



# West Virginia Purchasing Division

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](http://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](http://WVPurchasing.gov) with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header 6

List View

- General Information**
- Contact
- Default Values
- Discount
- Document Information
- Clarification Request

Procurement Folder: 1901808

Procurement Type: Central Purchase Order

Vendor ID: VS0000047299

Legal Name: Top Tier Construction Services LLC

Alias/DBA: Top Tier Construction Services LLC

Total Bid: \$67,563.44

Response Date: 03/31/2026

Response Time: 11:02

Responded By User ID: TopTier2021

First Name: Jerry

Last Name: Shaw

Email: jshaw@toptierconstructions

Phone: 8046152846

SO Doc Code: CRFQ

SO Dept: 0306

SO Doc ID: GEO2600000001

Published Date: 3/18/26

Close Date: 4/1/26

Close Time: 13:30

Status: Closed

Solicitation Description: Warehouse Shelving for West Virginia Geological Survey

Total of Header Attachments: 6

Total of All Attachments: 6



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:** 1901808  
**Solicitation Description:** Warehouse Shelving for West Virginia Geological Survey  
**Proc Type:** Central Purchase Order

Solicitation Closes	Solicitation Response	Version
2026-04-01 13:30	SR 0306 ESR03302600000006547	1

**VENDOR**  
 VS0000047299  
 Top Tier Construction Services LLC

**Solicitation Number:** CRFQ 0306 GEO2600000001  
**Total Bid:** 67563.44000000000232830643653 **Response Date:** 2026-03-31 **Response Time:** 11:02:40  
**Comments:** No discount offered for early payment.

**FOR INFORMATION CONTACT THE BUYER**  
 Larry D McDonnell  
 304-558-2063  
 larry.d.mcdonnell@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	Storage racks or shelves	1.00000	EA	67563.440000	67563.44

Comm Code	Manufacturer	Specification	Model #
24102004			

**Commodity Line Comments:**

**Extended Description:**

See attached specification and associated documentation for further details.

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFQ GEO26\*01**

**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 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.

Top Tier Construction Services LLC

\_\_\_\_\_  
Company

*Jerry Shaw*

\_\_\_\_\_  
Authorized Signature

3/30/2026

\_\_\_\_\_  
Date

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

# Pre-Bid Sign-In Sheet

Solicitation Number: CRFQ GEO 26 00000001

Date of Pre-Bid Meeting: 3/18/2026

Location of Prebid Meeting: WV Geological Survey  
1 Mont Chateau Rd.  
Morgantown, WV 26508

**Please Note:**

Vendors must sign-in on this sheet to verify attendance at the Pre-Bid meeting.  
 Failure to legibly sign in may be grounds for declaring a vendor ineligible to bid.  
 For further verification, please also provide a business card if possible.

<u>Firm Represented:*</u>	<u>Rep Name (Printed):</u>	<u>Firm Address:</u>	<u>Telephone #:</u>	<u>Fax #:</u>	<u>Email:</u>
LEE REGER BUILDS	ROB SMITH	ONE RAILROAD ST. SHANNON, WV 26431	304-592- 2083		sraber@ lrbuidswv.com
Top Tier Construction Services	Nathan Rogers	2332 Westwood Pine Drive Moseley VA 23120	804-517-5295		nrogers@top-tier constructionservices.com
AJ-Allegheny Systems	Charles Saul	5036 A Washington St Charleston, WV	304-769-0202	304-769-0203	Kenny@ajwv.net
WVGS	Hanna Law; CFO	1 Mont Chateau Rd. Morgantown, WV 26508	304-594-2331	304-594-2575	hlaw@wvgs. wvnet.edu
WVGS	Philip Dinterman Deputy Director	1 Mont Chateau Rd Morgantown WV 26508	304-594-2331		pdinterman@wvgs. wvnet.edu
WVGS	James Britton Coal Manager	1 Mont Chateau Rd. Morgantown WV 26508	304-594-2331		britton@wvgs.wvnet.edu

**\*One Vendor Per Representative** - No one individual is permitted to represent more than one vendor at the pre-bid meeting. Any individual that does attempt to represent two or more vendors will be required to select one vendor to which the individual's attendance will be attributed. The vendors not selected will be deemed to have not attended the pre-bid meeting unless another individual attended on their behalf.

**Top Tier Construction Services LLC**  
 2332 Westwood Pine Dr  
 Moseley, VA 23120 US  
 8046152846  
 jshaw@toptierconstructionservices.com



**ADDRESS**

West Virginia Purchasing Division  
 1 Mont Chateau Road  
 Morgantown, WV 26508

**SHIP TO**

West Virginia Geological &  
 Economic Survey  
 Address to be confirmed  
 Morgantown, WV 26508

**Estimate Q41332**

**DATE 03/22/2026**

ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
<b>Racking Uprights</b>	Welded Frame Upright- FR.2.70F 16' X 48"	70	172.00	12,040.00
<b>Mecalux RF Beam IK36E - 96"</b>	Mecalux Roll Formed Teardrop Step Beam IK36E F3M - 96". Orange. 4170 lbs capacity	448	33.78	15,133.44
<b>48" x 46" Waterfall Wire Deck</b>	48" x 46" Waterfall Wire Deck. 3 support channels. 2500 lbs capacity	448	30.00	13,440.00
<b>Wedge Anchors</b>	Powers SD 4 1/2" x 1/2"	170	2.50	425.00
<b>Upright Protector - 16"H</b>	Mecalux Upright Protector - 16"H	15	35.00	525.00
<b>Freight LTL</b>	Estimated freight to Morgantown WV. Dedicated truck from Melrose Park IL to Morgantown WV. Actual freight to be assessed at time of shipment.	1	4,000.00	4,000.00
<b>Installation Services</b>	Labor to install 56 bays of racking using the racking materials noted above. Includes all hardware and equipment rentals for installation.	1	12,000.00	12,000.00
<b>Engineer Stamped Drawings and Calculations</b>	Engineering/Stamped Drawings, Permitting, and Inspection fees. If not applicable, the listed charges will be deducted from final invoicing.	1	10,000.00	10,000.00

ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
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Assumptions:  
 7 day per week, 12 hour per day access  
 One mobilization to the site. If additional mobilizations are needed, they will be quoted at that time.  
 Productive uninterrupted work at all times. Any down time caused by product not being cleared for us to work will be charged per hour.  
 Adequate power and lighting.

Any and all applicable state and local sales taxes, even if not identified on this estimate, are the responsibility of the customer. By accepting this estimate, you are acknowledging that sales tax, as required, may be added to the invoice at the time of invoicing.

SUBTOTAL	67,563.44
TAX	0.00

<b>TOTAL</b>	<b>\$67,563.44</b>
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Accepted By

Accepted Date



# CONTRACTOR LICENSE

AUTHORIZED BY THE  
West Virginia Contractor  
Licensing Board

NUMBER: WV062826

CLASSIFICATION:  
SPECIALTY

TOP TIER CONSTRUCTION SERVICES LLC  
2332 WESTWOOD PINE DRIVE  
MOSELEY, VA 23120

DATE ISSUED

EXPIRATION DATE

MAY 2, 2025

MAY 2, 2026

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.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/07/2025

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 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).

<b>PRODUCER</b> Kilgo Insurance LLC 713 N Courthouse Rd Ste 201 North Chesterfield VA 23236-4074		<b>CONTACT NAME:</b> Candice Thompson <b>PHONE (A/C, No, Ext):</b> 804-403-7400 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> memberservices@kilgoinsurance.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A :</b> Erie Insurance	<b>NAIC #</b> 26263
		<b>INSURER B :</b> Erie Insurance Exchange	26271
		<b>INSURER C :</b> FLAGSHIP CITY INS CO	35585
		<b>INSURER D :</b>	
		<b>INSURER E :</b>	
		<b>INSURER F :</b>	
<b>INSURED</b> Top Tier Construction Services, LLC 2332 Westwood PineDr Moseley VA 23120			

**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <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 OTHER:	Y	Y	Q61-0184854	05/02/2025	05/02/2026	EACH OCCURRENCE	\$ 5,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 5,000,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 5,000,000
							GENERAL AGGREGATE	\$ 5,000,000
							PRODUCTS - COMP/OP AGG	\$ 5,000,000
							Employee benefits liabili	\$ 2,000,000/1,000,00
B	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> Employee ber <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	Y	Y	Q11-0731020	11/07/2025	11/07/2026	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
B	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB DED <input type="checkbox"/> RETENTION \$	Y	Y	Q29-0270430	05/02/2025	05/02/2026	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$
								\$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	Q89-5200365	05/02/2025	05/02/2026	PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
B	Physical Damage	Y		Q11-0731020	11/07/2025	11/07/2026	Deductibles - Comp: \$500, Coll: \$500	
A	Contractors Equipment Leased/Rented	Y		Q61-0184854	05/02/2025	05/02/2026	Limit: \$25,000 / Deductible: \$5,000	

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

**CERTIFICATE HOLDER****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

*Candice Thompson*

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