

Bond # 45472

BID BOND

with its principal office in the City of Atlanta, GA as Surety, are held and firmly bound unto the State of West Virginia, as Obligee, in the penal sum of Twenty Two Thousand and Nor100 (\$ 22,000.00) for the payment of which well and truly to be made, we jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns. The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for Cabin Modernization - North Bend State Park ARFQ 0310 DNR1900000048 NOWTHEREFORE. (a) If said bid shall be rejected, or (b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no even exceed the penal amount of this obligation as herein stated. The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no even way impaired or affected by any extension. IN WITNESS WHEREOF, Principal and Surety have hereunto set their hands and seals, and such of them as are corporation have caused their corporate seals to be affixed hereunto and these presents to be signed by their proper officers, this 20th day of November 2018 Principal Corporate Seal American Southern Insurance Company (Name of Principal) American Southern Insurance Company		of Marietta	Ohio		nomas R Moran Construction Co., Inc. , as Principal, and American Southern Insurance Company
Mansas with its principal office in the City of Atlanta, GA as Surety, are held and firmly bound unto the State of West Virginia, as Obligee, in the penal sum of Twenty Two Thousand and No/100 (\$ 22,000.00) for the payment of which well and truly to be made, we jointly and severally bind ourselves, cur heirs, administrators, executors, successors and assigns. The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for Cabin Modernization - North Bend State Park ARFQ 0310 DNR1900000048 NOWTHEREFORE, (a) If said bid shall be rejected, or (b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform the agreement created by the accepted and dargered that the liability of the Surety for any and all claims hereunder shall, in no even exceed the penal amount of this obligation is herein stated. The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no way impaired or affected by any extension of the time within which the Obligee may accept such bid, and said Surety does hereby waive notice of any such extension. IN WITNESS WHEREOF, Principal and Surety have hereunto set their hands and seals, and such of them as are corporation have caused their corporate seals to be affixed hereunto and these presents to be signed by their proper officers, this 20th day of November Principal Corporate Seal American Southem Insurance Company (Name of Piricipal) American Southem Insurance Company			Ohio		
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(Name of Principal) By Must be President or Vice President) President (Title) American Southern Insurance Company (Name of Surety)	20th	day of November	_{, 20} 18	·	
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Surety Corporate Seal American Southern Insurance Company (Name of Surety)					Vice President)
(Name of Surety)					President
(Name of Surety)					(Title)
DETRE	Surety Corporate Seal			8	
Attorney-in Fact					(Name of Surety)
Attorney-in Fact					7
Attorney-in Fact					Valle
David R. Brett				,	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.

AMERICAN SOUTHERN INSURANCE COMPANY

Home Office: 3715 Northside Parkway, NW

Suite 4-800

Atlanta, Georgia 30327

Mailing Address: P. O. Box 723030

Atlanta, GA 31139-0030

GENERAL POWER OF ATTORNEY

Know all men by these Presents, that the American Southern Insurance Company had made, constituted and appointed, and by these presents does make, constitute and appoint Stefan E. Tauger of Parker, Colorado: Scott E. Stoltzner of Hoover, Alabama; Arthur S. Johnson of Atlanta, Georgia; Andrew C. Heaner of Atlanta, Georgia; Jeffery L. Booth of Blacklick, Ohio; James E. Feldner of West Lake, Ohio; David R. Brett of Columbia, South Carolina; Melanie J. Stokes of Atlanta, Georgia; Jason S. Centrella of Jacksonville, Florida; Michael J. Brown of Cumming, Georgia; Kelley E.M. Nys of Decatur, Georgia; or Omar G. Guerra of Overland Park, Kansas, EACH as its true and lawful attorney for it and its name. place and stead to execute on behalf of the said company, as surety, bonds, undertakings and contracts of suretyship to be given to all obligees provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount of the sum of \$1,000,000 (one million dollars), including but not limited to consents of surety for the release of retained percentages and/or final estimates on construction contracts or similar authority requested by the Department of Transportation, State of Florida; and the execution of such undertakings, bonds, recognizances and other surety obligations. in pursuance of the presents, shall be as binding upon the Company as if they had been duly signed by the President and attested by the Secretary of the Company in their own proper persons.

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted pursuant to due authorization by the Executive Committee of the Board of Directors of the American Southern Insurance Company on the 26th day of May, 1998:

RESOLVED, that the Chairman, President or any Vice President of the Company be, and that each or any of them hereby is, authorized to execute Powers of Attorney qualifying the attorney named in the given Power of Attorney to execute in behalf of the American Southern Insurance Company bonds, undertakings and all contracts of suretyship; and that any Secretary or any Assistant Secretary be, and that each or any of them hereby is, authorized to attest the execution of any such Power of Attorney, and to attach thereto the seal of the Company.

FURTHER RESOLVED, that the signature of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the Company when so affixed and in the future, with respect to any bond undertaking or contract of suretyship to which it is attached.

In Witness Whereof, the American Southern Insurance Company has caused its official seal to be hereto affixed, and these presents to be signed by its President and attested by its Secretary this 24th day of January.

Attest:

Melonie A. Coppola, Secretary

By:

Scott G. Thompson, President

American Southern Insurance Compan

STATE OF GEORGIA

COUNTY OF FULTON

On this 24th day of January, 2018, before me personally came Scott G. Thompson to me known, who being by me duly sworn, did depose and say that he resides in Atlanta, in the County of Fulton, State of Georgia, at 421 Hollydale Court, that he is the President of American Southern Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed and that he signed his name thereto pursuant to due authorization.

STATE OF GEORGIA

Power No.

COUNTY OF FULTON

45472

Jonathan R. Bell

Notary Public, State of Georgia Qualified in Cherokee County

Commission Expires March 12, 2021

I, the undersigned, a Vice President of American Southern Insurance Company, a Kansas Corporation, DO HEREBY CERTIFY that the foregoing and attached Power of Attorney remains in full force and has not been revoked; and, furthermore, that the Resolution of the Executive Committee of the Board of Directors set forth in the Power of Attorney is now in force.

Signed and sealed at the City of Atlanta, Dated the 20th

John R. Huot Vice President

American Southern Insurance Company NAIC Company Code 10235 NAIC Group Code 587

Statutory Financial Statement

As of December 31, 2017

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LIABILITIES

Bonds	\$76,909,844	Reserve for Losses and Loss Expense	\$40,777,284
Stocks	18,692,138	Reserve for Unearned Premiums	19,178,022
Cash & Cash Equivalents	6,991,285	Reserve for Expenses, Taxes, Licenses and Fees	6,353,384
Agents Balances	8,452,869	Payable to Parents, Subsidiaries and Affiliates	273,203
Other Assets	4,384,251	Other Liabilities	5,500,153
		Total Liabilities	\$72,082,046
		POLICYHOLDERS'S SUPLUS	
		Capital Stock	3,000,000
		Surplus	40,348,341
		Total Policy holders' Surplus	43,348,341
Total Assets	\$115,430,387	Total Liabilities and Policyholders' Surplus	\$115,430,387
	-		

Bonds and stocks are valued in accordance with the basis adopted by the National Association of Insurance Commissioners (NAIC).

CERTIFICATE

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

Chief Financial Officer

State of Georgia County of Fulton

On the 26th day of February 2018, before me came the above named officers of the American Southern Insurance Company to me personally known al of said MIE COA OF THE SAID to be the individuals and officers described herein, and acknowledge that they executed the foregoing instrument and affixed the seal of said company thereto by authority of their office.

Melonie Coppola, Notary Public My Commission Expires, May 17, 2018



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

Procurement Folder: 507450

Document Description : North Bend SP Cabin Rehabilitation and Renovation

Procurement Type: Agency Contract - Fixed Amt

Date Issued	Solicitation Closes		Solic	itation No	Version	Phase
2018-10-17	2018-11-20 13:30:00	ARFQ	0310	DNR190000048	1	Final

SUBMIT RESPONSES TO:	Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The Treatment of the State of t	VENDOR	45
BID RESPONSE			Vendor Name, Address and Telephone	
DIVISION OF NATURAL RESOURCE	ES			
PROPERTY & PROCUREMENT OFF	FICE			
324 4TH AVE				
SOUTH CHARLESTON	WV	25303-1228		
US				

FOR INFORMATION CONTACT THE

James H Adkins (304) 558-3397

jamie.h.adkins@wv.gov

Kevin Roberts Signature X

FEIN # 311581098

11/15/2018

DATE

ADDITIONAL TERMS AND CONDITIONS (Construction Contracts Only)

1. CONTRACTOR'S LICENSE: W. Va. Code § 21-11-2 requires that all persons desiring to perform contracting work in this state be licensed. The West Virginia Contractors Licensing Board is empowered to issue the contractor's license. Applications for a contractor's license may be made by contacting the West Virginia Division of Labor. W. Va. Code § 21-11-11 requires any prospective Vendor to include the contractor's license number on its bid. If an apparent low bidder fails to submit a license number in accordance with this section, the Property and Procurement Office will promptly request by telephone and electronic mail that the low bidder and the second low bidder provide the license number within one business day of the request. Failure of the bidder to provide the license number within one business day of receiving the request shall result in disqualification of the bid. Vendors should include a contractor's license number in the space provided below.

Contractor's Name: Thomas	R. Moran Construction Co. Inc.
Contractor's License No.: WV	001906

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of a contract award document.

- 2. DRUG-FREE WORKPLACE AFFIDAVIT: W. Va. Code § 21-1D-5 provides that any solicitation for a public improvement contract requires each Vendor that submits a bid for the work to submit an affidavit that the Vendor has a written plan for a drug-free workplace policy. If the affidavit is not submitted with the bid submission, the Property and Procurement Office shall promptly request by telephone and electronic mail that the low bidder and second low bidder provide the affidavit within one business day of the request. Failure to submit the affidavit within one business day of receiving the request shall result in disqualification of the bid. To comply with this law, Vendor should complete the enclosed drug-free workplace affidavit and submit the same with its bid. Failure to submit the signed and notarized drugfree workplace affidavit or a similar affidavit that fully complies with the requirements of the applicable code, within one (1) business day of being requested to do so shall result in disqualification of Vendor's bid. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.
- 2.1. DRUG-FREE WORKPLACE POLICY: Pursuant to W. Va. Code § 21-1D-4, Vendor and its subcontractors must implement and maintain a written drug-free workplace policy that complies with said article. The awarding public authority shall cancel this contract if: (1) Vendor fails to implement and maintain a written drug-free workplace policy described in the preceding paragraph, (2) Vendor fails to provide information regarding implementation of its drug-free workplace policy at the request of the public authority; or (3) Vendor provides to the public authority false information regarding the contractor's drug-free workplace policy.

Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name:	Thomas R. Moran Cons	truction Co. Inc.
Check this box if no subcontractors will perform more than \$25,000.00 of work to complete the project.		
Subcontractor Name		License Number if Required by W. Va. Code § 21-11-1 et. seq.
ProCo Construction	on LLC	WV#039421
11		

20171020v

Attach additional pages if necessary.

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

Kevin Roberts	Construction Manager	
(Name, Title) Kevin Roberts	Construction Manager	,
(Printed Name and	d Title)	
417 Virginia St (Address) 1-740-374-236	t. Marietta, OH 45750	
(Phone Number) / kevin@moran-ir	(Fax Number) nc.com	
(email address)		X

CERTIFICATION AND SIGNATURE: By signing below, or 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 State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, 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 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 State agency that may require registration.

Thomas R. Moran Construction Co. Inc.

(Company)

Kevin Roberta
(Authorized Signature) (Representative Name, Title)

Kevin Roberts Construction Manager
(Printed Name and Title of Authorized Representative)

11/15/2018
(Date)

1-740-374-2362 1-740-374-8722
(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

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 addended)	dum received)
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
I further understand that any verbal discussion held between Vendor's i	the receipt of addenda may be cause for rejection of this bid. representation made or assumed to be made during any oral representatives and any state personnel is not binding. Only and added to the specifications by an official addendum is
Thomas R. Moran Construcction	n Co Inc.
Kevin Roberts Authorized Signature	
11/15/2018	
Date	
NOTE: This addendum acknowledg processing.	ement should be submitted with the bid to expedite document

REQUEST FOR QUOTATION WEST VIRGINIA DIVISION OF NATURAL RESOURCES – PARKS & RECREATION NORTH BEND SP – REHABILITATION AND RENOVATION OF 9 CABINS

- 11.1. Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
- 11.2. Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
- 11.3. Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
- **11.4.** Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
- 11.5. Vendor shall inform all staff of Agency's security protocol and procedures.

12. MISCELLANEOUS:

12.1. Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Kevin Roberts	
Telephone Number: 1-740-374-2362	
Fax Number: 1-740-374-8722	
Email Address: kevin@moran-inc.com	

REQUEST FOR QUOTATION WEST VIRGINIA DIVISION OF NATURAL RESOURCES – PARKS & RECREATION NORTH BEND SP – REHABILITATION AND RENOVATION OF 9 CABINS

Pricing Page Exhibit A

Name of Vendor:	Thomas R. Moran Construction Co Inc
Address of Vendor:	417 Virginia St. Marietta, OH. 45750
Phone Number of Vendor:	1-740-374-2362

We, the undersigned, having examined the site and being familiar with the local conditions affecting the cost of the work and also being familiar with the general conditions to vendors, drawings, and specifications, hereby proposes to furnish all materials, equipment, and labor to complete all work in a workmanlike manner, as described in the Bidding documents.

Base Bid

The Base Bid shall consist of construction of the facility and related work described in the drawings and specifications. **Total Base Bid** shall be indicated in the space below.

Total Base Bid: Lump sum for all labor, materials, and equipment as stipulated in the Bidding Documents, written in figures.

\$348,627.98

Total Base Bid: Lump sum for all labor, materials, and equipment as stipulated in the Bidding Documents, <u>written in</u> words.

Three Hundred forty Eight Thousand, Six Hundred Twenty Seven and 98/100

*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. *

REQUEST FOR QUOTATION WEST VIRGINIA DIVISION OF NATURAL RESOURCES – PARKS & RECREATION NORTH BEND SP – REHABILITATION AND RENOVATION OF 9 CABINS

Pricing Page Exhibit A

Additive Alternate 1:

words.

The Base Bid shall consist of construction of the facility and related work described in the drawings and specifications. **Additive Alternate 1** shall be indicated in the space below.

Additive Alternate 1: Lump sum for all labor, materials, and equipment as stipulated in the Bidding Documents, <u>written in</u> <u>figures</u> .	\$17,129.54
Additive Alternate 1: Lump sum for all labor, materials, and equipment as stipulated in the Bidding Documents, written in	Seventeen Thousand, One Hundred Twenty Nine and 54/100

*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. *



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

STATE OF WEST VIRGINIA,
COUNTY OF Wood TO-WIT:
I, <u>Jodie Bonnette</u> , after being first duly sworn, depose and state as follows:
I am an employee of <u>Thomas R. Moran Construction Co Inc.</u> ; and, (Company Name)
2. I do hereby attest that <u>Thomas R. Moran Construction Co Inc.</u> (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: Jodie Bonnette
Signature: 1000 Signature:
Title: President
Company Name: Thomas R Moran Construction Co Inc
Date: 11/19/18
Taken, subscribed and sworn to before me this 19th day of November,
By Commission expires 02 11 23
Kristi Starkey Susta Starkey
Notary Public State of Ohio (Notary Public) My Commission Expires
02-11-23
Rev. July 7, 201

Rev. July 7, 2017

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL CONTRACTS: 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 compliance 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: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, 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.

WITNESS THE FOLLOWING SIGNATURE:

WITHESS THE FOLLOWING SIGNATURE.
Vendor's Name: Thomas R Moran Construction Co Inc
Authorized Signature: Date: 11/19/18
State of Ohio
County of Washington, to-wit:
Taken, subscribed, and sworn to before me this 19th day of November , 2018.
My Commission expires 02 11 2 3
APPLY SEAL HERE Kristi Starkey Notary Public State of Ohio My Commission Expires APPLY SEAL HERE Kristi Starkey NOTARY PUBLIC Purchasing Affidavit (Revised 01/19/2018



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/19/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

lf	SUBROGATION IS WAIVED, subject sis certificate does not confer rights to	t to the	ter	ms and conditions of th	ne polic	y, certain p	olicies may	require an endo	rsemen	t. Asta	atement on		
	DUCER	to the t	Jeru	incate noider in ned of s	CONTACT Claire Evans								
Peoples Ins Agcy-Marietta											2 0 4 4 4		
124 Putnam Street						(A/C, No, Ext): 740-308-4034 (A/C, No): 740-376-0414							
Marietta OH 45750						E-MAIL ADDRESS: claire.evans@pebo.com							
						INSURER(S) AFFORDING COVERAGE					NAIC#		
MODANIA						INSURER A : Cincinnati Insurance Company					10677		
INSURED MORAN-1 Moran Construction					INSURER B : Brickstreet Mutual Ins Co						12372		
417 Virginia St						INSURER C:							
Marietta OH 45750					INSURER D :								
						INSURER E :							
						INSURER F:							
-		NUMBER: 1079470596											
IN CI E)	THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. NSR POLICY EFF POLICY EXP												
INSR LTR	TYPE OF INSURANCE	INSD W	VVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	s			
Α	X COMMERCIAL GENERAL LIABILITY			EPP0116701		1/1/2018	1/1/2019		EACH OCCURRENCE \$ 1,000,0				
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTE PREMISES (Ea occu	rrence)	\$ 500,00	00		
								MED EXP (Any one p	erson)	0			
								PERSONAL & ADV I	NJURY	000			
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG	GENERAL AGGREGATE \$ 2,000,0				
POLICY PRO- JECT LOC								PRODUCTS - COMP	DDUCTS - COMP/OP AGG \$ 2,000,0				
	OTHER		_						\$				
Α	AUTOMOBILE LIABILITY			EPP0116701	1/	1/1/2018	1/1/2019	COMBINED SINGLE (Ea accident)	ccident) \$ 1,000,0		000		
	ANY AUTO							BODILY INJURY (Pe	RY (Per person) \$				
	OWNED X SCHEDULED AUTOS							BODILY INJURY (Pe	- 1	\$			
	X HIRED X NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)	E	\$			
										\$			
Α	X UMBRELLA LIAB X OCCUR			EPP0116701		1/1/2018	1/1/2019	EACH OCCURRENCE \$ 1,000,		000			
	EXCESS LIAB CLAIMS-MADE	MADE						AGGREGATE \$		\$			
	DED X RETENTION \$ 0									\$			
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WCB1003211		5/11/2018	5/11/2019	PER STATUTE	OTH- ER				
	NYPROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDEN			00		
	OFFICER/MEMBER EXCLUDED? (Mandatory In NH)							E.L. DISEASE - EA EMPLOYEE \$ 500.0					
	If yes, describe under DESCRIPTION OF OPERATIONS below								L. DISEASE - POLICY LIMIT \$ 500,0				
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
Evid	lence of Coverage												
CERTIFICATE HOLDER						CANCELLATION							
SHATE INCLES					57,10	A 11014							
Division of Natural Resources Property adn Procurement Office					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
	324 4th Avenue	10 400	^		AUTHORIZED REPRESENTATIVE								
	South Charleston WV 2530	Party TK											



CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV001906

Classification:

ELECTRICAL
GENERAL BUILDING
GENERAL ENGINEERING
HEATING, VENTILATING & COOLING
MULTIFAMILY
PIPING
PLUMBING
RESIDENTIAL

THOMAS R MORAN CONSTRUCTION CO INC DBA RAMJACK WV 417 VIRGINIA STEEET MARIETTA, OH 45750

Date Issued

Expiration Date

AUGUST 21, 2018

AUGUST 21, 2019

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.