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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

RFQ NUMBER DEP15455

ADDRESS CORRESPONDENCE TO ATTENTION OF

CHUCK BOWMAN 304-558-2157

RFQ COPY TYPE NAME/ADDRESS HERE

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

TERMS OF SALE DATE PRINTED SHIP VIA FOB FREIGHT TERMS 05/26/2011 BID OPENING DATE: 07/21/2011 BID OPENING TIME 01:30PM CAT. LINE QUANTITY UOP ITEM NUMBER UNIT PRICE **AMOUNT** b001 DВ 962-73 1 RECLAMATION: RESTORATION OF LAND & OTHER PROPERTIES THE WEST VIRGINIA PURCHASING DIVISTON, FOR THE WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION, IS SOLICITING BIDS FROM QUALIFIED CONTRACTORS FOR A CONTRACT TO PROVIDE ALL LABOR AND MATERIALS FOR THE RECLAMATION OF 71-ACRE ABANDONED MINE PROJECT KNOWN AS THE "CHURCH CREEK/MANOWN HIGHWALL" PROJECT LOCATED NEAR SHINNSTON, WEST VERGINEA, (PRESTON CO. A MANDATORY ON SITE PREBID CONFERENCE \$HALL BE HELD ON 06/23/11 @ 10:00 AM.ALL INTERESTED PARTIES ARE REQUIRED TO ATTEND THIS MEETING. FAILURE TO ATTEND TH MANDATORY PRE-BID SHALL RESULT IN DISQUALIFICATION OF THE BID. NO ONE PERSON MAY REPRESENT MORE THAN ONE ALSO, PREBIDS WILL INVOLVE EXTENSIVE FOOT BIDDER. TRAVEL OVER DIFFICULT TERRAIN AND/OR DURING INCLEMENT WEATHER. AN ATTENDANCE SHEET WILL BE MADE AVAILABLE FOR ALL POTENTIAL BIDDERS TO COMPLETE. THIS WILL SERVE AS THE OFFICIAL DOCUMENT | VERIFYING ATTENDANCE | AT THE MANDATORY FAILURE TO PROVIDE YOUR COMPANY AND REPRESENTATIVE NAME ON THE ATTENDANCE \$HEET WILL RESULT IN DISQUALIF‡CATION OF THE BID. THE STATE WILL NOT ACCEPT ANY OTHER DOCUMENTATION TO VERIFY ATTENDANCE. THE BIDDER I\$ RESPONSIBLE FOR ENSURING THEY HAVE completed the information required on the attendance THE PURCHASING DIVISION AND THE STATE AGENCY SHEET. WILL NOT ASSUME ANY RESPONSIBILITY FOR A BIDDER'S FAILURE TO COMPLETE THE PRE-BID ATTENDANCE SHEET. TN SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE TELEPHONE TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE

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.
- 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).



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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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 304-926-0499

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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

DATE PRINTED TERMS OF SALE SHIP VIA F.O.B FREIGHTTERMS 05/26/2011 BID OPENING DATE: 07/21/2011 OPENING TIME **AMOUNT** UOP ITEM NUMBER UNIT PRICE LINE QUANTITY 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 RESK INSURANCE IN AN AMOUNT EQUAL TO 100 \Bbbk OF THE AMOUNT OF THE CONTRACT. (XX) BONDS: FIVE PERCENT (5%) OF THE TOTAL AMOUNT OF THE BID PAYABLE TO THE STATE OF WEST VIRGINIA, SHALL BE SUBMITTED WITH EACH BID AS A BID BOND. THE SUCCESSFUL BIDDER SHALL ALSO FURNESH 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, TRREVOCABLE LETTER OF CREDIT, OR BOND FURNISHED BY A BOLVENT SURETY COMPANY AUTHORIZED TO DO BUSINESS IN THE A LETTER OF CREDIT SUBMITTED STATE OF WEST VIRGINIA. IN LIEU OF A BOND WILL ONLY BE ALLOWED FOR PROJECTS UNDER \$100,000. PERSONAL OR BUSINESS CHECKS ARE NOT 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. IF THE ORIGINAL OMB #1029-0119 IS NOT ATTACHED TO THE BIDDING DOCUMENTS YOU CAN CONTACT THE AVS OFFICE AT SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE DATE SIGNATURE TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE



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DATE PRINTED TERMS OF SALE SHIP VIA FOB FREIGHT TERMS 05/26/2011 BID OPENING DATE: 07/21/2011 OPENING TIME 01:30PM CAT LINE QUANTITY UOP ITEM NUMBER UNIT PRICE **AMOUNT** 800-643-9748 OR WWW.AVS.OSMRE.GOV ************************************* CONTRACTORS LICENSE WEST VIRGINIA STATE CODE 21-11-2 REQUIRES THAT ALL PERSONS DESIRING TO PERFORM CONTRACTING WORK IN THIS STATE MUST BE LICENSED. THE WEST VIRGINIA CONTRACTORS LICENSING BOARD IS EMPOWERED TO ISSUE THE CONTRACTORS APPLICATIONS FOR A CONTRACTORS LICENSE MAY BE LICENSE. MADE BY CONTACTING THE WEST VIRGINIA DIVISION OF LABOR, CAPITOL COMPLEX, BUILDING 3, ROOM 319, CHARLESTON, WV 25305, PHL 304-558-7890. WEST VIRGINIA STAITE CODE 21-11-11 REQUIRES ANY PROSPECTIVE BIDDER TO INCLUDE THE CONTRACTORS LICENSE NUMBER ON THEIR BID. BIDDER TO COMPLETE: CONTRACTORS NAME: CONTRACTORS LICENSE #:|. THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FURNISH A COPY OF THEIR CONFRACTORS LICENSE PRIOR TO ISSUANCE OF A PURCHASE ORDER/CONTRACT. APPLICABLE LAW THE WEST VIRGINIA STATE CODE, PURCHASING DIVISION RULE REGULATIONS, AND THE INFORMATION PROVIDED IN THE 'REQUEST FOR QUOTATION' ISSUED BY THE PURCHASING DIVISION IS THE SOLE AUTHORITY GOVERNING THIS PROCUREMENT. ANY INFORMATION PROVIDED IN SPECIFICATION MANUALS SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE FELEPHONE DATE TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE



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OFFICE OF AML&R

25304

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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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MANDRESSICORRESSIONDENCE IOVARIENTION FOR

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

ADDRESS CHANGES TO BE NOTED ABOVE

DATE PRIN	ren l ter	RMS OF SALE	SHIPVIA	FOB	FREIGHT TERMS
05/26/					GREIGH HENVIS
BID OPENING DATE:	07/21/	2011	BTD	OPENING TIME 01	• 3 O DM
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State of West Virginia
Department of Administration
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Post Office Box 50130
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ADDRESS CORRESPONDENCE TO A ITENTION OF

CHUCK BOWMAN 304-558-2157

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

25304

304-926-0499

DATE PRINTED TERMS OF SALE SHIP VIA FOB: FREIGHT TERMS 05/26/2011 **BID OPENING DATE:** 07/21/2011 BID OPENING TIME $01 \cdot 30PM$ CAT. LINE QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT F, PRIOR TO THE AWARD OF A CONTRACT UNDER THE ABOVE PROVISIONS, THE SPENDING OFFICER OF THE SPENDING UNIT DETERMINES THAT THERE EXISTS A BID FOR LIKE FOREIGN ALUMINUM, GLASS OR STEEL THAT IS REASONABLE AND LOWER THAN THE LOWEST BID FOR DOMESTIC PRODUCTS, THE SPENDING OFFICE MAY REQUEST, IN WRITING, A REEVALUATION AND REDUCTION IN THE LOWEST BID FOR SUCH DOMESTIC PRODUCTS. ALL VENDORS MUST INDICATE IN THEIR BID IF THEY ARE \$UPPLYING FOREIGN ALUMINUM, GLASS OR STEEL. **R**EV. 3/88 **E**XHIBIT 9 NOTICE FOR ISSUANCE & ACKNOWLEDGEMENT OF CONSTRUCTION PROJECT ADDENDA. THE ARCHITECT/ENGINEER AND/OR AGENCY SHALL BE REQUIRED TO ABIDE BY THE FOLLOWING SCHEDULE IN ISSUING CONSTRUCTION PROJECT ADDENDA FOR STATE AGENCIES: THE ARCHITECT/ENGINEER SHALL PREPARE THE ADDENDUM AND A LIST OF ALL PARTIES THAT HAVE PROCURED DRAWINGS AND SPECIFICATIONS FOR THE PROJECT. THE ADDENDUM AND LIST SHALL BE FORWARDED TO THE BUYER IN THE STATE PURCHASING D‡VISI∮N. THE ARCHITECT/ENGINEER SHALL ALSO \$END A COPY OF THE ADDENDUM TO THE STATE AGENCY FOR WHICH THE CONTRACT IS ISSUED. THE BUYER SHALL SEND THE ADDENDUM TO ALL INTERESTED PARTIES AND IF NECESSARY, EXTEND THE BID ANY ADDENDUM SHOULD BE RECEIVED BY THE OPENING DATE BUYER WITHIN | FOURTEEN (14) DAYS PRIOR TO THE BID **OPENING DATE** 3) ALL ADDENDA \$HOULD BE FORMALLY ACKNOWLEDGED BY AL SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE TELEPHONE DATE TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE



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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

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PAGE 12

ADDRESS CO	RESPONDENCE	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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RFQ COPY

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

Request for
Quotation

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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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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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AD	DRESS CORRE	SPONDENC	E TO ATTEN	TION OF
HUCK	BOWMAN			
04-55	58-2157			

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TYPE	NAME/ADDRESS	нере	
	THE PROPERTY OF	*********	

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

DATE PRIN	TED	TER	IMS OF SAL	E		SHIP V	IA	FOB		FREIGHT TERMS
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SIGNATURE							TELEPHONE		DATE	
TITLE		F	EIN				L	ADDRESS (CHANGES	TO BE NOTED ABOVE

Church Creek / Manown Highwall DEP15455 Contractor's Bid Sheet

Company Name:	
Address:	

The DEP reserves the right to request additional information and supporting documentation

TEM NO.	QUAI	NTITY	when the Unit Price appears to be unreasonable. DESCRIPTION	UNIT PRICE	AMOUNT
1.0	Lump	Sum	Mobilization and Demobilization (Cannot be more than 5% of TOTAL AMOUNT BID)	\$	\$
2.0	Lump	Sum	Construction Layout Stakes (Cannot be more than 3% of TOTAL AMOUNT BID)	\$	\$
3.0	Lump	Sum	Quality Control (Cannot be more than 1% of TOTAL AMOUNT BID)	\$	\$
4.1	Lump	Sum	Site Preparation (Cannot be more than 8% of TOTAL AMOUNT BID)	\$	\$
4.2	4	Ea.	Gates	\$	\$
5.1	13,300	L.Ft.	Silt Fence	\$	\$
5.2	4,100	L.Ft.	Super Silt Fence	\$	\$
5.3	. 2	Ea.	Stone Construction Entrance	\$	\$
5.4	11,600	L.Ft.	Sediment Control Device	\$	\$
5.5	26,200	L.Ft.	Straw Wattles	\$	\$
6.1	63.0	Acs.	Revegetation	\$	\$
6.2	8.0	Acs.	Reforestation	\$	\$
7.1	3,618	L.Ft.	2.0 Ft. Deep Riprap "Vee" Shaped Ditch	\$	\$
7.2	1,915	L.Ft.	2.5 Ft. Deep Riprap "Vee" Shaped Ditch	\$	\$
7.3	2,442	L.Ft.	2.0 Ft. Deep Grouted Riprap "Vee" Shaped Ditch	\$	\$
7.4	1,878	L.Ft.	2.5 Ft. Deep Grouted Riprap "Vee" Shaped Ditch	\$	\$
7.5	891	L.Ft.	2.0 Ft. Deep by 6.0 Ft. Flat Bottom Shaped Grouted Riprap Ditch	\$	\$
7.6	30	L.Ft.	Temporary Pipe Number One	\$	\$
7.7	3	Ea.	Subsidence Socks	\$	\$
.0	196,000	C.Yds.	Unclassified Excavation	\$	\$
.1	21	Ea.	Type I or II Mine Seals	\$	\$
.2	3	Ea.	Type III Mine Seals	\$.	\$
.3	2	Ea.	Type IV Mine Seals	\$	\$
.4	4,000	L.Ft.	Wet Mine Seal Conveyance Pipes	\$	\$
.5	2,500	Bags	Soda Ash Briquettes	\$	\$
1.1	3,000	L.Ft.	Subsurface Drain	\$	\$
.2	6	Ea.	12" Inline Cleanouts	\$	\$
			TOTAL:	\$	-

Bidders Authorized Signature:		Date:	
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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 Paye	r ID No.:
Address:		·	Phone:
City:	State:	Zip Code:	Phone:
Fax No.:	E-mail addr	ess:	
Part B: Legal Struc	cture		
() Corporation () Other (please spe	() Sole Proprietorship	() Partners	hip () LLC
			t/Violator System (AVS). for that option, and sign below.
I,	h	ave the evoress at	thority to certify that:
l,(print n	name)	ave the express at	miority to cortify that.
accurate, con	n on the attached Entity (applete, and up-to-date. If VS to this form. Sign and	you select this or	mily Tree (OFT) from AVS is otion, you must attach an Entity o not complete Part D.
and must be a AVS to this f	updated. If you select this	option, you mus	om AVS is missing or incorrect tattach an Entity OFT from corrected information. Sign
		•	ou select this option, you must e below and complete Part D.
Date	Sig	gnature	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.

Part D.

Contractor's Business 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.

Name	Position/Title
Address	Telephone #
	% of Ownership
Begin Date:	Ending Date:
Name	Position/Title
Address	Talanhana #
	% of Ownership
Begin Date:	979 17 The
Name	Position/Title
Address	Telephone #
	% of Ownership
Begin Date:	Ending Date:
Name	Position/Title
Address	Telephone #
	% of Ownership
Begin Date:	Ending Date:
	Ditonig 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.

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

Agency		Agency REQ.P.O#
	BID BOND	
KNOW ALL MEN BY THESE PRESENT	S, That we, the undersigned,	
		Principal, and
		zed and existing under the laws of the State of
		Surety, are held and firmly bound unto the State
) for the payment of which,
well and truly to be made, we jointly and severally		
The Condition of the above obligation is Department of Administration a certain bid or prop		submitted to the Purchasing Section of the part hereof, to enter into a contract in writing for
NOW THEREFORE,		•
force and effect. It is expressly understood and a exceed the penal amount of this obligation as her	, then this obligation shall be null an agreed that the liability of the Surety ein stated. by stipulates and agrees that the ob-	d void, otherwise this obligation shall remain in full for any and all claims hereunder shall, in no event, ligations of said Surety and its bond shall be in no
IN WITNESS WHEREOF, Principal and	Surety have hereunto set their hand	is and seals, and such of them as are corporations
have caused their corporate seals to be affixed he	ereunto and these presents to be sig	gned by their proper officers, this
day of, 20	·	
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.

AGENCY

BID BOND PREPARATION INSTRUCTIONS

			RFQ/RFP# (B)
		Bid Bo	1 <u>d</u>
(A)	WV State Agency	KNOW ALL MEN BY THESE PI	ESENTS, That we, the undersigned,
	(Stated on Page 1 "Spending Unit")	(C)of(D),(E),
	Request for Quotation Number (upper	as Principal, and(F)	of (G)
	right corner of page #1)	(H) , a corporation of	rganized and existing under the laws
(C)	Your Company Name	of the State of (I) with its	principal office in the City of
(D)	City, Location of your Company		eld and firmly bound unto The State
(E)	State, Location of your Company	of West Virginia, as Obligee, in the penal st	m of (K)
(F)	Surety Corporate Name	(\$(L)) for the paymen	t of which, well and truly to be made,
(G)	City, Location of Surety	we jointly and severally bind ourselves, our	heirs administrators executors
(H)	State, Location of Surety	successors and assigns.	many administrations, executors,
(I)	State of Surety Incorporation		tion is such that whereas the Principal
(J)	City of Surety Incorporation	has submitted to the Purchasing Section of	the Department of Administration
(K)	Minimum amount of acceptable bid	a certain bid or proposal, attached hereto an	id made a part hereof to enter into a
()	bond is 5% of total bid. You may state	contract in writing for	a made a part nercor to cine; meo a
	"5% of bid" or a specific amount on	(M)	
	this line in words.	(174)	
(L)	Amount of bond in figures	**************************************	
(M)	Brief Description of scope of work	NOW THEREFORE.	
(N)	Day of the month	(a) If said bid shall be rejected, or	•
(O)	Month	(b) If said bid shall be accepted a	
(P)	Year	contract in accordance with the bid or prope	asal attached hereto and chall furnich
(Q)	Name of Corporation	any other bonds and insurance required by	
(R)	Raised Corporate Seal of Principal	other respects perform the agreement create	
(S)	Signature of President or Vice	this obligation shall be null and void, other	
(-)	President	force and effect. It is expressly understood	
(T)	Title of person signing	Surety for any and all claims hereunder sha	
(U)	Raised Corporate Seal of Surety	amount of this obligation as herein stated	in, in the event, exceed the pental
(V)	Corporate Name of Surety	The Surety for value received, her	rehy ctinulates and agrees that the
(W)	Signature of Attorney in Fact of the	obligations of said Surety and its bond shal	
(")	Surety	any extension of time within which the Obl	
NOTE:	Dated, Power of Attorney with Raised	Surety does hereby waive notice of any suc	
WOID.	Surety Seal must accompany this bid		pal and Surety have hereunto set their
	bond.	hands and seals, and such of them as are co	
	boliu.	seals to be affixed hereto and these presents	poracions have caused their corporate
		this (N) day of (O)	
		tins (0)	_, 20(P)
		Principal Corporate Seal	(Q)
		Timolpai Corporate Seal	
		(B)	(Name of Principal)
		(R)	By(S)
			(Must be President or
			Vice President)
			(T)
		. AT D	Title
		(U)	
		Surety Corporate Seal	(V)
			(Name of Surety)
			ZEW N
			(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		
COU	NTY OF	, TO-WIT:	
I,	e as follows:	, after being first duly sv	worn, depose and
1.	I am an employee	of(Company N	; and,
2.	I do hereby attest	that(Company N	Name)
		vritten drug free workplace po nce with West Virginia Code	
The	above statements are	e sworn to under the penalty o	of perjury.
		(Company	Name)
		Ву:	
		Title:	
		Date:	
Take	en, subscribed and sv	vorn to before me this	day of
ВуС	Commission expires $_$		_
(Sea	al)		
		(No	tary 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

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 owned 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 th		
My Commission expires	, 20	
AFFIX SEAL HERE	NOTORY PUBLIC	