vendor for this project.

If you have any questions or additional information, Please contact us.

Sincerely,

Robert J, Williams III

President

<u>ri@reclaimco.com</u> or (304-366-7070)

200,8th street

Fairmont, WV-26555



WEST VIRGINIA CONTRACTOR LICENSING BOARD

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV042918

Classification:

GENERAL ENGINEERING SPECIALTY DEMOLITION

> RECLAIM COMPANY LLC DBA RECLAMATION COMPANY PO BOX 2162 FAIRMONT, WV 26555

Date Issued

Expiration Date

AUGUST 21, 2017

AUGUST 21, 2018

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.



State of West Virginia

Bureau for Public Health
Office of Environmental Health Services
Radiation, Toxics and Indoor Air Division

This is to certify that

P.O. Box 2162
Fairmont, WV 26555

Has complied with Chapter 16, Article 32, of the Asbestos Abatement Licensing
Rules and Regulations and is hereby licensed as an
Asbestos Contractor.

Asbestos Contractor Number:

AC002579

Issued: 12/19/2017 Expires: 12/31/2018

Walter M. Ivey, Director

Office of Environmental Health Services



WEST VIRGINIA DEPARTMENT OF TRANSPORTATION

Division of Highways

1900 Kanawha Boulevard East • Building Five • Room 618 Charleston, West Virginia 25305-0430 • (304) 558-3931

Thomas J. Smith, P. E. Secretary of Transportation/ Commissioner of Highways

February 1, 2018

Mr. Robert J. Williams Reclaim Company, LLC Post Office Box 2162 Fairmont, West Virginia 26555

Dear Mr. Williams:

Annual Update - DBE Certification

We are pleased to inform you that the documents your firm submitted have been reviewed and approved. Your firm will continue to be listed in the West Virginia Department of Transportation, Division of Highways Contractor's Proposals as a DBE firm certified under the provisions of 49 CFR Part 26.

Please be reminded that as a DBE you must inform this office, within thirty days and in writing, of any change in circumstances affecting your ability to meet size, disadvantaged status, ownership, or control requirements or any material change in the information provided in your application form. Failure to do so may result in removal of your DBE certification in accordance with 49 CFR Part 26, §26.83(j) of the Federal Regulation.

Should you have questions or require additional information, please do not hesitate to contact this office.

Sincerely

Drema L. Smith, Director

EEO Division

DLS:Mf

Client#: 1514322 RECLAICO

$ACORD_{\scriptscriptstyle{\square}}$

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/12/2018

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.

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and continuate account control any rights to the continuate holder in hear							
PRODUCER	CONTACT Denise A Deem						
USI Insurance Svcs MVB CL	PHONE (A/C, No, Ext): 304-381-3426 FAX (A/C, No): 304-3	81-3430					
48 Donley Street, Suite 703	E-MAIL ADDRESS: denise.deem@usi.com						
Morgantown, WV 26501	INSURER(S) AFFORDING COVERAGE	NAIC#					
304 598-5678	INSURER A : Crum & Forster Specialty Insurance Co.	44520					
INSURED	INSURER B : Motorists Mutual Insurance Company	14621					
Reclaim Company LLC PO Box 2162	INSURER C:						
	INSURER D:						
Fairmont, WV 26555	INSURER E :						
	INSURER F:						

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	SR TYPE OF INSURANCE			SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S		
Α	X	COMMERCIAL GENERAL LIABILITY			EPK123003	06/11/2018	06/11/2019	EACH OCCURRENCE	\$1,000,000		
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$250,000		
	Χ	Pollution Liability						MED EXP (Any one person)	\$25,000		
	X	Professional Liab						PERSONAL & ADV INJURY	\$1,000,000		
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000		
		POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000		
		OTHER:							\$		
В	AUT	OMOBILE LIABILITY			3330987470	06/11/2018	06/11/2019	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000		
	X	ANY AUTO						BODILY INJURY (Per person)	\$		
		OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident)	\$		
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
									\$		
Α		UMBRELLA LIAB OCCUR			EFX110835	06/11/2018	06/11/2019	EACH OCCURRENCE	\$5,000,000		
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$5,000,000		
		DED RETENTION \$							\$		
Α		RKERS COMPENSATION EMPLOYERS' LIABILITY			EPK123003	06/11/2018	06/11/2019	PER OTH- STATUTE ER			
	ANY	PROPRIETOR/PARTNER/EXECUTIVE T / N	N/A					E.L. EACH ACCIDENT	\$		
	(Mar	ndatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$		
		s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$		
В	Co	mmercial P			3330987470	06/11/2018	06/11/2019				

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

Evidence of Insurance

CERTIFICATE HOLDER	CANCELLATION			
For Bidding Purposes Only	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			
	Adria			
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/24/2017

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				CONTACT Robin Roberts						
WesBanco Insurance Services					NAME: RODIN RODERTS FAX (A/C, No, Ext): (304)234-6102 FAX (A					
2100 National Pd					E-MAIL		231 0200	(A/C, No):	(301)2.	31 0102
					ADDRE		HIDED(E) AFFOR	DINC COVERACE		NAIC#
Wh	eeling WV 26	5003	:		INCLIDE			utual Ins Co.		12372
INSU							ocieec M	ucuai ilis co.		12372
	CLAIM COMPANY LLC				INSURE					
	SWATER CAPITAL LLC				INSURE					
	BOX 2162				INSURE					
		5555			INSURE					
				NUMBER:17-18 WC I	INSURE Maste			REVISION NUMBER:		1
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INSR LTR	TYPE OF INSURANCE	ADDL	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	GENERAL LIABILITY							EACH OCCURRENCE	\$	
	COMMERCIAL GENERAL LIABILITY							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
	CLAIMS-MADE OCCUR							MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$	
								GENERAL AGGREGATE	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG	\$	
	POLICY PRO- JECT LOC								\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	ALL OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$	
	AUTOS AUTOS NON-OWNED AUTOS AUTOS							PROPERTY DAMAGE (Per accident)	\$	
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	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$	1							\$	
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							X WC STATU- TORY LIMITS OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$	1,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		WCB1008977		8/20/2017	8/20/2018	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
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A	USL&H			WCB1008977		08/20/2017	08/20/2018			,
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					AUTHO	RIZED REPRESE	NTATIVE			
						_ willi	- /DVD	Sand	W	in-

State of West Virginia

Bureau for Public Health
Office of Environmental Health Services
Radiation, Toxics and Indoor Air Division

This is to certify that

P.O. Box 2162
Fairmont, WV 26555

Has complied with Chapter 16, Article 32, of the Asbestos Abatement Licensing
Rules and Regulations and is hereby licensed as an
Asbestos Contractor.

Asbestos Contractor Number:

AC002579

Issued: 12/19/2017 Expires: 12/31/2018

Walter M. Ivey, Director

Office of Environmental Health Services



WEST VIRGINIA CONTRACTOR LICENSING BOARD

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV042918

Classification:

GENERAL ENGINEERING SPECIALTY DEMOLITION

> RECLAIM COMPANY LLC DBA RECLAMATION COMPANY PO BOX 2162 FAIRMONT, WV 26555

Date Issued

Expiration Date

AUGUST 21, 2017

AUGUST 21, 2018

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.





WEST VIRGINIA DEPARTMENT OF TRANSPORTATION

Division of Highways

1900 Kanawha Boulevard East • Building Five • Room 618 Charleston, West Virginia 25305-0430 • (304) 558-3931

Thomas J. Smith, P. E. Secretary of Transportation/ Commissioner of Highways

February 1, 2018

Mr. Robert J. Williams Reclaim Company, LLC Post Office Box 2162 Fairmont, West Virginia 26555

Dear Mr. Williams:

Annual Update - DBE Certification

We are pleased to inform you that the documents your firm submitted have been reviewed and approved. Your firm will continue to be listed in the West Virginia Department of Transportation, Division of Highways Contractor's Proposals as a DBE firm certified under the provisions of 49 CFR Part 26.

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Sincerely

Drema L. Smith, Director

EEO Division

DLS:Mf