



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 @ 1

List View

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

Procurement Folder: 967354

Procurement Type: Central Purchase Order

Vendor ID: 000000209317 


Legal Name: CENTRAL VAN & STORAGE OF CHARLESTON INC

Alias/DBA:

Total Bid: \$193,827.00

Response Date: 12/14/2021 

Response Time: 8:54

Responded By User ID: centralvan 

First Name: Rich

Last Name: Harmon

Email: rharmon@centralvan.com

Phone: 304-223-7318

SO Doc Code: CRFQ

SO Dept: 0932

SO Doc ID: DRS2200000005

Published Date: 12/14/21

Close Date: 12/16/21

Close Time: 13:30

Status: Closed

Solicitation Description: Addendum No. 2 -Professional Moving and Relocation Services

Total of Header Attachments: 1

Total of All Attachments: 1



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: 967354
Solicitation Description: Addendum No. 2 -Professional Moving and Relocation Services
Proc Type: Central Purchase Order

Solicitation Closes	Solicitation Response	Version
2021-12-16 13:30	SR 0932 ESR12122100000003600	1

VENDOR
000000209317
CENTRAL VAN & STORAGE OF CHARLESTON INC

Solicitation Number: CRFQ 0932 DRS2200000005

Total Bid: 193827

Response Date: 2021-12-14

Response Time: 08:54:20

Comments:

FOR INFORMATION CONTACT THE BUYER

Toby L Welch
(304) 558-8802
toby.l.welch@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	RELOCATION SERVICES	1.00000	LS	193827.000000	193827.00

Comm Code	Manufacturer	Specification	Model #
78101804			

Commodity Line Comments:

Extended Description:

Vendor must enter a lump sum Grand total amount here. Vendors submitting paper bids should print this off and manually enter a lump sum Contract amount and submit with their bid



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
 Service - Prof

Proc Folder: 967354
 Doc Description: Addendum No. 1 -Professional Moving and Relocation Services

Reason for Modification:
 Addendum No. 1 is issued to publish a copy of sign in sheet from the mandatory pre-bid meeting and t..... See Page 2 for complete info

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2021-12-02	2021-12-14 13:30	CRFQ 0932 DRS2200000005	2

BID RECEIVING LOCATION

BID CLERK
 DEPARTMENT OF ADMINISTRATION
 PURCHASING DIVISION
 2019 WASHINGTON ST E
 CHARLESTON WV 25305
 US

VENDOR

Vendor Customer Code: 000000209317
 Vendor Name: Central Van & Storage of Charleston Inc.
 Address: 37 Jacobson Dr.
 Street :
 City: Roanoke
 State: WV Country: US Zip: 25159
 Principal Contact: Rich Harman
 Vendor Contact Phone: 304-223-7318 Extension:

FOR INFORMATION CONTACT THE BUYER

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

Vendor
 Signature X

FEIN# 550952625 DATE 12/13/21

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

Reason for Modification:

Addendum No. 1 is issued to publish a copy of sign in sheet from the mandatory pre-bid meeting and to modify specifications as attached:

ADDITIONAL INFORMATION

Addendum No. 1 is issued for the following reasons:

- 1) To add a list of items being moved per specification 4.1.13
- 2) To publish a copy of the sign-in sheet from the mandatory pre-bid meeting.
- 3) To modify the specifications by adding 4.1.14 / 4.1.15 / 4.1.16 / 4.1.17 / 4.1.18 - as attached.

-----no other changes-----

INVOICE TO		SHIP TO	
DIVISION OF REHABILITATION SERVICES 107 CAPITOL ST		DIVISION OF REHABILITATION SERVICES 107 CAPITOL ST	
CHARLESTON	WV	CHARLESTON	WV
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	RELOCATION SERVICES	1.00000	LS		\$ 193,827. ⁰⁰

Comm Code	Manufacturer	Specification	Model #
78101804			

Extended Description:

Vendor must enter a lump sum Grand total amount here. Vendors submitting paper bids should print this off and manually enter a lump sum Contract amount and submit with their bid

SCHEDULE OF EVENTS

Line	Event	Event Date
1	Vendors must sign in	2021-12-02
2	Questions are due by 4:00 p.m.	2021-12-06

SOLICITATION NUMBER:
Addendum Number:

The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

Applicable Addendum Category:

- Modify bid opening date and time
- Modify specifications of product or service being sought
- Attachment of vendor questions and responses
- Attachment of pre-bid sign-in sheet
- Correction of error
- Other

Description of Modification to Solicitation:

Addendum No. 1 is issued for the following reasons:

- 1) To add a list of items being moved per specification 4.1.13
 - 2) To publish a copy of the sign-in sheet from the mandatory pre-bid meeting.
 - 3) To modify the specifications by adding 4.1.14 / 4.1.15 / 4.1.16 / 4.1.17 / 4.1.18 - as attached.
- no other changes-----

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ATTACHMENT A

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ DRS22*5

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 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 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.

Central Van & Storage of Charleston Inc.
Company


Authorized Signature

12/13/21
Date

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

Revised 6/8/2012

CRFQ DRS2200000005

ADDENDUM NO. 1

To add lists of items omitted from the original CRFQ, per the attached.

To provide the mandatory pre-bid sign-in sheet, per the attached.

To add the following specifications:

4.1.14 The Agency shall bag the meters on Capitol Street to facilitate truck access.

4.1.15 Vendor shall move computer monitors and printers. Agency staff will move their own laptop computers and small peripherals.

4.1.16 All lateral file cabinets shall be empty. Agency staff will be responsible for boxing paper files for vendor to move. Standard upright file cabinets may remain filled.

4.1.17 Agency staff will disassemble smart boards for vendor to move.

4.1.18 An elevator key will be provided to the vendor to allow locking the elevator doors open at 107 Capitol Street during the move.

NO OTHER ADDITIONS

Central Van & Storage was founded in 1996 by Leonard E. (Gene) Papa II and has been Allied Van Lines agent since 1997. The company has grown from a 1,000 square foot warehouse, with 2 trucks and 4 employees, to four full-service locations with over 60 trucks and more than 100 employees. Central Van & Storage is the largest moving and storage company in the state of West Virginia, with locations serving Charleston, Morgantown, Clarksburg, Parkersburg, Huntington, and Beckley. The company also has a facility in Pittsburgh, PA, servicing Wheeling and points north.

The principal officer and President is Leonard E. (Gene) Papa II. Mr. Papa is a 2nd generation mover working for his family moving business since 1988 before starting his own company.

Central Van & Storage is an award-winning agent, earning multiple van line awards over the years. In 2017, Central Van & Storage was selected as the Allied Van Lines Agent of the year.

Central Van & Storage is the largest commercial mover in WV and a leading mover in a 200-mile radius of Charleston WV. We are a contracted commercial mover for the WV DHHR, WV DEP, WV University, Marshall University, and multiple corporations. We have successfully completed over 100 commercial moves over the years for the State of WV ranging from smaller one crew, one day moves to moves taking several weeks to over a month with multiple trucks & more than thirty movers per day.

Central Van & Storage is more than qualified to perform this relocation in the timeline provided with a high level of quality and service. We have a large group of trained, dedicated employees, with many who have been with the company for over 20 years. We pride ourselves in providing top-notch, quality relocation services for 25 years.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/2/2021

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 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 Alliant Insurance Services, Inc. 222 Bloomingdale Rd #402 White Plains NY 10605 INSURED Central Van & Storage of Charleston Inc. Central Van & Storage; Evans Van & Storage, LLC PO Box 626 Poca WV 25159	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">CONTACT NAME: Jennifer Long</td> </tr> <tr> <td>PHONE (A/C, No, Ext): 9143367938</td> <td>FAX (A/C, No):</td> </tr> <tr> <td colspan="2">E-MAIL ADDRESS: michelle.leschhorn@alliant.com</td> </tr> <tr> <td colspan="2" style="text-align: center;">INSURER(S) AFFORDING COVERAGE</td> </tr> <tr> <td>INSURER A: Vanliner Insurance Company</td> <td style="text-align: right;">NAIC # 21172</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	CONTACT NAME: Jennifer Long		PHONE (A/C, No, Ext): 9143367938	FAX (A/C, No):	E-MAIL ADDRESS: michelle.leschhorn@alliant.com		INSURER(S) AFFORDING COVERAGE		INSURER A: Vanliner Insurance Company	NAIC # 21172	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
CONTACT NAME: Jennifer Long																					
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INSURER B:																					
INSURER C:																					
INSURER D:																					
INSURER E:																					
INSURER F:																					

COVERAGES	CERTIFICATE NUMBER: 1287415610	REVISION NUMBER:
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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.

INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	INSD	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:					AVG000006600	6/25/2021	10/1/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A		<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY				AVA5191300 00	6/25/2021	10/1/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A		<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000				UMV519130000	6/25/2021	10/1/2022	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N			Y	N/A	10/1/2021	10/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Cargo Legal Liability Cargo Liability Warehouse Liability					CGV519130000	6/25/2021	10/1/2022	Any One Truck Any One Occurrence See Description of Op 200,000 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Warehouse Legal Liability: Vanliner Insurance Company CGV519130000 6/25/2021-6/25/2022
 5671 Benedum Road Shinnston, WV 26431 - \$1,025,000
 37 Jacobson Dr, Poca, WV 25159 - \$1,025,000
 425-429 N 4th Street, Clarksburg, WV 26301 - \$150,000
 123 Lee Street, Belpre, OH 45714 - \$25,000
 1385 Grafton Road, Morgantown, WV 26508 - \$1,025,000
 4801 Grand Ave, Ste A, Neville Island, PA 15225 - \$1,500,000
 4801 Grand Ave, Ste D, Neville Island, PA 15225 - \$2,500,000
 See Attached...

CERTIFICATE HOLDER WEST VIRGINIA DIVISION OF REHABILITATION SERVICES 107 CAPITOL ST CHARLESTON WV 25301	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
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ADDITIONAL REMARKS SCHEDULE

AGENCY Alliant Insurance Services, Inc.		NAMED INSURED Central Van & Storage of Charleston Inc. Central Van & Storage; Evans Van & Storage, LLC PO Box 626 Poca WV 25159	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

1420 Bigley Ave, Charleston, WV \$500,000
 Re: Evidence of Insurance

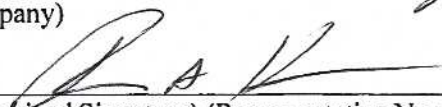
DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

Gene Papa - President
(Name, Title)
Gene Papa President
(Printed Name and Title)
37 Jacobson Dr PoCA WV 25159
(Address)
304-741-3813
(Phone Number) / (Fax Number)
gpapa @ centralvan . 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.

By signing below, I further certify that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law.

Central Van & Storage of Charleston Inc.
(Company)


(Authorized Signature) (Representative Name, Title)

Richard A. Harmon
(Printed Name and Title of Authorized Representative)

12/13/21
(Date)

304-223-7318
(Phone Number) (Fax Number)

REQUEST FOR QUOTATION
RELOCATION SERVICES

10. VENDOR DEFAULT:

10.1. The following shall be considered a vendor default under this Contract.

10.1.1. Failure to perform Contract Services in accordance with the requirements contained herein.

10.1.2. Failure to comply with other specifications and requirements contained herein.

10.1.3. Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.

10.1.4. Failure to remedy deficient performance upon request.

10.2. The following remedies shall be available to Agency upon default.

10.2.1. Immediate cancellation of the Contract.

10.2.2. Immediate cancellation of one or more release orders issued under this Contract.

10.2.3. Any other remedies available in law or equity.

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: Gurk PAPA
Telephone Number: 304-741-3813
Fax Number: 304-291-8100
Email Address: GPAPA@CENTRAVAN.COM

West Virginia Ethics Commission
Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity: Central Van & Storage Address: 301 Jacobson Dr
Poca WV 25159

Name of Authorized Agent: _____ Address: _____

Contract Number: _____ Contract Description: _____

Governmental agency awarding contract: Div of Rehab Services

Check here if this is a Supplemental Disclosure

List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (attach additional pages if necessary):

1. Subcontractors or other entities performing work or service under the Contract

Check here if none, otherwise list entity/individual names below.

2. Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities)

Check here if none, otherwise list entity/individual names below.

3. Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding legal services related to the negotiation or drafting of the applicable contract)

Check here if none, otherwise list entity/individual names below.

Signature: [Signature]

Date Signed: 12/13/21

Notary Verification

State of West Virginia County of Putnam

I, Richard A. Hansen, the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the penalty of perjury.

Taken, sworn to and subscribed before me this 13th day of December

[Signature]
Notary Public's Signature

To be completed by State Agency:
Date Received by State Agency: _____
Date submitted to Ethics Commission: _____
Governmental agency submitting Disclosure: _____



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 exceeds 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: Central Van & Storage

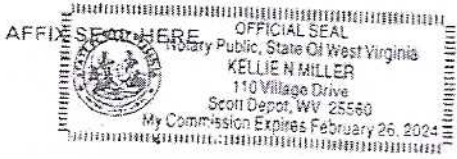
Authorized Signature: [Signature] Date: 12/1/21

State of West Virginia

County of Putnam to-wit:

Taken, subscribed, and sworn to before me this 13 day of December, 2021.

My Commission expires February 26, 2024.



NOTARY PUBLIC [Signature]
Purchasing Affidavit (Revised 01/19/2018)