

VENDOR

RFO COPY

TYPE NAME/ADDRESS HERE

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 WEH12043 PAGE 1

ROBERTA WAGNER 304-558-0067

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

ADDRESS CORRESPONDENCE TO ATTENTION OF:

454 MCDOWELL STREET WELCH, WV 24801

304-436-8710

DATE PRINTED FREIGHT TERMS TERMS OF SALE SHIP VIA FOR 12/13/2011 BID OPENING DATE: BID OPENING TIME 01/12/2012 01:30PM CAT. LINE QUANTITY UOP ITEM NUMBER UNIT PRICE **AMOUNT** 0001 JB 948-21 1 CONSULTING THERAPUTIC DIETITIAN SERVICES TO PROVIDE SERVICES AS | "CONSULTANT DIETITIAN" AT WELCH COMMUNITY HOSPITAL LOCATED IN MCDOWELL COUNTY, WELCH, WEST VIRGINIA, HER THE ATTACHED SPECIFICATIONS. EXHIBIT 3 LIFE OF CONTRACT: THIS CONTRACT BECOMES EFFECTIVE ON AWARD..... 2012 AND EXTENDS FOR A PERIOD OF ONE (1) YEAR OR UNTIL SUCH "REASONABLE TIME" THEREAFTER AS IS MECESSARY TO OBTAIN A NEW CONTRACT OR RENEW THE THE "REASONABLE TIME" PERIOD SHALL ORIGINAL CONTRACT. NOT EXCEED TWELVE (12) MONTHS. DURING THIS "REASONABLE TIME" THE VENDOR MAY TERMINATE THIS CONTRACT FOR ANY REASON UPON GIVING THE DIRECTOR OF PURCHASING 30 DAYS WRITTEN NOTICE. UNLESS SPECIFIC PROVISIONS ARE STIPULATED ELSEWHERE IN THIS CONTRACT DOCUMENT, THE TERMS, CONDITIONS AND PRICING SET HEREIN ARE FIRM FOR THE LIFE OF THE CONTRACT. RENEWAL: THIS CONTRACT MAY BE RENEWED UPON THE MUTUAL WRITTEN CONSENT OF THE SPENDING UNIT AND VENDOR, SUBMITTED TO THE DIRECTOR OF PURCHASING THIRTY (30) DAYS PRIOR TO THE EXPIRATION DATE. SUCH RENEWAL SHALL BE IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND SHALL BE LIMITED TO TWO (2) ONE SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE TELEPHONE DATE TITLE 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.
- 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 (BÁA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.html 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).



VEZDOR

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

RFQ NUMBER WEH12043 PAGE 2

ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 304-558-0067

HEALTH AND HUMAN RESOURCES
WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV

24801

TITLE		FEIN				ADDRESS CH	ANGES	TO BE NOTED ABOVE
SIGNATURE				1	ELEPHONE		DATE	
			SEE RE	VERSE SIDE FOR TEI	11/11/11/11/11/11	NDITIONS	IDATE	
F	OBERTA WAGN	ER						
E S S S S S S S S S S S S S S S S S S S	ALLY NULL ARDER. XHIBIT 4 NQUIRIES: RITTEN QUES USINESS ON ENT VIA USE SSURE NO VE UBSTANTIVE OSSIBLE, E- NQUIRIES TO	TIONS 12/2 2S, FAX CNDOR F QUESTI MAIL (SHALI 28/201 4, COU RECEIV	D IS TERMI BE ACCEPT 1. QUESTI RIER OR E- ES AN UNFA	TED THR ONS MA MAIL. AIR ADV	OUGH CLOSE OF Y BE IN ORDER TO ANTAGE, NO ORALLY. IF	ER	
						NTRACTOR FILE T IS AUTOMATI		
# P P P P P P P P P P P P P P P P P P P	UTHORIZE A ARKET, WITH STIMATE, IT MMEDIATE DE AUSES (INCI	SPENDI CUT TH EMS SH CLIVERY CUDING	NG UN E FII ECIFI IN E BUT N	IT TO PURC ING OF A F ED ON THIS MERGENCIES OT LIMITEI	CHASE C REQUISI S CONTR S DUE T O TO DE	TION OR COST		
) F N	ANCELLATION IGHT TO CAN OTICE TO TH UPPLIED ARE	I: THE ICEL THE IE VENI	IS CO OR II INFE	NTRACT IMN THE COMMO RIOR QUALI	MEDIATE ODITIES TY OR	G RESERVES TH LY UPON WRITT AND/OR SERVI DO NOT CONFOR NTRACT HEREIN	EN CES M	
	1) YEAR PEF		NO.					
LINE	QUANTITY	UOP	CAT.	ITEM NUME	0.0000000000000000000000000000000000000	UNIT PRICE	01:	AMOUNT
12/13/2 BID OPENING DATE:		2012			DID C	PENING TIME	01.	30PM
DATE PRIN		ERMS OF SA	LÉ	SHIP VIA		F.O.B.		FREIGHT TERMS
							PERCENT COL	



MODZEN

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

HERE

Request for Quotation

RFQ NUMBER WEH12043 PAGE 3

ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 304-558-0067

RFÇ	COPY	
TYPE	NAME/ADDRESS	

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV 24801 304

DATE PRINT	TÉD T	ERMS OF SAL	Ē .	SHIP VIA		F.O.B,	FREIGHT TERMS
12/13/2	011						
BID OPENING DATE: 01/12/2012			BII	OPE	ENING TIME 01	:30PM	
LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER		UNIT PRICE	AMOUNT
F 2	EPARTMENT (URCHASING I 019 WASHING HARLESTON,	DIVISIO TON ST	N REET,				
	AX: (304) ! -MAIL: ROBI			R@WV.GOV			
	ā						D
) M	URRENTLY UT S ISSUED TH UST ACCEPT	TILIZES ROUGH THE ST MENT C	A VI A BAN ATE C F ALI	SA PURCHASING K. THE SUCCES F WEST VIRGINI ORDERS PLACEI	CARI SSFUL A VI	SA PURCHASING	
		VENDO	R PRE	FERENCE CERTIE	rabı	E	
V	ERSION WHIC	CH IS A	VAILA	EEN REPLACED E BLE HERE: ADMIN/PURCHASE			
			NOTI	CE			
P	SIGNED BII	MUST	BE SU	BMITTED TO:			
	PURCHAS BUILDIS 2019 W	SING DI NG 15 ASHINGT	VISIO IR NO	NISTRATION N REET, EAST 305-0130			
PIONATURE			SEE RE	VERSE SIDE FOR TERMS AND TELEPHON		FIONS IDATE	
SIGNATURE				TELEPHON	5	DATE	
TITLE		FEIN				ADDRESS CHANGE	S TO BE NOTED ABOVE



PEZDOR

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division

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

Request for

RFQ NUMBER WEH12043 PAGE 4

ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 304-558-0067

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET WELCH, WV

24801

DATE PRINTED TE	BUS AF AN F	SHIP VIA	F.O.B.	FREIGHT TERMS
	RMS OF SALE	SHIP VIA	F.O.6,	FREIGHT TERMS
12/13/2011 BID OPENING DATE: 01/12/	2012	DID C	DENITING TIME 01	2.0.DM
				:30PM
LINE QUANTITY	UOP CAT.	ITEM NUMBER	UNIT PRICE	AMOUNT
PLEASE NOTE:	A CONVENIE	NCE COPY WOULD B	E APPRECIATED.	
		THIS INFORMATION MAY NOT BE CONS		
BUYER:		-RW/FILE 22		
RFQ. NO.:	-	-WEH12043		
BID OPENING	DATE:	01/12/2012		
BID OPENING	TIME:	-1:30 PM		
PLEASE PROVI TO CONTACT Y		MBER IN CASE IT	IS NECESSARY	
CONTACT PERS	ON (PLEASE	PRINT CLEARLY):		
			·	
	SEE RE	VERSE SIDE FOR TERMS AND CO		
SIGNATURE		TELEPHONE	DATE	
TITLE	FEIN	L	ADDRESS CHANGES	S TO BE NOTED ABOVE



MODZEK

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

RFQ NUMBER WEH12043 5

ADDRESS CORRESPONDENCE TO ATTENTION OF: ROBERTA WAGNER 304-558-0067

HEALTH AND HUMAN RESOURCES WELCH COMMUNITY HOSPITAL

454 MCDOWELL STREET O WELCH, WV

24801

DATE PRINTED	TERMS OF SA	0	ė (ni	VIA .	F.O.B.		PREJOUT TERMS
12/13/2011	TERMS OF SI	1LE	SHIP	VIA	F.O.B,		FREIGHT TERMS
])1/12/2012			DTD C	DENTAG BIME		2.0714
The control of the co					PENING TIME	01;	:30PM
LINE QUA	NTITY UOP	CAT. NO.	ITEM N	UMBER	UNIT PRICE		AMOUNT
* * * * *	THIS IS T	HE END	OF RFQ	WEH120	43 ***** TO	TAL:	
	4.1						
					e d		
	-						
71							n = -
							,
		OFF DEV	EDOE OIDE FOR	TERMS AND CO	NOITIONS	0.000.000.000	
SIGNATURE		oee nev	LUSE SIDE FOR	TELEPHONE	פאטונוטא	DATE	
TITLE	FEIN				ADDRESS	HANGES	TO BE NOTED ABOVE

REQUEST FOR QUOTATION

STATE OF WEST VIRGINIA

Department of Health and Human Resources Welch Community Hospital RFQ #WEH12043

Part 1 GENERAL INFORMATION

1.1 Purpose:

The Acquisition and Contract Administration Section of the Purchasing Division "State" for the Department of Health and Human Resources, Bureau for Behavioral Health Facilities, Welch Community Hospital, "Agency" is soliciting Quotations to provide Consultant Dietitian Services for Welch Community Hospital's Dietary Department.

1.2 Project:

The mission or purpose of the project is to provide consultant dietitian services for the Dietary Department of Welch Community Hospital.

Part 2 OPERATING ENVIRONMENT

Location

Facility is located in McDowell County at Welch Community Hospital, 454 McDowell Street, Welch WV 24801

Background:

Welch Community Hospital is a 124 bed hospital, 59 of which are Long Term care beds. Acute care beds include: 8 Intensive care beds; 2 pediatric beds; 10 obstetrical beds and 45 medical/surgical beds. The hospital serves the counties of McDowell, Wyoming and Mingo with a total market population of about 83,000.

The following numbers represent the typical utilization encountered by the outpatient service area of Welch Community Hospital for the 2011fiscal year:

9,618-Emergency Room patients
335-Observation visits
245-Surgeries
50-Deliveries
638,802-Laboratory Tests
13,230-Radiology Diagnostic
3,274-CAT Scans
1,262-Ultrasound
611-Mammographies
713-Admissions
18,736-Respiratory Tests

3,434-Electrocardiograms

17,805-Clinic patients (1,969 OB CLINIC, 2,169 SURGICAL CLINIC, 8,449 WALK-IN-CLINIC, 2,442 PEDIATRIC CLINIC, 2,776 INTERNAL MEDICINE CLINIC)

Outpatient Services Provided Are:

Primary Care and Family Practice in a Certified Rural Health Setting

Pediatric Clinic

Newborn Care

Internal Medicine

Surgery

Emergency Room Services

Radiology Services Including:

Diagnostic

CAT Scan

Ultrasound

Mammography

MRI

EKG, Cardiac Doppler Studies, Stress Testing and Respiratory Therapy Services Laboratory Services

Part 3 PROCUREMENT SPECIFICATIONS

3.1 General Requirements

The mission/purpose of this project is to provide Consultant Dietitian Services for Welch Community Hospital's Dietary Department. Vendor must provide eight (8) to twelve (12) hours of consulting time per week to include eight (8) hours on site per week. Consultants must be a Registered Dietitian for the providing of requested service. Certification must be submitted prior to award.

3.2 SCOPE OF WORK:

The vendor is to quote services of providing Consultant Dietitian Services, these services are to include, but are not limited to, the following:

- a. Consultant "must" provide eight (8) to twelve (12) hours of consulting time per week, to include eight (8) hours on site per week.
- b. Consultant "must" provide services as required during regular workday working hours (Monday through Friday, on site hours may be performed between 8:00am to 6:00pm).
- c. Consultant "must" consult with Hospital's Dietary Manager (or a person designated by the Dietary Manager) in regard to the providing of nutritional assessment of each resident/patient nearly practical upon admission.

- d. Consultant "must" consult with Hospital's Dietary Manager, (or a person designated by the Dietary Manager) in developing and documenting individual nutritional care plans for all residents/patients.
- e. Consultant "must" visit residents/patients as necessary and document progress notes in the medical charts.
- f. Consultant "must" assist in the development of residents/patients logs which provide current information relating to resident's/patient's diet order as well as food preferences and a record of resident/patient visitation.
- g. Consultant "must" routinely and regularly visit the Hospital at prearranged times and for sufficient duration to provide continuing liaison with medical and nursing staff and to advise administration, counsel residents/patients and provide guidance to the Dietary Manager.
- h. Consultant "must" assist in establishing procedures of Quality Assurance to assure the consistency and quality of all services provided.
- i. Consultant "must" attend Hospital's initial and annual orientation.
- j. Consultant "must" submit record/documentation of each service rendered to Dietary Manager on a weekly basis.
- k. Consultant "must" provide assistance for Hospital to meet requirements for participation and payment associated with third-party payment programs in regard to specific services provided.
- 1. Consultant "must" participate in the education programs conducted by Hospital and shall perform required teaching functions.
- m. Consultant "must" provide requested services in conformance with all requirements of the Department of Health and Human Resources, Federal and State Constitutions and all applicable Federal and State statutes and regulations.

3.3 Special Terms and Conditions:

3.3.1 Performance Bonds:

The successful vendor will be required to furnish a Performance Bond in the amount of 100% of the vendor bid submitted. A performance bond may be in the form of a policy or certificate issued by a surety company recognized as doing business in the State of West Virginia. The bond must be submitted on a form available from the Purchasing Division. A certified check or cashier's check made payable to the State of West Virginia may be accepted in lieu of the policy or certificate issued by the surety company. A Performance Bond is not required until requested by the Purchasing Division.

The Performance Bond is forfeited to the State if the vendor defaults in the performance of a purchase order after the order had been issued and work begun.

3.3.2 Insurance Requirements:

Insurance certificates are required prior to award but are not required at the time of bid. The vendor shall present evidence of insurance at the time of award in the types and amounts required by the Agency and acceptable to the State. Included in the required insurance coverage shall be the following:

1. Professional and Comprehensive General Liability Insurance: \$500,000 per occurrence and \$1,000,000 annual aggregate.

Policy must show Hospital as Memorandum Holder

3.3.3 Invoices and Progress Payments:

The Vendor shall submit invoices, in arrears, to the Agency at the address on the face of the purchase order labeled "Invoice To" pursuant to the terms of the contract. Invoices may not be submitted more than once monthly and State Law forbids payment of invoices prior to receipt of services. Payment will be made to the vendor on a monthly basis, in arrears for service.

Contract will be awarded to the lowest grand total bid meeting specifications.

WEH12043 COST PROPOSAL

Quantity	Description		Unit Cost		Total Cost		
624 hours	Charges per hour:	\$	<u></u>	\$			
(Estimated eight (8) to twelve (12) hours/week x 52 weeks per year)							
Contract will b	ne awarded to the lower	est total	cost bid meeting	ng specif	fications		
Hours are NOT TO EXCEED 624 hrs. per year.							
Vendor Name:							
Vendor Signature:							
vendor Signat	ure:						
Date:							

Rev. 09/08

State of West Virginia

VENDOR PREFERENCE CERTIFICATE

Certification and application* is hereby made for Preference in accordance with West Virginia Code, §5A-3-37. (Does not apply to construction contracts). West Virginia Code, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the West Virginia Code. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

Date	Title:
Bide	er:Signed:
and	er penalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is true accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate ges during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.
auth the r deer	abmission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and brizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid equired business taxes, provided that such information does not contain the amounts of taxes paid nor any other information and by the Tax Commissioner to be confidential.
requ agai or de	er understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the rements for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty st such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency ducted from any unpaid balance on the contract or purchase order.
6.	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
5.	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
4.	Application is made for 5% resident vendor preference for the reason checked: Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above, or,
3.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
2.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
	maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or, Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
1.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or, Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has

*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.

RFQ No. WEH12043

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		