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

Pricing Page Exhibit A

Fredeking Stafford Construction Co.

Address of Vendor:

203 Industrial Street Princeton WV 24740

Phone Number of Vendor:

304 - 425 - 2534

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.

\$ 349,000.00

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

Three Hundred Forty Mine Thousand Dollars

*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 BLUESTONE SP – REHABILITATION AND RENOVATION OF 9 CABINS

Pricing Page Exhibit A

Additive Alternate 1:

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, written in figures.

\$ 29,700.00

Additive Alternate 1: Lump sum for all labor, materials, and equipment as stipulated in the Bidding Documents, written in words.

Twenty Nine Thousand -Seven Hundred Dollars

Additive Alternate 2:

The Base Bid shall consist of construction of the facility and related work described in the drawings and specifications. **Additive Alternate 2** shall be indicated in the space below.

Additive Alternate 2:

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

\$ 115,000.00

Additive Alternate 2:

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

One Hundred Fifteen Thousand Dollars

*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 BLUESTONE SP – REHABILITATION AND RENOVATION OF 9 CABINS

Pricing Page Exhibit A

Additive Alternate 3:

The Base Bid shall consist of construction of the facility and related work described in the drawings and specifications. **Additive Alternate 3** shall be indicated in the space below.

Additive Alternate 3:

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

\$ 18,500.00

Additive Alternate 3:

Lump sum for all labor, materials, and equipment as stipulated in the Bidding Documents, written in words.

Eighteen Thousand Five Hundred Dollars

Additive Alternate 4:

The Base Bid shall consist of construction of the facility and related work described in the drawings and specifications. **Additive Alternate 4** shall be indicated in the space below.

Additive Alternate 4:

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

\$ 211,000.00

Additive Alternate 4:

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

Two Hundred Eleven Thousand Dollars

*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. *

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: Fredeking Stafford Construction Co.

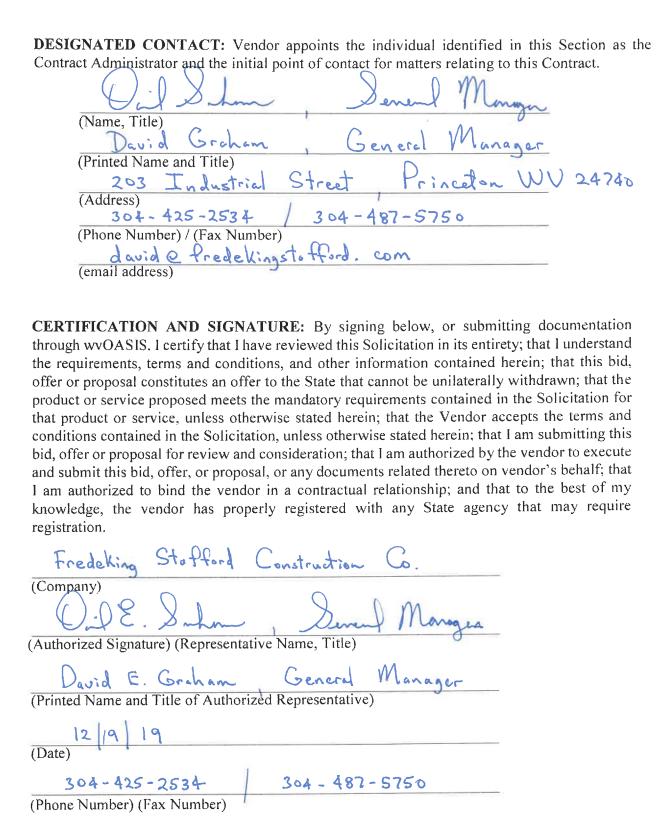
Contractor's License No.: WV-011017

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.

3. DRUG FREE WORKPLACE REPORT: Pursuant to W. Va. Code § 21-1D-7b, no less than once per year, or upon completion of the project, every contractor shall provide a certified report to the public authority which let the contract. For contracts over \$25,000, the public authority shall be





WEST VIRGINIA CONTRACTOR LICENSING BOARD

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV011017

Classification:

GENERAL BUILDING

FREDEKING STAFFORD CNSTRCTN CO DBA FREDEKING STAFFORD CNSTRCTN CO PO BOX 1232 PRINCETON, WV 24740-1232

Date Issued

Expiration Date

OCTOBER 10, 2019

OCTOBER 10, 2020

uthorized 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.

WEST VIRGINIA STATE TAX DEPARTMENT BUSINESS REGISTRATION CERTIFICATE

ISSUED TO:

FREDEKING/STAFFORD CONSTRUCTION COMPANY PO BOX 1232 PRINCETON, WV 24740-1232

BUSINESS REGISTRATION ACCOUNT NUMBER:

1041-6965

This certificate is issued on:

09/1/2010

This certificate is issued by the West Virginia State Tax Commissioner in accordance with Chapter 11, Article 12, of the West Virginia Code

The person or organization identified on this certificate is registered to conduct business in the State of West Virginia at the location above.

This certificate is not transferrable and must be displayed at the location for which issued.

This certificate shall be permanent until cessation of the business for which the certificate of registration was granted or until it is suspended, revoked or cancelled by the Tax Commissioner.

Change in name or change of location shall be considered a cessation of the business and a new certificate shall be required.

TRAVELING/STREET VENDORS: Must carry a copy of this certificate in every vehicle operated by them. CONTRACTORS, DRILLING OPERATORS, TIMBER/LOGGING OPERATIONS: Must have a copy of this certificate displayed at every job site within West Virginia.

atL006 v.3 L1584813824

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: ARFQ DNR20*23

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 addendi	ım 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 understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Fredeking Stofford	Construction Co.	
Company		
QDE. 31m		
Authorized Signature		
12 19 19		_
Date		

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

REQUEST FOR QUOTATION WEST VIRGINIA DIVISION OF NATURAL RESOURCES – PARKS & RECREATION BLUESTONE SP GROUP 2 – REHABILITATION AND RENOVATION OF 9 CABINS

11. MISCELLANEOUS:

11.1 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:

David Graham

Telephone Number:

304-425-2534

Fax Number:

304-487-5750

Email Address:

davide fredekingstafford.com

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name: tredekin	n Stafford Construction Co.
Check this box if no subcontractors	s 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.

Attach additional pages if necessary.

STATE OF WEST VIRGINIA,



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

COUNTY OF Mercer TO-WIT:
I, Tack C. Fredeking, after being first duly sworn, depose and state as follows:
1. I am an employee of Fredeking Stafford Construction; and, (Company Name) 2. I do hereby attest that Fredeking Stafford Construction Company, Inc.
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.
Signature: Title: President Company Name: Fredeking Stafford Construction (o.) Date: December 4, 2019
Taken, subscribed and sworn to before me this
My commission expires December 15, 2023 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 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:	
Vendor's Name: Fredcking Stafford	Constenction Company, INC.
Authorized Signature:	Date: 12.4-2019
State of Nest Virginia	
County of, to-wit: Taken, subscribed, and sworn to before me this da	, O O ,
Taken, subscribed, and sworn to before me this 🖊 da	y of Wecen ver 2019
My Commission expires Vecember 15	. 2023.
	A = A = A + A + A + A + A + A + A + A +
AFFIX SEAL HERE	NOTARY PUBLIC Freda B Merson
OFFICIAL SEAL	Purchasing Affidavit (Revised 01/19/2018)

Notary Public, State of West Virginia FREDA B. McPHERSON PO Box 203 Spanisburg, WV 25922 My commission expires December 15, 2023



Workers Compensation and Employers **Liability Insurance Policy**

BrickStreet Mutual Insurance Company		Policy Number	Policy Period			
			From	То		
A Mutual Compa	ny	WCB1013442	01/29/2019	01/29/2020		
			(12:01 AM at the in	sured location)		
Information	Page	Renewal/R	ewrite of Policy Nu	mber		
			WCB1013442			
1. Named Insured and Address		Agency Information				
Fredeking/Stafford Construction PO Box 1232 Princeton, WV 24740-1232	2044 George H. Friedlander Co. PO Box 2466 Charleston, WV 25329					
Carrier No.	FEIN	Risk ID	Entity	Туре		
15762 55-0710162		913598091	Corporation			

Additional Workplaces not shown above: Ree attached schedule.

- 2. The Policy Period is from 01/29/2019 to 01/29/2020 12:01am Standard Time at the insured's mailing address.
- 3. A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of the states listed here: WV VA
 - B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in Item 3.A. The limits of our liability under part Two are:

\$1,000,000.00 Each Accident Bodily Injury by Accident: \$1,000,000.00 Policy Limit Bodily Injury by Disease: \$1,000,000.00 Each Employee Bodily Injury by Disease:

- C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here: All states and U.S. territories except North Dakota, Ohio, Washington, Wyoming, Puerto Rico, and the U.S. Virgin Islands, and states designated in Item 3.A. of the Information Page.
- D. This policy includes these endorsements and schedules: SEE ATTACHED SCHEDULE
- 4. The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All Information required below is subject to verification and change by audit.

SEE ATTACHED CLASSIFICATIONS OF OPERATIONS

\$18,256.00 Total Estimated Annual Premium: Minimum Premium: \$1,175.00

\$95.00CR Premium Discount: \$250.00 Expense Constant:

\$3,798.00 Deposit Premium:

Issue Date: 01/25/2019 Issuing Office: Charleston, WV

WC 00 00 01 A (7-09)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/22/2019

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.

REPRESENTATIVE OR PRODUCER,	ANU	INE	DENTIFICATE ROLDER.	!:/:	V v A bro	A DOITIO	NAL INCURED provision	ns or he	endorsed.
IMPORTANT: If the certificate holde if SUBROGATION IS WAIVED, subjetthis certificate does not confer rights	ct to	the t	erms and conditions of t	the polic such enc	y, certain p lorsement(s	olicies may	require an endorsemen	it. A sta	itement on
PRODUCER				CONTAC NAME:	T Jeff O'Del				
George H. Friedlander Company				PHONE	304-35	7-4520	FAX (A/C No):	304-345	5-8724
1566 Kanawha Blvd. E.				E-MAIL	Ext): 304-35	Afriedlander	company.com		
Charleston WV 25311				ADDRES	d. Joneson				NAIC#
					A-0-4		RDING COVERAGE		~~
				INSURER A : Westfield Insurance Companies					24112
YSURED	FRES	3001		INSURER B : BrickStreet Insurance					12372
redeking-Stafford				INSURER C:					
Construction, Inc.				INSURER D:					
P.O. Box 1232 Princeton WV 24740									
1111001011 111 241 40				MOURER E :					
				INSURE	R P :		REVISION NUMBER:		
OVERAGES CE	RTIF	CAT	E NUMBER: 769651939				HEVISION NUMBER.	UE BOLL	CV PERIOD
THIS IS TO CERTIFY THAT THE POLICIE INDICATED. NOTWITHSTANDING ANY FOR CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PER POL	REME TAIN, ICIES	ENT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF ANY DED BY T BEEN RI	HE POLICIE EDUCED BY	S DESCRIBE PAID CLAIMS	D HEREIN IS SUBJECT T	0, 10 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
SR TYPE OF INSURANCE	INST	LEUBI	POLICY NUMBER		POLICY EFF	POLICY EXP	LIMIT	19	
X COMMERCIAL GENERAL LIABILITY			TRA3294164		1/29/2019	1/29/2020	EACH OCCURRENCE	\$1,000,0)00
CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Es occurrence)	\$ 500,00	٥
GLAIMS-MADE COCOR							MED EXP (Any one person)	\$5,000	
	-						PERBONAL & ADV INJURY	s 1.000.0	200
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,0	
POLICY X FRO- LECT LOC		0					PRODUCTS - COMP/OP AGG	\$2,000,0	100
OTHER:		i.						\$	
AUTOMOBILE LIABILITY	1		TRA3294164		1/20/2019	1/29/2020	COMBINEO SINGLE LIMIT (Ee accident)	\$ 1,000,0	100
X ANY AUTO							BODILY INJURY (Per person)	\$	
OWNED SCHEDULED							BODILY INJURY (Per accident)	\$	
AUTOS ONLY AUTOS				- 10			PROPERTY DAMAGE [Per accident]	\$	
X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							[Per accident]	\$	
		_							
X UMBRELLALIAB X OCCUR			TRA3294164		1/29/2019	1/29/2020	EACH OCCURRENCE	\$6,000,0	
EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 5,000,0	00
DED X RETENTION \$ 0				1				5	
WORKERS COMPENSATION	\vdash		WCB1013442		1/29/2019	1/29/2020	X PER OTH-		
AND EMPLOYERS' LIABILITY Y/N	1						E.L. EACH ACCIDENT	\$1,000,0	00
ANYPROPRIETOR/PARTNER/EXECUTIVE N	N/A						E.L. DISEASE - EA EMPLOYEE	\$ 1,000.0	00
(Mandetory In NH) If yes, describe under	1					1		\$ 1,000,0	
DESCRIPTION OF OPERATIONS below	-						E.L. DISEASE - POLICI EIWIN	\$ 1,000,0	••
				1	-				
16									
	L								
SCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORD	101, Additional Remarks Schedul	le, may be a	ttached if more	space is require	rd)		
C includes Broad Form Employers Liabili	ty, vv	V 23-	4-2						
				0.41105	T A TION				
RTIFICATE HOLDER				CANCE	LLATION				
				THE	EXPIRATION	DATE THE	escribed policies be ca reof, notice will b y provisions.	NCELLE	D BEFORE /ERED IN
To Whom It May Concern		AUTHORIZ	ED REPRESEN	TATIVE					
				1	BEIO				

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Agency_	Division	of Natura	Resources
REQ.P.C			

BID BOND

KNOW ALL MEN BY THESE PRE of 203 Industrial Street	ESENTS, That we, the undersigned, Fredeking/Stafford Construction Company, Inc. , Princeton, WV 24740, as Principal, and International Fidelity Insurance Company
	rark, NJ 07102 , a corporation organized and existing under the laws of the State of
	the City of Newark as Surety, are held and firmly bound unto the State
	ourn of Five Percent of Bid Amount (\$ 5%) for the payment of which,
- · · · · · · · · · · · · · · · · · · ·	everally bind ourselves, our heirs, administrators, executors, successors and assigns.
	The state of the s
The Condition of the above oblig	gation is such that whereas the Principal has submitted to the Purchasing Section of the
	or proposal, attached hereto and made a part hereof, to enter into a contract in writing for
	pup 2 Cabin Rehabilitation & Renovation
NOW THEREFORE,	
	. 1
(a) If said bid shall be rejecte (b) If said bid shall be acce	ed, or epted and the Principal shall enter into a contract in accordance with the bid or proposal
attached hereto and shall furnish any other	r bonds and insurance required by the bid or proposal, and shall in all other respects perform
the agreement created by the acceptance of	of said bld, then this obligation shall be null and void, otherwise this obligation shall remain in stood and agreed that the liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of this oblig	gation as herein stated.
The Surety, for the value received, way impaired or affected by any extension	hereby stipulates and agrees that the obligations of said Surety and Its bond shall be in no nof the time within which the Obligee may accept such bid, and said Surety does hereby
waive notice of any such extension.	To the late water when the obliger may decept back big, and bald outer, does note by
WITNESS the following cignotures	s and seals of Principal and Surety, executed and sealed by a proper officer of Principal and
Screty, or by Frincipal individually it Frincipa	al is an individual, this 10th_day of <u>December</u> , 20 <u>19</u> .
Principal Seal	Fredeking/Stafford Construction Company, Inc.
· , maipar ooar	(Name of Principal)
	By William
	(Must be President, Vice President, or
	Duty Authorized Agent)
97	Considered 1872
the Web.	(Title)
	International Fidelity Insurance Company
Surety Seal	VI AND
2 2	(Name of Surety)
13 100	$\langle \langle \langle \rangle \rangle \rangle = \langle \langle \rangle \rangle \langle \rangle \langle \rangle \rangle$
	Thomas I will Thomas
	Attorney in Fact

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.

POWER OF ATTORNEY

Bond #

n/a

CASUALT

1936

VEW JERSE

INTERNATIONAL FIDELITY INSURANCE COMPANY ALLEGHENY CASUALTY COMPANY

One Newark Center, 20th Floor, Newark, New Jersey 07102-5207 PHONE: (973) 624-7200

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and ALLEGHENY CASUALTY COMPANY a corporation organized and existing under the laws of the State of New Jersey, having their principal office in the City of Newark, New Jersey, do hereby constitute and appoint

RICHARD L. HIGGINBOTHAM, BUNNIE MARIE PERRINE, JEFFERY O'DELL, ROBIN HUBBARD-SHERROD

Charleston, WV

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 20th day of July, 2010 and by the Board of Directors of ALLEGHENY CASUALTY COMPANY at a meeting duly held on the 10th day of July, 2015 :

"RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Senior Vice President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

IN WITNESS WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY have each executed and attested these presents on this 31st day of December, 2018

STATE OF NEW JERSEY County of Essex

Kenneth Chapman

Executive Vice President, International Fidelity Insurance Company and

Allegheny Casualty Company

On this 31st day of December, 2018 , before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said he is the therein described and authorized officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and of ALLEGHENY CASUALTY COMPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.



IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.

Shirelle A. Outley a Notary Public of New Jersey My Commission Expires April 4, 2023

CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY and ALLEGHENY CASUALTY COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand on this day, December 10, 2019

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