

State of West Virginia Request For Quotation Construction

Procurement Folder: 570268

Document Description : Addendum No.02 - Lost River Group 4 Cabin Rehab (REBID)

Procurement Type: Agency Contract - Fixed Amt

| Della sili ilia sia | Solicitation Closes | | Solic | itation No | Version | Phase |
|---------------------|------------------------|------|-------|--------------|---------|-------|
| 2019-05-01 | 2019-05-09 13:30:00 | ARFQ | 0310 | DNR190000108 | 3 | Draft |

BID RESPONSE

DIVISION OF NATURAL RESOURCES

PROPERTY & PROCUREMENT OFFICE

324 4TH AVE

SOUTH CHARLESTON

WV 25303-1228

US

Vendor Name, Address and Telephone

W. HTW Lay MINLY Contractors Inc.

PO Boy 945

Martinsburg WV 25402

304 - 267 - 8959

FOR INFORMATION CONTACT THE

Angela W Negley (304) 558-3397 angela.w.negley@wv.gov

Signature X

FEIN # 55 061 8361

DATE 5/4/19

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

Date Printed: Apr 30, 2019 Solicitation Number: DNR1900000108

Page: 1

FORM ID: WV-PRC-ARFQ-001

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

DIVISION OF NATURAL RESOURCES

WEST VIRGINIA STATE PARKS

324 4TH AVE

US

SOUTH CHARLESTON

WV25303-1228

US

SUPERINTENDENT

DIVISION OF NATURAL RESOURCES

LOST RIVER STATE PARK

321 PARK DR

MATHIAS

WV 26812

| Line Commodity Line Description | Qty | Unit Issue | Unit Price | Total Price |
|---------------------------------|-----|------------|------------|-------------|
| Building maintenance and repair | | | <u> </u> | Total Frice |
| services | ··· | | | |

Commodity Code Manufacturer Model # Specification 72101500

Extended Description

Rehabilitation and renovation of three (3) cabins.

Additive Alternate No. 01

DIVISION OF NATURAL RESOURCES WEST VIRGINIA STATE PARKS

324 4TH AVE

SOUTH CHARLESTON

WV25303-1228

US

Line

2

SUPERINTENDENT

DIVISION OF NATURAL RESOURCES

LOST RIVER STATE PARK

321 PARK DR

MATHIAS

US

WV 26812

Commodity Line Description Qty Unit Issue **Unit Price Total Price**

| Commodity Code | Manufacturer | Model # | Specification |
|----------------|--------------|---------|---------------|
| 72101500 | | | Opecinication |

Extended Description

Window replacement (except in kitchens and bathrooms) in cabin #s 8, 9, and 10.

DIVISION OF NATURAL RESOURCES WEST VIRGINIA STATE PARKS

324 4TH AVE

US

SOUTH CHARLESTON

WV25303-1228

SUPERINTENDENT

DIVISION OF NATURAL RESOURCES

LOST RIVER STATE PARK

321 PARK DR

MATHIAS

WV 26812

US

| | 3 Additive Alternate No. 02 | Qty | Unit Issue Unit Price | Total Price |
|---|-----------------------------|-----|-----------------------|-------------|
| ı | | | | |

| Commodity Code | Manufacturer Model # Specification |
|----------------|------------------------------------|
| 72101500 | Model # Specification |
| | |

Extended Description
Floor sanding and refinishing in cabin #s 8,9 and 10.

| <u>Line</u> | Event | Event Date |
|-------------|--|------------|
| _ | Non-Mandatory Pre-Bid Meeting at 10:00 a.m., EST | 2019-04-17 |
| 2 | Technical Question Deadline at 9:00 a.m., EST | 2019-04-23 |

FORM ID: WV-PRC-ARFQ-001

| | | Document Phase | Document Description | Page 4 | 1 | |
|--|---------------|----------------|-------------------------------------|--------|---|--|
| | DNR1900000108 | Draft | Addendum No.02 - Lost River Group 4 | of 4 | | |
| | | | Cabin Rehab (REBID) | | | |

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS (Construction Contracts Only)

1.

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: | W. Harly | miller | Contractors | Inc |
|--------------------------|----------|--------|-------------|-----|
| Contractor's License No. | : WV- | 0052- | 10 | |

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 drug-free 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

Subcontractor List Submission (Construction Contracts Only)

W. Hurley miller Contractors Inc.

| Check this box if no subcontractors will perform more than \$25,000.00 of work to complete the project. | | | | | | |
|---|--------|-----------|------------|--------------|-----------|--|
| Subcontractor Name | 9 | | License Nu | ımber if Red | quired by | |
| | | | W. Va. Co | de § 21-11- | | |
| Ludy5 | Custom | Wood work | King | VV | 033180 | |
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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.

| | President |
|---|-----------|
| (Name, Title) | |
| James W. Dailey, III-President (Printed Name and Title) | |
| (Printed Name and Title) | |
| P. O. Box 945 Martinsburg WV 25402 (Address) | |
| 304-267-8959 (Phone Number) / (Fax Number) | |
| tdailey@whmcontractors.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.

W. Harley Miller Contractors, Inc.

(Company)

James W. Dailey, III-President

(Authorized Signature) (Representative Name, Title)

James W. Dailey, III-President

(Printed Name and Title of Authorized Representative)

5/2/2019

(Date)

304-267-8959 Fax 304-267-3847

(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: A RFQ 0310 DNR/100000108

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

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

| Addendum Numbers Received: | | | | | | |
|--|---|--|--|--|--|--|
| (Check the box next to each addendum received) | | | | | | |
| Addendum No. 2 Addendum No. 3 Addendum No. 4 | 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. | | | | | | |
| W. Harley Miller Contractors, Inc. Company Authorized Signature | James W. Dailey, III | | | | | |
| 5/2/2019 | | | | | | |
| 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 LOST RIVER STATE PARK - GROUP 4 REHABILITATION AND RENOVATION OF THREE (3) CABINS

- 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: | James W. Durkey III | |
|---------------------|----------------------------|-----|
| Telephone Number: _ | 304 367 8959 | |
| Fax Number: | 304 267 3847 | |
| Email Address: | + diley @ whm contractors. | com |

REQUEST FOR QUOTATION WEST VIRGINIA DIVISION OF NATURAL RESOURCES – PARKS & RECREATION LOST RIVER SP GROUP 4 – REHABILITATION AND RENOVATION OF CABINS

Pricing Page Exhibit A

Name of Vendor:

W. Harry Miller Contractors Inc.

Address of Vendor:

PO Bly 945 Martinsburg WV 254CZ

Phone Number of Vendor:

304 267 8959

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.

147,000.00

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

one hundred forty-seven 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 LOST RIVER SP GROUP 4 – REHABILITATION AND RENOVATION OF 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*.

40,000 -

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

Forty thousand 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*.

35,000 -

Additive Alternate 2:

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

Thirty five 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. *

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:

11 COLORADO COURT FALLING WATERS, WV 25419 MY COMMISSION EXPIRES OCTOBER 28 2019

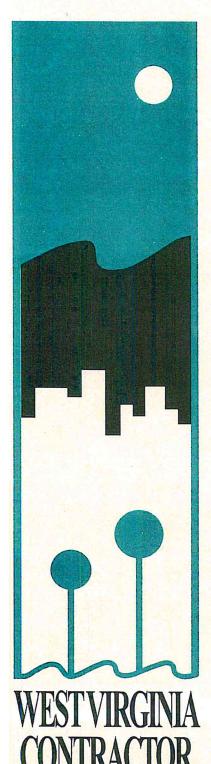
| Vendor's Name: W. Har | ley Miller Contractor | s, Inc. | | | |
|---------------------------|---------------------------------------|-----------------|-----------------------|------------------------------------|--|
| Authorized Signature: | | | Date: <u>5/2/2019</u> | | |
| State of West Virginia | | | | | |
| County of Berkeley | , to-wit: | | | | |
| Taken, subscribed, and sw | orn to before me this $\underline{2}$ | nday of May | | , 20 <u>19</u> . | |
| My Commission expires | October 29 | , 20 <u>19</u> | | | |
| AFFIX SEAL HERE | OFFICIAL SEAL NOTARY PUBLIC | NOTARY PUBLIC _ | Viche | p. Kuye | |
| I A A A A S | TATE OF WEST VIRGINIA | | Purchas | sing Affidavit /Pavisad 01/10/0018 | |



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

STATE OF WEST VIRGINIA,

| COUNTY | OF <u>Rerkeley</u> | _, TO-WIT: | | | | | | |
|---------------|---|--|--|-------------------|--|--|--|--|
| I, James W. | Dailey, III | , after being f | irst duly sworn, depose and state | as follows: | | | | |
| 1. I an | n an employee of W. I | V. Harley Miller Contractors, Inc. ; and, (Company Name) | | | | | | |
| 2. I do | hereby attest that _ | W. Harley Miller Contractors, Inc. (Company Name) | | | | | | |
| | intains a written plan cy are in compliance v | | e workplace policy and that such rginia Code §21-1D. | plan and | | | | |
| The above | e statements are swor | n to under the | e penalty of perjury. | | | | | |
| | | Printed Nam | e:James W. Dailey, III | | | | | |
| | | Signature: | | | | | | |
| | | Title: | President | | | | | |
| Company Name: | | | | | | | | |
| | | Date: | 5/2/2019 | | | | | |
| Taken, su | bscribed and sworn to | before me th | nis <u>2nd</u> day of <u>May</u> , | 2019 | | | | |
| By Commi | ission expires <u>Oct</u> | ober 29, 2019 | The state of the s | | | | | |
| (Seal) | | | Vernie R. Ka | e | | | | |
| | OFFICIA NOTARY STATE OF WE VICKIE F 11 COLORA FALLING WATE MY COMMISSION EXPE | PUBLIC EST VIRGINIA A, KAVE DO COURT ERS, WY 25419 | (Notary Public) | Rev. July 7, 2017 | | | | |



CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV005270

Classification:

ELECTRICAL ROOFING
GENERAL BUILDING CONCRETE
GENERAL ENGINEERING MASONRY
HEATING, VENTILATING & COOLING SIDING
MULTIFAMILY ASPHALT
PIPING EXCAVATION
PLUMBING DRYWALL

RESIDENTIAL STEEL ERECTION
SPECIALTY LOW VOLTAGE SYSTEMS

W HARLEY MILLER CONTRACTORS INC DBA W HARLEY MILLER SYSTEMS PO BOX 945 MARTINSBURG, WV 25402-0945

Date Issued

Expiration Date

SEPTEMBER 18 2018

SEPTEMBER 18, 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.

BID BOND

| | KNOW ALL MEN BY THESE PRES | SENTS, That we, the | undersigned, | W. Harley Mill | er Contrac | tors, Inc. |
|--------------------|--|--|---|---------------------------------------|------------------------------|---|
| of | Martinsburg | ,WV | , as | Principal, and Li | berty Mutu | al Insurance Company |
| of | | | | | | r the laws of the State of |
| MA | with its principal office in t | he City ofBo | ston | , as Surety, a | re held and | firmly bound unto the State |
| of West | Virginia, as Obligee, in the penal sur | n of Five Percent of | Amount Bio | d(\$ | 5% |) for the payment of which. |
| | d truly to be made, we jointly and seve | | | | | |
| | The Condition of the above obliga | tion is such that who | ereas the Pr | incipal has subn | nitted to the | Purchasing Section of the |
| Departn | nent of Administration a certain bid or | | | | | |
| Lost R | <u>iver - Group 4 - Cabin Rehabilita</u> | ation & Renovation | _ | | | |
| | | | | | | |
| | | | | | | |
| ur. | NOW THEREFORE, | | | | | |
| full force | (a) If said bid shall be rejected (b) If said bid shall be accept hereto and shall furnish any other lement created by the acceptance of and effect. It is expressly understoxceed the penal amount of this obligation. | ted and the Principa conds and insurance said bid, then this ob ood and agreed that t | required by th ligation shall he liability of | he bid or proposa be null and void | al, and shall otherwise t | his obligation shall remain in |
| way imp waive n | The Surety, for the value received, paired or affected by any extension office of any such extension. | hereby stipulates and of the time within wh | agrees that ich the Oblig | the obligations o | f said Suret such bid, a | y and its bond shall be in no nd said Surety does hereby |
| | WITNESS, the following signatures | and seals of Principal | and Surety, | executed and se | aled by a p | roper officer of Principal and |
| Surety, | or by Principal individually if Principal | | | | | |
| | Same of the same o | | | | | |
| Principa | I Seal | | | W. Harley Mi | | |
| | | | | | Name (| of Principal) |
| | | | | Ву | \sim | |
| | | | | (Must | | t, Vice President, or |
| | | | | D | | rized Agent) |
| | | | | Presio | | tle) |
| | | | | | (1) | ue) |
| Surety S | Seal | | | Liberty Mutua | al Insuranc | e Company |
| | | | | | | of Surety) |
| | | | | | 11 | |
| | | | | By: Cont | whi & | 10 hiles |
| | | | | Kimberly L. Miles, Lice | nsed WV Resider | t Agent 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.

THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON RED BACKGROUND.

This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Certificate No. 7815510

between 9:00 am and 4:30 pm EST on any business day.

To confirm the validity of this Power of Attorney call 1-610-832-8240 between 9:00 am and 4:30 pm EST o

Liberty Mutual Insurance Company

The Ohio Casualty Insurance Company

West American Insurance Company

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Andrew K. Teeter; Christopher A. Michel; Douglas P. Taylor; Jaime L. Carpenter; Kimberly L. Miles; Kimberly S. Burdette

all of the city of Charleston , state of WV each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 23rd day of June 2017



STATE OF PENNSYLVANIA COUNTY OF MONTGOMERY

The Ohio Casualty Insurance Company Liberty Mutual Insurance Company West American Insurance Company

David M. Carey, Assistant Secretary

On this 23rd day of June 2017, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.



COMMONWEALTH OF PENNSYLVANIA

Notarial Seal Teresa Pastella, Notary Public Upper Merion Twp., Montgomery County My Commission Expires March 28, 2021

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV - OFFICERS - Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII - Execution of Contracts - SECTION 5. Surety Bonds and Undertakings. Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-infact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this _

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