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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

DEP15136

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CHUCK BOWMAN 304-558-2157

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

304-926-0499

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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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CHUCK BOWMAN 304-558-2157

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DEPARTMENT OF
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601 57TH STREET SE
CHARLESTON, WV
25304 304-926-0499

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25304 304-926-0499

DATE PRINTED TERMS OF SALE SHIP VIA FOB: FREIGHT TERMS 07/21/2010 BID OPENING DATE: 09/09/2010 BID OPENING TIME 01:30PM LINE QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT OF COMMERCIAL GENERAL LIABILITY INSURANCE PRIOR TO ISSUANCE OF CONTRACT. UNLESS OTHERWISE SPECIFIED IN THE BID DOCUMENTS, THE MINIMUM AMOUNT OF INSURANCE COVERAGE REQUIRED IS \$250,000.) BUILDERS RISK INSURANCE: SUCCESSFUL VENDOR SHALL FURNISH PROOF OF BUILDERS RISK - ALL RISK INSURANCE IN AN AMOUNT EQUAL TO 100% OF THE AMOUNT OF THE CONTRACT. FIVE PERCENT (5%) OF THE TOTAL AMOUNT OF (XX) BONDS: THE BID PAYABLE TO THE STATE OF WEST VIRGINIA, SHALL BE SUBMITTED WITH EACH BID AS A BID BOND. THE SUCCESSFUL BIDDER SHALL ALSO FURNISH A PERFORMANCE BOND AND LABOR/ MATERIAL BOND FOR 100% OF THE AMOUNT OF THE CONTRACT. BONDS MAY BE PROVIDED IN THE FORM OF A CERTIFIED CHECK, IRREVOCABLE LETTER OF CREDIT, OR BOND FURNISHED BY A SOLVENT SURETY COMPANY AUTHORIZED TO DO BUSINESS IN TH STATE OF WEST VIRGINIA. A LETTER OF CREDIT SUBMITTED IN LIEU OF A BOND WILL ONLY BE ALLOWED FOR PROJECTS. PERSONAL OR BUSINESS CHECKS ARE NOT UNDER \$100,000. ACCEPTABLE IN LIEU OF THE 5% BID BOND, PERFORMANCE BOND, OR LABOR AND MATERIAL BOND.) MAINTENANCE BOND: A TWO (2) YEAR MAINTENANCE BOND COVERING THE ROOFING SYSTEM WILL BE A REQUIREMENT OF THE SUCCESSFUL VENDOR. REV. 11/00 AML CONTRACTOR INFORMATION FORM OMB #1029-0119 (EXPIRATION DATE: 01/31/2013) IS ATTACHED. YOU MUST COMPLETE THIS ORIGINAL FORM TO OBTAIN AN AVS DATA EVALUATION TO DETERMINE YOUR ELIGIBILITY AS AN AML CONTRACTOR. THIS IS A REQUIREMENT UNDER 30 CFR 874.16 SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE DATE TITLE ADDRESS CHANGES TO BE NOTED ABOVE



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DATE PRINTED TERMS OF SALE SHIP VIA FOB FREIGHT TERMS 07/21/2010

BID OPENING DATE: 09/09/2010 BID OPENING TIME 01:30PM CAT. UOP AMOUNT LINE QUANTITY ITEM NUMBER UNIT PRICE AT ITS EXPENSE. THE ONE-YEAR GUARANTEE PERIOD SHALL NOT BE (C) CONSTRUED AS BEING AN EXTENSION OF THE PERFORMANCE TIME WORK UNDER THE CONTRACT. ALLOTTED FOR GUARANTEES CONCERNING REVEGETATION MAY BE (D) FURTHER DEFINED IN THE TECHNICAL SPECIFICATIONS CONTAINED HEREIN. TERMINATION: (3) (1) THIS CONTRACT MAY BE CANCELLED IN WHOLE OR IN PART IN WRITING BY THE DIRECTOR OF PURCHASING, WITHOUT PREJUDICE TO ANY OTHER RIGHT OR REMEDY IT MAY HAVE, PROVIDED THAT THE CONTRACTOR IS GIVEN NOT LESS. THAN THIRTY CALENDAR DAYS WRITTEN NOTICE, (DELIVERED BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED) OF INTENT TO TERMINATE. IT SHALL BE THE RESPONSIBILITY OF THE SUCCESSFUL VENDOR TO: OBTAIN ALL NECESSARY DIVISION OF HIGHWAYS (A) PERMITS FOR ALL TRANSPORTATION OF EQUIPMENT AND MATERIALS TO AND FROM THE JOB SITE. OBTAIN ANY AND ALL REQUIRED CONSTRUCTION (B) PERMITS OR RELATED JOB PERMITS. TECHNICAL SPECIFICATIONS: ALL WORK UNDER THIS CONTRACT SHALL BE IN ACCORDANCE WITH THE SPECIFICATIONS PREPARED FOR THE RECLAMATION OF THE "SARAH ANN (VANCE) DRAINAGE" PROJECT. PLANS & SPECS ARE INCORPORATED HERE IN BY REFERENCE AND ALL PROVISIONS, CLAUSES AND CONDITIONS THEREIN ARE MADE PROPERLY A PART OF THIS CONTRACT, AND CONSISTS OF 25 DRAWINGS AS PREPARED BY TERRADON CORPORATION. PAYMENTS AND (6) COMPLETION: SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE DATE TITLE FEIN



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CHUCK BOWMAN 304-558-2157

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State of West Virginia
Department of Administration
Purchasing Division
2019 Washings Base 50400 Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

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CHUCK BOWMAN 304-558-2157

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

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ADDRESS CORRESPONDENCE TO ATTENTION OF

CHUCK BOWMAN

304-558-2157 **ENVIRONMENTAL PROTECTION**

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

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Charleston, WV 25305-0130

Request for Quotation

DEP15136

PAGE 11

ADDRESS	CORRESPOND	ENCE TO AT	TENTION OF:

CHUCK BOWMAN 304-558-2157

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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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0.7/21/2010

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

Request for Quotation

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CHUCK BOWMAN 304-558-2157

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Request for Quotation

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CHUCK BOWMAN 304-558-2157

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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 Payer	ID No.:
Address:			
City:	State:	Zip Code:	Phone:
Fax No.:	E-mail addres	ss:	Phone:
Part B: Legal Structur			
() Corporation (() Other (please specify) Sole Proprietorship y)	() Partnersh	ip ()LLC
Part C: Certifying and Select only one of the fo	updating information llowing options, follow	in the Applicant the instructions for	/Violator System (AVS). or that option, and sign below.
I,(print nam	, ha	ve the express au	thority to certify that:
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2. Part of the inf and must be upo AVS to this form and date below 3. Our business of	ormation on the attached lated. If you select this in. Use Part D to provious and complete Part D.	ed Entity OFT fro option, you must le the missing or o tion in AVS. If yo	m AVS is missing or incorrect attach an Entity OFT from

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.

Pa	rt	D

Contractor's Business Name:	
Continuetor o Business rame.	

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.

Name	Position/Title
Address	Telephone #
	% of Ownership
Begin Date:	Ending Date
Name	Position/Title
Address	Telephone #
	% of Ownership
Begin Date:	Ending Date
Name	Position/Title
Address	Telephone #
	% of Ownership
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Address	Telephone #
	% of Ownership
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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 <u>22 minutes</u> 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.

	REQ.P.O*	
	BID BOND	
KNOW ALL MEN BY THESE PRESENTS, That	we, the undersigned,	. <u></u>
of .	, as Principal, and	h
of .	, a corporation organized and existing under the laws	of the State of
with its principal office in the City of	as Surety, are held and firmly bou	nd unto the State
Most Virginia as Obligee, in the penal sum of	(\$) for the	payment of which
Il and truly to be made, we jointly and severally bind o	urselves, our heirs, administrators, executors, successors ar	nd assigns.
The Condition of the above obligation is such the	at whereas the Principal has submitted to the Purchasing S	ection of the
	ittached hereto and made a part hereof, to enter into a contr	ract in writing for
reto and shall furnish any other bonds and insurance preement created by the acceptance of said bid, then are and effect. It is expressly understood and agreed creed the penal amount of this obligation as herein stored the penal amount of the value received, hereby stigated impaired or affected by any extension of the time value notice of any such extension. IN WITNESS WHEREOF, Principal and Sureave caused their corporate seals to be affixed hereur	culates and agrees that the obligations of said Surety and its within which the Obligee may accept such bid, and said Surety where the said surety have hereunto set their hands and seals, and such of their to and these presents to be signed by their proper officers,	on shall remain in fa der shall, in no ever s bond shall be in n ety does hereby m as are corporation
day of, 20,		
Principal Corporate Seal	(Name of Prin	ncipal)
	· ·	
	By(Must be Pres	sident or
	Vice Preside	
	(Title)	
Surety Corporate Seal	(Name of Su	rety)
	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 RFO/RFP#

BID BOND PREPARATION INSTRUCTIONS

(A)

(C)

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NOTE.

			id Bond	That we sha wadanismad
WV State Agency				That we, the undersigned,
(Stated on Page 1 "Spending Unit")	as Principal, and		(<u>D)</u> of	,, (G),
Request for Quotation Number (upper	as Principai, and	3 COLDOLS	tion organized a	nd existing under the laws
right comer of page #1)	of the State of	, a corpore	with its principal	office in the City of
Your Company Name	of the State of	as Surety	are held and fi	rmly bound unto The State
City, Location of your Company	of West Virginia, as O	hligee in the r	nenal sum of	(K)
State, Location of your Company	(\$ (L)) for the p	ayment of which	n, well and truly to be made,
Surety Corporate Name City, Location of Surety	we jointly and several	ly bind oursely	es, our heirs, ad	ministrators, executors,
State, Location of Surety	successors and assign:	s.		
State of Surety Incorporation	The Condition	on of the above	obligation is su	ch that whereas the Principal
City of Surety Incorporation	has submitted to the P	Purchasing Sect	tion of the Depar	tment of Administration
Minimum amount of acceptable bid	a certain bid or propo	sal, attached he	ereto and made a	part hereof to enter into a
bond is 5% of total bid. You may state	contract in writing for	r		
"5% of bid" or a specific amount on			(M)	
this line in words.				
Amount of bond in figures	NOW THE	DECORE		
Brief Description of scope of work		ceroke. oid shall be reje	ected or	
Day of the month	(a) II said t	oid shall be acc	cented and the Pi	incipal shall enter into a
Month	contract in accordance	e with the bid	or proposal attac	ched hereto and shall furnish
Year Name of Corporation	any other bonds and	insurance requ	ired by the bid o	r proposal, and shall in all
Raised Corporate Seal of Principal	other respects perfor	m the screeme	nt created by the	acceptance of said bid then
Signature of President or Vice	this obligation shall l	he null and voi	d, otherwise this	obligation shall remain in tull
President	force and effect. It is	s expressly und	derstood and agr	eed that the madning of the
Title of person signing	Surety for any and a	ll claims hereu	nder shall, in no	event, exceed the penal
Raised Corporate Seal of Surety	amount of this oblig	ation as herein	stated	1
Corporate Name of Surety	The Surety	for value rece	eived, hereby stip	oulates and agrees that the
Signature of Attorney in Fact of the	obligations of said S	surety and its b	ond shall be in r	o way impaired or affected by
Surety		e within which	h the Obligee ma	y accept such bid: and said
Dated, Power of Attorney with Raised	Surety does hereby	waive notice of	r any such exten	Surety have hereunto set their
Surety Seal must accompany this bid	IN WITNE	55 WHEREO	or, Principal and	ons have caused their corporate
bond.	hands and seals, and	such of them	as are corporations as a precents to be	signed by their proper officers,
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	tuis (14)	lay 01	<u>(0)</u> , 20_	
	Principal Corporate	Seal		(Q)
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	V		- / -	(Must be President or
				Vice President)
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	Surety Corporate S	Seal		<u>(V)</u>
				(Name of Surety)
	•			
			-	(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

STAT	TE OF		•	
COU	NTY OF	_, TO-WIT:		
	as follows:	ifter being fi	rst duly sworn, depose	e and
1.	I am an employee of			; and,
		((Company Name)	
2.	I do hereby attest that			
		•	(Company Name)	
	maintains a valid written di policy is in compliance with	West Virgi	inia Code §21-1D-5.	such
The a	above statements are sworn	to under the	penalty of perjury.	
	-	((Company Name)	
	E	Ву:		·
	Т	itle:		
	С)ate:		
Taker	n, subscribed and sworn to b	efore me th	is day of	·
Ву Со	ommission expires		····	
(Seal)			
			(Notary 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.

RFQ No.			
IN COLINO.		 	

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 da	ay of	, 20
My Commission expires	, 20	
AFFIX SEAL HERE	NOTARY PUBLIC	

Sarah Ann (Vance) Drainage DEP15136

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.

ITEM				
NO.	QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
1.0	LS	Mobilization and Demobilization (Limited to 10% of Total Bid)	LS	\$
2.0	LS	Construction Layout (Limited to 5% of Total Bid)	LS	\$
3.0	LS	Quality Control (Limited to 3% of Total Bid)	LS	\$
4.0	LS	Site Preparation (Limited to 10% of Total Bid)	LS	\$
4.1	28 SY	Concrete Pavement Replacement		\$
5.1	6,615 LF	Sediment Control		\$
5.2	180 SY	Permanent Erosion Control Matting		\$
5.3	42 LF	Diversion Berms	· ·	\$
5.4	13 EA	Rock Check Dams		\$
6.0	10.0 AC	Revegetation		\$
7.1	LS	Temporary Stream Crossing		\$
7.2	52 LF	48-inch HDPE pipe		\$
7.3	218 LF	24-inch HDPE pipe		\$
7.4	LS	Clean out existing 18-inch CMP	Ī	\$
7.5	LS	Reshape Existing Ditch		\$
7.6	636 LF	Type I Channel		\$
7.7	69 LF	Type II Channel		\$
7.8	297 LF	Type III Channel		\$
7.9	657 LF	Type IV Channel		\$.
7.10	1,108 LF	Type V Channel		\$
7.11	100 LF	Temporary 18-inch HDPE pipe		\$
8.0	13,013 CY	Unclassified Excavation		\$
9.1	3 Ea	Wet/Modified Mine Seal		\$
9.2	9 Ea	Bat Gate Mine Seal		\$
9.3	8 Ea	Dry Mine Seal		\$
11.0	860 LF	Underdrain		\$
12.0	2.0 AC	Soil Cover		\$
				\$
				\$
		\		\$
d			·	
*********		TOTAL		\$