ARFQ 0608 DCR2500000046 REQUEST FOR QUOTATION CHILLER REPLACEMENT PROJECT MOUNT OLIVE CORRECTIONAL COMPLEX AND JAIL

EXHIBIT E – PRICING PAGE Vendor's Company Name: ___ DSO Mechanical 515 Third Ave., South Charleston, WV 25303 Vendor's Address: Phone Number: 304-744-8479 Fax Number: 304-744-8491 Email Address: mlaughlin@dsomech.com WV Contractor's License Number: WV 050370 We, the undersigned, hereby propose to furnish all materials, equipment, and labor to complete all work in a workmanlike manner, as described in the Bidding Documents. TOTAL BID AMOUNT: Seven Hundred Seventy - Five Thousand 775, 700 (Total bid amount to be written in words and numbers.) Authorized Signature:



State of West Virginia Agency Request for Quote

Proc Folder: 1646201 Reason for Modification: Doc Description: Chiller Replacement Project Addendum No. 3: Proc Type: Agency Purchase Order Date Issued Solicitation Closes Solicitation No Version 2025-04-18 2025-04-11 10:30 ARFQ 0608 DCR2500000046 4

BID RECE	EIVING LOCATION		

VENDOR

Vendor Customer Code: 000000 189985 Vendor Name: DSO Mechanical LLC

Address: 515 Third Ave

Street:

City: South Charleston

State: West Virginia

Country: USA

Zip: 25303

Principal Contact: Jeffrey Kelley

Vendor Contact Phone: 304-744-8479

Extension:

FOR INFORMATION CONTACT THE BUYER

Philip K Farley (304) 549-1050 philip.k.farley@wv.gov

Vendor Signature X

are X

FEIN# 46-1525016

DATE 04/18/2025

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

Date Printed: Apr 11, 2025

Page 1

FORM ID: WV-PRC-ARFQ-002 2020/05

ADDITIONAL INFORMATION

The West Virginia Division of Corrections and Rehabilitation (DCR) is soliciting bids on behalf of Mount Olive Correctional Complex and Jail (MOCC&J), to establish a contract for a lump sum amount to replace existing two (2) chillers and chiller controls, four (4) butterfly valves, any required piping, four (4) pumps and pump controls, and any associated parts and install new. The facility is located at 1 Mountainside Way, Mount Olive, WV 25185 and is in Fayette County.

INVOICE TO		SHIP TO	
DIVISION OF CORRECTION - CENTRAL OFFICE	S	MT OLIVE CORRECTIONAL CENTER	
1124 SMITH STREET		ONE MOUNTAINSIDE WAY	
SECOND FLOOR			
CHARLESTON US	WV	MT OLIVE WV	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Total Bid Amount			#-	775,700

Comm Code	Manufacturer	Specification	Model #	
72151201				
9				

Extended Description:

The West Virginia Division of Corrections and Rehabilitation (DCR) is soliciting bids on behalf of Mount Olive Correctional Complex and Jail (MOCC&J), to establish a contract for a lump sum amount to replace existing two (2) chillers and chiller controls, four (4) butterfly valves, any required piping, four (4) pumps and pump controls, and any associated parts and install new. The facility is located at 1 Mountainside Way, Mount Olive, WV 25185 and is in Fayette County.

SCHEDULE OF EVENTS						
Line	<u>Event</u>	Event Date				
2	Mandatory Pre-Bid Meeting at 10:00 AM E.S.T.	2025-03-21				
3	Deadline for Questions Due is 2:00 PM E.S.T.	2025-04-08				
4	Bid Due By 10:30 AM E.S.T.	2025-04-18				

	Document Phase	Document Description	Page 3
DCR2500000046	Final	Chiller Replacement Project	

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

CONTRACTOR LICENSE

AUTHORIZED BY THE
West Virginia Contractor
Licensing Board



NUMBER: WV050370

CLASSIFICATION:

HVAC PLUMBING SPECIALTY

> DSO MECHANICAL LLC 515 THIRD AVENUE SOUTH CHARLESTON, WV 25303

DATE ISSUED

EXPIRATION DATE

TANUARY 21, 2025

TANUARY 21 2026

Unorized Signature

Chair, West Virginia Contractor Licensing Board



A copy of this license must be readily available for inspection by the Board on every job site where contracting 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 is non-transferable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name: DSO Mechanical					
Check this box if no subcontractors will perfo project.	rm more than	\$25,000.00 of work to complete the			
Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.				
Johnson Controls Besco	WU	003182			
Pesco	WU	034701			
	<u> </u>				

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.

	7	\supset	Project	Menoger
(Name, Fit	(e)		J	
·	Mike Laughl	in /	Project Manag	ger
(Printed Na	me and Title)			
		Third A	ve., South Charl	eston, WV 25303
(Address)				
` /	304-744-8479	/ 3	04-744-8491	
(Phone Nur	nber) / (Fax Numbe	er)		
		mla	aughlin@dsome	ch.com
(Email add	ress)			

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation/Contract 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/Contract 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.

DSO Mechan	ical					
(Company)						
7		· /	Proje	et	Ma	neger
(Authorized Signature) (Represen					<i>y</i>
Mike Laughlin /	Projec	t Manager	1	04/1	8/2025	;
(Printed Name and Title	of Autho	rized Represen	ntativ	e) (Da	ite)	
04/18/2025						
(Date)						
304-744-8479	1	304-744-8	491			
(Phone Number) (Fax N	umber)	<u> </u>				
mlaughlii	n@dsom	nech.com				
(Email Address)						

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

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

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

Addendum Numbers Received:	
(Check the box next to each addend	lum received)
[V] Addendum No. 1 [v] Addendum No. 2	[] Addendum No. 6
	[] Addendum No. 7
Maddendum 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 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.

DSO Mechanical	
Company	
Authorized Signature	
04/18/2025	
Date	

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

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- 2) The contractor must submit three (3) electronic PDF format on USB drives.
- c. As-Built Drawings / Shop Drawings:
 - 1) The contractor must submit two (2) full-size hard copies.
 - 2) Contractor must submit three (3) electronic in PDF format on USB drives.

1.12 MISCELLANEOUS

A. Contract Manager

During its performance of this Contract, Contractor must designate and maintain a primary contract manager responsible for overseeing Contractor'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. Contractor should list its Contract manager and his or her contact information below.

Contract Manager:	Mike Laughlin	
Telephone Number:	304-744-8479	
Fax Number:	304-744-8491	
Email Address:	mlaughlin@dsomech.com	

END OF SPECIFICATIONS



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

I, _	Mike Laughlin	, after being first duly sworn, depose and state as follows:
1. 2.	I am an employee of I do hereby attest that _	(Company Name) DSO Mechanical (Company Name)
		for a drug-free workplace policy and that such plan and with West Virginia Code §21-1D.
The	above statements are swo	rn to under the penalty of perjury.
		Printed Name: Mike Laughlin Signature: Project Manager Company Name: DSO Mechanical Date: 04/18/2025
STA	TE OF WEST VIRGINIA,	
COL	JNTY OF Kanawha	, TO-WIT:
	en, subscribed and sworn to	o before me this 18 day of April , 2025 .
(Sea	OFFICIAL Tammy Notary State of We My Commiss July 10 515 3 R D A SOUTH CHARLES	Polety Public st Virginia ion Expires 2027 Rev. July 7, 2017

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the unders	signed, DSO Mechanical, LLC
of 515 Third Ave. South Charleston, WV	25303, as Principal, and Everest Reinsurance Company
of 100 Everest Way Warren, NJ 07059 a corpo	oration organized and existing under the laws of the State of
DE with its principal office in the City of Warren, NJ	as Surety, are held and firmly bound unto the State
of West Virginia, as Obligee, in the penal sum of BID	HE AMOUNT 5%) for the payment of which,
well and truly to be made, we jointly and severally bind ourselves, our he	eirs, administrators, executors, successors and assigns.
TENERS AND ADMINISTRATION OF THE PROPERTY OF T	the Principal has submitted to the Purchasing Section of the
Department of Administration a certain bid or proposal, attached hereto CHILLER REPLACEMENT PROJECT	and made a part hereof, to enter into a contract in writing for
CHILLER AND PUMP REPLACEMENT AT MT. OLIVE CORRE	CTIONAL
NOW THEREFORE,	
(a) If said bid shall be rejected, or	
attached hereto and shall furnish any other bonds and insurance require the agreement created by the acceptance of said bid, then this obligation	n shall be null and void, otherwise this obligation shall remain in
full force and effect. It is expressly understood and agreed that the lial event, exceed the penal amount of this obligation as herein stated.	bility of the Surety for any and all claims hereunder shall, in no
The Surety, for the value received, hereby stipulates and agree way impaired or affected by any extension of the time within which the waive notice of any such extension.	es that the obligations of said Surety and its bond shall be in no le Obligee may accept such bid, and said Surety does hereby
WITNESS, the following signatures and seals of Principal and	Surety, executed and sealed by a proper officer of Principal and
Surety, or by Principal individually if Principal is an individual, this 1ST	
odioty, or by i intoiper individually in i intoiper is art individual, this	
Principal Seal	DSO Meehanical, LLC
7 morphi osai	(Name of Pringipal)
	By laborate al
	Must be President, Vice President, or Duly Authorized Agent)
	Operations Managel
	Format Bairmanna Communi
Surety Seal	Everest Reinsurance Company
377.9 E 3/5.	(Name of Surety)
- 1965 A 1960.	O(1)
**************************************	Adrump S culera
	Adrianne Scalera ^{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.

9913 File

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(ACKNOWLEDGMENT BY LIMITED LIABILITY COMPANY)

STATE OF WV	
COUNTY OF Lanan 1850	
On this 1st day of April in the year of	, before me the undersigned Notary
Public in and for said State, personally appeared identified to me (or proved to me on the oath of) to	eff helluf, known or
identified to me (or proved to me on the oath of) t	to be the , of the
limited liability company that executed the instrumer	nt or the person who executed the
instrument on behalf of said limited liability compan	y and acknowledged to me that such
limited liability company executed the same.	
IN WITNESS WHEREOF, I have hereunto set my seal the day and year in this certificate first above wr	
commy folig	OFFICIAL SEAL
Notary Public for	Tammy Foley
Residing at: Lanauna County	Notary Public State of West Virginia
Notary Public for Nova County Residing at: Lanauna County My commission expires: 7 10 27	My Commission Expires July 10, 2027
1-110 2-1	515 3RD AVENUE SOUTH CHARLESTON, WV 25303

CORPORATE ACKNOWLEDGMENT

G		
State of County of	NEW JERSEY UNION	
who, being	day of	, 2025 before me RA , to me known and say that he/she resides in
SHREWSB that he/she	SURY, NEW JERSEY is theATTORNEY-IN-FACT_	of the
the corpora that he/she said instru	Re INSURUNCE COMPANY Ition described in and which exec knows that seal of said corporat ment is such corporate seal; that i	ion; that the seal affixed to
	ne thereto by like order.	
	-	

KATHLEEN M. CRISTIANO Notary Public, State of New Jersey My Commission Expires 11/16/2028

EVEREST REINSURANCE COMPANY STATEMENTS OF FINANCIAL CONDITION

	December 31,			
	2023		2022	
		Unaudited		Audited
ASSETS				
Bonds	\$	15,480,681,617	\$	13,425,435,159
Stocks		977,899,975		887,282,126
Short-term investments		304,102,787		148,664,819
Other invested assets		2,104,105,489		2,299,249,359
Cash and cash equivalents		963,116,519		530,084,045
Accounts receivable-premium balances		3,149,313,000		2,549,040,224
Reinsurance recoverable		1,109,380,891		821,045,215
Other assets		2,187,268,116		1,689,988,250
Total Assets	\$	26,275,868,394	\$	22,350,789,197
LIABILITIES				
Loss and loss adjustment expense reserve	\$	12,654,219,077	\$	11,330,580,413
Unearned premium reserve		3,406,155,545		2,723,033,746
Ceded reinsurance premium payable (net of ceding commission)		703,075,577		559,742,437
Reserve for commissions, taxes and other liabilities		2,549,054,546		2,184,544,900
Total Liabilities	\$	19,312,504,745	\$	16,797,901,496
SURPLUS AND OTHER FUNDS				
Common capital stock	\$	10,000,000	\$	10,000,000
Contributed Surplus		4,100,821,734		3,600,610,905
Unassigned surplus		2,852,541,914		1,942,276,796
Total capital and surplus	\$	6,963,363,649	\$	5,552,887,701
Total Liabilities and Surplus	\$	26,275,868,394	\$	22,350,789,197

Bonds and stocks are valued on a basis promulgated by the National Association of Insurance Commissioners

Margaret Horn, Vice President 3/21/2024

Signed by Margaret Horn, Vice President Date



POWER OF ATTORNEY EVEREST REINSURANCE COMPANY

KNOW ALL PERSONS BY THESE PRESENTS: That Everest Reinsurance Company, a corporation of the State of Delaware ("Company") having its principal office located at 100 Everest Way, Warren, New Jersey, 07059, do hereby nominate, constitute, and appoint:

Kathleen M. Cristiano, Adrianne Scalera, Joseph Dobkowski Jr., John Dougherty Hunter

its true and lawful Attorney(s)-in-fact to make, execute, attest, seal and deliver for and on its behalf, as surety, and as its act and deed, where required, any and all bonds and undertakings in the nature thereof, for the penal sum of no one of which is in any event to exceed UNLIMITED, reserving for itself the full power of substitution and revocation.

Such bonds and undertakings, when duly executed by the aforesaid Attorney(s)-in-fact shall be binding upon the Company as fully and to the same extent as if such bonds and undertakings were signed by the President and Secretary of the Company and sealed with its corporate seal.

This Power of Attorney is granted and is signed by facsimile under and by the authority of the following Resolutions adopted by the Board of Directors of Company ("Board") on April 21, 2016:

RESOLVED, that the President, any Executive Vice President, and any Senior Vice President are hereby appointed by the Board as authorized to make, execute, seal and deliver for and on behalf of the Company, any and all bonds, undertakings, contracts or obligations in surety or co-surety with others and that the Secretary or any Assistant Secretary of the Company be and that each of them hereby is authorized to attest to the execution of any such bonds, undertakings, contracts or obligations in surety or co-surety and attach thereto the corporate seal of the Company.

RESOLVED, FURTHER, that the President, any Executive Vice President, and any Senior Vice President are hereby authorized to execute powers of attorney qualifying the attorney named in the given power of attorney to execute, on behalf of the Company, bonds and undertakings in surety or co-surety with others, and that the Secretary or any Assistant Secretary of the Company be, and that each of them is hereby authorized to attest the execution of any such power of attorney, and to attach thereto the corporate seal of the Company.

RESOLVED, FURTHER, that the signature of such officers named in the preceding resolutions and the corporate seal of the Company may be affixed to such powers of attorney or to any certificate relating thereto by facsimile, and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be thereafter valid and binding upon the Company with respect to any bond, undertaking, contract or obligation in surety or co-surety with others to which it is attached.

IN WITNESS WHEREOF, Everest Reinsurance Company has caused their corporate seals to be affixed hereto, and these presents to be signed by their duly authorized officers this 15th day of February 2023.

Reinsurance Consocrate Consocrate

Everest Reinsurance Company

By: Anthony Romano, Senior Vice President

On this 15th day of February 2023, before me personally came Anthony Romano, known to me, who, being duly sworn, did execute the above instrument; that he knows the seal of said Company; that the seal affixed to the aforesaid instrument is such corporate seal and was affixed thereto; and that he executed said instrument by like order.

LINDA ROBINS Notary Public, State of New York No 01R06239736 Qualified in Queens County Term Expires April 25, 2027

Linda Robins, Notary Public

I, Nicole Chase, Assistant Secretary of Everest Reinsurance Company do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Section of the bylaws and resolutions of said Corporation as set forth in said Power of Attorney, with the ORIGINALS ON FILE IN THE HOME OFFICE OF SAID CORPORATION, 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 WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said Company, this 1st day of April 2025

Reinsurance SEAL 1973 OFLAWARE *

By: Nicole Chase, Assistant Secretary