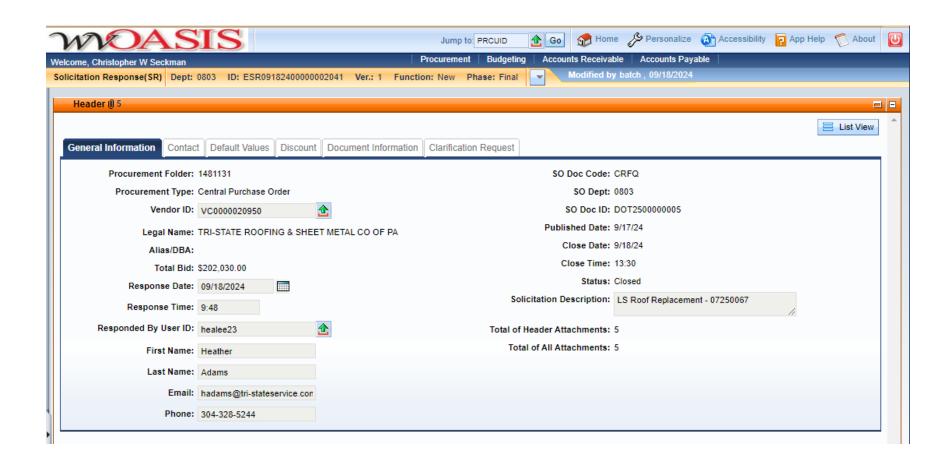


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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.





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: 1481131

Solicitation Description: LS Roof Replacement - 07250067

Proc Type: Central Purchase Order

 Solicitation Closes
 Solicitation Response
 Version

 2024-09-18 13:30
 SR 0803 ESR0918240000002041
 1

VENDOR

VC0000020950

TRI-STATE ROOFING & SHEET METAL CO OF PA

Solicitation Number: CRFQ 0803 DOT2500000005

Total Bid: 202030 **Response Date:** 2024-09-18 **Response Time:** 09:48:03

Comments:

FOR INFORMATION CONTACT THE BUYER

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

Vendor

Signature X FEIN# DATE

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

 Date Printed:
 Sep 18, 2024
 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	Roof Replacement for 0721	0.00000			202030.00

Comm Code	Manufacturer	Specification	Model #	
72152601				

Commodity Line Comments:

Extended Description:

Roof Replacement for 0721



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** Construction

Proc Folder:

1481131

Doc Description: LS Roof Replacement - 07250067

Reason for Modification:

ADDENDUM NO 3

Vendor Question and response

Proc Type:

Central Purchase Order

Date Issued

Solicitation Closes

2024-09-17

2024-09-18 13:30

CRFQ 0803

Solicitation No

DOT2500000005

Version

BID RECEIVING LOCATION

BID CLERK

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

VENDOR

Vendor Customer Code: VC0000020950

Vendor Name: Tri-State Roofing & Sheet Metal Company of PA

Address:

PO Box 4255

Street:

1651 Blue Horizon Drive

City:

Morgantown

State:

WV

Country: USA

Zip: 26504-4255

Principal Contact: Corey Strimer

Vendor Contact Phone: 304 328 5244

Extension:

FOR INFORMATION CONTACT THE BUYER

John W Estep 304-558-2566

john.w.estep@wv.gov

Vendor

Signature X

FEIN# 47-1425515

DATE

09/18/2024

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

Date Printed: Sep 17, 2024

Page: 1

FORM ID: WV-PRC-CRFQ-002 2020/05

ADDITIONAL INFORMATION

ADDENDUM NO_3

Addendum No_3 issued to publish and distribute the attached information to the Vendor Community

REQUEST FOR QUOTATION:

The West Virginia Purchasing Division is soliciting bids on behalf of the WV Division of Highways to establish a contract for the following: Remove existing roof and replace with Flex Star Rubberized Roof Coating and Poly-Flex Fiber Membrane roofing system on the West Virginia Division of Highways District 7 Lewis County Headquarters building located in Weston, WV. The Vendor shall furnish all materials, labor, and equipment necessary to complete all Construction Services. The Vendor shall furnish any incidental work, materials, labor, and equipment that are necessary to complete the Construction Services, even if such incidental work is not explicitly included in the Project Plans.

INVOICE TO		SHIP TO	
DIVISION OF HIGHWAYS		STATE OF WEST VIRGINIA	
DISTRICT SEVEN		JOBSITE - SEE SPECIFICATIONS	
DRAWER 1228			
WESTON	WV	No City	WV
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Roof Replacement for 0721	0.00000			

Comm Code	Manufacturer	Specification	Model #	
72152601				

Extended Description:

Roof Replacement for 0721

SCHEDULE OF EVENTS

<u>Line</u>	<u>Event</u>	Event Date
1	Pre-Bid 9:00am at Lewis Co. HQ - D7	2024-08-23
2	Tech Questions due by 10:00am	2024-08-29

Date Printed: Sep 17, 2024 Page: 2 FORM ID: WV-PRC-CRFQ-002 2020/05

	Document Phase	Document Description	Page 3
DOT2500000005	Final	LS Roof Replacement - 07250067	

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ DOT2500000005

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.

Add	<u>endun</u>	<u>Num</u>	bers	Receiv	ved:
		-			The second second

(Check the box next to each addendum received)

[x]	Addendum No. 1	[]	Addendum No. 6
[x]	Addendum No. 2]]	Addendum No. 7
[X]	Addendum No. 3	[]	Addendum No. 8
[]	Addendum No. 4	[]	Addendum No. 9
[]	Addendum No. 5	[]	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.

Trii-State Roofing & Sheet Metal Company of PA

Company

Authorized Signature

09/18/2024

Date

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

Agency DO	Т
REQ.P.O#	2500000005

BID BOND

	the undersigned, Iri-State Roofing & Sheet Metal Company
	n, WV 26501, as Principal, and Travelers Casualty and Surety Company
of America of 119 Virginia Street W., Charleston, WV 25302	_, a corporation organized and existing under the laws of the State of
	rd, as Surety, are held and firmly bound unto the State
of West Virginia, as Obligee, in the penal sum of _Five Perce	nt of Amount Bid (\$ 5% of Amount Bid) for the payment of which,
well and truly to be made, we jointly and severally bind ourselv	ves, our heirs, administrators, executors, successors and assigns.
The Condition of the above obligation is such that	whereas the Principal has submitted to the Purchasing Section of the
Department of Administration a certain bid or proposal, attache	ed hereto and made a part hereof, to enter into a contract in writing for
CRFQ 0803 DOT2500000005, LS Roof Replacement	-07250067
according to plans and specifications.	
NOW THEREFORE,	
(a) If said bid shall be rejected, or	
(b) If said bid shall be accepted and the Prin	cipal shall enter into a contract in accordance with the bid or proposal
	nce required by the bid or proposal, and shall in all other respects perform s obligation shall be null and void, otherwise this obligation shall remain in
full force and effect. It is expressly understood and agreed ti	hat the liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of this obligation as herein sta	ated.
The Surety, for the value received, hereby stipulates way impaired or affected by any extension of the time withir waive notice of any such extension.	and agrees that the obligations of said Surety and its bond shall be in no which the Obligee may accept such bid, and said Surety does hereby
, 100 mg/gg	
	cipal and Surety, executed and sealed by a proper officer of Principal and
Surety, or by Principal individually if Principal is an individual, t	his_18day of September, 20_24
Principal Seal	Tri-State Roofing & Sheet Metal Company
	(Name of Principal)
	Ву
	Must be President, Vice President, or Duly Authorized Agent)
	President
	(Title)
	Travalara Caqualty and Suraty Company of America
Surety Seal	Travelers Casualty and Surety Company of America (Name of Surety)
	(Mario di Galoty)
	Acold . 1
	exal 1/1/w
	Taylor R. Johnson Attorney in Fact

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.



Travelers Casualty and Surety Company of America Travelers Casualty and Surety Company St. Paul Fire and Marine Insurance Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint TAYLOR R JOHNSON of CHARLESTON, West Virginia, their true and lawful Attorney(s)-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of

the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 21st day of April, 2021.







State of Connecticut

City of Hartford ss.

By: Robert L. Raney, Senior Vice President

On this the 21st day of April, 2021, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of each of the Companies, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2026



Anna P. Nowik, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of each of the Companies, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice

I, Kevin E. Hughes, the undersigned, Assistant Secretary of each of the Companies, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this 18 day of September, 2024







Kevin E. Hughes, Assistant Secretary

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.

Corey M. Strimer, President	
(Printed Name and Title)	
PO Box 4255, Morgantown, WV 26504-4255	
(Address)	
304 328 5244 / 304 328 5248	1
(Phone Number) / (Fax Number)	
cstrimer@tri-stateservice.com	
(E-mail 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 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.

Tri-State Roofing & Sheet Metal Company of PA
(Company)
(Signature of Authorized/Representative)
Corey M. Strimer, President
(Printed Name and Title of Authorized Representative)
09/18/2024
(Date)
304 328 5244 / 304 328 5248
(Phone Number) (Fax Number)
Revised 8/24/2023

Client#: 645481 LAUREMANAG2

$ACORD_{\scriptscriptstyle{\mathbb{M}}}$

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/30/2024

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 any rights to the certificate holder in lieu of such endorsement(s).

and definitions do to the definition of the definition of the desired of the desi										
PRODUCER	CONTACT Brenda S Stickrod AAI									
Marsh & McLennan Agency LLC	PHONE (A/C, No, Ext): 800-796-3567 FAX (A/C, No): 859-2	254-8020								
360 East Vine Street, Ste 200	E-MAIL ADDRESS: Brenda.Stickrod@MarshMMA.com									
Lexington, KY 40507	INSURER(S) AFFORDING COVERAGE	NAIC#								
859 254-8023	INSURER A: Westfield Insurance Company	24112								
INSURED	INSURER B:									
Tri-State Roofing & Sheet Metal Company	INSURER C:									
of Pennsylvania	INSURER D:									
P.O. Box 4255	INSURER E:									
Morgantown, WV 26504	INSURER F:									

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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 INSR		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
Α	Χ	COMMERCIAL GENERAL LIABILITY			CMM5942244	04/30/2024	04/30/2025	EACH OCCURRENCE	\$1,000,000			
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$500,000			
•								MED EXP (Any one person)	\$10,000			
								PERSONAL & ADV INJURY	\$1,000,000			
	GEN	L'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000			
		POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$2,000,000			
		OTHER:							\$			
Α	AUT	OMOBILE LIABILITY			CMM5942244	04/30/2024	04/30/2025	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000			
	X	ANY AUTO						BODILY INJURY (Per person)	\$			
		OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$			
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$			
	Χ	Drive Oth Car							\$			
Α	Χ	UMBRELLA LIAB X OCCUR			CMM5942244	04/30/2024	04/30/2025	EACH OCCURRENCE	\$5,000,000			
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$5,000,000			
		DED X RETENTION \$0							\$			
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER				
	ANY	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$			
	(Mar	ndatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$			
		s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$			
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											

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

CERTIFICATE HOLDER	CANCELLATION

FOR INFORMATION PURPOSES ONLY

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

Chri P. Barnett

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/29/2024

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

Mountain State Insurance Agency

1206 Kanawha Blvd. E.

CONTACT NAME:
PHONE (304) 720-2000 FAX (A/C, No): (304) 720-2002

E-MAIL ADDRESS: jdrake@mountainstateinsurance.com

PO Box 4255											INSURER D:						
												INSURER E :					
Morgantown WV 26504										WV	26504	INSUR	INSURER F:				
COVERAGES CERTIFICATE NUMBER: 24 25 TSR PA M									ATE	NUMBER:	\ Morga	ntown		REVISION NUMBER:			
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	NSR ADDL SUBR										LICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
		COM	IERCIAL G	ENERA	L LL	ABILITY		INOD	1112						EACH OCCURRENCE	\$	
			CLAIMS-MA	DE		OCCUR									DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
		ļ													MED EXP (Any one person)	\$	
															PERSONAL & ADV INJURY	\$	
	GEI	Ŋ'L AGG	RE <u>GATE</u> LI	MIT AP	P <u>LIE</u>	S PER:									GENERAL AGGREGATE	\$	
		POLIC	Y F	PRO- IECT		LOC									PRODUCTS - COMP/OP AGG	\$	
		OTHE													COMBINED SINCLE LIMIT	\$	
	AU.	7	ILE LIABILI	TY											COMBINED SINGLE LIMIT (Ea accident)	\$	
		ANY A		_	1 00	UEDIII ED									BODILY INJURY (Per person)	\$	
		AUTO	S ONLY		AU	HEDULED TOS									BODILY INJURY (Per accident)	\$	
		HIREE AUTO	S ONLY		AU	N-OWNED TOS ONLY	,								PROPERTY DAMAGE (Per accident)	\$	
					<u> </u>											\$	
		4	RELLA LIAB	}		OCCUR									EACH OCCURRENCE	\$	
		EXCE	SS LIAB			CLAIMS-	MADE								AGGREGATE	\$	
		DED		ΓΕΝΤΙΟ	N \$											\$	
		VORKERS COMPENSATION IND EMPLOYERS' LIABILITY INY PROPRIETOR/PARTNER/EXECUTIVE IN PFFICER/MEMBER EXCLUDED?									06/01/2024	06/01/2025	PER STATUTE X OTH-		ode 23-4-2		
Α	ANY					N/A		WCB1037746	E.L. EACH ACCIDENT				_{\$} 1,00	0,000			
	(Mandatory in NH)														E.L. DISEASE - EA EMPLOYEE	Ψ	0,000
	DES	f yes, describe under DESCRIPTION OF OPERATIONS below													E.L. DISEASE - POLICY LIMIT	_{\$} 1,00	0,000
DESC	RIPT	TION OF	OPERATIO	ONS / L	OCA	TIONS / VI	EHICLI	ES (AC	ORD 1	01, Additional R	emarks Schedule,	may be	attached if more s	pace is required)			
CERTIFICATE HOLDER CANC											CANCELLATION						
For information purposes only										SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
Δι											■ AUTHO	ALITHORIZED REPRESENTATIVE					

WEST VIRGINIA STATE TAX DEPARTMENT BUSINESS REGISTRATION CERTIFICATE

ISSUED TO:

TRI-STATE ROOFING & SHEET METAL COMPANY 1651 BLUE HORIZON DR MORGANTOWN, WV 26501-2056

BUSINESS REGISTRATION ACCOUNT NUMBER:

2306-6187

This certificate is issued on:

11/10/2014

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.4 L0045045312 **CONTRACTOR LICENSE**



West Virginia Contractor Licensing Board



NUMBER:

WV053078

CLASSIFICATION:

HEATING, VENTILATING & COOLING SPECIALTY ROOFING CRANE SHEET METAL

TRI STATE ROOFING & SHEET METAL COMPANY DBA TRI STATE ROOFING & SHEET METAL COMPANY PO BOX 4255 MORGANTOWN, WV 26504

DATE ISSUED

EXPIRATION DATE

DECEMBER 23, 2023

DECEMBER 23, 2024

Authorized 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-transferable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.