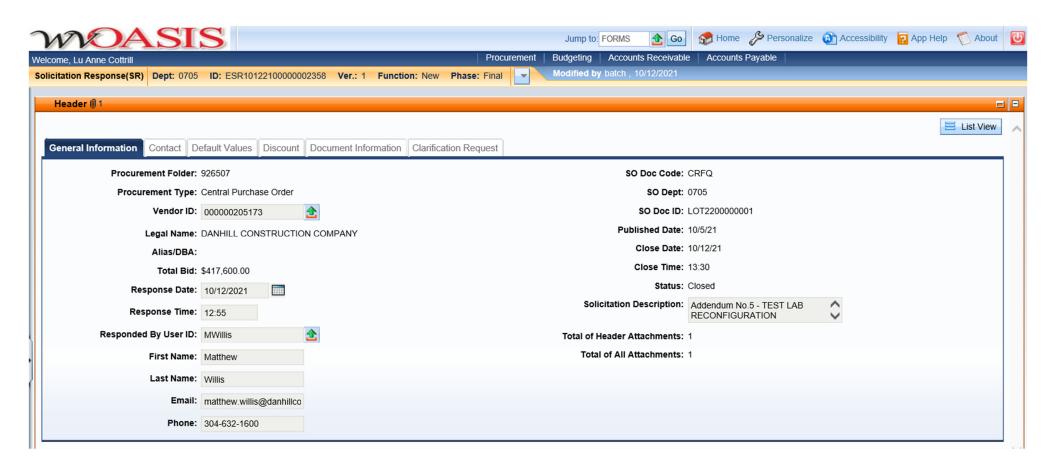
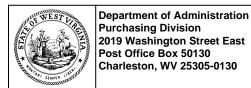


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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:

926507

**Solicitation Description:** 

Addendum No.5 - TEST LAB RECONFIGURATION CONTRUCTION

Proc Type:

Central Purchase Order

Solicitation Closes	Solicitation Response	Version
2021-10-12 13:30	SR 0705 ESR10122100000002358	1

**VENDOR** 

000000205173

DANHILL CONSTRUCTION COMPANY

Solicitation Number: CRFQ 0705 LOT2200000001

**Total Bid:** 417600 **Response Date:** 2021-10-12 **Response Time:** 12:55:14

Comments:

FOR INFORMATION CONTACT THE BUYER

Toby L Welch (304) 558-8802 toby.l.welch@wv.gov

Vendor Signature X

ture X FEIN# DATE

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

Date Printed: Oct 12, 2021 Page: 1 FORM ID: WV-PRC-SR-001 2020/05

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Commercial and office building construction				417600.00
	services				

Comm Code	Manufacturer	Specification	Model #	
72121100				

#### **Commodity Line Comments:**

#### **Extended Description:**

\*\*\*\*\*A vendor submitting a bid bond electronically must include a copy of the bid bond with their submission and will be required to provide the original bond within two (2) business days of original bid opening date.\*\*\*\*
Bid must meet or exceed the requirements listed within the Proiect Manual and specifications. Enter a Lump Sum CONTRACT AMOUNT for all

FORM ID: WV-PRC-SR-001 2020/05 Date Printed: Oct 12, 2021 Page: 2

## REQUEST FOR QUOTATION (11th Floor Test Lab Renovations)

## EXHIBIT A PRICING PAGE

"A"	BASE	CON	TRAC	CTI	LUMP	SUM	BID	:

The base bid shall consist of all the work described in the Bidding Documents including the plans, Project Manual, specifications, and any Addendums not identified as an added alternate.

\$ 389,000.00

#### "B" ADD ALTERNATE NO. 1 LUMP SUM BID:

Alternate 1 shall consist of ceiling height change and addition of bulkhead. Relocate diffuser noted on floor plans outside of raised ceiling area and rework associated ductwork as required. AS INDICATED ON THE ARCHITECTURAL DRAWINGS.

\$ 19,000.00

#### "C" ADD ALTERNATE NO.2 LUMP SUM BID:

Alternate 2 shall consist of installing new flat-panel light fixtures as shown on design documents. (Base bid existing lighting to remain) AS INDICATED ON THE ARCHITECTURAL DRAWINGS:

\$ 9,600.00

Total bid amount is the total of "A" + "B" + "C"

\$ 417,600.00

## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ LOT22\*1

**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.

		umbers R	eceived: ach addendum rec	eive	<del>1</del> )				
(									
	[ X ]	Addendu	m No. 1	[	]	Addendum No. 6			
	[ X ]	Addendu	m No. 2	[	]	Addendum No. 7			
	[X]	Addendu	m No. 3	[	]	Addendum No. 8			
	[ X ]	Addendu	m No. 4	[	]	Addendum No. 9			
	[ X ]	Addendu	m No. 5	[	]	Addendum No. 10			
further discuss	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.								
				Ι	Danl	hill Construction Company			
				-		Company			
					Ro	best D. Hill			
						Authorized Signature			
				****	10/1	12/21			
						Date			

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing. Revised 6/8/2012

#### **BID BOND**

	KNOW ALL MEN BY THESE P	RESENTS, That	we, the undersigned, D	anhill Construct	ion Compa	ny
of	Gauley Bridge					Insurance Company
of	Boston,	MA	, a corporation or	ganized and existin	ng under the	laws of the State of
NH	with its principal office	in the City of	Boston	_, as Surety, are h	neld and firm	ly bound unto the State
of Wes	t Virginia, as Obligee, in the pena	sum of Five Pe	rcent of Amount Bid	(\$	5%) fo	or the payment of which,
well an	d truly to be made, we jointly and	severally bind ou	ırselves, our heirs, adm	inistrators, executo	ors, successo	ors and assigns.
	The Condition of the above of	bligation is such	that whereas the Prin	cipal has submitte	ed to the Pu	rchasing Section of the
	ment of Administration a certain b					
Test L	ab Reconfiguration Construc	tion - CRFQ-0	705-LOT220000000°	1 - According to	Plans & Sp	ecifications
***************************************	NOW THEREFORE,					
the agr	(a) If said bid shall be rejet (b) If said bid shall be a sed hereto and shall furnish any of the acceptance and effect. It is expressly undexceed the penal amount of this content of the	ccepted and the ther bonds and ir ce of said bid, the terstood and agre	surance required by the en this obligation shall b eed that the liability of t	e bid or proposal, a e null and void, oth	and shall in a nerwise this o	obligation shall remain in
	The Surety, for the value receinpaired or affected by any extension.					
	WITNESS, the following signat	ures and seals o	f Principal and Surety, e	executed and seale	ed by a prope	er officer of Principal and
Surety	, or by Principal individually if Prin					
Princip	pal Seal				(Name of P The sident, Volume of P	rincipal)  LCC  ice President, or ed Agent) esident
Surety	Seal			By: Fatricia A. Moye, W.	(Name of S	Weng

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 limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

Certificate No 8205759-973918

#### **POWER OF ATTORNEY**

Gordon: Kimberly J. Wilkinson; Patricia A. Moye	
all of the city of <u>Charleston</u> state of <u>WV</u> each individually if there be more than one named, its true and lawful attorney-in-fact to make execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.	
IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 17th day of June . 2021	
Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company West American Insurance Company West American Insurance Company West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company  The Ohio Casualty Insurance Company  West American Insurance Company  The Ohio Casualty Insurance Company	quiries.
State of PENNSYLVANIA County of MONTGOMERY ss	ni noi
On this 17th day of June, 2021 before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer	verificat P@liber
IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written	(AO)
Commonwealth of Pennsylvania - Notary Seat Teresa Pastella, Notary Public Montgomery County My commission expires March 28, 2025 Commission number 1126044 Member, Pennsylvania Association of Notanes  By: Use a Notary Public  Teresa Pastella, Notary Public	r of Attorney (POA) verification inquiries.
This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows	Powe
ARTICLE IV - OFFICERS; Section 12 Power of Attorney Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute seal acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority	ond an
ARTICLE XIII – Execution of Contracts: Section 5. Surety Bonds and Undertakings  Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe	
Any officer of the Company automotived in that pulpose in writing by the charman of the president and solven to solv	
Certificate of Designation – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey. Assistant Secretary to appoint such attorneys infact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.	
Authorization – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed	
I, Renee C. Llewellyn, the undersigned, Assistant Secretary The Unit Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the detection of a unit and correct copy of the Power of Attorney executed by said Companies is in full force and effect and has not been revoked.	
IN TESTIMONY WHEREOF, I have hereunto set my lead and affixed the seals of said Companies this 12th day of October 2021	
1912 1919 1919 By: Renee C Liewellyn Assistant Secretary	



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

STATE OF WEST VIRGINIA, COUNTY OF Fayette , TO-WIT: \_\_\_\_\_, after being first duly sworn, depose and state as follows: Robert D. Hill I am an employee of <u>Danhill Construction Company</u> 1. (Company Name) I do hereby attest that \_\_Danhill Construction Company 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: Robert D. Hill Signature: Robert W. Will Title: President Company Name: Danhill Construction Company Taken, subscribed and sworn to before me this 12th day of October2021 By Commission expires July 27, 202 (Seal) (Notary Rublic) OFFICIAL SEAL

NOTARY PUBLIC STATE OF WEST VIRGINIA Cheryl Lynn Lawrence Danhill Construction

033 Midland Trail, Glen Ferris, WV 25090 My Commission Expires July 27, 2026 Rev. July 7, 2017

## 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 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:

9033 Midland Trail, Glen Ferris, WV 25090 My Commission Expires July 27, 2026

Vendor's Name: Danhill Const	ruction Company		
Authorized Signature: Rober	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Date: _	10/12/21
State of West Virginia			
County of Fayette	, to-wit:		
Taken, subscribed, and sworn to	pefore me this <u>12</u> day of <u>October</u>		, 20 <u>21</u> .
My Commission expires	ly 27 , 20%.		
AFFIX PAL HERE  NOTARY STATE OF WE Chery Lynn Dashill Co.	PUBLIC ST VIRGINIA Lawrence NOTARY PUBLI	U	Lynn Frewow Purchasing Affidavit (Revised 01/19/2018)



## WEST VIRGINIA CONTRACTOR LICENSING BOARD

# **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV001196

Classification:

ELECTRICAL
GENERAL BUILDING
HEATING, VENTILATING & COOLING
MULTIFAMILY
PIPING
PLUMBING
RESIDENTIAL

DANHILL CONSTRUCTION COMPANY
DBA DANHILL CONSTRUCTION COMPANY
PO BOX 685
GAULEY BRIDGE, WV 25085-0685

**Date Issued** 

**Expiration Date** 

AUGUST 06, 2021

AUGUST 06, 2022

Robert D. Hill

Authorized Company Signature

Chair, West Virginia Contractor

Licensing Board

A copy of this license must be readily available for inspection by the Board on every job site where contracting 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 is non-transferrable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.



Client#: 1638974

18DANHICON

#### ACORD. CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/30/2021

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 ter this certificate does not confer any rights to the		f such endorsement(s).	an endorsement. A statem	nent on
PRODUCER		NAME: Janet Poling		
McGriff Insurance Services		PHONE (A/C, No, Ext): 304 346-0806	FAX (A/C, No): 8887	513002
300 Summers Street, Suite #650		E-MAIL ADDRESS: jpoling@mcgriff.com		
Charleston, WV 25301		INSURER(S) AFFORDING COVERAGE		NAIC #
304 346-0806		INSURER A: Westfield National Insura	nce Company	24120
INSURED	ny	INSURER B : Brickstreet Mutual Insurance Company		12372
Danhill Construction Company		INSURER C :		
P O Box 685		INSURER D :		
Gauley Bridge, WV 25085		INSURER E :		
		INSURER F :		
COVERAGES CERTIFICATE	E NUMBER:	RE	VISION NUMBER:	
THIS IS TO CERTIFY THAT THE POLICIES OF INSUINDICATED. NOTWITHSTANDING ANY REQUIREMEN CERTIFICATE MAY BE ISSUED OR MAY PERTAIN.	ENT, TERM OR CONDITION OF THE INSURANCE AFFORDER	ANY CONTRACT OR OTHER DOCUM BY THE POLICIES DESCRIBED HER	MENT WITH RESPECT TO W	HICH THIS
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES	S LIMITS SHOWN MAY HAV	E BEEN REDUCED BY PAID CLAIMS.		

ADDL SUBR POLICY EFF POLICY EXP
(MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER X COMMERCIAL GENERAL LIABILITY 07/01/2021 07/01/2022 EACH OCCURRENCE Δ Х X TRA0548113 \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE X OCCUR \$500,000 X XCU Included \$5,000 MED EXP (Any one person) X Contractual Liab. \$2,000,000 PERSONAL & ADV INJURY GEN'L AGGREGATE LIMIT APPLIES PER: \$2,000,000 GENERAL AGGREGATE POLICY X PRO-\$2,000,000 PRODUCTS - COMP/OP AGG 100 OTHER: 07/01/2021 07/01/2022 COMBINED SINGLE LIMIT \$1,000,000 AUTOMOBILE LIABILITY X X TRA0548113 BODILY INJURY (Per person) ANY AUTO \$ SCHEDULED OWNED AUTOS ONLY BODILY INJURY (Per accident) AUTOS NON-OWNED AUTOS ONLY PROPERTY DAMAGE (Per accident) HIRED AUTOS ONLY X UMBRELLA LIAB 07/01/2021 07/01/2022 EACH OCCURRENCE X OCCUR Х TRA0548113 \$7,000,000 **EXCESS LIAB** CLAIMS-MADE AGGREGATE \$7,000,000 DED X RETENTION \$0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 07/01/2021 07/01/2022 X STATUTE WCB1008781 OTH Includes WV Broad Form ANY PROPRIETOR/PARTNER/EXECUTIV OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT s1,000,000 Y N/A E.L. DISEASE - EA EMPLOYEE \$1,000,000 (Mandatory In NH)
If yes, describe under
DESCRIPTION OF OPERATIONS below **Employers** Liability Section of WV Code 23-4-2 E.L. DISEASE - POLICY LIMIT \$1,000,000

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

\*\* Workers Comp Information \*\*

Voluntary Compensation; Other States Coverage

Proprietors/Partners/Executive Officers/Members Excluded:

Robert Hill, President

Rebecca Hill, Secretary/Treasurer

(See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
Robert Dan Hill 187 Glen Ferris Loop Glen Ferris, WV 25090	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
2.0,	AUTHORIZED REPRESENTATIVE
	Greens B. Stanly.

© 1988-2015 ACORD CORPORATION. All rights reserved.