

State of West Virginia **Agency Request for Quote**

Proc Folder:

1299010

Reason for Modification:

Doc Description: Equipment and Systems Maintenance and Repairs Contract WRJCF

Addendum No. 1:

Proc Type:

Agency Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version	
2023-10-12	2023-10-23 10:30	ARFQ 0608 DCR2400000042	2	

BID RECEIVING LOCATION

- 4		-	0	

Vendor Customer Code:

Vendor Name: 1. tro Construction Services

Street:

City: 1

State:

Country : USA

Principal Contact:

Vendor Contact Phone

Extension:

FOR INFORMATION CONTACT THE BUYER

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

Vendor

Signature X

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

Date Printed:

Oct 12, 2023

Page 1

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

ADDITIONAL INFORMATION

The West Virginia Division of Administrative Services (DAS) is soliciting bids on behalf of the Division of Corrections and Rehabilitation (DCR) to establish an open-ended contract to provide preventative maintenance and inspections, corrective maintenance, repairs, replacement parts, and installation of new devices and equipment for the Equipment and Systems Maintenance and Repairs Contract at Western Regional Jail and Correctional Facility located at One O'Hanlon Place, Barboursville, WV 25504 in Cabell County.

INVOICE TO		SHIP TO
WESTERN REGIONAL J	AIL	WESTERN REGIONAL JAIL
1 O'HANLON PLACE		1 O'HANLON PLACE
BARBOURSVILLE	WV	BARBOURSVILLE WV
US		US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Overall Cost			0.1	111200

Comm Code	Manufacturer	Specification	Model #	
72151201				

Extended Description:

Equipment and Systems Maintenance and Repairs Contract

SCHEDULE OF EVENTS

COLIEDOL	LE OF EVERTO	
<u>Line</u>	<u>Event</u>	Event Date
1	Non-Mandatory Pre-Bid Meeting at 10:00 AM E.S.T.	2023-10-04
2	Deadline for Questions Due is 2:00 PM E.S.T.	2023-10-12
3	Bid Due By 10:30 AM E.S.T.	2023-10-23

ARFQ 0608 DCR2400000042 REQUEST FOR QUOTATION EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIRS CONTRACT WESTERN REGIONAL JAIL AND CORRECTIONAL FACILITY

Addendum No. 1

Questions:

Q1: Are filters included in the contract price?

A1: If the facility wants the contractor to provide and replace the filters, it is done as a corrective maintenance hourly labor rate cost and a material percentage markup as stated in the specifications. The contractor would be responsible for providing and installing new air filters at the facility.

Clarifications:

C1: Please see attached non-mandatory pre-bid sign-in sheet.

C2: A bid bond will not be required on this contract.

C3: The bid closing date has changed: 10:30 AM E.S.T. on October 23, 2023

C4: The public bid opening date has changed: 11:00 AM E.S.T. on October 23, 2023

Pre-Bid Sign-In Sheet

Solicitation Number: DCR2460000042 Date of Pre-Bid Meeting: 10 - 4 - 2023

Location of Prebid Meeting: WRZ+CF

Please Note:

Failure to legibly sign in may be grounds for declaring a vendor ineligible to bid. Vendors must sign-in on this sheet to verify attendance at the Pre-Bid meeting. For further verification, please also provide a business card if possible.

Firm Represented:*	Rep Name (Printed):	Firm Address:	Telephone #:	Fax #:	Email:
		401 29th Street (304)	(3,4)	***	John Jenningse
Mec anca	John Tennings	Dunkay WV	550 5639		asm serlice com
Powell Troc.		(70 Stringtown RD	304		Pawelling 2
	John Stone	Belinston ter 26050	4666		Yahoo Com
Linear		and the second sequence of the second	The second secon	endersher.	Annual O
And addressed to the second se	California de la calenta de la	The state of the s	The state of the s		
5. d.		With an address and the second	Province (Property of	or constitute,	un remain phása de la companya

*One Vendor Per Representative - No one individual is permitted to represent more than one vendor at the pre-bid meeting. Any individual that does attempt to represent two or more vendors will be required to select one vendor to which the individual's attendance will be attributed. The vendors not selected will be deemed to have not attended the pre-bid meeting unless another individual attended on their behalf.



State of West Virginia Agency Request for Quote

Proc Folder: 1299010 Reason for Modification: Doc Description: Equipment and Systems Maintenance and Repairs Contract WRJCF Proc Type: Agency Master Agreement **Date Issued** Solicitation Closes Solicitation No Version 2023-09-26 2023-10-19 10:30 ARFQ 0608 DCR2400000042 **BID RECEIVING LOCATION**

_			_		-
V	F	N	D	O	R

Vendor Customer Code:

Vendor Name: 1,400 Construction Services

Address: 4300 First Ave

Street:

City: (1,410

State: \bigcirc Country: \bigcirc Zip: \bigcirc Zip: \bigcirc Zip: \bigcirc

Principal Contact: Amie huhn

Vendor Contact Phone: Extension:

FOR INFORMATION CONTACT THE BUYER

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

Sep 26, 2023

Vendor Signature X

Date Printed:

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

amed in this solicitation

Page 1

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

ADDITIONAL INFORMATION

The West Virginia Division of Administrative Services (DAS) is soliciting bids on behalf of the Division of Corrections and Rehabilitation (DCR) to establish an open-ended contract to provide preventative maintenance and inspections, corrective maintenance, repairs, replacement parts, and installation of new devices and equipment for the Equipment and Systems Maintenance and Repairs Contract at Western Regional Jail and Correctional Facility located at One O'Hanlon Place, Barboursville, WV 25504 in Cabell County.

INVOICE TO		SHIP TO	
WESTERN REGIONAL JAIL		WESTERN REGIONAL JAIL	
1 O'HANLON PLACE		1 O'HANLON PLACE	
BARBOURSVILLE US	WV	BARBOURSVILLE US	WV

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Overall Cost			0.	111-00
				2	4.640.

Comm Code	Manufacturer	Specification	Model #	
72151201				

Extended Description:

Equipment and Systems Maintenance and Repairs Contract

SCHEDULE OF EVENTS

<u>Line</u>	<u>Event</u>	Event Date
1	Non-Mandatory Pre-Bid Meeting at 10:00 AM E.S.T.	2023-10-04
2	Deadline for Questions Due is 2:00 PM E.S.T.	2023-10-12
3	Bid Due By 10:30 AM E.S.T.	2023-10-19

WESTERN REGIONAL JAIL AND CORRECTIONAL FACILTY

ARFQ 0608 DCR2400000042 - Equipment and Systems Maintenance and Repairs Contract Pricing Page

Preventative Maintenance	Preventative Maintenance Unit of Measure	Preventative Maintenance Number of Times Per Year	Preventative Maintenance Unit Price Per Each Time	Preventative Maintenance Extended Amount
Equipment and Systems				
Equipment and Systems	Biannual	2	2,500,00	3,000,5
			Subtotal A:	S,100,8
Correction Maintenance Hourly Rates	Corrective Maintenance Unit of Measure	Corrective Maintenance Estimated Annual Hours	Corrective Maintenance Unit Price	Corrective Maintenance Extended Amount
Regular Labor Rate	Hour	100	8.10	8.00
Overtime Labor Rate	Hour	16	00.00	B 000
Holiday Labor Rate	Hour	∞	00,100	800
Emergency Labor Rate	Hour	8	82.50	00.00
New Equipment, Devices, and Parts Markup Percentage Quote	Estimated New Equipn Markup Perc	Estimated New Equipment, Devices, and Parts Markup Percentage Cost **	New Equipment, Devices, and Parts Markup Percentage	New Equipment, Devices, and Parts Markup Percentage Extended
Parts	\$5,00	\$5,000.00	1.30 %	00000000
			Subtotal C:	opiousto)
		OVERALL COST (by	OVERALL COST (by adding subtotals A, B, and C)	34 Lours
Bidder/Vendor Information: Name:	Lynn Servi	ces		
Author And	43			
Fax No.				
Email Address: Kuhn On Authorized Signaffie	trocsicon			
The same				

NOTES:

* Quantities are estimated for bid evaluation purposes only.
** Estimated cost for bid evaluation purposes only

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name: Ato Construction Ser.									
Check this box if no subcontractors will perform more than \$25,000.00 of work to complete the project.									
Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.								
	w. va. code y 21 11 1 ct. soq.								

Contract Administrator and the initial point of contact for matters relating to this Contract. HVAC Comm. Serv. 1. (Name, Title) omm, Serv. (Printed Name and Title) (Address) (Phone Number) / (Fax Number) na Controcs, com (Email address) 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 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 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 Vendor in a contractual relationship; and that to the best of my knowledge, Vendor has properly registered with any State agency that may require registration. construction ? omm. (Authorized Signature) (Representative Name, Title) (Printed Name and Title of Authorized Representative) (Date)

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the

(Email Address)

(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

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

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

Check the box next to each addend	um received)
[1] Addendum No. 1	[] Addendum No. 6
[] Addendum No. 2	[] Addendum No. 7
[] Addendum No. 3	[] Addendum No. 8
[] Addendum No. 4	[] Addendum No. 9
[] Addendum No. 5	[] Addendum No. 10

Addendum Numbers Received:

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.

Company

Authorized Signature

Date

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

STATE OF WEST VIRGINIA

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 §15A-3-14, 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:
Vendor's Name: 11to Coastruction Dervices
Authorized Signature:
State of West Virginia
County of Putnam, to-wit:
Taken, subscribed, and sworn to before me this Day of, 2023
My Commission expires 2013, 204.
OFFICIAL SEAL STATE OF WEST VIRGINIA NOTARY PUBLIC Cheryl L Griffith 4810 Spring Hill Ave South Charleston WV 25309 NOTARY PUBLIC Purchasing Affidavit (Revised 03/09/2019)
My Commission Expires April 3, 2024

Enterprise Herrical Control of Co



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

STATE OF WEST VIRGINIA, COUNTY OF after being first duly sworn, depose and state as follows: I am an employee of \sqrt{ 1. I do hereby attest that 2. 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: Signature: Company Name Taken, subscribed and sworn to before me this day of By Commission expires

OFFICIAL SEAL OFFICIAL SEAL
STATE OF WEST VIRGINIA
NOTARY PUBLIC
Cheryl L Griffith
4810 Spring Hill Ave
South Charleston WV 25309
My Commission Expires April 3, 2024 (Seal)

ARFQ 0608 DCR2400000042 REQUEST FOR QUOTATION

EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIRS CONTRACT Western Regional Jail and Correctional Facility

A. 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. The previously specified information must be submitted prior to award of contract.

Contract Manager:

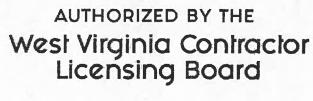
Telephone Number:

Fax Number:

Email Address:

END OF SPECIFICATIONS

CONTRACTOR LICENSE





NUMBER:

WV042601

CLASSIFICATION:

ELECTRICAL
GENERAL BUILDING
HEATING, VENTILATING & COOLING
PIPING
SPECIALTY
LOW VOLTAGE SYSTEMS
SPRINKLER AND FIRE PROTECTION

NITRO CONSTRUCTION SERVICES INC DBA NITRO MECHANICAL SERVICES 4300 1ST AVE #2 NITRO, WV 25143-1001

DATE ISSUED

EXPIRATION DATE

JUNE 13, 2023

JUNE 13, 2024

Authorized 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.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/28/2022

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(ies) must have ADDITIONAL INSURED provisions or be endorsed.

li t	SUBROGATION IS WAIVED, subject in scertificate does not confer rights to	to t	he tern	ns and conditions of the icate holder in lieu of su	e polic	y, certain p dorsement(s	olicies may	require an e	ndorsemen	t. As	statement on
PRODUCER			CONTACT Willis Towers Watson Certificate Center								
Willis Towers Watson Northeast, Inc.			PHONE 1_977_045_7279 FAX 1_999_467_0279								
c/o 26 Century Blvd P.O. Box 305191			(A/C, No, Ext): 1-07/-943-7376 (A/C, No): 1-088-467-2378 E-MAIL ADDRESS: certificates@willis.com								
	hville, TN 372305191 USA										
			INCURE				IE .		NAIC# 11150		
INSURED Nitro Construction Services, Inc 4300 1st Avenue Nitro, WV 25143			INSURER A: Arch Insurance Company INSURER B: Starr Indemnity & Liability Company						38318		
									30310		
			INSURER C:						-		
NITTO, WV 25143				INSURER D:							
				INSURER E :							
COVEDACES OFFICIATE NUMBER, W27421327					INSURER F:						
COVERAGES CERTIFICATE NUMBER: W27421387						L IOOLIED TO		REVISION N			
II C	THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. NSR										
LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	s	
	CLAIMS-MADE X OCCUR							DAMAGE TO RE PREMISES (Ea	NTED	\$ \$	2,000,000
A								MED EXP (Any		\$	5,000
				ZAGLB9222206		01/01/2023	01/01/2024	PERSONAL & A		s	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGG		S	4,000,000
	POLICY X PRO- X LOC							PRODUCTS - C		5	4,000,000
	OTHER:							17000010-0	OWII /OI AGG	\$	- 7,111,700
	AUTOMOBILE LIABILITY							COMBINED SIN	GLE LIMIT	s	5,000,000
	X ANY AUTO		1 1					(Ea accident) BODILY INJURY	(Per person)	\$	3,000,000
A	OWNED SCHEDULED			ZACAT9243306	01/01/2023	01/01/2024	BODILY INJURY				
	AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY AUTOS ONLY		2AOA19243300	01/0	02,02,2025		PROPERTY DAI				
	X AUTOS ONLY X AUTOS ONLY							(Per accident)		\$	
_	X UMBRELLA LIAB X OCCUP				-					\$	
В	EVEROU LAB			1000580155021		01 /01 /0000	01 /01 /0004	EACH OCCURR	ENCE	\$	10,000,000
	CLAIIVIO-IVIAUE			1000588155231		01/01/2023	01/01/2024	AGGREGATE		\$	10,000,000
	DED X RETENTION \$ 10,000				-			NA DEB	OTH	\$	
	AND EMPLOYERS' LIABILITY							X PER STATUTE	OTH- ER		
Α	!YPROPRIETOR/PARTNER/EXECUTIVE	N/A	ZAWCI9402606	0	01/01/2023	01/01/2024	E.L. EACH ACC	DENT	\$	1,000,000	
				230025402500		,,		E.L. DISEASE - E	EA EMPLOYEE	\$	1,000,000
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - I	POLICY LIMIT	\$	1,000,000
	RIPTION OF OPERATIONS / LOCATIONS / VEHICI	ES (A	CORD 10	11, Additional Remarks Schedule	e, may be	attached if more	a space is require	ad)			
CEI	RTIFICATE HOLDER				CANC	ELLATION					
					THE	EXPIRATION	DATE THE	ESCRIBED POI EREOF, NOTIONS Y PROVISIONS	CE WILL B		

© 1988-2016 ACORD CORPORATION. All rights reserved.

Evidence of Insurance

Darl Ehm

AUTHORIZED REPRESENTATIVE