



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

State of West Virginia  
 Request for Quotation  
 09 - Construction

Proc Folder: 350107

Doc Description: Addendum No.01, ELEVATOR INSPECTION MAINTENANCE SERVICE

Proc Type: Central Master Agreement

Date issued	Solicitation Closes	Solicitation No	Version
2017-07-19	2017-08-01 13:30:00	CRFQ 0613 VNF1800000002	2

**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:

08/01/17 10:18:07  
 WV Purchasing Division

**FOR INFORMATION CONTACT THE BUYER**

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

Signature X

FEIN #

45-5260236

DATE

7/30/17

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

**ADDITIONAL INFORMATION:**

**Addendum**

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

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**Request for Quotation  
Elevator Maintenance**

The West Virginia Purchasing Division is soliciting bids on behalf of the Agency, the WV Veterans Nursing Facility to establish an open-end contract for Elevator Maintenance at the Agency location Freedoms Way, Clarksburg, WV. 26301. per the bid requirements, specifications and terms and conditions that are apart of the solicitation as attached hereto.

INVOICE TO		SHIP TO	
DIVISION OF VETERANS AFFAIRS 1 FREEDOMS WAY		DIVISION OF VETERANS AFFAIRS 1 FREEDOMS WAY	
CLARKSBURG	WV26301	CLARKSBURG	WV 26301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Elevator Inspection				

Comm Code	Manufacturer	Specification	Model #
72101506			

**Extended Description :**

Vendor is to enter their Total Bid Amount from Exhibit C Pricing Page in the wvOASIS Commodity line. And submit all required documents before bid opening.

Vendor is to submit Pricing Page along with required information with their submitted response.

VNF1800000002	<b>Document Phase</b> Final	<b>Document Description</b> Addendum No.01, ELEVATOR INSPECTION MAINTENANCE SERVICE	<b>Page 3</b> <b>of 3</b>
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

**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. If an apparent low bidder fails to submit a license number in accordance with this section, the Purchasing Division will promptly request by telephone and electronic mail that the low bidder and the second low bidder provide the license number within one business day of the request. Failure of the bidder to provide the license number within one business day of receiving the request shall result in disqualification of the bid. Vendors should include a contractor's license number in the space provided below.

Contractor's Name: West Virginia Elevator LLC.  
 Contractor's License No.: WV- 049746

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a contract 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 an affidavit that the Vendor has a written plan for a drug-free workplace policy. If the affidavit is not submitted with the bid submission, the Purchasing Division shall promptly request by telephone and electronic mail that the low bidder and second low bidder provide the affidavit within one business day of the request. Failure to submit the affidavit within one business day of receiving the request shall result in disqualification of the bid. To comply with this law, Vendor should complete the enclosed drug-free workplace affidavit and submit the same with its bid. Failure to submit the signed and notarized drugfree workplace affidavit or a similar affidavit that fully complies with the requirements of the applicable code, within one business day of being requested to do so 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.



**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.

  
 (Name, Title) \_\_\_\_\_  
 Dustin Bozch - Manager  
 (Printed Name and Title) \_\_\_\_\_  
 Po Box 57 Amma, WV 25005  
 (Address) \_\_\_\_\_  
 304-881-1383 / 304-381-4444  
 (Phone Number) / (Fax Number) \_\_\_\_\_  
 Wvelevator@gmail.com  
 (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.

West Virginia Elevator, LLC  
 (Company) \_\_\_\_\_

  
 (Authorized Signature) (Representative Name, Title) \_\_\_\_\_

Dustin Bozch  
 (Printed Name and Title of Authorized Representative) \_\_\_\_\_

7/30/17  
 (Date) \_\_\_\_\_

304-881-1383 / 304-381-4444  
 (Phone Number) (Fax Number) \_\_\_\_\_

ADDENDUM ACKNOWLEDGEMENT FORM  
SOLICITATION NO.:

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- |  |  |
|--|--|
| <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.

West Virginia Elevator, LLC.  
Company

[Signature]  
Authorized Signature

7/30/17  
Date

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

**SOLICITATION NUMBER:** CRFQ 00613 VNF1800000002

**Addendum Number:** No.01

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The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

**Applicable Addendum Category:**

- ] Modify bid opening date and time
- ] Modify specifications of product or service being sought
- ] Attachment of vendor questions and responses
- ] Attachment of pre-bid sign-in sheet
- ] Correction of error
- ] Other

**Description of Modification to Solicitation:**

Addendum issued to publish and distribute the attached documentation to the vendor community.

1. Publish Pre-Bid sign in sheet

No other Changes.

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

**Terms and Conditions:**

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.



# ATTACHMENT A

**SIGN IN SHEET**

Request for Proposal No. CRFQ 18k2

PLEASE PRINT

Date: 7/19/17

Elevator Maintenance

\* PLEASE BE SURE TO PRINT LEGIBLY - IF POSSIBLE, LEAVE A BUSINESS CARD

FIRM & REPRESENTATIVE NAME	MAILING ADDRESS	TELEPHONE & FAX NUMBERS
Company: <u>WV ELEVATOR</u>	<u>Po Box 57</u>	PHONE <u>304 881 1383</u>
Rep: <u>T.J. ROWE</u>	<u>Amma, WV 25005</u>	TOLL
Email Address: <u>Sales@wvelevator.com</u>		FREE
		FAX <u>304 381 444</u>
Company: <u>WVVE</u>	<u>One Freedom's Way</u>	PHONE <u>304-626-1600</u>
Rep: <u>Sherri A Reed</u>	<u>Clarksburg WV 26301</u>	TOLL
Email Address: <u>Sherri.A.Reed@WV.gov</u>		FREE
		FAX
Company: <u>WVVE</u>		PHONE <u>304-626-1600</u>
Rep: <u>Rich Parker</u>		TOLL
Email Address: _____		FREE
		FAX
Company: _____		PHONE
Rep: _____		TOLL
Email <u>West Virginia Elevator, LLC</u>		FREE
Comp <u>Dustin Bozek</u> <u>Sales Manager</u>		FAX
Rep: <u>P.O. Box 57</u> <u>Amma, WV 25005</u>		PHONE
Em: <u>Phone: (304) 881-1383</u> <u>Fax: (304) 381-4444</u> <u>Cell: (304) 550-9285</u> <u>Email: sales@wvelevator.com</u>		TOLL
		FREE
		FAX



**West Virginia Elevator, LLC**  
 Dustin Bozek  
 Sales Manager  
 P.O. Box 57  
 Amma, WV 25005  
 Phone: (304) 881-1383  
 Fax: (304) 381-4444  
 Cell: (304) 550-9285  
 Email: sales@wvelevator.com  
 Website: www.wvelevator.com

REQUEST FOR QUOTATION  
Elevator Maintenance

- 11.2.1 Cancellation of the Contract.
- 11.2.2 Cancellation of one or more release orders issued under this Contract.
- 11.2.3 Any other remedies available in law or equity.
- 11.3 Agency reserves the right to inspect the Elevator Maintenance to ensure that Vendor's performance is in compliance with this Contract. If Agency determines that Vendor has failed to perform in accordance with this Contract, Agency may demand that the Vendor immediately remedy the failure or consider the failure to be a default. Vendor's failure to remedy the deficient performance, if given the opportunity to do so, shall be considered a default.

12. MISCELLANEOUS:

- 12.1 **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: Dustin Borell  
Telephone Number: 304-881-1383  
Fax Number: 304-381-4444  
Email Address: WV.elevator@gmail.com

REQUEST FOR QUOTATION  
Elevator Maintenance

EXHIBIT C - PRICING PAGE

A - Preventive Maintenance:

Monthly Charge	x	12 months	=	Total Yearly Charge
\$ <u>675.<sup>00</sup></u>	x	12	=	\$ <u>8,100.<sup>00</sup></u>

B - Corrective Maintenance:

Hourly Labor Rate	x	Estimated Hours	=	Total Labor Cost
\$ <u>200.<sup>00</sup></u>	x	200	=	\$ <u>40,000.<sup>00</sup></u>

<u>C - Estimated Parts Cost</u>	x	Multiplier	=	Total Parts Cost
\$10,000.00	x	<u>1.2</u>	=	\$ <u>12,000.<sup>00</sup></u>

Total Bid Amount \* \$ 60,100.<sup>00</sup>

\* Total Bid Amount is calculated by adding the Total Yearly Cost, Total Labor Cost, and the Total Parts Cost.



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

STATE OF WEST VIRGINIA,

COUNTY OF ROANE, TO-WIT:

I, CHRISTOPHER BRADLEY, after being first duly sworn, depose and state as follows:

1. I am an employee of WEST VIRGINIA ELEVATOR LLC; and,  
(Company Name)

2. I do hereby attest that WEST VIRGINIA ELEVATOR LLC  
(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: CHRISTOPHER J BRADLEY

Signature: [Handwritten Signature]

Title: MEMBER

Company Name: WEST VIRGINIA ELEVATOR LLC

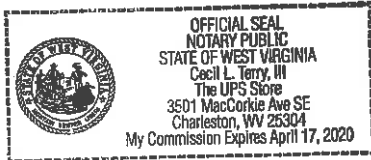
Date: 8-1-17

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

By Commission expires 4/17/2020

(Seal)

[Handwritten Signature]  
(Notary Public)



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 OTHER 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, 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 § 23-20-2, 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: (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: WEST VIRGINIA ELEVATOR LLC

Authorized Signature: [Signature] Date: 8-1-17

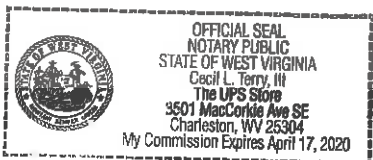
State of WV

County of Kanawha, to-wit:

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

My Commission expires 4/17, 2020

**AFFIX SEAL HERE**



**NOTARY PUBLIC**

[Signature]  
Purchasing Affidavit (Revised 07/07/2017)

**BID BOND**

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, West Virginia Elevator, LLC  
of Amma, WV, as Principal, and The Cincinnati Insurance Company  
of Cincinnati, OH, a corporation organized and existing under the laws of the State of  
OH 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 of Amount Bid (\$ 5%) 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  
Elevator Inspection Maintenance Service VA Nursing Center 1 Freedom Way Clarksburg WV 26301 - According to  
Plans and Specifications

**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 1st day of August, 2017.

Principal Seal

West Virginia Elevator, LLC  
(Name of Principal)

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

Manager  
(Title)

Surety Seal

The Cincinnati Insurance Company  
(Name of Surety)

By:   
Kimberly J. Wilkinson, WV Resident Agent 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.**

THE CINCINNATI INSURANCE COMPANY

Fairfield, Ohio

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That THE CINCINNATI INSURANCE COMPANY, a corporation organized under the laws of the State of Ohio, and having its principal office in the City of Fairfield, Ohio, does hereby constitute and appoint

Gregory T. Gordon; Patricia A. Moye and/or Kimberly Wilkinson

of Charleston, West Virginia its true and lawful Attorney(s)-in-Fact to sign, execute, seal and deliver on its behalf as Surety, and as its act and deed, any and all bonds, policies, undertakings, or other like instruments, as follows:

Any such obligations in the United States, up to Fifty Million and No/100 Dollars (50,000,000.00).

This appointment is made under and by authority of the following resolution passed by the Board of Directors of said Company at a meeting held in the principal office of the Company, a quorum being present and voting, on the 6th day of December, 1958, which resolution is still in effect:

"RESOLVED, that the President or any Vice President be hereby authorized, and empowered to appoint Attorneys-in-Fact of the Company to execute any and all bonds, policies, undertakings, or other like instruments on behalf of the Corporation, and may authorize any officer or any such Attorney-in-Fact to affix the corporate seal, and may with or without cause modify or revoke any such appointment or authority. Any such writings so executed by such Attorneys-in-Fact shall be binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company."

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company at a meeting duly called and held on the 7th day of December, 1973.

"RESOLVED, that the signature of the President or a Vice President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Secretary or Assistant Secretary and the seal of the Company may be affixed by facsimile to any certificate of any such power and any such power of certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certified by certificate so executed and sealed shall, with respect to any bond or undertaking to which it is attached, continue to be valid and binding on the Company."

IN WITNESS WHEREOF, THE CINCINNATI INSURANCE COMPANY has caused these presents to be sealed with its corporate seal, duly attested by its Vice President this 1st day of October, 2015.



THE CINCINNATI INSURANCE COMPANY

Signature of Stephen A. Justice

Vice President

STATE OF OHIO ) ss:
COUNTY OF BUTLER )

On this 1st day of October 2015, before me came the above-named Vice President of THE CINCINNATI INSURANCE COMPANY, to me personally known to be the officer described herein, and acknowledged that the seal affixed to the preceding instrument is the corporate seal of said Company and the corporate seal and the signature of the officer were duly affixed and subscribed to said instrument by the authority and direction of said corporation.



Signature of Mark J. Huller

MARK J. HULLER, Attorney at Law
NOTARY PUBLIC - STATE OF OHIO
My commission has no expiration date. Section 147.03 O.R.C.

I, the undersigned Secretary or Assistant Secretary of THE CINCINNATI INSURANCE COMPANY, hereby certify that the above is a true and correct copy of the Original Power of Attorney issued by said Company, and do hereby further certify that the said Power of Attorney is still in full force and effect.

GIVEN under my hand and seal of said Company at Fairfield, Ohio, this 1st day of August 2017

Signature of Scott R. Bobb

Secretary

