



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.



Header 3

[List View](#)

General Information

[Contact](#)[Default Values](#)[Discount](#)[Document Information](#)[Clarification Request](#)

Procurement Folder: 763325

Procurement Type: Central Purchase Order

Vendor ID: VC0000020779

Legal Name: MON VALLEY INTEGRATION LLC

Alias/DBA:

Total Bid: \$139,368.00

Response Date: 09/03/2020

Response Time: 12:11

Responded By User ID: MVI_Aaron

First Name: Aaron

Last Name: Dlugos

Email: aaron.dlugos@monvalley

SO Doc Code: CRFQ

SO Dept: 0603

SO Doc ID: ADJ2100000015

Published Date: 8/20/20

Close Date: 9/3/20

Close Time: 13:30

Status: Closed

Solicitation Description: Addendum No. 2 CDC
Emergency Generator Purchase

Total of Header Attachments: 3

Total of All Attachments: 3



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

**State of West Virginia
 Solicitation Response**

Proc Folder: 763325
Solicitation Description: Addendum No. 2 CDC Emergency Generator Purchase Installation
Proc Type: Central Purchase Order

Solicitation Closes	Solicitation Response	Version
2020-09-03 13:30	SR 0603 ESR09032000000001518	1

VENDOR
 VC0000020779
 MON VALLEY INTEGRATION LLC

Solicitation Number: CRFQ 0603 ADJ2100000015
Total Bid: 139368
Response Date: 2020-09-03
Response Time: 12:11:24
Comments:

FOR INFORMATION CONTACT THE BUYER

Tara Lyle
 (304) 558-2544
 tara.l.lyle@wv.gov

Vendor Signature X **FEIN#** **DATE**

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	CDC Emergency Generator Purchase and Installation				139368.00

Comm Code	Manufacturer	Specification	Model #
72000000			

Commodity Line Comments:

Extended Description:

Provide all labor, materials, tools, supplies and equipment needed to provide and install a new 130kw generator and automatic transfer switch per the attached specifications.

Exhibit A
Pricing Page
CRFQ ADJ21*15

ALL LABOR, MATERIALS, EQUIPMENT, AND SUPPLIES NECESSARY TO PROVIDE FOR THE PURCHASE & INSTALLATION OF A NEW 130KW GENERATOR AND AUTOMATIC TRANSFER SWITCH INCLUDING ALL ELECTRICAL & PLUMBING WORK AND START-UP SERVICES:

CHILD DEVELOPMENT CENTER (CDC)
1742 COONSKIN DRIVE, CHARLESTON, WV 25311

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

VENDOR COMPANY NAME: Mon Valley Integration, LLC

VENDOR ADDRESS: PO Box 247
Dellslow, WV 26531

TELEPHONE: (304) 212-2930

FAX NUMBER: (304) 241-5290

E-MAIL ADDRESS: aaron.dlugos@monvalleyintegration.com

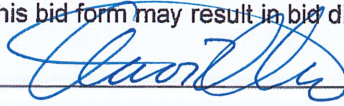
CONTRACT TOTAL BID AMOUNT: COST: PURCHASE & INSTALLATION OF A NEW 130KW GENERATOR AND AUTOMATIC TRANSFER SWITCH INCLUDING ALL ELECTRICAL & PLUMBING WORK AND START-UP SERVICES: **at the CDC, Charleston, WV.**

One Hundred Thirty-Nine Thousand Three Hundred Sixty-Eight Dollars

(\$ 139,368.00

(Contract bid to be written in words and numbers.)

Failure to use this bid form may result in bid disqualification.

SIGNATURE:  DATE: 9/3/2020

NAME: Aaron Dlugos
(Please Print)

TITLE: Sourcing Manager

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ ADJ2100000015

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)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> 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 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.

Mon Valley Integration LLC
Company

[Signature]
Authorized Signature

9/3/2020
Date

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

State of West Virginia

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:

the vendor should mail the report to the public authority issuing the contract.

Contract Identification:

Contract Number: ADJ21*15

Contract Purpose: CDC -Purchase and Install 130KW Generator and ATS

Agency Requesting Work: State of West Virginia - Dept. of Administration

Required Report Content: The attached report must include each of the items listed below. The vendor should check each box as an indication that the required information has been included in the attached report.

- Information indicating the education and training service to the requirements of **West Virginia Code** § 21-1D-5 was provided;
- Name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;
- Average number of employees in connection with the construction on the public improvement;
- Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.

Vendor Contact Information:

Vendor Name: Mon Valley Integration, LLC

Vendor Telephone: (304) 212-2930

Vendor Address: PO Box 247
Dellslow, WV 26531

Vendor Fax: (304) 241-5290

Vendor E-Mail: ap@monvalleyintegration.com



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

**STATE OF WEST VIRGINIA,
COUNTY OF Monongalia, TO-WIT:**

I, Ian Lunden, after being first duly sworn, depose and state as follows:

1. I am an employee of Mon Valley Integration; and,
(Company Name)
2. I do hereby attest that Mon Valley Integration
(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: Ian Lunden

Signature: [Handwritten Signature]

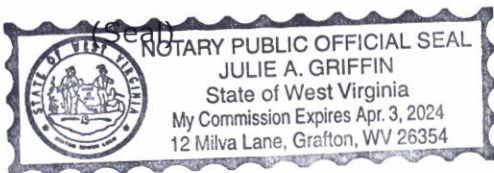
Title: Member-Manager

Company Name: Mon Valley Integration

Date: 03.16.20

Taken, subscribed and sworn to before me this 16th day of March, 2020.

By Commission expires April 3, 2024



[Handwritten Signature]
(Notary Public)

Lab:

Clinical Reference Lab
8433 Quivira Road, Lenexa, KS 66215

Average # of Employees:

32

Drug Results: (April 2019 - Current)

Pre-employment:	0 Positive	7 Negative
Resonable Suspicion:	0 Positive or Negative	
Post-Accident:	0 Postive	4 Negative
Random:	0 Positive	22 Negative