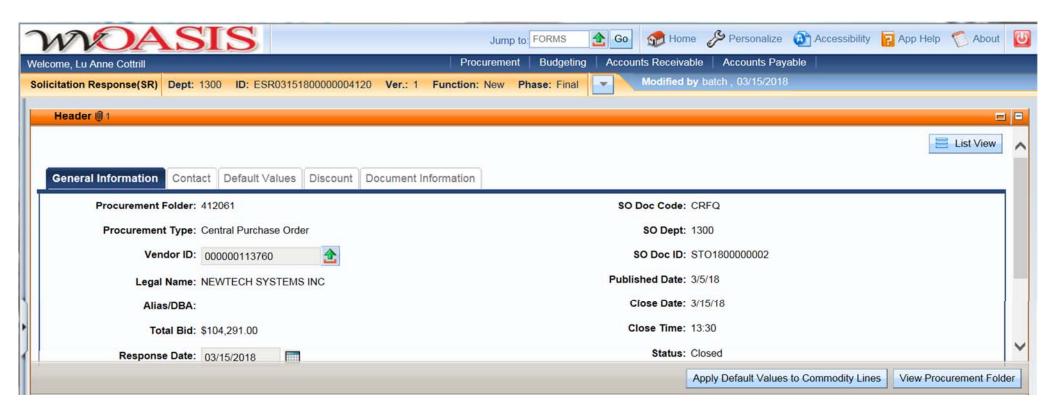
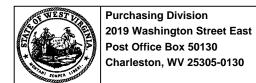


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

Bid Fax: 304-558-3970

The following documentation is an electronicallysubmitted 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: 412061

Solicitation Description : Addendum Burglary/Access Control for State Treasurer

Proc Type: Central Purchase Order

Date issued	Solicitation Closes	Solicitation Response	Version
	2018-03-15 13:30:00	SR 1300 ESR03151800000004120	1

VENDOR

000000113760

NEWTECH SYSTEMS INC

Solicitation Number: CRFQ 1300 STO1800000002

Total Bid: \$104,291.00 **Response Date:** 2018-03-15 **Response Time:** 11:06:54

Comments:

FOR INFORMATION CONTACT THE BUYER

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

Signature on File FEIN # DATE

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

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

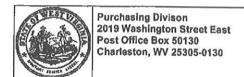
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Security or access control systems for State Treasure	1.00000	LS	\$104,291.000000	\$104,291.00

Comm Code	Manufacturer	Specification	Model #	
46171619				

Extended Description:

"Vendor submitted bid response must include as an attachment a completed Exhibit A - Pricing Page."

If submitting through wvOASIS enter Total Bid Amount on OASIS Commodity Line.



State of West Virginia Request for Quotation 09 — Construction

Proc Folder: 412061

Doc Description: Addendum Burglary/Access Control for State Treasurer

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2018-03-05	2018-03-15 13:30:00	CRFQ 1300 STO1800000002	3

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION 2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

- Morch

Vendor Name, Address and Telephone Number:

Newtech SYSTEMS iNC. 420 16TH STREET DUNBAR WV 25063 304-7660000 FAX 304-766-0003

FOR INFORMATION CONTACT THE BUYER

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

Signature X

FEIN#

DATE

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

Addendum

Addendum No.02 issued to publish and distribute the attached information to the vendor community.

Request for Quotation

The West Virginia Purchasing Division is soliciting bids on behalf of the agency, The West Virginia State Treasurer's Office ("STO") to establish a construction contract for the one-time purchase and installation of the following:

A commercially rated comprehensive Physical Access Control System, and Burglary Intrusion Alert Detection for three (3) locations which are in close proximity of each other in Charleston, WV. per the Bid Requirements, Specifications and Terms and Conditions that apart of the solicitation and attached hereto.

THE BOOK OF THE PARTY.			
WEST VIRGINIA STATE TO 322 70TH ST SE	REASURERS OFFICE	STATE OF WEST VII VARIOUS LOCATION	RGINIA NS AS INDICATED BY ORDER
CHARLESTON	WV25304	No City	WV 99999
US		US	

Line Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
Security or access control systems for State Treasure	1.00000	LS	\$ 10	4291 00

Comm Code	Manufacturer	Specification	Model #	
46171619			THE COLUMN TO TH	

Extended Description:

"Vendor submitted bid response must include as an attachment a completed Exhibit A - Pricing Page."

If submitting through wvOASIS enter Total Bid Amount on OASIS Commodity Line.

SOLICITATION NUMBER: CRFQ 1300 STO1800000002 Addendum Number: No.02

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

Description of Modification to Solicitation:

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

1. Publish and distribute Vendor submitted questions and Agency responses.

No other Changes.

Other

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

CRFQ STO1800000002 Security Access Project Vendor Submitted Questions and Agency Responses 03/05/2018

- 1. Can you confirm that the existing access control system is Kantech?
 - A. From our research it seems the system is a DSC Maxsys based system
- 2. Can you confirm the software version currently being used?
 - A. We currently do not use any software. All card entries or deletions are done via keypads
- 3. Can you confirm that the existing software is Entrapass corporate edition by Kantech?
 - A. We do not use any computer based software.

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)

٢	1	Addendum No. 1	ſ	ī	Addendum No. 6
-	•	110. 1	L	1	Addendum No. 6
['	/]	Addendum No. 2	Ĺ]	Addendum No. 7
[`	/]	Addendum No. 3	[]	Addendum No. 8
[]	Addendum No. 4]]	Addendum No. 9
[]	Addendum No. 5	[]	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.

Company
Authorized Signature
3-/5-20/8
Date

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

Revised 6/8/2012

State of West Virginia Purchasing Division

CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

In accordance 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 items identified below in the Required Report Content section.

<u>Instructions:</u> 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 Ident	fication:					
Contract Number	er:					
Agency Reques	sting Work:					
Required Repo	rt Content: The attached report must inclich box as an indication that the required in	ude each of the items listed below. The vendor formation has been included in the attached report.				
☐ Information		rvice to the requirements of West Virginia Code §				
☐ Name of successo	the laboratory certified by the United State r that performs the drug tests;	s Department of Health and Human Services or its				
☐ Average i	number of employees in connection with th	ne construction on the public improvement;				
Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.						
Vendor Contact	Information:					
Vendor Name:	Newtech Systems Inc.	Vendor Telephone: 304-766-0000				
Vendor Address:	420 16th Street	Vendor Fax: 304-766-0003				
	Dunbar WV 25064	Vendor E-Mail: jhatfield@newtech-sys.com				

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:	vtech Systems Inc.	
Contractor's License No.: V	VV- wv0420038	

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.

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 rece	rived)
 ✓ Addendum No. 1 ✓ Addendum No. 2 ✓ Addendum No. 3 ✓ Addendum No. 4 ✓ Addendum No. 5 	☐ Addendum No. 6 ☐ Addendum No. 7 ☐ Addendum No. 8 ☐ Addendum No. 9 ☐ Addendum No. 10
discussion held between Vendor's representa	pt of addenda may be cause for rejection of this bid. tation made or assumed to be made during any oral tives and any state personnel is not binding. Only the specifications by an official addendum is
✓ Newtech Systems INC.	
Company	
Nota (In)	
Authorized Signature	
03-15-2018	
Date	
NOTE: This addendum colon at 1	

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

REQUEST FOR QUOTATION Physical Access Control & Burglary Intrusion Alert Detection

12.3 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 Manage	Joseph Chapman	
Telephone Numbe	(Printed Name) 304-766-0000	
Fax Number:	304-766-0003	
Email Address: _	jchapman@newtech-sys.com	-

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 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

"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: Newtech Systems Inc. Authorized Signature: Date: Date: O3-15-2018 State of West Virginia County of Cabell to-wit: Taken, subscribed, and swom to before me this day of March 2018. My Commission expires Sebruary 02, 2017. AFFIX SEAL HERE OFFICIAL SEAL NOTARY PUBLIC And Communication of Cabell Seal Notary Public, State Of West Virginia JOSEPH CHAPMAN Purchasing Affidavit (Revised 01/19/2018)

RR 1 Box 369 LeSage, WV 25537 My Commission Expires February 02, 2022

West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Contracting Busine	ess Entity: Newtech Sys	stem Inc.	Address: _	420 16th Stre	et Dunbar, W	V 25064
Authorized Agent:	Jeremy Hatfield		Address:	420 16th Stree	et Dunabr Wv	25064
Contract Number:	STO 1800000002		Contract Descripti	Security	Access	
Governmental agen	cy awarding contract:	Departme	nt of State Treasuer	JII,		
	is is a Supplemental Dis					
List the Names of Inte	erested Parties to the contr ory below (attach additional	ract which a	e known or reasonab ecessary):	ly anticipated b	y the contracti	ng busines:
1. Subcontractors ☐ Check here if n	or other entitles perform one, otherwise list entity/i	ning work o individual na	r service under the mes below.	Contract		
2. Any person or ea	ntity who owns 25% or n one, otherwise list entity/ii	nore of con	tracting entity (not mes below.	applicable to	oublicly trade	d entities)
SCI VICES I CIALCU	entity that facilitated, or to the negotiation or dra one, otherwise list entity/in	ming of the	applicable contract	applicable co) 03-15-2018	entract (exclu	ding legal
Notary Verificati						
State of West	Virginia	. Coi	inty of Callel	1		
	Winginia ng duly sworn, acknowled					
Taken, sworn to and st	ubscribed before me this	15 Ars	and Church	ah .	, 2012	?
To be completed by State Received by State Date submitted to Ethic	State Agency:	0	Notary Publics	Signature		

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the u	undersigned, Newtech Systems, Inc.
of Ashland, Kentucky	undersigned, Newtech Systems, Inc, as Principal, and Fair American Insurance and Reinsurance Company corporation organized and existing under the laws of the State of
New York with its principal office in the City of Atlanta, C	GA, as Surety, are held and firmly bound unto the State dred Fifty and No/100 (\$ 9,650.00) for the payment of which,
The Condition of the above obligation is such that whereat Department of Administration a certain bid or proposal, attached he WV State Treasurers Office Security and Access Control Charleston, WV	as the Principal has submitted to the Purchasing Section of the ereto and made a part hereof, to enter into a contract in writing for
hereto and shall furnish any other bonds and insurance required by agreement created by the acceptance of said bid, then this obligatiforce and effect. It is expressly understood and agreed that the lial exceed the penal amount of this obligation as herein stated. The Surety, for the value received, hereby stipulates and way impaired or affected by any extension of the time within which waive notice of any such extension.	ion shall be null and void, otherwise this obligation shall remain in full bility of the Surety for any and all claims hereunder shall, in no event, agrees that the obligations of said Surety and its bond shall be in no the Obligee may accept such bid, and said Surety does hereby sunto set their hands and seals, and such of them as are corporations
Principal Corporate Seal	Newtech Systems, Inc. (Name of Principal) By Madda (Must be President or Vice President) PRESIDENT (Title)
Surety Corporate Seal	Fair American Insurance and Reinsurance Company (Name of Surety) Attorney-in-Fact

Attorney-in-Fact David R. Brett

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance. Raised corporate seals must be affixed, a power of attorney must be attached.

FAIR AMERICAN INSURANCE AND REINSURANCE COMPANY One Liberty Plaza, 165 Broadway, New York, NY 10006 **POWER OF ATTORNEY**

Know all men by these Presents, that Fair American Insurance and Reinsurance Company ("Company"), a New York corporation, had made, constituted and appointed, and by these presents does make, constitute and appoint, Andrew C. Heaner of Atlanta, Georgia; Stefan E. Tauger of Parker, Colorado; Arthur S. Johnson of Atlanta, Georgia; James E. Feldner of West Lake, Ohio; Jeffery L. Booth of Blacklick, Ohio; Melanie J. Stokes of Atlanta, Georgia; David R. Brett of Columbia, South Carolina; Scott E. Stoltzner of Birmingham, Alabama; Patricia E. Martin of Lutz, Florida; Jason S. Centrella of Jacksonville, Florida; Kelley E.M. Nys of Decatur, Georgia; Michael K. Thompson of Atlanta, GA; or Brian Clark of Charlotte, North Carolina EACH as its true and lawful attorney-in-fact to sign, execute, seal, deliver for, and on behalf of the said Company, and as its act and deed any place in the United States any and all surety, bonds, undertakings, recognizances and contracts of suretyship to be given to all obligees provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount of the sum of \$5,000,000 (Five Million Dollars), any single instance. Provided, however, that this power of attorney limits the acts of those named herein; and they shall have no authority to bind the Company except in the manner stated and to the extent of any limitation herein.

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolutions adopted pursuant to due authorization by the Board of Directors of the Company on the 2nd day of February, 2016.

RESOLVED, that the President, Chairman, or any Senior Vice President or Vice President of the Company, in conjunction with any Senior Vice President or Vice President, be, and that each or any of them hereby is, authorized to appoint Attorneys-in-fact of the Company as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all bonds, undertakings, recognizances, contracts of suretyship and other surety obligations. Such Attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the President and attested by the Secretary.

FURTHER RESOLVED, that any and all Powers of Attorney and Certified Copies of such Powers of Attorney and certification in respect thereto, granted and executed by the President or Senior Vice President, in conjunction with any Senior Vice President or Vice President of the Company, shall be binding on the Company to the same extent as if all signatures therein were manually affixed, even though one or more of any such signatures thereon may be facsimile.

IN WITNESS WHEREOF, the Company has caused its official seal to be hereto affixed, and these presents to be sealed with its corporate seal and duly attested to by these Senior Vice Presidents this 22nd day of February, 2016.

STATE OF NEW YOR

COUNTY of NEW YORK

Fair American Insurance and Reinsurance Company

Christopher O'Gwen, Senior Vice President

By: Spane A. Spantidos, Senior Vice President

On February 22, 2016 before me, the above named Senior Vice Presidents, personally appeared, who proved to me on the basis of satisfactory evidence to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, that they know the seal of Fair American Insurance and Reinsurance Company, and that their signatures and the seals of Fair American Insurance and Reinsurance Company were duly affixed and subscribed to said instrument by the authority and direction of the Company. I certify under PENALTY OF PERJURY under the laws of the State of New York that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature (Seal)

KEN T YAPP NOTARY PUBLIC STATE OF NEW YORK **NEW YORK COUNTY** LIC. #02YA6296526 COMM. EXP. FEBRUARY 3, 2018

I, Christopher O'Gwen, the undersigned, an Officer of Fair American Insurance and Reinsurance Company, a New York Corporation, DO HEREBY CERTIFY that the foregoing and attached Power of Attorney is a true and correct copy of the original power of attorney, and do hereby further certify that the said Powers are still in force and effect.

Signed and sealed at the City of New York. Dated the 15th day of March

2018

Bond # BND1005557-00

Christopher O'Gwen, Senior Vice President

No. 1462

Fair American Insurance and Reinsurance Company 165 Broadway, New York, NY 10006

NAIC Company Code: 35157 NAIC Group Code: 0501

Statutory Financial Statement Summary As of December 31, 2016

Bonds: Assets		-
Stocks:	\$	191,355,676
	\$	
Cash & Short-term Investments:	\$	7,494,393
Receivable for Securities:	\$	19,249
Investment Income Due & Accrued:	\$	1,461,735
Uncollected Premium & Agents Balances in Course of Collection:	\$	3,741,132
Amounts Recoverable from Reinsurers:	\$	1,470,554
Other Assets:		
Current Federal & Foreign Income Tax Recoverable:	ć	
Receivables from Parent, subsidiaries and affiliates:	\$ \$	•
Aggregate Write-ins for other than invested assets:	\$	- 52,323
Total NET Admitted Assets:	\$	205,595,062
Liabilities		
Reserves for:		
a) Losses & LAE:	\$	E E20 200
b) Unearned Premiums:		5,529,390
c) Tax, Licenses & Fees:	\$	1,823,769
Reinsurance Payables:	\$	1,050,991
Other Liabilities:	\$	5,427,511
otal Liabilities:	\$	4,095,544
otal Labilities,	\$	17,927,205
olicyholder Surplus		
Common Stock:	\$	5,000,000
iross Pald-in & Contributed Surplus:	\$	88,227,719
Inassigned funds:	\$	95,691,901
ggregate Write-ins for other than special surplus funds	Š	(1,251,763)
otal Policyholder Surplus	\$	187,667,857
otal Liabilities & Policyholder Surplus	\$	205 505 652
		205,595,062

CERTIFICATION:

I, Matthew D. Mahoney, Senior Vice President and Chief Financial Officer of FAIR AMERICAN INSURANCE AND REINSURANCE COMPANY, certify that the foregoing is a fair statement of Assets, Liabilities, Surplus and Other Funds of this Company, at the close of business, December 31, 2016 as reflected by its books and records and as reported in its statement on file with the Insurance Department of the State of New York.

NOTARIZED

AM E- En 1 H GREGG EANI ENGLICIPATI

State of New York County of New York on

Gregote MPEnglish Skit

Commission Expires November 28, 2020

Matthew D. Mahoney, SVP and Chief Financial Officer

FAIR AMERICAN INSURANCE AND REINSURANCE COMPANY



WEST VIRGINIA CONTRACTOR LICENSING BOARD

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV042038

Classification:

LOW VOLTAGE SYSTEMS

NEWTECH SYSTEMS INC DBA NEWTECH SYSTEMS INC 1850 DALTON AVENUE ASHLAND, KY 41102

Date Issued

Expiration Date

FEBRUARY 26, 2018

FEBRUARY 26, 2019

Peny) Madde

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.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/1/2017

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 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).

COVERACES	OFFICIONES NUMBER 2015 2016					
Ashland KY	41102	INSURER F:				
		INSURER E:				
1850 Dalton Avenue		INSURER D:				
		INSURER C:				
Newtech Systems, Inc.		INSURER B:DIICKSCLEEC MUCUAI Insurar	ice 12372			
INSURED		INSURER B:BrickStreet Mutual Insurar	*			
Huntington WV	25728	INSURER A: Westfield Insurance Company				
P O Box 2966	17	INSURER(S) AFFORDING COVERAGE	NAIC #			
		E-MAIL ADDRESS: jconley@thornburgagency.com	m.			
2519 3rd Ave	A CONTRACTOR OF THE CONTRACTOR	(A/C, No, Ext): (A/C, No): (A/C, No):				
THORNBURG INSURANCE AGENCY INC			FAX (A/C, No): (304)697-7699			
PRODUCER		CONTACT Joanna Conley				

COVERAGES

CERTIFICATE NUMBER:2017-2018

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.

TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMIT	s	
X COMMERCIAL GENERAL LIABILITY				111111111111111111111111111111111111111	(annabb) (fill)	EACH OCCURRENCE	\$	1,000,000
CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	50,000
X OH Stop Gap			CMM8049045	7/1/2017	7/1/2018	MED EXP (Any one person)	\$	10,000
						PERSONAL & ADV INJURY	\$	1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
POLICY X PRO-						PRODUCTS - COMP/OP AGG	\$	2,000,000
OTHER:						Employee Benefits	\$	2,000,000
AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
X ANY AUTO						BODILY INJURY (Per person)	\$	
A AUTOS A AUTOS			CMM8049045	7/1/2017	7/1/2018	BODILY INJURY (Per accident)	\$	
X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
						Uninsured motorist combined	\$	1,000,000
OCCUR						EACH OCCURRENCE	\$	10,000,000
EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	10,000,000
DED RETENTION \$			CMM8049045	7/1/2017	7/1/2018		\$	
AND EMPLOYEDELLIADILITY						X PER OTH- STATUTE ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$	1,000,000
(Mandatory in NH)			WCB1025341	7/1/2017	7/1/2018	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
Equipment Rented/Leased			CMM8049045	7/1/2017	7/1/2018			\$50,000
Installation Floater			CMM8049045	7/1/2017	7/1/2018	\$600,000		
100000000000000000000000000000000000000	CLAIMS-MADE X OCCUR X OH Stop Gap GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- OTHER: AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS X HIRED AUTOS X HIRED AUTOS X HORED CLAIMS-MADE EXCESS LIAB WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Equipment Rented/Leased	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X OH Stop Gap GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- OTHER: AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS X HIRED AUTOS X HIRED AUTOS X HIRED AUTOS X CLAIMS-MADE DED RETENTION S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Equipment Rented/Leased	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X OH Stop Gap GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- OTHER: AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED X AUTOS X HIRED AUTOS X AUTOS X HIRED AUTOS X AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE EXCESS LIAB CLAIMS-MADE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Equipment Rented/Leased	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X OH Stop Gap CMM8049045 GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- OTHER: AUTOMOBILE LIABILITY X ANY AUTO X ALL OWNED AUTOS X HIRED AUTOS X NON-OWNED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYER'S LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Equipment Rented/Leased CMM8049045	TYPE OF INSURANCE INSD WVD POLICY NUMBER (MM/DDYYYY) X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X OH Stop Gap CMM8049045 7/1/2017 GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- OTHER: AUTOMOBILE LIABILITY X ANY AUTO X ALL OWNED AUTOS X HIRED AUTOS X NON-OWNED AUTOS X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION S WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (MM8049045 7/1/2017 WCB1025341 7/1/2017 WCB1025341 7/1/2017 Equipment Rented/Leased CMM8049045 7/1/2017	TYPE OF INSURANCE INSU WVD POLICY NUMBER (MM/DD/YYYY) (MM/DD/YYYY) X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X OH Stop Gap CMM8049045 7/1/2017 7/1/2018 GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X JECT LOC OTHER: AUTOMOBILE LIABILITY X ANY AUTO X ALL OWNED AUTOS AUTOS X HIRED AUTOS X NON-OWNED AUTOS X HIRED AUTOS X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION'S WORKERS COMPENSATION AND EMPLOYER'S LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MAMBGER EXCLUDED? (MM8049045 7/1/2017 7/1/2018 WCB1025341 7/1/2017 7/1/2018 Equipment Rented/Leased CMM8049045 7/1/2017 7/1/2018	TYPE OF INSURANCE INSD WYD POLICY NUMBER MM/DD/YYYY (MM/DD/YYYY) (MM/DD/	TYPE OF INSURANCE NSD WVD POLICY NUMBER (MM/DD/YYY) (MM/DD/YYYY) (MM/DD/YYYY) (MM/DD/YYYY) (MM/DD/YYYY) (MM/DD/YYYY) (MM/DD/YYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYY

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Evidence of Insurance subject to policy terms, conditions, limitations and exclusions.

CERTIFICATE HOLDER	CANCELLATION					
For Evidence of Insurance	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					
	Ryan Wingrove/JC					

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

STATE OF WEST VIRGINIA,
COUNTY OF Kanawha, TO-WIT:
I, Jereny Hoffield, after being first duly sworn, depose and state as follows:
1. I am an employee of Newtech Systems Ive, ; and, (Company Name) 2. I do hereby attest that New tech Systems Ive. (Company Name)
2. I do hereby attest that New tech Sasters Inc. (Company Name)
maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with West Virginia Code §21-1D.
The above statements are sworn to under the penalty of perjury.
Printed Name:
Signature:
Title: General Manager
Company Name: Newtech Systems Inc.
Date:03-15-2018
Taken, subscribed and sworn to before me this 15 day of March, 2018. By Commission expires February 02,2022
OFFICIAL SEAL Notary Public, State Of West Virginia JOSEPH CHAPMAN RR 1 Box 369 LeSage, WV 25537 My Commission Expires February 02, 2022
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Rev. July 7, 2017