

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

## State of West Virginia Centralized Request for Quote Construction



**Proc Folder:** 

818942

Doc Description: Twin Falls - New Sprayground & Proshop Construction

Reason for Modification:

Addendum 4 issued for clarification purposes as per attached documentation

**Proc Type:** 

Central Purchase Order

Date Issued

Solicitation Closes

Solicitation No

Version

2021-02-16

2021-02-17 13:30

CRFQ 0310

DNR2100000005

5

**BID RECEIVING LOCATION** 

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

VENDOR

**Vendor Customer Code:** 

709050415

Vendor Name :

Wiseman Construction Co., Inc.

Address:

Street:

1616 6th Avenue

City:

Charleston

State:

WV

Country:

USA

Zip:

25387

Principal Contact:

John A. Wiseman

Vendor Contact Phone:

(304) 344-1200

Extension:

01

FOR INFORMATION CONTACT THE BUYER

Joseph E Hager III (304) 558-2306

joseph.e.hageriii@wv.gov

Vendor

Signature X

55-0602314

DATE

February 17, 2021

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

Date Printed: Feb 16, 2021

Page: 1

FORM ID: WV-PRC-CRFQ-002 2020/05

### **ADDITIONAL INFORMATION**

Addendum 4 issued for clarification purposes as per attached documentation No other changes

INVOICE TO	SHIP TO
DIVISION OF NATURAL RESOURCES	DIVISION OF NATURAL RESOURCES
PARKS & RECREATION-PEM SECTION	TWIN FALLS RESORT STATE PARK
324 4TH AVE	RR 97
SOUTH CHARLESTON WV 25305	MULLENS WV 25882-0667
US	US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	<b>Total Price</b>
1	Building Construction Services		*SEE ATTAC	HED BID FOR	M*

Comm Code	Manufacturer	Specification	Model #	
72120000				

### **Extended Description:**

Construction of new sprayground and golf proshop. Vendors submitting bids online should enter their total bid amount in the commodity line of Oasis and attach the Bid Form included in the specifications with their bid response

## SCHEDULE OF EVENTS

<u>Line</u>	Event	<b>Event Date</b>
1	Mandatory Pre-Bid Meeting @ 11:00 am ET	2021-01-14
2	Q&A Deadline @4:00 pm ET	2021-01-26

## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ DNR21\*05

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.

•			•	
	[X]	Addendum No. 1	[ ]	Addendum No. 6
	[x]	Addendum No. 2	[ ]	Addendum No. 7
	[x]	Addendum No. 3	[ ]	Addendum No. 8
	[X ]	Addendum No. 4	[ ]	Addendum No. 9
	[ ]	Addendum No. 5	[ ]	Addendum No. 10

Addendum Numbers Received:

(Check the box next to each addendum received)

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

February 17, 2021

Date

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

Revised 6/8/2012

## 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:	Wiseman Construction Co., Inc.	
Contractor's License	No.: WV000836	

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a contract award document.

- 2. DRUG-FREE WORKPLACE AFFIDAVIT: W. Va. Code § 21-1D-5 provides that any solicitation for a public improvement contract requires each Vendor that submits a bid for the work to submit an affidavit that the Vendor has a written plan for a drug-free workplace policy. If the affidavit is not submitted with the bid submission, the Purchasing Division shall promptly request by telephone and electronic mail that the low bidder and second low bidder provide the affidavit within one business day of the request. Failure to submit the affidavit within one business day of receiving the request shall result in disqualification of the bid. To comply with this law, Vendor should complete the enclosed drug-free workplace affidavit and submit the same with its bid. Failure to submit the signed and notarized drugfree workplace affidavit or a similar affidavit that fully complies with the requirements of the applicable code, within one business day of being requested to do so shall result in disqualification of Vendor's bid. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.
- 2.1. DRUG-FREE WORKPLACE POLICY: Pursuant to W. Va. Code § 21-1D-4, Vendor and its subcontractors must implement and maintain a written drug-free workplace policy that complies with said article. The awarding public authority shall cancel this contract if: (1) Vendor fails to implement and maintain a written drug-free workplace policy described in the preceding paragraph, (2) Vendor fails to provide information regarding implementation of its drug-free workplace policy at the request of the public authority; or (3) Vendor provides to the public authority false information regarding the contractor's drug-free workplace policy.

Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract. (Name, Title) James C. Linkinoggor, Vice President (Printed Name and Title) 1616 6th Avenue, Charleston, WV 25387 (Address) (304) 344-1200 / (304) 344-1281 (Phone Number) / (Fax Number) ilink@wisemancorp.com (email address) CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration. Wiseman Construction Co. Inc. (Company) (Authorized Signature) (Representative Name, Title) John A. Wiseman, President (Printed Name and Title of Authorized Representative) February 17, 2021 (Date)

(304) 344-1200 / (304) 344-1281

(Phone Number) (Fax Number)

## REQUEST FOR QUOTATION WVDNR

## Twin Falls Resort State Park New Sprayground and Golf Proshop

- **10.4.** Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
- 10.5. Vendor shall inform all staff of Agency's security protocol and procedures.

### 11. MISCELLANEOUS:

11.1. 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: John A. Wiseman

Telephone Number: (304) 344-1200

Fax Number: (304) 344-1281

Email Address: awiseman@wisemancorp.com

## EXHIBIT A – PRICING PAGE Twin Falls Resort State Park Sprayground and Pro Shop

Name of Vendor:

Wiseman Construction Co., Inc.

Address of Vendor:

1616 6th Avenue
Charleston, WV 25387

Phone Number of Vendor:

(304) 344-1200

WV Contractors License No.

We, the undersigned, having examined the site and being familiar with the local conditions affecting the cost of the work and also being familiar with the general conditions to bidders, drawings, and specifications, hereby proposes to furnish all materials, equipment, and labor to complete all work in a workmanlike manner, as described in the Bidding documents.

#### "A" Base Bid

The Base Bid shall consist of all the work described in the Bidding Documents including the Plans, Project Manual, and any addendums pertaining to construction and utilities tied to the Sprayground.

#### **Total Base Bid:**

Lump sum for all labor, materials, and equipment necessary for a complete project.

Written in numbers.

Total Base Bid: "A"

Lump sum for all labor, materials, and equipment necessary for a complete project.

Written in words.

\$2,273,000.00

Two Million Two Hundred Seventy-Three Thousand Dollars

#### **Additive Alternates**

"B" Alternate No. 1 - <u>ADD</u> TO THE BASE BID ALL LABOR AND MATERIAL TO demolish, remove and regrade existing pro shop and construct the proposed new construction as shown on the plan set, design drawings and project specifications.

Total "B" Alternate No. 1
Bid: Lump sum for all labor,
materials, and equipment
necessary for a complete
project.

Written in numbers.

Total "B" Alternate No. 1 Bid: Lump sum for all labor, materials, and equipment necessary for a complete project.

Written in words.

\$1,354,000.00

One Million Three Hundred Fifty-Four Thousand Dollars

Total Bid Amount is the TOTALS of A + B=

**\$** 3,627,000.00

### **BID BOND**

	KNOW ALL MEN BY THESE PRESENTS	S, That we, the u	ndersigned,	Wiseman C	onstruction (	Company, Inc.
of	Charleston,	WV	, as l	Principal, and	Ohio Farme	ers Insurance Company
of	Westfield Center , Of	H, a d	corporation o	rganized and	existing unde	r the laws of the State of
OH	with its principal office in the Cit	y of Westfiel	d Center	_, as Surety	, are held and	I firmly bound unto the State
of West	Virginia, as Obligee, in the penal sum of F	ive Percent of	Amount Bid		(\$5%	) for the payment of which,
well and	truly to be made, we jointly and severally	bind ourselves, o	our heirs, adn	ninistrators, e	xecutors, succ	cessors and assigns.
	The Condition of the above obligation is	s such that whe	reas the Pri	ncipal has su	ibmitted to the	e Purchasing Section of the
Departn	nent of Administration a certain bid or prope	osal, attached he	reto and mad	de a part here	eof, to enter in	to a contract in writing for
	IR Parks & Recreation - PEM Section	Twin Falls Ne	w Spraygro	ound & Pros	hop Constru	iction DNR21*05 -
Accord	ling to Plans and Specifications					
	NOW THEREFORE,  (a) If said bid shall be rejected, or (b) If said bid shall be accepted an	nd the Principal	shall enter i	nto a contrac	ct in accordan	nce with the bid or proposal
the agre	I hereto and shall furnish any other bonds rement created by the acceptance of said be and effect. It is expressly understood an exceed the penal amount of this obligation a	and insurance re old, then this oblig nd agreed that th	equired by the gation shall b	e bid or propo e null and vo	osal, and shall id, otherwise t	in all other respects perform this obligation shall remain in
	The Surety, for the value received, hereby aired or affected by any extension of the otice of any such extension.					
	WITNESS, the following signatures and so	eals of Principal a	and Surety, e	executed and	sealed by a p	roper officer of Principal and
Surety, o	or by Principal individually if Principal is an	individual, this	28th day	ofJan	uary,	
Principal	l Seal			By (Mu	(Name of the Name	Company, Inc. of Principal  nt, Vice President, or orized Agent)  President
Surety S	eal			Ohio Farme	ers Insuranc (Name d	e Company of Surety)
	».		Kimberly J.	By: Wilkinson, W	V Resident A	gent Attorney-in-Fact

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.

THIS POWER OF ATTORNEY SUPERCEDES ANY PREVIOUS POWER BEARING THIS SAME POWER # AND ISSUED PRIOR TO 08/16/18, FOR ANY PERSON OR PERSONS NAMED BELOW.

General Power of Attorney

**CERTIFIED COPY** 

POWER NO. 4752152 06

## 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," did 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 GREGORY T. GORDON, KIMBERLY J. WILKINSON, PATRICIA A. MOYE, JOINTLY OR SEVERALLY

of CHARLESTON and State of WVits 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 suretyship

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

and to blind 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

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, 2000).

held on February 8, 2000).

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 16th day of AUGUST A.D., 2018 MATIONAL

Corporate SURAL Seals

State of Ohio County of Medina

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

Dennis P. Baus, National Surety Leader and

A.D., 2018, 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



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

I, Frank A. Carrino, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and CHIO 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 attixed the seals of said Companies at Westfield Center, Ohio, this 28thday of A.D., 2021

January SURARCA

ACTIONAL WAS



Frank A. Carrino, Secretary



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

I, John A. Wiseman afte	r being first duly sworn, depose and state as follows:
1. I am an employee ofWisem	an Construction Co., Inc. ; and, (Company Name)
2. I do hereby attest that _Wiser	nan Construction Co., Inc. (Company Name)
maintains a written plan for a policy are in compliance with I	drug-free workplace policy and that such plan and <b>Nest Virginia Code</b> §21-1D.
The above statements are sworn to u	inder the penalty of perjury.
Print	ed Name: John A. Wiseman
	ature: Juling Misseine
Title	President
Com	pany Name: Wiseman Construction Co., Inc.
Date	: February 17, 2021
STATE OF WEST VIRGINIA,	
COUNTY OF Kanawha	, TO-WIT:
Taken, subscribed and sworn to before	re me this 17th day of February 2021
By Commission expires October 28,	2024
OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA James C. Linkinoggor 104 Morningside Drive Elkview, WV 25071 My Commission Expires October 28, 20	(Notary Public)  Rev. July 7, 2017
·····································	

## 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 Identif	cation:	
Contract Number	:DNR21*05	
Contract Purpose	:Construction of new spraygroun	d and golf proshop
Agency Request	ing Work:WVDNR- Parks & Recrea	tion PEM Section
		de each of the items listed below. The vendor formation has been included in the attached report.
	n indicating the education and training ser	vice to the requirements of West Virginia Code §
	ne laboratory certified by the United States that performs the drug tests;	s Department of Health and Human Services or its
☐ Average n	umber of employees in connection with th	e construction on the public improvement;
☐ Drug test inegative to (D) Rando	ests: (A) Pre-employment and new hires;	ng the number of positive tests and the number of (B) Reasonable suspicion; (C) Post-accident; and
Vendor Contact	Information:	
Vendor Name:	Wiseman Construction Co., Inc.	Vendor Telephone: (304) 344-1200
Vendor Address:	1616 6th Avenue	Vendor Fax: _(304) 344-1281
	Charleston, WV 25387	Vendor E-Mail: awiseman@wisemancorp.com
		c

<sup>\*</sup>Report to be submitted if low bid and at end of contract

## 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 payroil 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:

My Commission Expires October 28, 2024

Vendor's Name: Wiseman	n Construction Co., Ir	nc.	
Authorized Signature:	hy Whalim	Date: Fe	ebruary 17, 2021
State of West Virginia			
County of Kanawha	, to-wit:		
Taken, subscribed, and swort	n to before me this 17thda	ay of February	, 20 <u>21</u> .
My Commission expires	october 28		11
AFFIX SEAL HERE STATI	OFFICIAL SEAL JOTARY PUBLIC E OF WEST VIRGINIA nes C. Linkinoggor I Morningside Drive kview, WY 25071	NOTARY PUBLIC Purci	hesing Affidavit (Revised 01/19/2018)

## West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

	ame of Contracting Business Entity	Wiseman Const. Co, In-	c. Address: 16	16 6th Avenue	
			_ C	harleston, WV 25387	
Na	ame of Authorized Agent: John A. W	/iseman	Address: _161	6 6th Ave, Charleston, WV 2538	37
Ç	ontract Number: DNR21*05	Con	tract Description	New sprayground & golf sho	p const.
G	overnmental agency awarding cont	ract: WVDNR- Parks &	Recreation - PEM	Section	
	Check here if this is a Supplemen	tal Disclosure			
Lis	st the Names of Interested Parties to th tity for each category below (attach ac	e contract which are kno		anticipated by the contracting	business
1.	Subcontractors or other entitles p	_		ontract	
2.	Any person or entity who owns 25			oplicable to publicly traded o	entitles)
3.	Any person or entity that facilitates related to the negotiation			pplicable contract (excludi	no legal
	☐ Check here if none, otherwise list		-		
	Check here if none, otherwise list	entity/individual names l	below.	February 17, 2021	
	☐ Check here if none, otherwise list	entity/individual names l	below.	February 17, 2021	
No	Check here if none, otherwise list	entity/individual names l	below.	February 17, 2021	
No Sta i,_ ent	Check here if none, otherwise list of the control o	entity/individual names l	Date Signed: _ of Kanwahwa, the autho	rized agent of the contracting	business
No Sta i, _ ent per	Check here if none, otherwise list of the control o	entity/individual names i	Date Signed: _ of Kanwahwa, the autho	rized agent of the contracting to being made under oath and u	business



## WEST VIRGINIA CONTRACTOR LICENSING BOARD

# **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV000836

Classification:

GENERAL BUILDING
GENERAL ENGINEERING
MULTIFAMILY
PIPING
PAINTING
MASONRY
CONCRETE

WISEMAN CONSTRUCTION CO INC DBA WISEMAN CONSTRUCTION CO INC 1616 6TH AVE CHARLESTON, WV 25387-2424

**Date Issued** 

**Expiration Date** 

AUGUST 29, 2020

ugust 29 2021

Anthorized 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) 9/29/2020

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(les) must have ADDITIONAL INSURED provisions or be endorsed.

L	If SUBROGATION IS WAIVED, subj this certificate does not confer right	ect to	the t	erms and conditions of t rtificate holder in lieu of s	uch endorsement	(s).	y require an endorsem	ent As	tatement on
	RODUCER George H. Friedlander Company				CONTACT Jeff O'De		1		
lì	566 Kanawha Blvd. E.				PHONE (A/C, No. Ext): 304-3	57-4520	FAX (A/C, N	ol: 304-34	5-8724
	Charleston WV 25311				E-MAIL ADDRESS: jeffodell		company.com		
					11	SURER(S) AFF	ORDING COVERAGE		NAIC#
					INSURER A : Westfie	ld Insurance	Companies		24112
	SURED			WSC001	INSURER B : BrickSt	reet Insuranc	e e		12372
	Viseman Construction Co., Inc.				INSURER C:				120/2
	616 6th Avenue harleston WV 25387				INSURER D:				
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Marioston PVV 20001				INSURER E :				
					INSURER F:				
-	OVERAGES CE	פודם	ICAT	E NUMBER: 645115326	INSURER F:		REVISION NUMBER:		
į	THIS IS TO CERTIFY THAT THE POLICI INDICATED. NOTWITHSTANDING ANY CERTIFICATE MAY BE ISSUED OR MA EXCLUSIONS AND CONDITIONS OF SUC	ES OF REQU PEF H POI	INSU IREME RTAIN, ICIES.	RANCE LISTED BELOW HAY ENT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF ANY CONTRACT ED BY THE POLICIE BEEN REDUCED BY	T OR OTHER ES DESCRIBE PAID CLAIMS	RED NAMED ABOVE FOR DOCUMENT WITH RESP ED HEREIN IS SUBJECT 3.	THE POL	WHICH THIS
INS	TYPE OF INSURANCE		D WVD		POLICY EFF (MM/DD/YYYY)	POLICY EXP	Lin	AITS	
Α	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR			CMM1886950	10/4/2020	10/4/2021	EACH OCCURRENCE  DAMAGE TO RENTED  PREMISES (Ea occurrence)	\$ 1,000, \$ 500,00	
							MED EXP (Any one person)	\$ 10,000	
					1		PERSONAL & ADV INJURY	\$ 1,000,	
	GEN'L AGGREGATE LIMIT APPLIES PER:	1					GENERAL AGGREGATE	\$2,000,	
	POLICY X PRO-						PRODUCTS - COMP/OP AGG	_	
	OTHER:						PRODUCTS - COMPIOP AGG	\$ 2,000,	300
Α	AUTOMOBILE LIABILITY	+	1	CMM1886950	10/4/2020	10/4/2021	COMBINED SINGLE LIMIT	\$ 1,000,	000
•	X ANY AUTO			OMM TOGOGO	10/12020	10/4/2021	(Es accident)  BODILY INJURY (Per person)	\$ 7,000,	,00
	OWNED SCHEDULED							-	
	X HIRED XX NON-OWNED	1					PROPERTY DAMAGE	-	
	X HIRED AUTOS ONLY X AUTOS ONLY						(Per accident)	\$	
	V	-	$\vdash$					\$	
Α	X UMBRELLA LIAB X OCCUR			CMM1886950	10/4/2020	10/4/2021	EACH OCCURRENCE	\$ 5,000,0	100
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$5,000,0	000
	DED X RETENTION S NONE WORKERS COMPENSATION	-	-				DEE	\$	
В	AND EMPLOYERS' LIABILITY		lΙ	WCB1029859	10/4/2020	10/4/2021	X PER OTH-		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A	1 1		1		E.L. EACH ACCIDENT	\$ 1,000,0	00
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,0	00
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,0	00
vio	RIPTION OF OPERATIONS / LOCATIONS / VEHICLENCE OF LIABILITY INSURANCE	.ES (A	CORD 1	io1, Additional Remarks Schedule,	may be attached if more	space is require	d)		
ER	TIFICATE HOLDER			C	ANCELLATION				
	TO WHOM IT MAY CONCE	RN		AL	THE EXPIRATION ACCORDANCE WITH STHORIZED REPRESENT	DATE THEF I THE POLICY	SCRIBED POLICIES BE CAREOF, NOTICE WILL B PROVISIONS.		
	- T			0	Affector	2			