

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

Procurement Folder: 688517

Document Description : Addendum No 02 - Hawks Nest SP Lodge Structural Repair Const

Procurement Type : Agency Purchase Order

Date Issued	Solicitation Closes		Solic	itation No	Version	Phase
2020-03-09	2020-03-19 13:30:00	ARFQ	0310	DNR2000000031	3	Final

SUBMIT RESPONSES TO:			VENDOR	
BID RESPONSE			Vendor Name, Address and Telephone	
DIVISION OF NATURAL RESOURCES			Wiseman Construction Co., Inc.	
PROPERTY & PROCUREMENT OFFICE			1616 6th Avenue	
324 4TH AVE			Charleston, WV 25387	
SOUTH CHARLESTON	WV	25303-1228	Vendor 709050415	
US			(304) 344-1200	

FOR INFORMATION CONTACT THE

James H Adkins (304) 558-3397 jamie.h.adkins@wv.gov

Signature X FEIN # 55-0602314

All offers subject to all terms and conditions contained in this solicitation

Date Printed Mar 09, 2020 Solicitation Number: DNR2000000031

Page : 1

DATE March 19, 2020

FORM ID: WV-PRC-ARFQ-001

#### ADDITIONAL INFORMATION:

Addendum No. 02 is issued to publish and distribute the attached information to the Vendor Community.

INVOICE TO	SHIP TO
	SUPERINTENDENT
DIVISION OF NATURAL RESOURCES	DIVISION OF NATURAL RESOURCES
PARKS & RECREATION-PEM SECTION	HAWKS NEST STATE PARK
324 4TH AVE	49 HAWKS NEST PARK RD
SOUTH CHARLESTON WV25305	ANSTED WV 25812-0857
US	US

Line	Commodity Line Description	Qty	Unit Issue	Unit Price	Total Price
1	Hawks Nest Lodge Structural Repairs	'	*SEE A1	TACHED BID	FORM*

Commodity Code	Manufacturer	Model #	Specification	
72120000				

**Extended Description**Hawks Nest Lodge Structural Repairs

SCHEDULE OF EVENTS				
<u>Line</u>	Event	Event Date		
1	MANDATORY Pre-Bid will be at 10 a.m. EST	2020-02-27		
2	Technical Questions Due at 9 a.m. EST	2020-03-05		

Date Printed: Mar 09, 2020 Solicitation Number: DNR2000000031 Page: 2 FORM ID: WV-PRC-ARFQ-001

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DNR200000031	Final	Addendum No 02 - Hawks Nest SP Lodge	of 3
		Structural Repair Const	

#### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

#### 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:	Wiseman Construction Co., Inc.
Contractor's License	e No.: WV000836

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

**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.

John A. Wiseman, President
(Printed Name and Title)
1616 6th Avenue, Charleston, WV 25387
(Address)
(304) 344-1200 / (304) 344-1281
(Phone Number) / (Fax Number)
awiseman@wisemancorp.com
(email address)

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.

Wiseman Construction Co., Inc.
(Company)
Mug Walnun President
Authorized Signature) (Representative Name, Title)
John A. Wiseman, President
(Printed Name and Title of Authorized Representative)
March 19, 2020
(Date)
(304) 344-1200 / (304) 344-1281
(Phone Number) (Fax Number)

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: ARFQ DNR20\*31

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:	
Addendam Numbers Received.	
(Check the box next to each addendum received)	
Addendum No. 1	Addendum No. 6
Addendum No. 1	Addendum No. 7
Addendum No. 3	Addendum No. 8
Addendum No. 4	Addendum No. 9
Addendum No. 5	Addendum No. 10
I understand that failure to confirm the receipt of a I further understand that any verbal representation discussion held between Vendor's representative the information issued in writing and added to binding.	n made or assumed to be made during any oral s and any state personnel is not binding. Only
Wiseman Construction Co, Inc.	
Company	
John Wiscum	
Authorized Signature	
March 19, 2020	
Date	

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

#### REQUEST FOR QUOTATION Hawks Nest State Park Lodge Structural Repairs

#### 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:	John A. Wiseman
Telephone Number:	(304) 344-1200
Fax Number:	(304) 344-1281
Email Address:	awiseman@wisemancorp.com

#### EXHIBIT A – PRICING PAGE Hawks Nest Lodge Structural Repairs

Name of Bidder:	Wiseman Construction Co., Inc.
Address of Bidder:	
Į.	1616 6th Avenue Charleston, WV 25387
Phone Number of Bidder:	(304) 344-1200
WV Contractors License No.	WV000836

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 bidders, 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 renovations of the existing building to include but are not limited to: repair or replacement of exterior clay masonry and concrete. The replacement of guardrails at specified locations. The demolition and replacement of various aluminum storefront systems to allow for masonry repairs. The project also includes other incidental construction as needed and described in the construction documents. The total of all items shall be summarized as the Total Base Bid in the space indicated below.

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

\$1,389,000.00

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

One Million Three Hundred Eighty-Nine Thousand Dollars

# EXHIBIT A – PRICING PAGE Hawks Nest Lodge Structural Repairs

### **Unit Prices**

The following Unit Price Items are not to be included in the Base Bid but will be used in negotiating Change Orders.

No.	Description	Amount in Words	Amount in Figures		
B1	Remove existing damaged brick, replace with new, per brick unit	Fifty-Five Dollars	\$55.00		
C1	Provide concrete patch, match existing adjacent profile, per SF	One Hundred Fifty-Nine Dollars	\$159.00		
C2	Provide concrete crack repair, per LF	Seventy-One Dollars	\$71.00		
С3	Remove previously applied cementitious materials, per location	One Hundred Forty-Six Dollars	\$146.00		
М1	Repoint brick having deteriorated or missing mortar, per SF	Twenty-Eight Dollars	\$28.00		
S1	Remove sealant or mortar, install backer rod & sealant, per LF	Fifteen Dollars	\$15.00 \$3,565.00		
	Pier/wall repair, per location	Three Thousand Five Hundred Sixty-Five Dollars			
PR2	Pier/wall repair, per location	Four Thousand Two Hundred Fifty-Five Dollars	\$4,255.00		
	Pier/wall repair, per location	Seven Thousand Eight Hundred Twenty Dollars	\$7,820.00		

Agency DNR	
REQ.P.O# DNR200000027	_

#### **BID BOND**

	KNOW ALL MEN BY THESE PRESENTS,	That we, the u	ındersigned,	Wisem	an Consti	ruction (	Company, I	nc.
of	Charleston,	WV	, as	Principa	I, and Ohio	Farme	rs Insuranc	e Company
of	Westfield Center , OH	, a	corporation (	organize	d and exist	ing under	the laws of	the State of
<u>OH</u>	with its principal office in the City	of_ Westfie	ld Center	, as S	urety, are	held and	firmly bound	d unto the State
of West	t Virginia, as Obligee, in the penal sum of Fiv	e Percent of	Amount Bio		(\$	5%	_) for the pa	yment of which,
well and	d truly to be made, we jointly and severally bi	nd ourselves, o	our heirs, ad	ministrat	ors, execut	ors, succ	essors and a	assigns.
	The Condition of the above obligation is						_	
	ment of Administration a certain bid or propos							_
DNR2	:000000027 Twin Falls SP - Lodge Build	ding Structura	al Repairs	- Accord	ding to Pla	ans and	Specificati	ons
								-
	NOW THEREFORE,							
the agre full force	(a) If said bid shall be rejected, or (b) If said bid shall be accepted and d hereto and shall furnish any other bonds a eement created by the acceptance of said bid e and effect. It is expressly understood and exceed the penal amount of this obligation as	nd insurance red, then this obli agreed that the	equired by th gation shall ne liability of	ne bid or be null a	proposal, and void, other	and shall herwise tl	in all other re his obligation	espects perform a shall remain in
way imp waive n	The Surety, for the value received, hereby paired or affected by any extension of the totice of any such extension.	stipulates and ime within whi	agrees that ch the Oblig	the oblig ee may	ations of sa accept suc	aid Surety ch bid, ar	y and its bon nd said Sure	d shall be in no ty does hereby
	WITNESS, the following signatures and sea	als of Principal	and Surety,	executed	d and seale	ed by a pi	oper officer	of Principal and
Surety,	or by Principal individually if Principal is an in							
Principa	al Seal			Wisen	nan Cons		Company, of Principal)	Inc.
				Ву			t, Vice Presidence	dent, or
				John	A. Wisc	-	Presiden	+
						(Ti	tle)	-
Surety S	Seal			Ohio F		nsurance (Name o	e Company f Surety)	
		Kimberl	y J. Wilkins	By:	/m/fc Residen	rly nt Agent	Wie	kuwoc ney-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.

THIS POWER OF ATTORNEY SUPERCEDES ANY PREVIOUS POWER BEARING THIS SAME POWER # AND ISSUED PRIOR TO 08/16/18, FOR ANY PERSON OR PERSONS NAMED BELOW.

General Power of Attorney POWER NO. 4752152 06

### Westfield Insurance Co. Westfield National Insurance Co. Ohio Farmers Insurance Co.

Westfield Center, Ohio

#### CERTIFIED COPY

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having its principal office in Westfield Center, Medica County, Ohio, do by these presents make, constitute and appoint GREGORY T. GORDON, KIMBERLY J. WILKINSON, PATRICIA A. MOYE, JOINTLY OR SEVERALLY

of CHARLESTON and State of WVits true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings, or other instruments or contracts of 

LIMITATION: THIS POWER OF AFTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.

and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY:

\*\*Resolved, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall

be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for

be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact, may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed by the President and sealed and attested by the Corporate Secretary."

"Be it Further Resolved, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal chall be valid and bradies there is a company with respect to saw head or undertaking for which it is attached. (Sech patented at a precise

seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2000).

in Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their National Surety Leader and Senior Executive and their corporate seals to be hereto affixed this 16th day of AUGUST A.D., 2018.

Corporate Seals Affived

State of Ohio County of Medina

WESTFIELD INSURANCE COMPANY WESTFIELD NATIONAL INSURANCE COMPANY OHIO FARMERS INSURANCE COMPANY

By: Dennis P. Baus, National Surety Leader and Senior Executive

On this 16th day of AUGUST A.D., 2018, before me personally came Dennis P. Baus to me known, who, being by me duly sworn, did depose and say, that he resides in Wooster, Ohio; that he is National Surety Leader and Senior Executive of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Boards of Directors of said Companies; and that he signed his name thereto by like order.

Seal Affixed

State of Ohio County of Medina

35.

David A. Kotnik, Attorney at Law, Notary Public My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

I, Frank A. Carrino, Secretary of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Boards of Directors, set out in the Power of Attorney are in full force and effect.

In Witness whereof, I have hereunto set my hand and affixed the seals of said Companies at Westfield Center, Onlo, this 11thday of

2020 February

SEAL



Arrivo Secretary

Frank A. Carrino, Secretary

#### State of West Virginia Purchasing Division

### CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET

In accordance with **West Virginia 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. That report must include each of the items identified below in the Required Report Content section.

<u>Instructions:</u> Vendor should complete this coversheet, attach it to the required report, and submit it to the appropriate location as follows: For contracts more than \$25,000, the report should be mailed to the West Virginia Purchasing Division at 2019 Washington Street East, Charleston, WV 25305. For contracts of \$25,000 or less, the vendor should mail the report to the public authority issuing the contract.

Contra	<u>ct Identifi</u>	cation:	
Contra	ct Number:	DNR20*31	
Contra	ct Purpose	Structural Repairs to Hawks Ne	est SP Lodge
Agend	y Requesti	ng Work: WV Div. of Natural Reso	ources, Parks & Recreation Section
Requir should	red Report check eac	<b>Content:</b> The attached report must include hox as an indication that the required info	e each of the items listed below. The vendor rmation has been included in the attached report.
		n indicating the education and training serv as provided;	ice to the requirements of West Virginia Code §
		ne laboratory certified by the United States that performs the drug tests;	Department of Health and Human Services or its
	Average n	umber of employees in connection with the	construction on the public improvement;
		ests: (A) Pre-employment and new hires; (I	the number of positive tests and the number of 3) Reasonable suspicion; (C) Post-accident; and
<u>Vendo</u>	r Contact I	nformation:	
Vendor	Name:	Wiseman Construction Co., Inc.	Vendor Telephone: _(304) 344-1200
Vendor	Address:	1616 6th Avenue Charleston, WV 25387	Vendor Fax: (304) 344-1281 Vendor E-Mail: awiseman@wisemancorp.com

<sup>\*</sup>Report to be provided if low bid and at completion of contract\*



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

## STATE OF WEST VIRGINIA, COUNTY OF Kanawha , TO-WIT: I, John A. Wiseman \_\_\_\_\_, after being first duly sworn, depose and state as follows: 1. I am an employee of <u>Wiseman Construction Co., Inc.</u>; and, (Company Name) I do hereby attest that Wiseman Construction Co., 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: John A. Wiseman Signature: Title: President Company Name: Wiseman Construction Co., Inc. Date: March 19, 2020 Taken, subscribed and sworn to before me this 19thday of March 2020 By Commission expires October 28, 2024 (Notary Public) (Seal) OFFICIAL SEAL

OFFICIAL SEAL
NOTARY PUBLIC
STATE OF WEST VIRGINIA
James C. Linkinoggor
104 Morningside Drive
Elkview, WV 25071
My Commission Expires October 28, 2024

Rev. July 7, 2017

# West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity: Wiseman Construction Co., Inc. Address:	1616 6th Ave, Charleston, WV 25387
Name of Authorized Agent: John A. Wiseman Address:	1616 6th Ave, Charleston, WV 25387
Contract Number: DNR20*31 Contract Descrip	otion: Hawks Nest SP Lodge Structural Repairs
Governmental agency awarding contract: WV Division of Natural Resources - Parks	
☐ Check here if this is a Supplemental Disclosure	
List the Names of Interested Parties to the contract which are known or reasonal entity for each category below (attach additional pages if necessary):	ably anticipated by the contracting business
1. Subcontractors or other entities performing work or service under th	ne Contract
☐ Check here if none, otherwise list entity/individual names below.	
2. Any person or entity who owns 25% or more of contracting entity (no □ Check here if none, otherwise list entity/individual names below.	ot applicable to publicly traded entities)
3. Any person or entity that facilitated, or negotiated the terms of, the services related to the negotiation or drafting of the applicable control. Check here if none, otherwise list entity/individual names below. Complete list of interested parties to be submitted if low bid, prior to award	he applicable contract (excluding legal act)
Signature: Ming Misauum Date Signe	ed: _March 19, 2020
Notary Verification	
State ofWest Virginia, County ofKanawha	:
I. John A. Wiseman , the au	uthorized agent of the contracting business
entity listed above, being duly sworn, acknowledge that the Disclosure herein penalty of perjury.	n is being made under oath and under the
Taken, sworn to and subscribed before me this	
To be completed by State Agency:	OFFICIAL SEAL  NOTARY PUBLIC
Date Received by State Agency:	STATE OF WEST VIRGINIA
Date submitted to Ethics Commission:  Governmental agency submitting Disclosure:	James C. Linkinoggor 104 Morningside Drive Elkview, Wby 25071 My Commission Expires Uctober 28, 2028, 2018

#### 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.

### 

HERE OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA James C. Linkinoggor 104 Morningside Drive Elkview, WV 25071 My Commission Expires October 28, 2024

WITNESS THE FOLLOWING SIGNATURE:

**NOTARY PUBLIC** 

Purchasing Affidavit (Revised 01/19/2018)



# WEST VIRGINIA CONTRACTOR LICENSING BOARD

# **CONTRACTOR LICENSE**

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV000836

#### Classification:

GENERAL BUILDING
GENERAL ENGINEERING
MULTIFAMILY
PIPING
PAINTING
MASONRY
CONCRETE

WISEMAN CONSTRUCTION CO INC
DBA WISEMAN CONSTRUCTION CO INC
1616 6TH AVE
CHARLESTON, WV 25387-2424

**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.



### CERTIFICATE OF LIABILITY INSURANCE

PATE (MM/DD/YYYY) 9/25/2019

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

	this certificate does not confer right	s to t	he ce	rtificate holder in lieu of s	such end	orsement/s	e)		ent. As	tatement on
George H. Friedlander Company 1566 Kanawha Blvd. E. Charleston WV 25311					CONTACT Richard Higginbotham PHONE 204 257 4520 FAX					
					IAIC, No. Extl; 304-357-4520 FAX (A/C, No); 304-345-8724 E-MAIL  ADDRESS: rhigginbotham@friedlandercompany.com					
Ι`	5/10/10010/1 *** 2001 ·				ADDRES		The Street Control			
						INSURER(S) AFFORDING COVERAGE INSURER A: Westfield Insurance Companies				
IN	SURED		_	WISC001						24112
Ÿ	Wiseman Construction Co., Inc.					в: BrickStr	eet Insurance	e		12372
1	616 6th Avenue				INSURER	C:				
C	charleston WV 25387				INSURER	D:				
					INSURER	E:				
_					INSURER	F:				
	OVERAGES CE	RTIF	ICAT	E NUMBER: 948900210				REVISION NUMBER:		
í	THIS IS TO CERTIFY THAT THE POLICIE INDICATED. NOTWITHSTANDING ANY F CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUC	PER I POL	TAIN,	THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	ED BY TH	LE POLICIE DUCED BY	OR OTHER	DOCUMENT WITH RESPI	THE POL ECT TO I	ICY PERIOD WHICH THIS THE TERMS,
INS		INS	LSUBF	POLICY NUMBER	100	POLICY EFF	POLICY EXP	Lim	Te	
Α	X COMMERCIAL GENERAL LIABILITY			CMM1886950		10/4/2019	10/4/2020	EACH OCCURRENCE	1	000
	CLAIMS-MADE X OCCUR		1					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000	-
									\$ 500,0	
						1		MED EXP (Arry one person)	\$10,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:					- 1		PERSONAL & ADV INJURY	\$1,000,	
	POLICY X PRO-		1					GENERAL AGGREGATE		
	OTHER:							PRODUCTS - COMP/OP AGG	\$2,000,	000
A	AUTOMOBILE LIABILITY		$\vdash$	CMM1886950	_	101110010	101110000	COMPINED CINCLE LINES	\$	
	X ANY AUTO			CHAIN 1000BDU		0/4/2019	10/4/2020	COMBINED SINGLE LIMIT (Es accident)	\$1,000,	000
	OWNED SCHEDULED	1			- 1			BODILY INJURY (Per person)	\$	
	AUTOS ONLY AUTOS NON-OWNED				- 1			BODILY INJURY (Per accident)	\$	
	AUTOS ONLY AUTOS ONLY					- 1		PROPERTY DAMAGE (Per accident)	\$	
A	X UMBRELLALIAB X OCCUP	-	-						\$	
٩	FYDERO LIAD			CMM1888950	1	0/4/2019	10/4/2020	EACH OCCURRENCE	\$5,000,0	100
	OLANO WALE						[	AGGREGATE	\$ 5,000,0	100
В	DED X RETENTION \$ NONE		-						\$	
	AND EMPLOYERS' LIABILITY			WCB1019848	1	0/4/2019	10/4/2020	X PER OTH-		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A			1		E.L. EACH ACCIDENT	\$1,000,000	
								E.L. DISEASE - EA EMPLOYEE		
	If yes, describe under DESCRIPTION OF OPERATIONS below								\$1,000,0	
		- 1	- 1						\$ 1,550,0	-
						1				
ESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	E8 (AC	ORD 1	01, Additional Remarks Schedule.	may be atta	ched if more s	pace is required	<u> </u>		
.Vid	lence of Liability Insurance				•			•		
										- 1
										1
										- 1
ER	TIFICATE HOLDER			C	ANCEL	ATION				
	T0.14.10.1.15.11.1.1			1	THE EX	PIKA HUN	DATE THER	SCRIBED POLICIES BE CAI EOF, NOTICE WILL BE PROVISIONS.	NCELLED E DELIV	BEFORE ERED IN
	TO WHOM IT MAY CONCE	At	AUTHORIZED REPRESENTATIVE							
				\ <b>T</b>	Cich	34	Burpa	han		