



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
 Equipment

Proc Folder: 1294508			Reason for Modification: Addendum No_3 Vendor questions and responses
Doc Description: ADDENDUM NO_3 Trailer Mounted Culvert Cleaner			
Proc Type: Central Master Agreement			
Date Issued	Solicitation Closes	Solicitation No	Version
2023-10-13	2023-10-23 13:30	CRFQ 0803 DOT2400000022	4

BID RECEIVING LOCATION

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



VENDOR

Vendor Customer Code: 000000204452
Vendor Name : West Virginia Tractor Company
Address : PO Box 473
Street : 214 Virginia Street West
City : Charleston
State : WV **Country :** US **Zip :** 25322
Principal Contact : Gary Grady
Vendor Contact Phone: 304-346-5301 **Extension:**

FOR INFORMATION CONTACT THE BUYER

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

Vendor
 Signature X

Gary Grady

FEIN#

550621655

DATE

10-17-23

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

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFO DOT240000022

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 checked="" 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.

West Virginia Tractor Company

Company



Authorized Signature

10-17-23

Date

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

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) Gary Grady President
(Address) PO Box 473 Charleston, WV 25322
(Phone Number) / (Fax Number) 304-346-5301 304-346-5305
(email address) wvtractor@msn.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.

West Virginia Tractor Company

(Company) _____

(Signature of Authorized Representative) Gary Grady

(Printed Name and Title of Authorized Representative) (Date) _____

Gary Grady President
(Phone Number) (Fax Number)
wvtractor@msn.com

(Email Address) _____

REQUEST FOR QUOTATION
(WVDOH CLASS 814) Trailer Mounted Culvert Cleaner Vector Ramjet Or Equal.

- 8.2 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.
- 8.3 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: Gary Grady
Telephone Number: 304-346-5301
Fax Number: 304-346-5305
Email Address: wvtractor@msn.com



CERTIFICATE OF GARAGE INSURANCE

DATE (MM/DD/YYYY)
04/21/2023

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(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 Sentry Insurance 1800 North Point Drive Stevens Point, WI 54481	CONTACT NAME: Sentry Customer Service
	PHONE (A/C, No, Ext): 800-473-6879 FAX (A/C, No): 800-514-7191 EMAIL ADDRESS: businessproducts_direct@sentry.com
INSURER(S) AFFORDING COVERAGE	
INSURER A : Sentry Select Insurance Company	NAIC # 21180
INSURED West Virginia Tractor Co. PO Box 473 214 Virginia Street West Charleston, WV 25322	
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

COVERAGES PROD / CUSTOMER ID: CERTIFICATE #: 1311744 REVISION #:

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 INSRD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> Scheduled Autos <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS USED IN GARAGE BUSINESS			A0053698001	04/01/2023	04/01/2024	AUTO ONLY (Ea accident)	\$ 500,000	
							OTHER THAN AUTO ONLY	EA ACCIDENT	\$ 500,000
								AGGREGATE	\$ 2,500,000
A	GARAGE KEEPERS LIABILITY <input type="checkbox"/> LEGAL LIABILITY <input type="checkbox"/> DIRECT BASIS <input type="checkbox"/> PRIMARY <input type="checkbox"/> EXCESS			A0053698001	04/01/2023	04/01/2024	<input checked="" type="checkbox"/> COMP / OTC SPECIFIED PERILS	LOC 1 \$ 250,000	
							<input checked="" type="checkbox"/> COLLISION	LOC 1 \$ 250,000	
								LOC \$	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	X		A0053698005	04/01/2023	04/01/2024	EACH OCCURRENCE	\$ 1,000,000	
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000	
							MED EXP (Any one person)	\$ 5,000	
							PERSONAL & ADV INJURY	\$ 1,000,000	
							GENERAL AGGREGATE	\$ 3,000,000	
							PRODUCTS - COMP/OP AGG	\$ 2,000,000	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			A0053698008	04/01/2023	04/01/2024	EACH OCCURRENCE	\$ 2,000,000	
							AGGREGATE	\$ 6,000,000	
							PRODUCTS - COMP/OP AGG	\$ 6,000,000	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / <input type="checkbox"/> N (Mandatory in NH) If yes, describe under REMARKS below	N / A					<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER		
							E.L. EACH ACCIDENT	\$	
							E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	
A	ERRORS & OMISSIONS			A0053698004	04/01/2023	04/01/2024	Employee Benefits Occurrence Limit	\$ 500,000	
							Errors & Omissions Annual Aggregate Limit Deductible	\$ 1,000,000 \$ 1,000	
							All Other Errors & Omissions Occurrence Limit	\$ 250,000	
							Annual Aggregate Limit Deductible	\$ 500,000 \$ 1,000	

REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Refer to attached

CERTIFICATE HOLDER WV DOH 83 Brushy Road Xing PO Box 610 Buckhannon, WV 26201-0610	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 <i>John Hyland</i>
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AGENCY CUSTOMER ID: XXXXXX1855

LOC #: _____

ADDITIONAL REMARKS SCHEDULEPage 2 of 2

AGENCY Melanie Rosenbaum		NAMED INSURED West Virginia Tractor Co.	
POLICY NUMBER A0053698001			
CARRIER Sentry Select Insurance Company	NAIC CODE 21180	EFFECTIVE DATE: 04/01/2023	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,


FORM NUMBER: ACORD 30 **FORM TITLE:** Certificate Of Garage Insurance**General Liability**

WV DOH AND STATE OF WEST VIRGINIA ARE ADDITIONAL INSURED ON THE GENERAL LIABILITY, PER THE POLICY PROVISIONS IF REQUIRED AS SUCH IN WRITTEN CONTRACT WITH THE NAMED INSURED. GARAGE LIABILITY INCLUDES THE AUTOMOBILE LIABILITY. ANY AUTO COVERAGE INCLUDED. EXCESS/UMBRELLA LIABILITY FOLLOWS FORM.

Errors and Omissions Liability Coverage:

Policy Number: A0053698004 Effective date: 04/01/2023 Expiration Date: 04/01/2024
 Per Occurrence Limit: \$250,000 General Aggregate Limit: \$500,000
 Truth-In-Lending and Truth-In-Leasing
 Odometer Hour Meter and Prior Damage Disclosure Errors and Omissions
 Title Errors and Omissions

VENDOR: West Virginia Tractor Company **Trailer mounted culvert cleaner**

Item No.	Description:	Model & Part Number Being Bid	Estimated Unit Quantity	Unit Price	Item Total Cost
1	Vactor Ramjet trailer mounted culvert cleaner or equal	Vactor 30-40-750	10	\$127,000	\$127,000
Total Bid Cost					\$1,270,000

Bid Will Be Awarded To The Lowest Overall Bid Total For All Items

Vendor Information

Company Name:	West Virginia Tractor Company
Contact Manager:	Gary Grady
Address:	PO Box 473 Charleston WV 25322
Phone:	304-346-5301
Fax:	304-346-5305
E-mail:	wvtractor@msn.com
Signature:	<i>Gary Grady</i>

State of West Virginia

VENDOR PREFERENCE CERTIFICATE

Certification and application is hereby made for Preference in accordance with West Virginia Code, §5A-3-37. (Does not apply to construction contracts). West Virginia Code, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the West Virginia Code. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Vendor Preference, if applicable.

- 1. Application is made for 2.5% vendor preference for the reason checked: [] Bidder is an individual resident vendor... [x] Bidder is a resident vendor partnership... [] Bidder is a nonresident vendor...
2. Application is made for 2.5% vendor preference for the reason checked: [x] Bidder is a resident vendor who certifies that...
3. Application is made for 2.5% vendor preference for the reason checked: [] Bidder is a nonresident vendor that employs a minimum of one hundred state residents...
4. Application is made for 5% vendor preference for the reason checked: [x] Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5. Application is made for 3.5% vendor preference who is a veteran for the reason checked: [] Bidder is an individual resident vendor who is a veteran of the United States armed forces...
6. Application is made for 3.5% vendor preference who is a veteran for the reason checked: [] Bidder is a resident vendor who is a veteran of the United States armed forces...
7. Application is made for preference as a non-resident small, women- and minority-owned business... [] Bidder has been or expects to be approved prior to contract award...
8. Application is made for reciprocal preference. [x] Bidder is a West Virginia resident and is requesting reciprocal preference to the extent that it applies.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) rescind the contract or purchase order; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Bidder hereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: West Virginia Tractor Company

Signed: [Signature]

Date: 10-17-23

Title: President

*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.