

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: 1252690

Solicitation Description: SECONDARY ROADS CONSULTING 969240101)

Proc Type: Central Master Agreement

 Solicitation Closes
 Solicitation Response
 Version

 2023-07-25 13:30
 SR 0803 ESR0720230000000211
 1

**VENDOR**VS0000019301
TB & RR LLC

Solicitation Number: CRFQ 0803 DOT2400000001

Total Bid: 0 Response Date: 2023-07-20 Response Time: 17:22:13

Comments:

FOR INFORMATION CONTACT THE BUYER

John W Estep 304-558-2566 john.w.estep@wv.gov

VendorSignature XFEIN#DATE

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

 Date Printed:
 Jul 25, 2023
 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	SECONDARY ROAD CONSULTING SERVICE	0.00000	DAY	1327.000000	0.00

Comm Code	Manufacturer	Specification	Model #	
72141003				

# **Commodity Line Comments:**

### **Extended Description:**

CONSULTING SERVICES - SECONDARY ROAD MAINTENANCE SEE ATTACHED EXHIBIT A PRICING PAGE

 Date Printed:
 Jul 25, 2023
 Page: 2
 FORM ID: WV-PRC-SR-001 2020/05

# **EXHIBIT A - PRICING PAGE**

TOTAL INSTALLATION & DELIVERY COST  LOCATION -Building 5, Room 920, Charleston, WV 25305							
Item Number	Est. Qty	Description	Unit Per Day Price	Extended Price			
1	50	Consultant Services - Secondary Road Maintenance Initiative	\$1,327.00	\$66,350.00			

**Daily Rate Must include travel charges** 

**Estimated Quantity 50 Days** 



PRODUCER State Farm

Chuck Noffsinger Insurance Agency Inc

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/19/2023

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. 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).

CONTACT Chuck Noffsinger PHONE 304-295-4575

Sta	teFari	M Chuck Noffsinger Insura	nce /	Agen	cy Inc	PHONE (A/C, No	o, Ext): 304-29	5-4575	FAX (A/C, No):		
1		2801 Grand Central Ave	<b>:</b>			E-MAIL ADDRE	م 🕾 دام در مام	chucknoffsing			
Vienna, WV 26105			INSURER(S) AFFORDING COVERAGE NAIC #								
						INSURE			omobile Insurance Company	25178	
INSU	SURED			INSURE	RB:						
		James E Roten, Jr.				INSURE	RC:				
		546 Scenic Hills Dr.				INSURE	INSURER D:				
		Parkersburg, WV 26104				INSURE	RE:				
						INSURE	RF:				
	/ERAG				NUMBER:				REVISION NUMBER:		
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDE EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE I		VE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS ED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, BEEN REDUCED BY PAID CLAIMS.    POLICYEFF   POLICYEXP									
INSR LTR		TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS		
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-		CLAIMS-MADEOCCUR							PREMISES (Ea occurrence) \$		
ŀ									MED EXP (Any one person) \$		
	Ш								PERSONAL & ADV INJURY \$		
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		DPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT \$		
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prov	iding co	ontracted consulting Services to	the S	tate o	of WV						
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CERTIFICATE HOLDER				CANCELLATION							
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SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEI THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED ACCORDANCE WITH THE POLICY PROVISIONS.											
		1900 Kanawha Blvd E Bldg 5				AUTHO	RIZED REPRESE	NTATIVE	11		
		Charleston WV 25305					Jel-	P	1/2	į	
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## CERTIFICATE OF LIABILITY INSURANCE

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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).

this certificate does not confer rights t	o the	certi							
PRODUCER				CONTAC NAME: PHONE	Chuck No	offsinger			Ť
StateFarm Chuck Noffsinger Insurance Agency Inc		cy inc	PHONE (A/C, No, Ext): 304-295-4575 FAX (A/C, No):						
2801 Grand Central Ave	)			E-MAIL ADDRES	ss: chuck@d	hucknoffsinge	er.com		
Vienna, WV 26105						URER(S) AFFOR	DING COVERAGE		NAIC #
			INSURE			sualty Company		25143	
INSURED				INSURER B:					
TB & RR LLC			F	INSURER C:					
546 Scenic Hills Dr.			F	INSURER D:					
Parkersburg, WV 26104-840	3		F	INSURER F :					
<u>-</u>			ľ						
COVERAGES CER	TIFIC	ATE	NUMBER:		····		REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	EQUIR PERT POLIC	EME AIN, CIES.	NT, TERM OR CONDITION ( THE INSURANCE AFFORDS	OF AN	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER S DESCRIBE PAID CLAIMS.	DOCUMENT WITH RESPE	CT TO	WHICH THIS
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							MED EXP (Any one person)	\$	
			97-BJ B554-0		08/08/2022	08/08/2023	PERSONAL & ADV INJURY	\$	
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OTHER						ĺ		s	
AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
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OWNED SCHEDULED AUTOS ONLY AUTOS				1			BODILY INJURY (Per accident)	\$	
HIRED NON-OWNED AUTOS ONLY					1		PROPERTY DAMAGE (Per accident)	\$	
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WORKERS COMPENSATION							PER OTH- STATUTE ER	\$	
ANY PROPRIETOR/PARTNER/EXECUTIVE	OFFICER/MEMBER EXCLUDED?			ĺ			E.L. EACH ACCIDENT	\$	*
OFFICER/MEMBER EXCLUDED? [Mandatory In NH]							E.L. DISEASE - EA EMPLOYEE	s	
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1900 Kanawha Bivd E Bidg 5	5			AUTHO	RIZED REPRESE	NTATIVE	<u> </u>		
Charleston WV 25305				1 / mat					

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# REQUEST FOR QUOTATION Consulting Services – Secondary Road Maintenance Initiative

# 8.2.3 Any other remedies available in law or equity.

# 9. MISCELLANEOUS:

- 9.1 No Substitutions: Vendor shall supply only Contract Items submitted in response to the Solicitation unless a contract modification is approved in accordance with the provisions contained in this Contract.
- 9.2 Vendor Supply: Vendor must carry sufficient inventory of the Contract Items being offered to fulfill its obligations under this Contract. By signing its bid, Vendor certifies that it can supply the Contract Items contained in its bid response.
- 9.3 Reports: Vendor shall provide quarterly reports and annual summaries to the Agency showing the Agency's items purchased, quantities of items purchased, and total dollar value of the items purchased. Vendor shall also provide reports, upon request, showing the items purchased during the term of this Contract, the quantity purchased for each of those items, and the total value of purchases for each of those items. Failure to supply such reports may be grounds for cancellation of this Contract.
- 9.4 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: James E. Roten, Jr. "Rusty"
Telephone Number: (304) 588-0826

Fax Number: (304) 420-0379 (Shared Land Line)

Email Address: tb\_rr://c@yahoo.com

Alt: rotenje yahoo.com

**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.

(Printed Name and Title) <u>James E. Roten, Jr. Company Partner</u>

(Address) <u>546 Scenic Hills, Parkersburg, WV 26104-8406</u>

(Phone Number) / (Fax Number) <u>(304) 588-0826</u> / (304) 420-0379 (Shared Land Line)

(Email address) <u>Hb\_rr.llc@yahoo.com</u> (Alternate: rotenj@yahoo.com)

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation/Contract 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/Contract 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 this bid or offer was made without prior understanding, agreement, or connection with any entity submitting a bid or offer for the same material, supplies, equipment or services; that this bid or offer is in all respects fair and without collusion or fraud; that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; 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; and that pursuant to W. Va. Code 5A-3-63, the entity entering into this contract is prohibited from engaging in a boycott against Israel.

TB&RR, LLC
(Company) Jawell to Sp
(Signature of Authorized Representative)  James E. Roten, Jr. Company Partner 7/20/2023
(Printed Name and Title of Authorized Representative) (Date) (304)588-0826 (304)420-0379 (Shaved Land Line)
(Phone Number) (Fax Number) tb_rr. 11ce yahoo. com
(Email Address)

# WEST VIRGINIA STATE TAX DEPARTMENT BUSINESS REGISTRATION CERTIFICATE

ISSUED TO:
TB & RR, LLC
546 SENIC HILLS
PARKERSBURG, WV 26104-0000

BUSINESS REGISTRATION ACCOUNT NUMBER:

2377-4020

This certificate is issued on:

05/23/2019

This certificate is issued by the West Virginia State Tax Commissioner in accordance with Chapter 11, Article 12, of the West Virginia Code.

The person or organization identified on this certificate is registered to conduct business in the State of West Virginia at the location above.

This certificate is not transferrable and must be displayed at the location for which issued.

This certificate shall be permanent until cessation of the business for which the certificate of registration was granted or until it is suspended, revoked or cancelled by the Tax Commissioner.

Change in name or change of location shall be considered a cessation of the business and a new certificate shall be required.

TRAVELING/STREET VENDORS: Must carry a copy of this certificate in every vehicle operated by them. CONTRACTORS, DRILLING OPERATORS, TIMBER/LOGGING OPERATIONS: Must have a copy of this certificate displayed at every job site within West Virginia.

atL006 v.19 L1954993088



# Certificate

# I, Mac Warner, Secretary of State of the State of West Virginia, hereby certify that

TB & RR, LLC

Control Number: 9AQTC

has filed its "Articles of Organization" in my office according to the provisions of West Virginia Code §§31B-2-203 and 206. I hereby declare the organization to be registered as a limited liability company from its effective date of May 23, 2019 until the expiration of the term or termination of the company.

Therefore, I hereby issue this

# CERTIFICATE OF A LIMITED LIABILITY COMPANY



Given under my hand and the Great Seal of the State of West Virginia on this day of May 23, 2019

Mac Warner