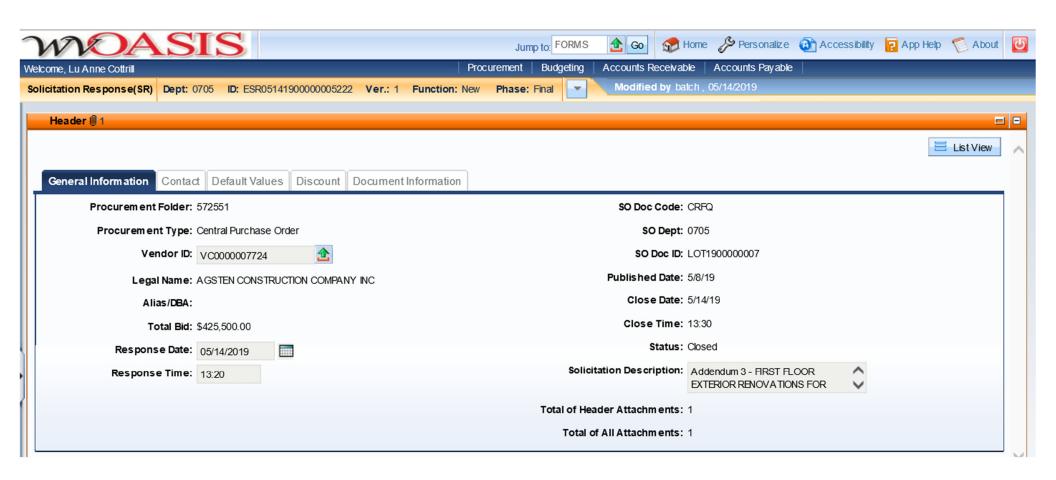


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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: 572551

Solicitation Description: Addendum 3 - FIRST FLOOR EXTERIOR RENOVATIONS FOR LOTTERY HQ

Proc Type: Central Purchase Order

Date issued	Solicitation Closes	Solicitation Response	Version
	2019-05-14 13:30:00	SR 0705 ESR05141900000005222	1

VENDOR

VC0000007724

AGSTEN CONSTRUCTION COMPANY INC

Solicitation Number: CRFQ 0705 LOT1900000007

**Total Bid:** \$425,500.00 **Response Date:** 2019-05-14 **Response Time:** 13:20:31

**Comments:** 

FOR INFORMATION CONTACT THE BUYER

Brittany E Ingraham (304) 558-2157 brittany.e.ingraham@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	Commercial and office building			\$425,500.00
1	construction services			

Comm Code	Manufacturer	Specification	Model #	
72121100				

**Extended Description:** 

\*Dates of service are estimated for bidding purposes.

FIRST FLOOR/FRONT ENTRANCE EXTERIOR RENOVATIONS FOR THE WV LOTTERY HEADQUARTERS BUILDING LOCATED AT 900 PENNSYLVANIA AVE, CHARLESTON, WV PER ATTACHED SPECS AND PROJECT MANUAL

#### **BID BOND**

	KNOW ALL MEN BY THESE PRESENTS	S, That we, the	undersigne	d, Agsten	Construction	Company, Inc.	
of	Hurricane ,	WV				mers Insurance Co	ompany
of	Westfield Center , OF	<del> </del> , ;	a corporatio	n organize	d and existing ur	nder the laws of the S	State of
<u>OH</u>	with its principal office in the Cit	y of <u>Westfi</u>	eld Center	, as S	urety, are held	and firmly bound uni	to the State
of West	Virginia, as Obligee, in the penal sum of $\underline{F}$	ive Percent o	Amount E	Bid	(\$5%		
well and	f truly to be made, we jointly and severally i	bind ourselves,	our heirs, a	administrat	ors, executors, s		
	The Condition of the above obligation is	s such that wh	ereas the	Principal h	as submitted to	the Purchasing Sec	ction of the
Departn	nent of Administration a certain bid or propo	sal, attached h	ereto and r	nade a par	t hereof, to enter	into a contract in wr	iting for
FIRST FI	oor Exterior Renovations for Lottery I	-leadquarters				And the second s	
-							
	NOW THEREFORE,						
	,						
	<ul><li>(a) If said bid shall be rejected, or</li><li>(b) If said bid shall be accepted an</li></ul>	d the Driveine	11 (-				
attached	hereto and shall furnish any other bonds	and insurance	required by	the hid or i	nronosal and sh	all in all other reconce	to norform
uic agre	ement dieated by the acceptance of said bi	la, then this ob	idation sha	ll he null ar	nd void otherwic	a thic obligation shall	I romain in
event, ex	and effect. It is expressly understood and exceed the penal amount of this obligation as	a agreed that t s herein stated	he liability of	of the Sure	ty for any and a	Il claims hereunder s	shall, in no
way imp	The Surety, for the value received, hereby aired or affected by any extension of the	stipulates and	agrees tha	t the obliga	ntions of said Su	rety and its bond sha	all be in no
waive no	tice of any such extension.	THE WITHIN WIL	ich the Obi	igee may a	accept such big,	and said Surety do	es hereby
	WITNESS the following signatures and	-l- (D: )					
Suroty	WITNESS, the following signatures and se	als of Principal	and Surety	, executed	and sealed by a		ncipal and
Surety, 0	r by Principal individually if Principal is an ir	ndividual, this_	<u> 14tn</u> da	ay of	May	_,2019	
Principal	Seal			Aaston	Construction	Company, Inc.	
rinoipai	ocai			Agsteri		of Principal)	
				_		J. Indipaly	ALL-
				Ву	(Must be Bresid	ent, Vice President,	
					Duly Aut	horized Agent)	Oi.
					PLZ510		
						(Title)	
Surety Sa	eal			Ohio Fa	armers Insurar		
					(Name	e of Surety)	
					15/	0 1/1	
				Ву:	0/11	· /// C	
				Douglas P. Ta	aylor, Licensed WV Resid	dent Agent Attorney-in	n-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.

THIS POWER OF ATTORNEY SUPERCEDES ANY PREVIOUS POWER BEARING THIS SAME POWER # AND ISSUED PRIOR TO 09/15/17, FOR ANY PERSON OR PERSONS NAMED BELOW.

General Power of Attorney

CERTIFIED COPY

POWER NO. 4750172 01

### Westfield Insurance Co. Westfield National Insurance Co. Ohio Farmers Insurance Co.

Westfield Center, Ohio

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint

ANDREW K. TEETER, KIMBERLY L. MILES, DOUGLAS P. TAYLOR, GARY R. FREEMAN, KIMBERLY S. BURDETTE, JAIME L.

CARPENTER, TAMMY SELBE, JOINTLY OR SEVERALLY

and State of WV its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings, or other instruments or contracts of

LIMITATION: THIS POWER OF ATTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.

and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY:

"Be It Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact. may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary."

"Be it Further Resolved, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2

In Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their National Surety Leader and Senior Executive and their corporate seals to be hereto affixed this 15th day of SEPTEMBER A.D., 2017

Corporate Seals Affixed

State of Ohio County of Medina Same to the state of the state

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

By Dennis P. Baus, National Surety Leader and Senior Executive

On this 15th day of SEPTEMBER A.D., 2017, before me personally came Dennis P. Baus to me known, who, being by me duly sworn, did depose and say, that he resides in Wooster, Ohio; that he is National Surety Leader and Senior Executive of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Seal Affixed

State of Ohio County of Medina

SS.:



David A. Kotnik, Attorney at Law, Notary Public My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

I, Frank A. Carrino, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect

In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Ohio, this 14th day of

2019 ARREM

Solding Hammer



Larrino Secretary Frank A. Carrino, Secretary



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

STAT	E OF WEST VIRGINIA,
coul	NTY OF Kanawha , TO-WIT:
<sub>I,</sub> <u>Sa</u>	m Hull, after being first duly sworn, depose and state as follows:
1.	I am an employee of Agsten Construction Company, Inc. ; and, (Company Name)
2.	I do hereby attest that Agsten Construction Company, Inc.  (Company Name)
	maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with <b>West Virginia Code</b> §21-1D.
The a	bove statements are sworn to under the penalty of perjury.
	Printed Name: Sam Hull
	Signature:
	Title: COO
	Company Name: Agsten Construction Company, Inc.
	Date: May 14, 2019
	mmission expires April 13, 2022
(Seal)	NOTARY PUBLIC OFFICIAL SEAL CASEY E MILLER State of West Virginia My Commission Expires April 13, 2022 6 Holly Circle, Winfield, WV 25213

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

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

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

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that: (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:

Commission Expires April 13, 2022 6 Holly Circle, Winfield, WV 25213

Vendor's Name: Agsten Construction Compar	ny Inc.	
Authorized Signature:		Date: May 14, 2019
State of West Virginia		
County of Putnam, to-wit:		
Taken, subscribed, and sworn to before me this 14 day of	May	, 20 <u>19</u> .
My Commission expires April 13	, 20 <u>22</u> .	
AFFIX SEAL HERIOTARY PUBLIC OFFICIAL SEAL CASEY E MILLER State of West Virginia	OTARY PUBLIC	Casy E. Miles

Purchasing Affidavit (Revised 01/19/2018)



# WEST VIRGINIA CONTRACTOR LICENSING BOARD

# **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV031022

Classification:

GENERAL BUILDING

AGSTEN CONSTRUCTION COMPANY INC DBA AGSTEN CONSTRUCTION COMPANY INC 1700 STATE ROUTE 34 HURRICANE, WV 25526-7089

**Date Issued** 

**Expiration Date** 

MAY 18, 2019

MAY 18, 2020

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.

Client#: 1114657

AGSTECON1

#### ACORD.

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/23/2019

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

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

this certificate does not comer any rights to the certificate holder in fled of such endorsement(s).							
PRODUCER		CONTACT Donna Waggoner					
USI Ins Svcs C/L Charleston		PHONE (A/C, No, Ext): 304.710.3680	31.1259				
1 Hillcrest Drive East		E-MAIL ADDRESS: donna.waggoner@usi.com					
Charleston, WV 25311		INSURER(S) AFFORDING COVERAGE					
304 347-0611		INSURER A: Westfield Insurance Company					
INSURED	0- 1	INSURER B : BrickStreet Mutual Insurance Company		12372			
Agsten Construction	ı ´	INSURER C:					
1700 State Route 34		INSURER D:					
Hurricane, WV 2552	0	INSURER E :					
		INSURER F:					
COVERAGES	CERTIFICATE NUMBER:	REVISION NUM	BFR.				

	72101020		711-	TOWNDER.			TEVIOLOTI MOMBELL.	
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.								
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR	POLICY NUMBER	POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	X COMMERCIAL GENERAL LIABILITY	X	Х			04/26/2020	EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$500,000
	X PD Ded:500						MED EXP (Any one person)	\$5,000
							PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
	OTHER:							\$
Α	AUTOMOBILE LIABILITY	X	Х	CMM3907572	04/26/2019	04/26/2020	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	X UMBRELLA LIAB X OCCUR			CMM3907572	04/26/2019	04/26/2020	EACH OCCURRENCE	\$2,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$2,000,000
	DED X RETENTION \$0						DED. OTH	\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  Y/N		X	WCB1019272	04/26/2019	04/26/2020	X PER STATUTE OTH-	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH) If yes, describe under						E.L. DISEASE - EA EMPLOYEE	
	DÉSCRIPTION OF OPERATIONS below				0.4.10.0.10.0.4.0	0.4.10.0.10.0.00	E.L. DISEASE - POLICY LIMIT	\$1,000,000
Α	Leased/Rented			CMM3907572	04/26/2019	04/26/2020	300,000	
	Equipment							
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES /A	CORE	A 404 Additional Remarks Schodule, may be	no attached if me		in all	
DESC	ME HON OF OPERATIONS / LOCATIONS / VEHICL	LES (A	CORL	ior, Additional Remarks Schedule, may t	ve attaurieu if MC	ne space is requi	ieuj	

CERTIFICATE HOLDER	CANCELLATION			
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			
	James P. Crouse			

### ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ LOT19\*07

**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)

را	1	Addendum No. 1	[	]	Addendum No. 6
[/	1	Addendum No. 2	[	]	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

Date

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

Revised 6/8/2012