

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

State of West Virginia Request for Quotation 09 — Construction

Proc Folder: 610225

Doc Description: Warehouse Electrical Upgrade

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2019-08-01	2019-08-20 13:30:00	CRFQ 1400 AGR200000	.1

BID RECEIVING LOCATION

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV

25305

US

Vendor Name, Address and Telephone Number:

Nitro Construction Services, Inc.

4300 First Avenue Nitro, WV 25143

304-204-1500

RECENTED
2019 AUG 26 PM 1:01
WY PURSONASING
DIVISION

FOR INFORMATION CONTACT THE BUYER

Jessica S Chambers (304) 558-0246

jessica.s.chambers@wv.gov

Signature X

FEIN

20-8844160

DATE 8/26/19

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

Page: 1

FORM ID: WV-PRC-CRFQ-001

ADDITIONAL INFORMATION:

The West Virginia Purchasing Division is soliciting bids on behalf of West Virginia Department of Agriculture to establish a contract for the Ripley Warehouse Electrical Upgrades. Miller Engineering, Inc. is serving as the Architect on this project per the terms and conditions and specifications as attached.

INVOICE TO		SHIP TO	White the country and the party of the party		
PROCUREMENT OFFICE	R 304-558-2221	AUTHORIZED RECEIVE	R 304-558-0573		
AGRICULTURE DEPARTM		AGRICULTURE DEPART	AGRICULTURE DEPARTMENT OF		
ADMINISTRATIVE SERVICES		FOOD DISTRIBUTION P	FOOD DISTRIBUTION PROGRAM		
1900 KANAWHA BLVD E		4496 CEDAR LAKES RD)		
CHARLESTON	WV25305-0173	RIPLEY	WV 25271		
US		us			

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Warehouse Electrical Upgrade				1,100,768.00

Comm Code	Manufacturer	Specification	Model #	
72151502				

Extended Description:

Warehouse Electrical Upgrade

Does not include Performance and Payment Bond. Should it need to be included, please increase Total Price by \$8,300.00

BID BOND

	KNOW	ALL MEN B	Y THESE PRE	ESENTS, That	we, the u	ındersigr	ned, <u>Nitro</u>	Construct	ion Service	es, Inc.		
of		Nitro			WV		, as Princip	oal, and <u>Phil</u>	adelphia Inde	emnity Ins	surance Compan	ly
of	Bala	a Cynwyd		PA	, а	corporat	ion organiz	zed and exis	sting under t	he laws	of the State of	
PA		with its pr	incipal office in	the City of	Bala (Cynwyd	, as	Surety, are	held and fi	irmly bou	and unto the St	tate
of Wes	t Virginia	, as Obligee,	in the penal s	um of <u>Five</u> Pe	rcent of	<u>Amount</u>	Bid	(\$_	5%	for the	payment of whi	ich,
well an	d truly to	be made, we	e jointly and se	verally bind ou	ırselves, (our heirs	, administr	ators, execu	utors, succes	ssors and	d assigns.	
	The Co	ondition of t	ne above oblic	aation is such	that whe	ereas the	Principal	has submit	tted to the I	Purchasi	ng Section of	the
Departr											ct in writing for	
		lectrical Up										_
the agre full force event, e way imp waive ne	(a) (b) d hereto eement ce e and eff exceed th The Sui paired or otice of a	If said bid and shall fur reated by the fect. It is exple penal amounterty, for the saffected by any such extenses, the followers.	shall be rejected shall be acceptance of coressly undersount of this obligation any extension ension.	pted and the bonds and insoft said bid, then tood and agregation as herein, hereby stipulation the time was a first time was a	surance ron this oblined that the instated. ates and within which which is a contracted.	equired to the ligation shape liability agrees the control of the	by the bid on all be null y of the Sunat the oblibilities made the country of the sunat the oblibilities of the sunat the sunat the oblibilities of the sunat the suna	or proposal, and void, o trety for any igations of s y accept su ed and seal	and shall in therwise this and all clai said Surety a ach bid, and	all others obligations here and its both said Su	e bid or propor respects performs that remain under shall, in ond shall be in arety does here	no no no
Principa	ıt Seal						Nitro By_	(Must be	tion Servic (Name of I President ouly Authoriz (Title	Principal) Vice Pres zed Agen	sident, or	_
Surety S	Seal						Ву:	linke	demnity In (Name of S	Surety)	e Company Company orney-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.

PHILADELPHIA INDEMNITY INSURANCE COMPANY

One Bala Plaza, Suite 100 Bala Cynwyd, PA 19004-0950

Power of Attorney

KNOW ALL PERSONS BY THESE PRESENTS: That PHILADELPHIA INDEMNITY INSURANCE COMPANY (the Company), a corporation organized and existing under the laws of the Commonwealth of Pennsylvania, does hereby constitute and appoint <u>Douglas P. Taylor, Andrew K. Teeter, Kimberly L. Miles, Kimberly S. Burdette, Jaime L. Carpenter and Tammy S. Selbe of USI Insurance Services, LLC its true and lawful Attorney-in-fact with full authority to execute on its behalf bonds, undertakings, recognizances and other contracts of indemnity and writings obligatory in the nature thereof, issued in the course of its business and to bind the Company thereby, in an amount not to exceed \$50,000,000.00.</u>

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of PHILADELPHIA INDEMNITY INSURANCE COMPANY on the 14th of November, 2016.

RESOLVED:

That the Board of Directors hereby authorizes the President or any Vice President of the Company: (1) Appoint Attorney(s) in Fact and authorize the Attorney(s) in Fact to execute on behalf of the Company bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof and to attach the seal of the Company thereto; and (2) to remove, at any time, any such Attorney-in-Fact and revoke the authority given. And, be it

FURTHER RESOLVED:

That the signatures of such officers and the seal of the Company may be affixed to any such Power of Attorney or certificate relating thereto by facsimile, and any such Power of Attorney so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the Company in the future with respect to any bond or undertaking to which it is attached.

IN TESTIMONY WHEREOF, PHILADELPHIA INDEMNITY INSURANCE COMPANY HAS CAUSED THIS INSTRUMENT TO BE SIGNED AND ITS CORPORATE SEALTO BE AFFIXED BY ITS AUTHORIZED OFFICE THIS 27TH DAY OF OCTOBER, 2017.



(Seal)

Hoemson

Robert D. O'Leary Jr., President & CEO Philadelphia Indemnity Insurance Company

On this 27th day of October, 2017, before me came the individual who executed the preceding instrument, to me personally known, and being by me duly sworn said that he is the therein described and authorized officer of the **PHILADELPHIA INDEMNITY INSURANCE COMPANY**; that the seal affixed to said instrument is the Corporate seal of said Company; that the said Corporate Seal and his signature were duly affixed.

COMMONWEALTH OF PENNIST VANIA NOTARMAL SEAL Morgan Krapp, Notary Public Läwer Metion Tyrp. Mortigamery County My Carmitistion Expires Sept. 25, 2021

Notary Public:

Moreyan Mopp

(Notary Seal)

residing at:

Bala Cynwyd, PA

My commission expires:

September 25, 2021

I, Edward Sayago, Corporate Secretary of PHILADELPHIA INDEMNITY INSURANCE COMPANY, do hereby certify that the foregoing resolution of the Board of Directors and the Power of Attorney issued pursuant thereto on the 27th day of October, 2017 are true and correct and are still in full force and effect. I do further certify that Robert D. O'Leary Jr., who executed the Power of Attorney as President, was on the date of execution of the attached Power of Attorney the duly elected President of PHILADELPHIA INDEMNITY INSURANCE COMPANY.

In Testimony Whereof I have subscribed my name and affixed the facsimile seal of each Company this 26th day of August , 20 19



Edward Sayago, Corporate Secretary

PHILADELPHIA INDEMNITY INSURANCE COMPANY

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 rec	eived)
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
I further understand that any verbal represe discussion held between Vendor's represe	eipt of addenda may be cause for rejection of this bid. entation made or assumed to be made during any oral ntatives and any state personnel is not binding. Only led to the specifications by an official addendum is
Nitro Construction Services, Inc.	
Spanart Becker Authorized Signature	
8.24.19 Date	

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

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 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



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

STATE OF WEST VIRGINIA, COUNTY OF Putnam , TO-WIT: I, Doug Jarrett ___, after being first duly sworn, depose and state as follows: I am an employee of Nitro Construction Services, Inc. (Company Name) I do hereby attest that Nitro Construction Services, 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: Doug Jarrett Signature: Title: Corporate Safety Director Company Name: Nitro Construction Services, Inc. Taken, subscribed and sworn to before me this 26 day of _ By Commission expires (Seal) OFFICIAL SEAL (Notary Public) Notary Public, State Of West Virginia FATINA WITHROW

57 Spruce Drive Scott Depot, WV 25560

My Commission Expires August 05, 2023

Rev. July 7, 2017

REQUEST FOR QUOTATION WVDA Ripley Warehouse Electrical Upgrades

fee, if the cards or keys become lost or stolen.

- 14.3. Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
- 14.4. Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
- 14.5. Vendor shall inform all staff of Agency's security protocol and procedures.

15. MISCELLANEOUS:

15.1. 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:	Stewart Beebe
Telephone Number	304-204-1500
Fax Number: 304-	204-1350
Email Address:s	beebe@nitrocs.com
15.2. Owner's Representative: Owner's r Name: Stewart Be	``
Telephone Number:	304-204-1500
Fax Number: $\frac{304-2}{2}$	04-1350
Email Address: sb	eebe@nitrocs.com

16. Initial Decision Maker: Miller Engineering, Inc., the Engineer, shall serve as the Initial Decision Maker in matters relating to this contract.

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.

Stewart Beebe / Project Manager	
(Name, Title) Stewart Beebe / Project Manager	
(Printed Name and Title) 4300 First Avenue Nitro, WV 25143	
(Address) 304-204-1500 / 304-204-1350	
(Phone Number) / (Fax Number)	
(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.

Nitro Construction Services, Inc.
(Company)
Bun Was Executive Vice Residen
(Authorized Signature) (Representative Name, Title)
Bruce Ward Exercitive Vice President
(Printed Name and Title of Authorized Representative)
8126119
(Date)
304.204.1500/304.204.1350
(Phone Number) (Fax Number)

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name: Nitro Construction Services, Inc.				
Check this box if no subcontractors will perf project.	form 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.			
WV Fence & Gates	WV046557			
EN Engineering	C04002-00			

Attach additional pages if necessary



WEST VIRGINIA CONTRACTOR LICENSING BOARD

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV042601

Classification:

ELECTRICAL
GENERAL BUILDING
HEATING, VENTILATING & COOLING
PIPING
LOW VOLTAGE SYSTEMS
SPRINKLER AND FIRE PROTECTION

NITRO CONSTRUCTION SERVICES INC DBA NITRO MECHANICAL SERVICES 4300 1ST AVE #2 NITRO, WV 25143-1001

Date Issued

Expiration Date

JUNE 13, 2019

JUNE 13, 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.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/24/2018

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

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).

PRODUCER Willis of Pennsylvania, Inc. c/o 26 Century Blvd P.O. Box 305191	CONTACT NAME: PHONE (A/C. No. Ext): 1-877-945-7378 E-MAIL ADDRESS: Certificates@willis.com	FAX (A/C, No): 1-888-467-2378	
Nashville, TN 372305191 USA	INSURER(S) AFFORDING COVERAGE	NAIC#	
	INSURER A: Arch Insurance Company	11150	
INSURED	INSURER B: XL Specialty Insurance Company	37885	
Nitro Construction Services, Inc 4300 1st Avenue	INSURER C: Western World Insurance Compan	y 13196	
Nitro, WV 25143	INSURER D:		
	INSURER E :		
	INSURER F:		

COVERAGES CERTIFICATE NUMBER: W9626003

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.

NSR LTR	TYPE OF INSURANCE		SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			ZAGLB9222202	01/01/2019	01/01/2020	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 2,000,000 \$ 2,000,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 4,000,000
	POLICY X PRO-						PRODUCTS - COMP/OP AGG	\$ 4,000,000
	OTHER:							\$
	AUTOMOBILE LIABILITY			ZACAT9243302	01/01/2019	01/01/2020	COMBINED SINGLE LIMIT (Ea accident)	\$ 2,000,000
	X ANY AUTO						BODILY INJURY (Per person)	\$
A	OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
	AGTOG GITE!							\$
В	X UMBRELLA LIAB X OCCUR			US00077260LI19A	01/01/2019	01/01/2020	EACH OCCURRENCE	\$ 10,000,000
B	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 10,000,000
	DED X RETENTION \$ 10,000							\$
A	WORKERS COMPENSATION	N/A		ZAWCI9402602	01/01/2019	01/01/2020	X PER OTH- STATUTE ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE						E.L. EACH ACCIDENT	\$ 1,000,000
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
С	Auto Buffer			GLX1000037-01	01/01/2019	01/01/2020	Each Occurrence:	\$1,000,000
	Occurrence Basis						Aggregate:	\$1,000,000

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

CERTIFICATE HOLDER	CANCELLATION
	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
Evidence of Insurance	Cing Plen

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