Solicitation Response(SR) Dept: 0310 ID: ESR01231800000003169 Ver.: 1 Function: New Phase: Final Modified by batch, 01/24/2018 Header 3 H **General Information** Default Values Discount Contact Document Information Procurement Folder: SO Doc Code: 392452 ARFQ Procurement Type: Agency Contract - Fixed Amt SO Dept: 0310 Vendor ID: SO Doc ID: 000000206725 DNR1800000021 Published Date: Legal Name: CARPENTER RECLAMATION INC 1/18/18 Close Date: Allas/DBA: 1/24/18 Close Time: Total Bid: \$597,739.00 13:30 Status: Response Date: 01/23/2018 Solicitation Description: Response Time: ADDENDUM No. 1 Conaway Run 14:31 Dam Repairs Total of Header Attachments: Total of All Attachments:

## Exhibit "A" Pricing Pages 1/2

## CONAWAY RUN DAM MODIFICATIONS CONAWAY RUN WILDLIFE MANAGEMENT AREA

NAME OF VENDOR: Carpenter Reclamation, Inc.
The aforementioned, hereinafter called Vendor, being familiar with and understanding the Bidding Documents and also having examined the site and being familiar with all local conditions affecting the project hereby proposes to furnish all labor, material, equipment, supplies and transportation and to perform all Work in accordance with the Bidding Documents within the time set forth for the sum of:
The Bidder is to summarize his bid prices below in both numbers and words for the Bid shown on the enclosed Bid Form. The Bidder will also complete the enclosed Bid Form in its entirety. The Bid Form includes both unit price and lump sum items (See Page 2/2).
BASE BID:
For the sum of: Five Hundred Ninty Seven Thousand Seven Hundred Thirty Nine Dollars
\$ 597,739,00

(Show amount in both words and numbers)

DATE: 1-23-18

### Carpenter Reclamation, Inc.

# EXHIBIT "A" - BID FORM - PRICING PAGES 2/2 CONAWAY RUN DAM MODIFICATIONS - REV. 0 Prepared By: Civil Tech Engineering, Inc. January 10, 2018

		BID			
ITEM	DESCRIPTION	QUANTITY	UNIT	COST/UNIT	EXTENDED PRICE (\$)
1.0	SURVEYING (Max. 5% of Contract)	1.0	LS	10,000,00	
2.0	QUALITY CONTROL TESTING (Max. 5% of Contract)	1.0	LS	5,000,00	5,000.00
3.0	MOB/DEMOB (Max. 10% of Contract)	1.0	LS	10,000,00	10.000,00
4.0	CLEARING & GRUBBING (Borrow Area)	0.8	AC	6,000.00	4.800,00
5.0	PRINCIPAL SPILLWAY DEMOLITION	1.0	LS	10,000,00	10,000,00
6.0	EXCAVATION (Dam Only)	4865.0	CY	8.00	38 920,00
7.0	REINFORCED CONCRETE	22.0	CY	400,00	8.800.00
8.1	COHESIVE FILL	1041.0	CY	10.00	10.410.00
8.2	RANDOM FILL	7781.0	CY	9.00	70,029.00
9.1	COARSE FILTER	18.0	CY	70,00	1,260,00
9.2	FINE FILTER	342.0	CY	80,00	27.360.00
10.1	RIP RAP	213.0	CY	70.00	14. 910.00
10.2	GROUTED RIP RAP	1520.0	CY	140.00	212,800,00
11.0	EROSION AND SEDIMENT CONTROL	1.0	LS	10,000,00	10.000.00
12.0	SEEDING, FERTILIZING, & MULCHING	3.6	AC	3,000,00	10,800,00
13.0	DEWATERING & WATER CONTROL	1.0	LS	100,000,00	100,000,00
14.1	CRUSHED STONE AGGREGATE	750.0	TN	40.00	30,000.00
14.2	NO. 1 STONE (Stabilization)	250.0	TN	4200	10,500,00
14.3	FISHERMAN'S TRAIL	405.0	LF	30.00	12, 150,00

**TOTAL BID PRICE** 

\$ 597, 739,00

The Contract award shall be based on the lowest base bid or the lowest combination of the base bid and alternate bid items, as selected by the owner. The alternate bid items will be selected in the order indicated in the Form of Proposal.



#### State of West Virginia Request For Quotation Construction

Procurement Folder: 392452

Document Description : ADDENDUM No. 1 Conaway Run Dam Repairs

Procurement Type : Agency Contract - Fixed Amt

	Solicitation Closes		Solic	itation No	Version	Phase
2017-12-06	2018-01-24 13:30:00	ARFQ	0310	DNR1800000021	2	Draft
					1	

SUBMIT RESPONSES TO: BID RESPONSE DIVISION OF NATURAL RESOURCES PROPERTY & PROCUREMENT OFFICE			VENDOR Vendor Name, Address and Telephone
324 4TH AVE SOUTH CHARLESTON US	WV	25303-1228	

FOR INFORMATION CONTACT THE Angela W Negley

(304) 558-3397

angela.w.negley@wv.gov

Signature X Kuller (OrDenty FEIN# 55-0693493)
All offers subject to all terms and conditions contained in this solicitation

Date Printed: Jan 18, 2018 Sollcitation Number: DNR1800000021

Page: 1

1-23-18 DATE

FORM ID: WV-PRC-ARFQ-001

### ADDITIONAL INFORMATION:

Addendum No.01 is issued to publish and distribute the attached information to the Vendor Community.

INVOICE TO		SHIP TO	
DIVISION OF NATURAL RES PARKS & RECREATION-PEN 324 4TH AVE		STATE OF WEST V JOBSITE - SEE SPE	
SOUTH CHARLESTON	WV25305	No City	WV 99999
US		us	

Line Commodity Line Description	Qty	Unit Issue	Unit Price	Total Price
1 Marine Hatchery Equipment	LS	LS	597,739.00	
Commodity Code Manufacturer 21111601	Model #		Specification	

#### **Extended Description**

To modify and repair the existing embankment to bring the impoundment into compliance with WVDEP Dam Safety Regulations. Scope of work includes construction of an emergency spillway, various blanket drains, rip rap groin ditches, and other repairs and modifications as outlined in the complete design drawings and project menual.

SCHEDULE OF EVE	NTS	
<u>Line</u> 1	Event Mandatory Pre-Bid Meeting at 11 am	Event Date 2018-01-03
2	Technical Question Deadline at 9 am	2018-01-08

		Document Phase	Document Description	Page 3	
	DNR1800000021	Draft	ADDENDUM No. 1 Conaway Run Dam	of 3	
ĺ			Repairs	j	

### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

### ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: ARFQ DNR 18\*21

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received: (Check the box next to each addendum received)	eived)
Addendum No. 1 Addendum No. 2 Addendum No. 3 Addendum No. 4 Addendum No. 5	Addendum No. 6 Addendum No. 7 Addendum No. 8 Addendum No. 9 Addendum No. 10
discussion held between Vendor's represent	pt of addenda may be cause for rejection of this bid. Itation made or assumed to be made during any oral atives and any state personnel is not binding. Only to the specifications by an official addendum is
Carpenter Reclama	ation, luc.
Kulley Carpenter	
1-23 -18 Date	
NOTE: This addendum acknowledgement sh	ould be submitted with the hid to associate at a second

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

#### SIGNATURE PAGE

<b>DESIGNATED CONTACT:</b> The Vendor appoints the individual identified in this section as the Contract Administrator and point of contact for matters relating to this contract.
Kelley Carpenter - President Printed Name and Title
PD Box 13015 Chas, WV 25360 Address
304984-1115 304984-2770 Telephone Number and Fax Number
VCarpen 103@ 901. com E-Mail Address
CERTIFICATION AND SIGNATURE: By submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the Department that cannot be unilaterally withdrawn; that the combined service and goods proposed meets the mandatory requirements in the Solicitation for the project, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the Vendor to execute and submit this bid, offer or proposal or any documents related thereto on the Vendor's behalf; that I am authorized to bind the Vendor in a contractual relationship; and that, to the best of my knowledge, the Vendor has properly registered with any agency of the State that may require registration.
Carpenter Reclamation Inc.
Kelley Carpenter - President  Printed Name and Title of Authorized Representative
Signature & Carpenter
PO BOX 13015 Chas, WV 25360 Address
304 984-1115 304 984-2770 Telephone Number and Fax Number
<u>FCarpen 103@ acl. Com</u> E-Mail Address

OMB #1029-0119 Expiration Date: 1/31/16

#### 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. When possible, please type your information onto this form to reduce errors on our end. NOTE: Signature and date this form is signed must be recent (within the last month) to be considered for a current bid

#### Part A: General Information

Business Name: Carpente	r Reclamation, Inc.	Tax Payer ID	No.: 55-0693493
Address: PO Box 13015			
City: Charleston	State: WV Z	ip Code: 25360	Phone: 304-984-1115
Fax No.: 304-984-2770	E-mail address	rcarpen103@aol.com	1
Part B: Legal Structur	re		_
Corporation Other (please specify	Sole Proprietorship	Partnership	LLC
	updating information in ions, follow the instruction		olator System (AVS). Select only and sign below.
I, Kelley Carpenter	, hav	e the express autho	rity to certify that:
(print n	ame)	*	· ·
complete, and to this form. Si	up-to-date. If you select gn and date below and do	this option, you mu not complete Part	
be updated. If	you select this option, you	u <b>must</b> attach an Er	AVS is missing or incorrect and must atity OFT from AVS to this form. Sign and date below and complete
	uired in Part D. Sign and	l date below and co	ident
Date		ghature	Title
	-	_	xisting information in AVS,
vou must obtain a conv	of your husiness' 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:	Carpenter Reclamation, Inc.	
-----------------------------	-----------------------------	--

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	N/A	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 #	
		0/ 00 1:	
Begin Date:		E. E D	
Name		Position/Title	
Address		Telephone #	
		% of Ownership	
Begin Date:		Ending Date:	
_	***	<del>_</del>	

#### 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.



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

### STATE OF WEST VIRGINIA, COUNTY OF Kanawha **Kelley Carpenter** \_\_\_\_\_, after being first duly sworn, depose and state as follows: I am an employee of Carpenter Reclamation, Inc. (Company Name) 1. I do hereby attest that Carpenter Reclamation, Inc. 2. (Company Name) maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with West Virginia Code §21-1D. The above statements are sworn to under the penalty of perjury. Printed Name: Signature: Title: Company Name: \_\_\_\_ Date: 1-10-18 By Commission expires NICHOLE BEARY Notary Public Official Seal (Seal) State of West Virginia My Comm. Expires Jun 26, 2022

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**

MANDATE: Under W. Va. Code §5A-3-10a, 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: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

**EXCEPTION:** The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. 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.

#### **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.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the insurance Commissioner and remains in compilance with the obligations under the repayment agreement.

"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.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (*W. Va. Code* §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

MILKESS THE LOTFOMING SIGNATORS:	
Vendor's Name: Carpenter T	Reclamation Inc.
Authorized Signature: Kullung	Carpenter Date: 1-10-18
State of	
County of Kanawha, to-wit:	4
Taken, subscribed, and sworn to before me this	
My Commission expires Juna	2.6 202.2
AFFIX SEAL HERE	NOTARY PUBLIC Nigholf Cay
-	Purchasing Afficavit (Reviset 08/01/2015)

MICHOLE BEARY
Notary Public Official Seal
State of West Virginia
My Comm Expires Jul 26, 2022
PO Box 13194 Sissonville WV 25360



Parent Entity

(140618) Carpenter Recisemation Inc (146618) Carporter Reclamation inc (140618) Carpenter Reclamation Inc (140618) Corporter Reclamation Inc

AVS OFT Report - 4/5/2010 12:56:36 PM

All OFTs where the selected entity is listed as an entity or related entity

Entity Selected (140618) Carpenter Reclamation (ac

President Simreholder Description Related Entity

**Vice President** Shareholder

(140616) Kelley Carpenter (140616) Keltby Carpenter

(140617) Mary Carpenter (140617) Mary Carpenter

X0X

% Ownership

Begin Dute

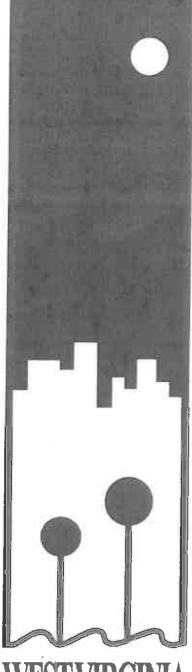
**End Date** 

5861A.00? 6861AAD 10/1/1989 10/1/1989

1-10-18

KC

Current Information



## WEST VIRGINIA CONTRACTOR LICENSING BOARD

## CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV007728

Classification:

GENERAL ENGINEERING

CARPENTER RECLAMATION INC DBA CARPENTER RECLAMATION INC PO BOX 13015 CHARLESTON, WV 25360-0015

**Date Issued** 

**Expiration Date** 

Authorized Company Signature

Chair, West Virginia Contractor

Licensing Board

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where work is being performed. This license number must appear in all advertisements, on all bid submissions and on all fully executed and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.

DEPARTMENT OF								
Agency NATURAL RESOURCES								
REQ.P.O# DNR1800000021								

#### **BID BOND**

	KNOW	ALL MEN BY T	HESE PRES	ENTS, T	nat we, the	undersign	ned, C	ARPENT	ER .	RECL	AMATIC	)N,	INC.	
	_ of	EAST 4TH STR	) 	SISS	ONVILLE	, WV 2	25360	as Princi	pal. ar	GREA	T AMERIC	AN IN	SURANCE	COMPAN
-	of	EAST 4TH STR	EET CINCIN	NATI, O	4 45202-	4201 a corporati					ler the law	e of t	he State	
OHIO		_ with its princip	al office in th	e City of	CINCINN	ITA		, as Suret						
of West \	Virginia, a	as Obligee, in t	ne penal sum	of AMOUNT	RCENT (5%) C	F THE		(\$			\ fo= #b	ound	unto the	SIZIE
well and	truly to b	e made, we joi	ntly and seve	rally bind	ourselves	our hairs	admi	nietrotore	nvooud		) IOF IN	e pay	ment of	which,
		-	•			, 041 110110,	1 GOITH	inotratoro, i	execui	ors, su	ccessors a	ınd as	ssigns,	
	The Con	dition of the a	bove obligat	ion is su	ch that wh	erese the	Dring	inal bas s		4 44				
Departme	ent of Adi	ministration a c	ertain bid or i	proposal	attached E	narata and	i mada	apai nas s	uomini	ed to ti	ne Purcha	sing	Section	of the
DNR18000	000021, C	ONAWAY RUN I	DAM REPAIRS	TYLER	COUNTY, W	N N	made	а рап лег	eor, to	enter i	nto a conti	ract in	writing f	or
						-			-					
											<del></del>			
	NOW THI	EREFORE,												
		-												
	(a)   'b)	f sald bid shall	be rejected,	or										
attached	(b) i hereto ar	f said bid shal	I be accepte	d and th	e Principa	shall ent	ter into	a contrac	ct in a	ccorda	nce with t	he bi	d or proj	oosal
	ment crea	ated by the acc	entance of s	aid hid th	insurance ien this obl	required by	y the b	or prope	isal, a	nd shal	in all othe	er res	pects per	form
							of the	Surety for	ıu, buı ranva	erwise and all a	inis obliga claims her	tion s	shall rema	תו מוג
event, exc	ceed the p	penal amount o	f this obligati	on as hei	ein stated.			,	,			Curio	or orient,	1110
		y, for the value fected by any such extension	eviciiaioii oi	reby stip the time	ulates and within whi	agrees the	at the bligee	obligations may accep	of sai	id Sure n bid, a	ty and its I Ind said S	bond : urety	shall be i does he	n no reby
V	VITNESS	, the following :	signatures ar	id seals o	f Principal	and Suret	tv. exe	cuted and	sealer	l by a n	roper offic		Dain ain at	d
Surety, or I	by Princip	pal individually	if Principal is	an indivi	dual this	24TH day	of	IAMITADA	, seale(	a by ai þ			Principal	and
		,			addi, 1110_	<u> 27111</u> uay	JI	JANUARI			_, 20 <u>18</u>			
Principal S	Seal						C	ARPENT			/ATION:	INC		
							_	WITH CIVI			of Principa			
									۸ ۸			y - ',		-
							Ву		<u> </u>	Ly.	Car	Pil	ull	<u>(_)</u> ]
								(Mus	t be P	resideh	t, Vice Pre rized Age	edider	at, or	7
								D.			nzeu Age	ny		
							_	TV	esi	'du	nt			
										(Ti	tle)			
urety Seal	ſ						G	REAT AM	EDIC	ANI INI		- OC	DB 4122 # A 4 12	,
	-							ULAT AIV				= 00	JIVIPAN'	<u></u>
								/	(1)	Varne o	Yourself !			
								h	1/2.	7//	عنن			
									M		-			
						Will	Iliam A	. Kantlehn	er. III /	Attorne	v-in-Fact			
						- 7			. 1 111 2		,			

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.

GREAT AMERICAN INSURANCE COMPANY®

Administrative Office: 301 E 4TH STREET CINCINNATI, OHIO 45202 513-369-5000 FAX 513-723-2740

The number of persons authorized by this power of attorney is not more than ELEVEN

No. 0 20768

ALL OF

LOUISVILLE, KENTUCKY

POWER OF ATTORNEY KNOW ALL MEN BY THESE PRESENTS: That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof, provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

Name

STEVEN M. GARRETT

DIANE L. PHELPS WILLIAM A. KANTLEHNER, III CHRISTOPHER E. VON ALLMEN

THOMAS J. MITCHELL

ANDREW G. WINDHORST, JR.

ROGER A. NEAL RYAN P. MITCHELL ROSS E. JOHNSON

ANDREA CORTES

JEFFREY A. BROWN

This Power of Attorney revokes all previous powers issued on behalf of the attorney(s)-in-fact named above.

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate officers and its corporate seal hercunto affixed this day of MARCH

Assistant Secretary

GREAT AMERICAN INSURANCE COMPANY

Limit of Power

ALL

\$100,000,000

Divisional Senior Vice President

Susan a Lohoust

STATE OF OHIO, COUNTY OF HAMILTON - ss:

On this 18TH day of

MARCH

DAVID C. KITCHIN (877-377-2405)

2016 , before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his



My Commission Entires 05-18-2020

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisonal Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

#### CERTIFICATION

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this

24th

day of **JANUARY**