

### 2020 MAR 20 AM 11: 15

### **Exhibit A Pricing Page**

W PURCHASING DIVISION

CRFQ ADJ2000000017 - Fairmont Armed Forces Reserve Center

ALL LABOR, MATERIALS, EQUIPMENT, AND SUPPLIES NECESSARY TO PROVIDE FOR TURN-KEY INSTALLATION OF ONE GAS-FIRED, FORCED DRAFT, BOILER INCLUDING PLUMBING AND ALL ELECTRICAL WORK:

> FAIRMONT ARMED FORCES RESERVE CENTER 201 ARTILLERY DRIVE, FAIRMONT, WV 26554

The undersigned, hereafter called the Vendor, being familiar with and understanding the bidding documents; and being familiar with the site and all local conditions affecting the Project, hereby proposes to furnish labor, material, equipment, supplies, and transportation to perform the work as described in the bidding documents

Engel Welding Inc.

VENDOR COMPANY N	NAME: Engel Welding	Inc.	
VENDOR ADDRESS:	617 Austin Dr.		
	St. Albans WV. 251	77	
	Mailing: PO Box 307		
TELEPHONE:	(304) 727-4341		
FAX NUMBER:	(304) 727-4562		
E-MAIL ADDRESS:	tengel@engelwe	ld.com	
7 011022 011/11 1, 00	Armed Forces Reserve usand three hundred ni	G AND ALL ELECTRI Center, Fairmont, V	LLATION OF ONE GAS-FIRED, ICAL WORK: at the Fairmont NV.
:	(Contract bid to be writte		ers.)
	m may result in bid disqualific		/ / .
SIGNATURE:	-Alan	DA	ATE: 03/20/2020
NAME:	(Please Print)		
TITLE:	/residut		

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ ADJ200000017

**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)					
[1]	Addendum No. 1	[	]	Addendum No. 6	
[]	Addendum No. 2	[	]	Addendum No. 7	
[ ]	Addendum No. 3	[	]	Addendum No. 8	
[ ]	Addendum No. 4	[	]	Addendum No. 9	
[ ]	Addendum No. 5	[	]	Addendum No. 10	
further unders discussion hel	stand that that any verbal repre ld between Vendor's represent	seni ativ	tatio es a	Idenda may be cause for rejection of this bid. I on made or assumed to be made during any oral and any state personnel is not binding. Only the affications by an official addendum is binding.	
	:	_		ENGEL WELDING INC	
				Company	
				Tin Ent	
				Authorized Signature	
		_		3-19-2020	
				Date	

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

	REQ.P.O#
BID BOND	
KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, of 617 AUSTIN DRIVE ST. ALBANS, WV 25177  COMPANY of 305 MADISON AVENUE, MORRISTOWN, NJ 07960 , a corporation of DELAWRE with its principal office in the City of MORRISTOWN, NJ of West Virginia, as Obligee, in the penal sum of FIVE PERCENT (5%p OF AMOWELL and truly to be made, we jointly and severally bind ourselves, our heirs, admits a several s	, as Principal, and UNITED STATES FIRE INSURANCE organized and existing under the laws of the State of, as Surety, are held and firmly bound unto the State OUNT BID \$) for the payment of which,
The Condition of the above obligation is such that whereas the Principal Department of Administration a certain bid or proposal, attached hereto and marked FAIRMONT AFRC BOILER REPLACEMENT - SOLICITATION NO. CRFC	de a part hereof, to enter into a contract in writing for
NOW THEREFORE,  (a) If said bid shall be rejected, or (b) If said bid shall be accepted and the Principal shall enter is attached hereto and shall furnish any other bonds and insurance required by the the agreement created by the acceptance of said bid, then this obligation shall be full force and effect. It is expressly understood and agreed that the liability of event, exceed the penal amount of this obligation as herein stated.  The Surety, for the value received, hereby stipulates and agrees that the way impaired or affected by any extension of the time within which the Obligation of the time within the Obligation of the time within the Obligation of the time within the Obl	be bid or proposal, and shall in all other respects perform be null and void, otherwise this obligation shall remain in the Surety for any and all claims hereunder shall, in no the obligations of said Surety and its bond shall be in no lee may accept such bid, and said Surety does hereby executed and sealed by a proper officer of Principal and
Principal Seal	ENGEL WELDING INC  (Name of Principal)  By  (Must be President, Vice President, or Duly Authorized Agent)  (Title)

Agency\_\_\_\_\_

UNITED STATES FIRE INSURANCE COMPANY
(Name of Surety)

DEBRA J. EZRA, Atorrey-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.

Surety Seal



### **CONSENT OF SURETY**

We, the undersigned, UNITED STATES FIRE INSURANCE COMPANY, corporation organized and existing under the laws of the state of Delaware and authorized to do business in the State of NJ with offices at Morristown, New Jersey do hereby consent and agree with STATE OF WEST VIRGINIA that if the foregoing proposal of ENGEL WELDING INC for FAIRMONT AFRC BOILER REPLACEMENT- SOLICITATION NUMBER CRFQ 0603 ADJ000000017 be accepted and the contract be timely awarded and executed by STATE OF VIRGINIA we will, upon its being awarded and entered into, become surety for the said ENGEL WELDING INC

ln	а	sum	not to	exceed	<b>AMOUNT</b>	BID	Dollars (\$	
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) for the faithful performance of said contract.

Signed, sealed and dated this 20TH of MARCH, 2020

**UNITED STATES FIRE INSURANCE COMPANY** 

BY:

**DEBRA J. EZRA, ATTY-IN-FACT** 

### POWER OF ATTORNEY UNITED STATES FIRE INSURANCE COMPANY PRINCIPAL OFFICE - MORRISTOWN, NEW JERSEY

06385

KNOW ALL MEN BY THESE PRESENTS: That United States Fire Insurance Company, a corporation duly organized and existing under the laws of the state of Delaware, has made, constituted and appointed, and does hereby make, constitute and appoint:

Debra J. Ezra, Robert G. Lull

each, 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 and undertakings of surety and other documents that the ordinary course of surety business may require, and to bind United States Fire Insurance Company thereby as fully and to the same extent as if such bonds or undertakings had been duly executed and acknowledged by the regularly elected officers of United States Fire Insurance Company at its principal office, in amounts or penalties not exceeding: **Twenty-Five Million Dollars (\$25,000,000).** 

This Power of Attorney limits the act of those named therein to the bonds and undertakings specifically named therein, and they have no authority to bind United States Fire Insurance Company except in the manner and to the extent therein stated.

This Power of Attorney revokes all previous Powers of Attorney issued on behalf of the Attorneys-In-Fact named above and expires on January 31, 2021.

This Power of Attorney is granted pursuant to Article IV of the By-Laws of United States Fire Insurance Company as now in full force and effect, and consistent with Article III thereof, which Articles provide, in pertinent part:

Article IV, Execution of Instruments - Except as the Board of Directors may authorize by resolution, the Chairman of the Board, President, any Vice-President, any Assistant Vice-President, the Secretary, or any Assistant Secretary shall have power on behalf of the Corporation:

- (a) to execute, affix the corporate seal manually or by facsimile to, acknowledge, verify and deliver any contracts, obligations, instruments and documents whatsoever in connection with its business including, without limiting the foregoing, any bonds, guarantees, undertakings, recognizances, powers of attorney or revocations of any powers of attorney, stipulations, policies of insurance, deeds, leases, mortgages, releases, satisfactions and agency agreements;
- (b) to appoint, in writing, one or more persons for any or all of the purposes mentioned in the preceding paragraph (a), including affixing the seal of the Corporation.

Article III, Officers, Section 3.11, Facsimile Signatures. The signature of any officer authorized by the Corporation to sign any bonds, guarantees, undertakings, recognizances, stipulations, powers of attorney or revocations of any powers of attorney and policies of insurance issued by the Corporation may be printed, facsimile, lithographed or otherwise produced. In addition, if and as authorized by the Board of Directors, dividend warrants or checks, or other numerous instruments similar to one another in form, may be signed by the facsimile signature or signatures, lithographed or otherwise produced, of such officer or officers of the Corporation as from time to time may be authorized to sign such instruments on behalf of the Corporation. The Corporation may continue to use for the purposes herein stated the facsimile signature of any person or persons who shall have been such officer or officers of the Corporation, notwithstanding the fact that he may have ceased to be such at the time when such instruments shall be issued.

IN WITNESS WHEREOF, United States Fire Insurance Company has caused these presents to be signed and attested by its appropriate officer and its corporate seal hereunto affixed this 10<sup>th</sup> day of March, 2016.

UNITED STATES FIRE INSURANCE COMPANY



Anthony R. Slimowicz, Executive Vice President

State of New Jersey}
County of Morris }

On this 10<sup>th</sup> day of March 2016, before me, a Notary public of the State of New Jersey, came the above named officer of United States Fire Insurance Company, to me personally known to be the individual and officer described herein, and acknowledged that he executed the foregoing instrument and affixed the seal of United States Fire Insurance Company thereto by the authority of his office.

SONIA SCALA NOTARY PUBLIC OF NEW JERSEY MY COMMISSION EXPIRES 3/25/2024 No. 2163686

Sonia Scala

(Notary Public)

I, the undersigned officer of United States Fire Insurance Company, a Delaware corporation, do hereby certify that the original Power of Attorney of which the foregoing is a full, true and correct copy is still in force and effect and has not been revoked.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the corporate seal of United States Fire Insurance Company on the day of MARCH 20 20



UNITED STATES FIRE INSURANCE COMPANY

Peter M. Quinn, Senior Vice President

## UNITED STATES FIRE INSURANCE COMPANY 1209 ORANGE STREET, WILMINGTON, DELAWARE 19801

### STATEMENT OF ASSETS, LIABILITIES, SURPLUS AND OTHER FUNDS

#### AT DECEMBER 31, 2018

ASSETS	
Bonds (Amortized Value)	1,575,095,69
Preferred Stocks (Market Value)	2,500,00
Common Stocks (Market Value)	1,163,841,7
Aortgage Loans (Market Value)	3,510,00
Cash, Cash Equivalents, and Short Term Investments	477,327,33
Derivativeszagista asia mitoroga asia materialista asia materialista asia materialista asia materialista	23,002,73
Other Invested Assets	216,475,68
nvestment Income Due and Accrued	8,006,76
Premiums and Considerations	195,195.70
Amounts Recoverable from Reinsurers	31,104,24
Funds Held by or Deposited with Reinsured Companies	4,482,82
Current Income Taxes Recoverable	1,966,56
Net Deferred Tax Asset	161,021,87
Electronic Data Processing Equipment	4,043,04
Receivables from Parent, Subsidiaries and Affiliates	138,140,00
Other Assets	80,113,77
TOTAL ASSETS	\$ 4,085,827,97
LIABILITIES, SURPLUS & OTHER FUNDS  osses (Reported Losses Net of Reinsurance Ceded and Incurred	
LIABILITIES, SURPLUS & OTHER FUNDS	
osses (Reported Losses Net of Reinsurance Ceded and Incurred	
osses (Reported Losses Net of Reinsurance Ceded and Incurred ut Not Reported Losses)	
osses (Reported Losses Net of Reinsurance Ceded and Incurred ut Not Reported Losses)	41,178,53
osses (Reported Losses Net of Reinsurance Ceded and Incurred ut Not Reported Losses)	41,178,53 386,839,69
osses (Reported Losses Net of Reinsurance Ceded and Incurred  ut Not Reported Losses)	41,178,53 386,839,69 3,516,08
osses (Reported Losses Net of Reinsurance Ceded and Incurred ut Not Reported Losses)	41,178,53 386,839,69 3,516,08 48,794,04
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Losses (Reported Losses Net of Reinsurance Ceded and Incurred But Not Reported Losses).  Reinsurance Payable on Paid Losses and Loss Adjustment Expenses.  Loss Adjustment Expenses.  Commissions Payable, Contingent Commissions and Other Similar Charges.  Dither Expenses (Excluding Taxes, Licenses and Fees).  Taxes, Licenses and Fees (Excluding Federal Income Taxes).  Joearned Premiums.  Advance Premiums.	41,178,53 386,839,69 3,516,08 48,794,04 20,335,06 517,688,14 5,194,00
Losses (Reported Losses Net of Reinsurance Ceded and Incurred But Not Reported Losses)  Reinsurance Payable on Paid Losses and Loss Adjustment Expenses  Loss Adjustment Expenses  Commissions Payable, Contingent Commissions and Other Similar Charges  Commissions Payable, Contingent Commissions and Other Similar Charges  Characs, Licenses and Fees (Excluding Federal Income Taxes).  Characteristic Premiums  Cheded Reinsurance Premiums Payable	41,178,53 386,839,69 3,516,08 48,794,04 20,335,06 517,688,14 5,194,00 23,630,61
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1, Carmine Scaglione, Senior Vice President and Controller of UNITED STATES FIRE INSURANCE 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, 2018, as reflected by its books and records and as reported in its statement on file with the Insurance Department of the State of Delaware.

IN TESTIMONY WHEREOF, I have set my hand and affixed the seal of the Company, this 5th day of Merch, 2019 UNITED STATES FIRE INSURANCE COMPANY



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/16/2020

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

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

tl	nis certificate does not confer rights to	the	certifi	icate holder in lieu of such						
PRODUCER				CONTACT Kim Bess						
The Hilb Group of West Virginia LLC				PHONE (A/C, No, Ext): (304) 926-7400 FAX (A/C, No): (304) 926-7433						
3601 MacCorkle Avenue SE			E-MAL ADDRESS: kim.bess@hilbgroup.com							
Suit	te 50				HODITE		SURERIS\ AFFOR	RDING COVERAGE		NAIC#
Cha	arleston			WV 25304	INSURE	18746-1	Insurance Co			24112
-	JRED					Drielestra	et Insurance/E			12372
	Engel Welding Inc				INSURE	χБ.	ot mourance, E			12072
	PO Box 307				INSURE					
					INSURE	RD:				
	617 Austin Drive				INSURE	RE:				
	St. Albans			WV 25177	INSURE	RF:				
				NUMBER: CL191231406				REVISION NUMBER:		
IN CI	HIS IS TO CERTIFY THAT THE POLICIES OF IDICATED. NOTWITHSTANDING ANY REQUI ERTIFICATE MAY BE ISSUED OR MAY PERT, KCLUSIONS AND CONDITIONS OF SUCH PC	REME AIN, T	NT, TE	ERM OR CONDITION OF ANY ( SURANCE AFFORDED BY THE	CONTRA E POLICIE	CT OR OTHER	R DOCUMENT \ D HEREIN IS S	MITH RESPECT TO WHICH T	HIS	
INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
-11	COMMERCIAL GENERAL LIABILITY	עפוייי		, sais, itamiant		MINIODI I I I I	Autor Dilli	EACH OCCURRENCE		0,000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,	000
								MED EXP (Any one person)	\$ 5,00	0
Α				TRA5104107		01/01/2020	01/01/2021	PERSONAL & ADV INJURY	s 1,00	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	s 2,00	0,000
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,000,000	
	OTHER:							Property damage-single	\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$ 1,00	0,000
	X ANY AUTO							(Ea accident) BODILY INJURY (Per person)	\$	
Α	OWNED SCHEDULED			TRA5104107	- 1	01/01/2020	01/01/2021	BODILY INJURY (Per accident)	-	
	AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE	\$	
	AUTOS ONLY AUTOS ONLY							(Per accident) Underinsured motorist	\$ 1,00	0.000
	★ UMBRELLA LIAB				-			EACH OCCURRENCE		5,000
Α	EXCESSIVA			TRA5104107		01/01/2020	01/01/2021		\$	
	CDAING-WADE			1101010101		0110112020	0110112021	AGGREGATE	\$	
	DED RETENTION \$ WORKERS COMPENSATION				-			✓ PER OTH-	\$	
	AND EMPLOYERS' LIABILITY Y/N						-	STATUTE ER	1.00	0,000
В	ANY PROPRIETOR/PARTNER/EXECUTIVE Y	N/A		WCB1018260		01/01/2020	01/01/2021	E.L. EACH ACCIDENT	4.00	
	(Mandatory in NH)  If yes, describe under							E.L. DISEASE - EA EMPLOYEE	4.00	0,000
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 1,00	0,000
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (AC	ORD 1	01, Additional Remarks Schedule, r	may be att	ached if more sp	ace is required)			
Evid	lence of Insurance									
CER	RTIFICATE HOLDER	_			CANCE	LLATION				
CER	TIFICATE HOLDER			1	CANCE	LLATION				
West Virginia Army National Guard			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
	1707 Coonskin Drive			ŀ	AUTHORI	ZED REPRESEN	TATIVE			
	Charleston			WV 25311				Kimbess		
						(	9 1988-2015 A	ACORD CORPORATION.	All righ	ıts reserved.



# WEST VIRGINIA CONTRACTOR LICENSING BOARD

# **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV001428

Classification:

HEATING, VENTILATING & COOLING PIPING PLUMBING WELDING

ENGEL WELDING INC DBA ENGEL WELDING INC PO BOX 307 ST ALBANS, WV 25177

**Date Issued** 

**Expiration Date** 

AUGUST 15, 2019

AUGUST 15, 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.

# 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:	
Vendor's Name: ENGEL WELDING INC	
Authorized Signature: Tom H Engl	Date: 3-18-2620
State of West Virgin	
County of Kamha, to-wit:	
Taken, subscribed, and sworn to before me this 🔏 day of	, 20 <i>25</i>
My Commission expires May 16- 2022 , 20	
AFFIX SEAL HERE  OFFICIAL SEAL  NOTARY PUBLIC	Pance E. Ingul

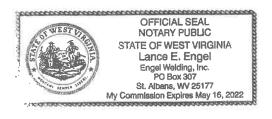
STATE OF WEST VIRGINIA Lance E. Engel Engel Welding, Inc PO Box 307 St. Albans, WV 25177 My Commission Expires May 16, 2022 Purchasing Affidavit (Revised 01/19/2018)

STATE OF WEST VIRGINIA.



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

## COUNTY OF Kanawha \_\_\_\_, TO-WIT: I, Tim A. Engel , after being first duly sworn, depose and state as follows: I am an employee of \_\_\_\_Engel Welding Inc. (Company Name) I do hereby attest that Engel Welding Inc. 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: \_\_\_ Tim A. Engel Signature: Title: President Company Name: Engel Welding Inc. Date: January 06, 2020 Taken, subscribed and sworn to before me this 18 day of March , 2020 . By Commission expires May 16. 2022 Lance E. Engel (Seal)



### 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.

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 Identification:	
Contract Number:	
Contract Purpose:	
Agency Requesting Work:	
Required Report Content: The attached report must include e should check each box as an indication that the required information	each of the items listed below. The vendor ation has been included in the attached report.
☐ Information indicating the education and training service 21-1D-5 was provided;	to the requirements of West Virginia Code §
Name of the laboratory certified by the United States Department of the laboratory certified by the United States Departmen	partment of Health and Human Services or its
☐ Average number of employees in connection with the col	nstruction on the public improvement;
<ul> <li>Drug test results for the following categories including the negative tests: (A) Pre-employment and new hires; (B) F (D) Random.</li> </ul>	e number of positive tests and the number of Reasonable suspicion; (C) Post-accident; and
Vendor Contact Information:	
Vendor Name: ENGE WELDING JOC	Vendor Telephone: 304 757-434/
Vendor Address: Po Box 307 St. Albans hv 05177	Vendor Fax: 304 727 4562 Vendor E-Mail: tengel@engelweld com

DESIGNATED COll Contract Administrate	NTACT: Vendor appoints or and the initial point of co	the individual identified in this Section as the ontact for matters relating to this Contract.
7.6	I - fasunt	Contract.
(Name, Title) tim Engel	l President	
(Printed Name		5177
(Address)	-4341 (304)727-4562	
tengel@e	er) / (Fax Number) engelweld.com	
(email address)	)	
the requirements, terms or proposal constitutes or service proposed me product or service, unle conditions contained in bid, offer or proposal fand submit this bid, off I am authorized to bind	errify that I have reviewed to s and conditions, and other an offer to the State that ca sets the mandatory requirem ess otherwise stated herein; the Solicitation, unless oth or review and consideration er, or proposal, or any docu- the vendor in a contractual	gning below, or submitting documentation this Solicitation in its entirety; that I understand information contained herein; that this bid, offer annot be unilaterally withdrawn; that the product nents contained in the Solicitation for that that the Vendor accepts the terms and nerwise stated herein; that I am submitting this a; that I am authorized by the vendor to execute aments related thereto on vendor's behalf; that I relationship; and that to the best of my hany State agency that may require
Engel Welding	Inc.	
Company)	^	

(304) 727-4341

(Phone Number) (Fax Number)

(Authorized Signature) (Representative Name, Title)

(Printed Name and Title of Authorized Representative)

(304) 727-4562

## Subcontractor List Submission (Construction Contracts Only)

Bidder's Name: Emplweldig Im.				
Check this box if no subcontractors will pe project.	rform more than \$25,000.00 of work to complete the			
Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.			

Attach additional pages if necessary