

VENDOR

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TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

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RFQ NUMBER DEP14920

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304-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

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GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- 1. Awards will be made in the best interest of the State of West Virginia.
- 2. The State may accept or reject in part, or in whole, any bid.
- 3. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
- 4. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods this Purchase Order/Contract becomes void and of no effect after June 30.
- 5. Payment may only be made after the delivery and acceptance of goods or services.
- 6. Interest may be paid for late payment in accordance with the West Virginia Code.
- 7. Vendor preference will be granted upon written request in accordance with the West Virginia Code.
- 8. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 9. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 10. The laws of the State of West Virginia and the Legislative Rules of the Purchasing Division shall govern the purchasing process.
- 11. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
- 12. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
- 13. HIPAA BUSINESS ASSOCIATE ADDENDUM: The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and is hereby made part of the agreement. Provided that the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
- 14. CONFIDENTIALITY: The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf.
- 15. LICENSING: Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, and the West Virginia Insurance Commission. The vendor must provide all necessary releases to obtain information to enable the director or spending unit to verify that the vendor is licensed and in good standing with the above entities.
- 16. ANTITRUST: In submitting a bid to any agency for the State of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the State of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, or person or entity submitting a bid for the same material, supplies, equipment or services and is in all respects fair and without collusion or Fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

INSTRUCTIONS TO BIDDERS

- 1. Use the quotation forms provided by the Purchasing Division. Complete all sections of the quotation form.
- 2. Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as **EQUAL** to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
- 3. Unit prices shall prevail in case of discrepancy. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- 4. All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130
- 5. Communication during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited (W.Va. C.S.R. §148-1-6.6).



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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request	for
Quotati	on

RFQ NUMBER DEP14920

ADDRESS CORRESPONDENCE TO ATTENTION OF:

CHUCK BOWMAN 804-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

DIPOCHMONE OLIVITY LOSE PAILURE TO COMPLETE THE PRE-BID ATTENDANCE SHEET. IN ADDITION, WE REQUEST THAT ALL POTENTIAL BIDDERS INCLUDE THEIR EMAIL ADDRESS AND FAX NUMBER. ALL POTENTIAL BIDDERS ARE REQUESTED TO ARRIVE PRIOR TO THE STARTING TIME FOR THE PER-BID. BIDDERS WHO ARRIVE LATE, BUT PRIOR TO THE DISMISSAL OF THE TECHNIAL PORTION OF THE PRE-BID. WILL BE PERMITTED TO SIGN IN. BIDDERS WHO ARRIVE AFFER CONCLUSION OF THE TECHNICAL PORTION OF THE PRE-BID. WILL NOT BE PERMITTED TO SIGN THE ATTENDANCE SHEET. DIRECTIONS TO PREBID: FROM BECKLEY TAKE INTERSTATE 64 EAST. TAKE THE BEAVER EXIT (125A). TAKE RT. 307 WEST TO BEAVER. AT THE STOPLIGHT, TURN LEFT ON RT. 19 SOUTH. TRAVEL OF TO MILL AND TURN LIEFT ON C & O DAM ROAD. TRAVEL IN THE ADDITION RIGHT ON C & O DAM ROAD. TRAVEL IN THE ADDITION RIGHT ON C & O DAM ROAD. TRAVEL IN THE ADDITION RIGHT ON C & O DAM ROAD. TRAVEL IN THE ADDITION RIGHT ON C & O DAM ROAD. TRAVEL IN THE ADDITION RIGHT ON COPLEY COURT. PLANS AND SPECIFICATIONS MAY BE OBTAINED FROM WYDEP, OFFICE AMLER 601 57TH ST. SE, CHARLESTON, WY 25304, PH. 304-926-0485 MPON PAYMENT OF \$10.00 NON-REPUNDABLE FEE. PAYMENT MUST BE MADE BY CHECK OR MONEY ORDER. NO CASH WILL BE ACCEPTED. EXHIBIT 5 WEST VIRGINIA CODE 21-1D-5 PROVIDES THAT: ANY SOLICITATION FOR A PUBLIC IMPROVEMENT CONSTRUCTION CONTRACT REQUIRES EACH VENDOR THAT SUBMITS A BID FOR THE WORK TO SUBMIT AT THE SAME TIME AN AFTIDAVIT OF COMPLIANCE WITH THE BID. THE ENCLOSED PURCHASING AFFIDAVIT MUST.	DATE PRI	NTED	ТЕР	RMS OF SALE		SH	IP VIA	8 8-18.	F.O.B		FREIGHT TERMS
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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

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ADDRESS CORRESPONDENCE TO ATTENTION OF

CHUCK BOWMAN 304-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF CHARLESTON, WV

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ADDRESS CORRESPONDENCE TO ATTENTION OF::: CHUCK BOWMAN

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ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

25304

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2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

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CHUCK BOWMAN B04-558-2157

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

RFQ:NUMBER
DEP14920

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ADDRESS CORRESPONDENCE TO ATTENTION O

CHUCK BOWMAN 804-558-2157

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ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

25304 304-926-0499

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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

ADDRESS CORRESPONDENCE TO ATTENTION OF: CHUCK BOWMAN

804-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

25304

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State of West Virginia Department of Administration Quotation Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for

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RFQ NUMBER

ADDRESS CORRESPONDENCE TO ATTENTION OF

CHUCK BOWMAN 804-558-2157

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ENVIRONMENTAL PROTECTION DEPARTMENT OF P OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304 304-926-0499

FREIGHT TERMS TERMS OF SALE SHIP VIA F.O.B. DATE PRINTED 03/02/2010 BID OPENING DATE: 04/29BID OPENING TIME :30PM 2010 QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT: TIME OF ENVIRONMENTAL PROTECTION. PAYMENTS AND COMPLETION: THE CONTRACTOR SHALL FURNISH TO DEP AN APPLICATION FOR PAYMENT WITH AN ITEMIZED SCHEDULE OF values as herein before requested. THE FORM INCLUDED IN THE SPECIFICATIONS \$HALL BE USED FOR APPLICATIONS IT IS THE DEP'S INTENT THAT THE PAYMENT TO OF PAYMENT. THE CONTRACTOR BE MADE WITHIN 60 DAYS AFTER RECEIPT OF APPLICATION FOR PAYMENT. (7) APPLICATION FOR PARTIAL PAYMENT: THE CONTRACTOR MAY, ON A PERIODIC BASIS, SUBMI FOR PARTIAL PAYMENT BASED ON THE AMOUNT OF WORK COMPLETED AT THE TIME OF THE SUBMITTAL THE AMOUNT OF PAYMENT WILL BE DETERMINED FROM THE ACTUAL QUANTITY OF work completed if|based upon unit measures or the PERCENT COMPLETED IF BASED UPON A LUMP SUM. IN THE EVENT THE VENDOR/CONTRACTOR FILES BANKRUPTCY: FOR BANKRUPTCY PROTECTION, THE STATE MAY DEEM THIS CONTRACT NULL AND VOID AND TERMINATE SUCH CONTRACT WITHOUT FURTHER ORDER. REV. 1/2005 PREFERENCE FOR USE OF DOMESTIC STEEL PRODUCTS EXCEPT WHEN AUTHORIZED BY THE DIRECTOR OF THE PURCHASING DIVISION PURSUANT TO SUBSECTION 2 BELOW, NO CONTRACTOR MAY USE OR SUPPLY STEEL PRODUCTS FOR A STATE CONTRACT PROJECT OTHER THAN THOSE STEEL PRODUCTS | MADE | IN THE UNITED STATES. AS USED IN THIS CONTRACT "STATE CONTRACT PROJECT" MEANS ANY ERECTION OR CONSTRUCTION OF, OR ANY ADDITION TO SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE TELEPHONE TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE



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Purchasing Division
2019 Washington Street East
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Request for Quotation

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ADDRESS CORRESPONDENCE TO ATTENTION OF

CHUCK BOWMAN B04-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

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Request for Quotation

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ADDRESS CORRESPONDENCE TO ATTENTION OF

CHUCK BOWMAN B04-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

304-926-0499

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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

CHUCK BOWMAN 304-558-2157

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RFQ COPY ENVIRONMENTAL PROTECTION TYPE NAME/ADDRESS HERE DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV 25304

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Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation DEP1492

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CHUCK BOWMAN

304-558-2157 ENVIRONMENTAL PROTECTION

DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

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CHUCK BOWMAN 304-558-2157

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ADDRESS CORRESPONDENCE TO ATTENTION OF:

CHUCK BOWMAN 804-558-2157

ENVIRONMENTAL PROTECTION DEPARTMENT OF OFFICE OF AML&R 601 57TH STREET SE CHARLESTON, WV

25304

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OMB #1029-0119 Expiration Date: 1/31/13

AML CONTRACTOR INFORMATION FORM

You must complete this form for your AML contracting officer to request an eligibility evaluation from the Office of Surface Mining to determine if you are eligible to receive an AML contract. This requirement applies to contractors and their sub-contractors and is found under OSM's regulations at 30 CFR 874.16.

Business Name:		Tax Pay	ver ID No.:
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(print i	name)		
accurate, con	mplete, and up-to-date	e. If you select this	Family Tree (OFT) from AVS is option, you must attach an Enti-do not complete Part D.
and must be AVS to this	updated. If you selec	ct this option, you m e provide the missing of	from AVS is missing or incorre ust attach an Entity OFT from or corrected information. Sign
			f you select this option, you must late below and complete Part D.
		Signature	Title

IMPORTANT! In order to certify in Part C to the accuracy of existing information in AVS, you must obtain a copy of your business' Entity OFT. To obtain an Entity OFT, contact the AVS Office, toll-free, at 800-643-9748 or from the AVS website at https://avss.osmre.gov.

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Contractor's Bus	iness Name:		

If the current Entity OFT information for your business is incomplete or incorrect in AVS, or if there is no information in AVS for your business, you must provide all of the following information as it applies to your business. Please make as many copies of this page as you require.

- Every officer (President, Vice President, Secretary, Treasurer, etc.);
- All Directors;
- All persons performing a function similar to a Director;
- Every person or business that owns 10% or more of the voting stock in your business;
- Every partner, if your business is a partnership;
- · Every member and manager, if your business is a limited liability company; and
- Any other person(s) who has the ability to determine the manner in which the AML reclamation project is being conducted.

NameAddress	Position/Title Telephone # % of Ownership
Begin Date:	Ending Data:
NameAddress	Position/Title Telephone # % of Ownership
Begin Date:	Ending Date
Name Address Begin Date:	Position/Title
NameAddress	Position/Title Telephone # % of Ownership
Begin Date:	Ending Date:

PAPERWORK REDUCTION STATEMENT

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501) requires us to inform you that: Federal Agencies may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. This information is necessary for all successful bidders prior to the distribution of AML funds, and is required to obtain a benefit.

Public reporting burden for this form is estimated to range from 15 minutes to 1 hour, with an average of 22 minutes per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Office of Surface Mining Reclamation and Enforcement, Room 202 SIB, Constitution Ave., NW, Washington, D.C. 20240.

Instructions for Completing AML Contractor Form OMB #1029-01191

Part A: General Information. Part A should be completed by the AML Contractor.

Part B: Legal Structure. Part B should be completed by the AML Contractor.

Part C: Certifying and updating information in the Applicant/Violator System (AVS). Part C should be completed by the AML Contractor, selecting the statement that best describes their situation.

If information is accurate, complete and up-to-date, then check the first statement and sign and date. Attach the Entity OFT printout to the OMB #1029-0119 form and submit the form and attachment to the AML Contracting Officer your business is working with. ²

Upon reviewing an Entity OFT printout, if you discover the information contained in AVS is not accurate, complete and up-to-date, then check the second statement and complete Part D to provide missing or corrected information that needs reflected in AVS. Attach the Entity OFT printout to the OMB #1029-0119 form and submit the form and attachment to the AML Contracting Officer your business is working with.

If your business does not appear to have any information in AVS, then check the third statement and complete Part D. Submit the OMB #1029-0119 form to the AML Contracting Officer your business is working with.

Part D:

If current Entity OFT information for your business is incomplete, incorrect, or if you believe there is no information currently in the AVS for your business, you must complete Part D. Submit the OMB #1029-0119 form to the AML Contracting Officer your business is working with.

¹ If you need any assistance completing OMB #1029-0119, please contact the AVS Office at 800.643.9748.

² You may obtain your business' Entity OFT for certification purposes two ways. One way is to contact the AVS Office at 800.643.9748 and request the information. The second way is to access the AVS from your personal computer by visiting https://avss.osmre.gov. Click "Access AVS", and then Login as Guest. Place your cursor on the "Entity" Module and "Click". Type your business name in search box and press enter key. If more than one entity record appears, select your company and then "Click" on the "relationship" tab to display your Entity OFT information. Print the Entity OFT from AVS.

Daniels (Copley) Portal Requisition # DEP14920 Contractor's Bid Sheet

Company Name:	
Address	

The DEP reserves the right to request additional information and supporting documentation regarding unit prices when the unit price appears to be unreasonable.

TEM	QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
۷0.	QUANTITI			
		MOBILIZATION (LIMTED TO 10% OF TOTAL BID)		\$
1.0		CONSTRUCTION LAYOUT (LIMITED TO 5% TOTAL BID)	-	\$
2.0	Lump Sum	QUALITY CONTROL (LIMITED TO 3% OF TOTAL BID)		\$
3.0	Lump Sum	SITE PREPARATION (LIMITED TO 10% OF TOTAL BID)		\$
4.0		SITE PREPARATION (LIMITED TO 10% OF TOTAL BID)		\$
5.0	1000 L.F.	SEDIMENT CONTROL BARRIER		\$
6.0	Lump Sum	REVEGETATION	· · · · · · · · · · · · · · · · · · ·	\$
8.0	1	IBAT GATE SEAL		\$
9.0	420 S.Y.	2" ASPHALT OVERLAY		\$
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Agency____ REQ.P.O#_

	BID BOND		
KNOW ALL MEN BY THESE PRESENTS, The	we, the undersigned,		
of	, as Principal, and		
	, a corporation organized and existing under the laws of the State of		
	, as Surety, are held and firmly bound unto the State		
-	(\$) for the payment of which,		
well and truly to be made, we jointly and severally bind	urselves, our heirs, administrators, executors, successors and assigns.		
	nat whereas the Principal has submitted to the Purchasing Section of the attached hereto and made a part hereof, to enter into a contract in writing for		
NOW THEREFORE,			
hereto and shall furnish any other bonds and insurance agreement created by the acceptance of said bid, then force and effect. It is expressly understood and agreed exceed the penal amount of this obligation as herein st	ulates and agrees that the obligations of said Surety and its bond shall be in no		
way impaired or affected by any extension of the time waive notice of any such extension.	ithin which the Obligee may accept such bid, and said Surety does hereby		
	have hereunto set their hands and seals, and such of them as are corporations		
have caused their corporate seals to be affixed hereur day of, 20	o and these presents to be signed by their proper officers, this		
District Comments Cont			
Principal Corporate Seal	(Name of Principal)		
	By		
	(Must be President or Vice President)		
	(Title)		
Surety Corporate Seal	(Name of Surety)		
	Attorney-in-Fact		

IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance. Raised corporate seals must be affixed, a power of attorney must be attached.

(B)

AGENCY_RFQ/RFP#_

				Bid Bond	
(A)	WV State Agency	KNOW AL	L MEN BY TH	HESE PRESENT	S, That we, the undersigned,
	(Stated on Page 1 "Spending Unit")	(C)	OI	(B)	_,(E),
	Request for Quotation Number (upper	as Principal, and	(F)	Ui	and origing and at the leave
	right comer of page #1)	(H)	, a corpe	ration organized	and existing under the laws
(C)	Your Company Name	of the State of	<u>(1)</u>	with its princip	al office in the City of
(D)	City, Location of your Company				firmly bound unto The State
(E)	State, Location of your Company	of West Virginia, as	Obligee, in the	e penai sum oi	(N)
(F)	Surety Corporate Name	(\$ <u>(L)</u>) for the	payment of which	ch, well and truly to be made,
(G)	City, Location of Surety	~ -	•	ives, our neirs, a	dministrators, executors,
(H)	State, Location of Surety	successors and assig	ens.	5 57	and the subsection of the Philippine
(I)	State of Surety Incorporation	The Condi	tion of the abov	e obligation is s	uch that whereas the Principal
(J)	City of Surety Incorporation	has submitted to the	Purchasing Se	ction of the Dep	artment of Administration
(K)	Minimum amount of acceptable bid				a part hereof to enter into a
	bond is 5% of total bid. You may state	contract in writing	ror	/ N & N	
	"5% of bid" or a specific amount on				
	this line in words.				
(L)	Amount of bond in figures	NOW TYP	EREFORE.		
(M)	Brief Description of scope of work			instant on	
(N)	Day of the month	(a) Il said	bid shall be re	jected, or contod and the E	rincipal shall enter into a
(O)	Month	(D) II SZIC	i dia shall de ad	cepieu anu me r	ched hereto and shall furnish
(P)	Year	contract in accorda	nce while the Di	u or proposar and	or proposal, and shall in all
(Q)	Name of Corporation	any other donds an	u msurance req	uniou by the blu th	e acceptance of said bid then
(R)	Raised Corporate Seal of Principal	other respects perio	on null and w	sid otherwise thi	s obligation shall remain in full
(S)	Signature of President or Vice	force and affect. It	ic averacely ur	iderctood and ap	reed that the liability of the
(PP)	President	Constructor for any and	all claims bere	under chall in no	event, exceed the penal
(T)	Title of person signing	amount of this obli			ovom, encode the police
(U)	Raised Corporate Seal of Surety	The Caret	gation as neces	nived herehvisti	pulates and agrees that the
(V)	Corporate Name of Surety	abligations of said	Suratu and ite!	hand chall he in I	no way impaired or affected by
(W)	Signature of Attorney in Fact of the	onigations of said	me within which	h the Obligee m	ay accept such bid: and said
	Surety	Curaty does hereby	me widimi wine i waive notice (of any such exter	sion
OTE:	Dated, Power of Attorney with Raised	sed Surety does hereby waive notice of any such extension. IN WITNESS WHEREOF, Principal and Surety have hereunto s			
	Surety Seal must accompany this bid				ons have caused their corporate
	bond.	reals to be affived	hereta and the	e presents to be	signed by their proper officers,
		this (N)	day of	(O) 20	(P)
		mis (14)	day or		
		Principal Corporat	e Seal		(Q)
	•	t incipat Corporat	io Dout	<u></u>	(Name of Principal)
,		i	(R)	Ву	(S)
			(E v)	<u>,</u>	(Must be President or
					Vice President)
					(T)
					Title
			(A.D.		THE
	Z.		(U) Sool		· (V)
		Surety Corporate	Scal		(Name of Surety)
		•			(ivanie or baios)
					(W)
					Attorney-in-Fact

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance. Raised Corporate Seals must be affixed and a Power of Attorney must be attached.



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

STA	TE OF		
COL	UNTY OF	, TO-WIT:	
I,	e as follows:	, after being first duly s	worn, depose and
1.	I am an employee o	f(Company N	; and,
2.	I do hereby attest th	nat(Company N	Vame)
		itten drug free workplace po ce with West Virginia Cod e	
The	above statements are	sworn to under the penalty	of perjury.
		(Company	Name)
		Ву:	
		Date:	
Tak	en, subscribed and swo	orn to before me this	day of
Ву	Commission expires		_
(Se	al)		
		(No	otary Public)

THIS AFFIDAVIT MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF THE BID.

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

EXCEPTION: The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

Under penalty of law for false swearing (West Virginia Code §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

WITNESS THE FOLLOWING SIGNATURE

			-
Vendor's Name:			
Authorized Signature:		Date:	
State of			
County of, to-wit:			
Taken, subscribed, and sworn to before me this _	day of	, 20	
My Commission expires	, 20		
AFFIX SEAL HERE	NOTARY PUBLIC		