



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 @ 1

List View

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

Procurement Folder: 1991485

Procurement Type: Central Purchase Order

Vendor ID: VS0000048591

Legal Name: WIXCO GROUP INC

Alias/DBA:

Total Bid: \$269,872.00

Response Date: 06/25/2026

Response Time: 9:50

Responded By User ID: Wixboox

First Name: Taylor

Last Name: Brown

Email: Bookkeeping@wixcogroup.

Phone: 423-620-4103

SO Doc Code: CRFQ

SO Dept: 0613

SO Doc ID: VNF2600000009

Published Date: 6/24/26

Close Date: 6/25/26

Close Time: 13:30

Status: Closed

Solicitation Description: Construction: Installation Flooring, Cove Base, Patch, Repai

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:** 1991485  
**Solicitation Description:** Construction: Installation Flooring, Cove Base, Patch, Repai  
**Proc Type:** Central Purchase Order

Solicitation Closes	Solicitation Response	Version
2026-06-25 13:30	SR 0613 ESR06252600000009067	1

**VENDOR**  
 VS0000048591  
 WIXCO GROUP INC

**Solicitation Number:** CRFQ 0613 VNF2600000009  
**Total Bid:** 269872      **Response Date:** 2026-06-25      **Response Time:** 09:50:15  
**Comments:**

**FOR INFORMATION CONTACT THE BUYER**

David H Pauline  
 304-558-0067  
 david.h.pauline@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	Construction: Flooring, Patch, Repair, Paint				269872.00

Comm Code	Manufacturer	Specification	Model #
72151302			

**Commodity Line Comments:**

**Extended Description:**

Installation of LVT, Cove BasePatch, Repair, and Paint per the attached specifications

**VENDOR NAME:** Wixco Group Inc.

**BUYER:** David H Pauline

**SOLICITATION NO.:**CRFQ 0613 VNF2600000009



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**

<b>Proc Folder:</b> 1991485		<b>Reason for Modification:</b>	
<b>Doc Description:</b> Construction: Installation Flooring, Cove Base, Patch, Repai		Addendum No. 2	
<b>Proc Type:</b> Central Purchase Order			
<b>Date Issued</b>	<b>Solicitation Closes</b>	<b>Solicitation No</b>	<b>Version</b>
2026-06-24	2026-06-25 13:30	CRFQ 0613 VNF2600000009	3

**BID RECEIVING LOCATION**

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

**VENDOR**

**Vendor Customer Code:**

**Vendor Name :** WIXCO GROUP INC

**Address :** P.O. BOX 51, FOREST HILL, WV 24935 (mailing)

**Street :** 54 INDEPENDENCE LN

**City :** Hinton

**State :** WV **Country :** United States **Zip :** 25951

**Principal Contact :** RODNEY WICKLINE

**Vendor Contact Phone:** (304) 445-1280 **Extension:**

**FOR INFORMATION CONTACT THE BUYER**  
 David H Pauline  
 304-558-0067  
 david.h.pauline@wv.gov

**Vendor Signature X** *Rodney Wickline* **FEIN#** 33-1696681 **DATE** 06/24/2026

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

**ADDITIONAL INFORMATION**

Addendum No. 2

To provide the Mandatory Prebid Sign-in Sheets, see attached.

Bid opening date and time remain June 25, 2026, at 1:30 PM EST.

No other changes.

**INVOICE TO****SHIP TO**

DIVISION OF VETERANS  
AFFAIRS  
1 FREEDOMS WAY

VETERAN'S NURSING  
FACILITY  
1 FREEDOMS WAY

CLARKSBURG WV  
US

CLARKSBURG WV  
US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Construction: Flooring, Patch, Repair, Paint				

**Comm Code****Manufacturer****Specification****Model #**

72151302

**Extended Description:**

Installation of LVT, Cove BasePatch, Repair, and Paint per the attached specifications

**SCHEDULE OF EVENTS**

<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	Mandatory Prebid Meeting At 11:00 AM. EST.	2026-06-16
2	Vendor Technical Questions Due By 11:00 AM. EST.	2026-06-18

REQUEST FOR QUOTATION – CRFQ VNF26\*09  
FLOORING, PATCH, REPAIR and PAINT  
CRFQ VNF26\*

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**EXHIBIT A**

**PRICING PAGES**

**PROJECT TOTAL BID PRICE**

**269,872.00**



# AIA<sup>®</sup> Document A310<sup>™</sup> – 2010

## Bid Bond

**CONTRACTOR:**

*(Name, legal status and address)*

WIXCO GROUP, INC.  
396 Independence Ln  
Hinton, WV 25951

**OWNER:**

*(Name, legal status and address)*

Bid Clerk Department of Administration Purchasing Division  
2019 Washington St E  
Charleston, WV 25305

**BOND AMOUNT:** 5% of Bid Amount

**PROJECT:**

*(Name, location or address, and Project number, if any)*

Construction: Installation Flooring, Cove Base, Patch, Repairing, and painting the Clarksburg VNF resident rooms

**SURETY:**

*(Name, legal status and principal place of business)*

Nationwide Mutual Insurance Company  
1100 Locust Street, Department 2006  
Des Moines, IA 50391

**ADDITIONS AND DELETIONS:**

The author of this document has added information needed for its completion. The author may also have revised the text of the original AIA standard form. An *Additions and Deletions Report* that notes added information as well as revisions to the standard form text is available from the author and should be reviewed. A vertical line in the left margin of this document indicates where the author has added necessary information and where the author has added to or deleted from the original AIA text.

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.


If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Init.

Signed and sealed this 24th day of June, 2026

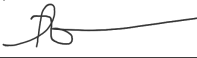
  
\_\_\_\_\_  
(Witness)

  
\_\_\_\_\_  
(Witness)

WIXCO GROUP, INC.  
\_\_\_\_\_  
(Contractor as Principal) (Seal)

  
\_\_\_\_\_  
(Title)

Nationwide Mutual Insurance Company  
\_\_\_\_\_  
(Surety) (Seal)

  
\_\_\_\_\_  
(Title)

Linda Vallance  
Attorney-In-Fact



Init.

**Power of Attorney**

KNOW ALL MEN BY THESE PRESENTS THAT:

Nationwide Mutual Insurance Company, an Ohio corporation

hereinafter referred to severally as the "Company" and collectively as "the Companies" does hereby make, constitute and appoint:

Linda Vallance

each in their individual capacity, its true and lawful attorney-in-fact, with full power and authority to sign, seal, and execute on its behalf on the date thereof any and all: (i) bonds and undertakings; (ii) Proposal Bonds; (ii) Letters of Surety; (iv) Consent of Surety; and (v) other obligatory instruments of similar nature, in penalties not exceeding the sum of

**5% of Bid Amount**

and to bind the Company thereby, as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Company; and all acts of said Attorney pursuant to the authority given are hereby ratified and confirmed.

This power of attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the board of directors of the Company:

"RESOLVED, that the president, or any vice president be, and each hereby is, authorized and empowered to appoint attorneys-in-fact of the Company, and to authorize them to execute and deliver on behalf of the Company any and all bonds, forms, applications, memorandums, undertakings, recognizances, transfers, contracts of indemnity, policies, contracts guaranteeing the fidelity of persons holding positions of public or private trust, and other writings obligatory in nature that the business of the Company may require; and to modify or revoke, with or without cause, any such appointment or authority; provided, however, that the authority granted hereby shall in no way limit the authority of other duly authorized agents to sign and countersign any of said documents on behalf of the Company."

"RESOLVED FURTHER, that such attorneys-in-fact shall have full power and authority to execute and deliver any and all such documents and to bind the Company subject to the terms and limitations of the power of attorney issued to them, and to affix the seal of the Company thereto; provided, however, that said seal shall not be necessary for the validity of any such documents."

This power of attorney is signed and sealed under and by the following bylaws duly adopted by the board of directors of the Company.

Execution of Instruments. Any vice president, any assistant secretary or any assistant treasurer shall have the power and authority to sign or attest all approved documents, instruments, contracts, or other papers in connection with the operation of the business of the company in addition to the chairman of the board, the chief executive officer, president, treasurer or secretary; provided, however, the signature of any of them may be printed, engraved, or stamped on any approved document, contract, instrument, or other papers of the Company.

IN WITNESS WHEREOF, the Company has caused this instrument to be sealed and duly attested by the signature of its officer the 23rd day of October, 2025.



Antonio C. Albanese, **Vice President** of Nationwide Mutual Insurance Company

**ACKNOWLEDGMENT**

STATE OF OHIO COUNTY OF FRANKLIN: ss

On this 23rd day of October, 2025, before me came the above-named officer for the Company aforesaid, to me personally known to be the officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposes and says, that he is the officer of the Company aforesaid, that the seal affixed hereto is the corporate seal of said Company, and the said corporate seal and his signature were duly affixed and subscribed to said instrument by the authority and direction of said Company.



Karen L. Karn  
Notary Public, State of Ohio  
No. 2018-RE-719796  
Commission Expires July 7, 2028



Notary Public  
My Commission Expires  
July 7, 2028

**CERTIFICATE**

I, Lezlie F. Chimienti, Assistant Secretary of the Company, do hereby certify that the foregoing is a full, true and correct copy of the original power of attorney issued by the Company; that the resolution included therein is a true and correct transcript from the minutes of the meetings of the boards of directors and the same has not been revoked or amended in any manner; that said Antonio C. Albanese was on the date of the execution of the foregoing power of attorney the duly elected officer of the Company, and the corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority of said board of directors; and the foregoing power of attorney is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto subscribed my name as Assistant Secretary, and affixed the corporate seal of said Company this 24th day of June, 2026.



Assistant Secretary

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFQ VNF2600000009**

**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 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.

WIXCO GROUP INC.

\_\_\_\_\_  
Company

*Rodney Wickline*

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

6/24/2026

\_\_\_\_\_  
Date

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



**State of West Virginia  
DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT  
West Virginia Code §21-1D-5**

1. Robyn Wickline after being first duly sworn, depose and state as follows:

1. I am an employee of Wico Group Inc; and,  
(Company Name)
2. I do hereby attest that Wico Group Inc  
(Company Name)

maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with **West Virginia Code §21-1D**.

The above statements are sworn to under the penalty of perjury.

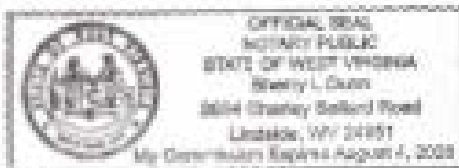
Printed Name: Robyn Wickline  
 Signature: [Signature]  
 Title: CEO  
 Company Name: Wico Group Inc  
 Date: 5-27-20

STATE OF WEST VIRGINIA,  
 COUNTY OF Mourne, TO-WIT:

Taken, subscribed and sworn to before me this 27 day of May, 2020.

By Commission expires Aug 4, 2028

(Seal)



[Signature]  
 (Notary Public)



# CONTRACTOR LICENSE

AUTHORIZED BY THE  
West Virginia Contractor  
Licensing Board

NUMBER:

CLASSIFICATION:



DATE ISSUED

EXPIRATION DATE

Grid area for entering the date issued and expiration date.

Authorized Signature

Chair, West Virginia Contractor  
Licensing Board



**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.

# State of West Virginia



## Certificate

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

WIXCO GROUP INC.

has filed the appropriate registration documents in my office according to the provisions of the West Virginia Code and hereby declare the organization listed above as duly registered with the Secretary of State's Office.

*Given under my hand and  
the Great Seal of West Virginia  
on this day of  
November 19, 2024*



*Mac Warner*

*Secretary of State*



# Edit My Account

[← Back](#)

WIXCO GROUP INC Email: [Bookkeeping@wixcogro...](mailto:Bookkeeping@wixcogro...)

Phone Number: 423-620-4103

Vendor Status: Active

## Headquarters Information

Edit

**Headquarters Legal Name**  
WIXCO GROUP INC

**Headquarters Account Code**  
VS0000048591

**Taxpayer ID Number**  
331696681

**Taxpayer ID Number Type**  
EIN

**1099 Reportable**  
No

**Franchise Account**  
No

**Headquarters Web Address**  
-

[▶ Show More](#)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/26/2026

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).

<b>PRODUCER</b> Blue Ridge Risk Partners, LLC 418 4th Avenue Montgomery WV 25136	<b>CONTACT NAME:</b> Certificates <b>PHONE (A/C, No, Ext):</b> 301-733-2530 <b>E-MAIL ADDRESS:</b> certificates@blueridgeriskpartners.com		<b>FAX (A/C, No):</b> 301-791-1478
	<b>INSURER(S) AFFORDING COVERAGE</b>		
<b>INSURED</b> WIXCO GROUP INC 54 INDEPENDENCE LN Hinton WV 25951	AGREADY-01	INSURER A : Celina Mutual Insurance Co	NAIC # 20176
		INSURER B : NorthStone Insurance Company	13045
		INSURER C :	
		INSURER D :	
		INSURER E :	

**COVERAGES**

CERTIFICATE NUMBER: 703431399

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	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			7297657-0	1/31/2026	1/31/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			7297657-0	1/31/2026	1/31/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	<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 <input type="checkbox"/>	N/A	WCB1041156	2/10/2026	2/10/2027	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 THE COVERAGES LISTED ON THIS CERTIFICATE INCLUDE DATES FROM 1/31/2026 -1/31/2027

**CERTIFICATE HOLDER****CANCELLATION**

WIXCO GROUP INC  
 54 Independence Lane  
 Hinton WV 25951

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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**WEST VIRGINIA  
TAX DIVISION**

**BUSINESS REGISTRATION  
CERTIFICATE**

**ISSUED TO:  
WIXCO GROUP INC.  
54 INDEPENDENCE LN  
HINTON, WV 25951-4636**

**BUSINESS REGISTRATION ACCOUNT NUMBER: 2472-5285**

This certificate is issued on: November 20, 2024

*This certificate is issued by  
the West Virginia 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 annulled 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.



# State of West Virginia

## WORKFORCE West Virginia

CHARLESTON, WEST VIRGINIA FEBRUARY 13, 2025

THIS IS TO CERTIFY THAT

WIXCO GROUP INC,

OF

FOREST HILL, WV

HAS BEEN REGISTERED WITH WORKFORCE West Virginia AS AN  
EMPLOYER UNDER THE PROVISIONS OF THE WEST VIRGINIA  
UNEMPLOYMENT COMPENSATION LAW AND HAS BEEN ASSIGNED  
THE ACCOUNT NUMBER 000076988-6

*Scott Adkin*  
Acting Commissioner



**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) Rodney Wickline - CEO

(Address) 54 Independence ln, Hinton, WV 25951

(Phone Number) / (Fax Number) 304-445-1280

(email address) rocky@wixcogroup.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.*

Wixco Group Inc

(Company)

*Rodney Wickline*

(Signature of Authorized Representative)

Rodney Wickline - CEO

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

304-445-1280

(Phone Number) (Fax Number)

rocky@wixcogroup.com

(Email Address)

REQUEST FOR QUOTATION – CRFQ VNF26\*09  
FLOORING, PATCH, REPAIR and PAINT  
CRFQ VNF26\*

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**12. 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.

**Vendor:** Wixco Group Inc

**Contract Manager:** Shannon Cornett

**Telephone Number:** 304-273-2337

**Cell Phone Number:** \_\_\_\_\_

**Email Address:** shannon@wixcogroup.com

The following terms used in this section have the meaning shown below.

(1) The term “construction project” means any construction, reconstruction, improvement, enlargement, painting, decorating or repair of any public improvement let to contract in an amount equal to or greater than \$500,000. The term “construction project” does not include temporary or emergency repairs;

(2) The term “employee” means any person hired or permitted to perform hourly work for wages by a person, firm or corporation in the construction industry; The term “employee” does not include:(i) Bona fide employees of a public authority or individuals engaged in making temporary or emergency repairs;(ii) Bona fide independent contractors; or(iii) Salaried supervisory personnel necessary to assure efficient execution of the employee's work;

(3) The term “employer” means any person, firm or corporation employing one or more employees on any public improvement and includes all contractors and subcontractors;

(4) The term “local labor market” means every county in West Virginia and any county outside of West Virginia if any portion of that county is within fifty miles of the border of West Virginia;

(5) The term “public improvement” includes the construction of all buildings, roads, highways, bridges, streets, alleys, sewers, ditches, sewage disposal plants, waterworks, airports and all other structures that may be let to contract by a public authority, excluding improvements funded, in whole or in part, by federal funds.

**9. DAVIS-BACON AND RELATED ACT WAGE RATES:**

*RW*

The work performed under this contract is federally funded in whole, or in part. Pursuant to \_\_\_\_\_, Vendors are required to pay applicable Davis-Bacon wage rates.

The work performed under this contract is not subject to Davis-Bacon wage rates.

**10. SUBCONTRACTOR LIST SUBMISSION:** In accordance with W. Va. Code § 5-22-1, the apparent low bidder on a contract valued at more than \$250,000.00 for the construction, alteration, decoration, painting or improvement of a new or existing building or structure shall submit a list of all subcontractors who will perform more than \$25,000.00 of work on the project including labor and materials. (This section does not apply to any other construction projects, such as highway, mine reclamation, water or sewer projects.) The subcontractor list shall be provided to the Purchasing Division within one business day of the opening of bids for review.

If the apparent low bidder fails to submit the subcontractor list, the Purchasing Division shall promptly request by telephone and electronic mail that the low bidder and second low bidder provide the subcontractor list within one business day of the request. Failure to submit the subcontractor list within one business day of receiving the request shall result in disqualification of the bid.