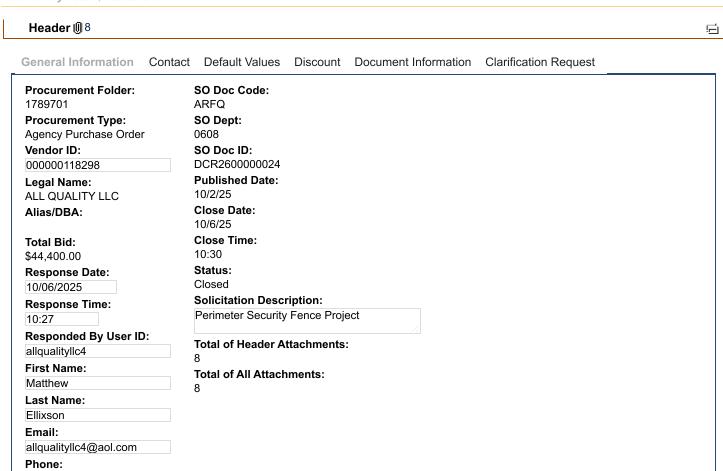
Solicitation Response(SR) Dept: 0608 ID: ESR10062500000002448 Ver.: 1 Function: New Phase: Final

Modified by batch, 10/06/2025

3049627352



ARFQ 0608 DCR2600000024 REQUEST FOR QUOTATION PERIMETER SECURITY FENCE PROJECT GENE SPADARO JUVENILE CENTER

EXHIBIT E – PRICING PAGE

EAHIBIT E - FRICING FAGE
Contractor's Company Name: All Quality LLC
Contractor's Address: P.O. Box 7H69
Churleston, W.V. 25301
Phone Number: (304) 776-9473
Fax Number: (304) 776-7267
Email Address: All Quality 11c4@ AOL. Com
WV Contractor's License Number: WV 33713
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: Forty four thousand four hundred dollars
(\$ 44,400 (Total bid amount must be written in words and numbers.)
Authorized Signature:

BID BOND

KNOV	V ALL MEN BY THESE PRE	SENTS. That we, the	undersigned, All Quality, LLC
of	Charleston	. WV	, as Principal, and First Indemnity of America Insurance
Company of_	MANUAL MANUAL PROPERTY AND	NJ	, a corporation organized and existing under the laws of the State
NJ	with its principal office in		ris Plains, as Surety, are held and firmly bound unto the St
	a, as Obligee, in the penal su		
well and truly to	o be made, we jointly and se	verally bind ourselves	s, our heirs, administrators, executors, successors and assigns.
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
The C	Condition of the above oblig	ation is such that w	hereas the Principal has submitted to the Purchasing Section of
Department of	Administration a certain bid	or proposal, attached	hereto and made a part hereof, to enter into a contract in writing for
Perimeter Se	ecurity Fence, Gene Space	laro Juv Center, M	t Hope
		LUNCHARIUM A HOME	
***************************************			4.110
NOW	THEREFORE,		
(a)	If said bid shall be rejecte	d, or	the state of the second or a s
(b)	t d -b-II firminh any other	hande and incurance	oal shall enter into a contract in accordance with the bid or propose required by the bid or proposal, and shall in all other respects perfectly the shall be applied to the proposal this obligation shall remain
full force and e	effect. It is expressly unders the penal amount of this obli	tood and agreed tha	t the liability of the Sulety for any and an Calms heredider shall, in
The S	Surety, for the value received	, hereby stipulates a	nd agrees that the obligations of said Surety and its bond shall be in
way impaired	or affected by any extension f any such extension.	n of the time within v	which the Obligee may accept such bid, and said Surety does her
	•		
WITN	IESS, the following signature	s and seals of Princip	pal and Surety, executed and sealed by a proper officer of Principal
	Principal individually if Princip		
			All Own Pro III O
Principal Seal			All Quality, LLC (Name of Principal)
			(Name of Findpary
			By(Must be President, Vice President, or
			Duly Authorized Agent)
			(Title)
Surety Seal			First Indemnity of America Insurance Company
			(Name of Surety)
	1181		By: Vinlah (Mules)
7 7 -			Kimberly L. Miles 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.

FIRST INDEMNITY OF AMERICA INSURANCE COMPANY

2740 Route 10 West, Suite 205, Morris Plains, N.J. 07950 Telephone: (973) 402-1200

POWER OF ATTORNEY FOR BONDS AND UNDERTAKINGS

Know All Men By These Presents: That First Indemnity of America Insurance Company, a Corporation of the State of New Jersey does hereby appoint: Jessica J. Bentley, Kimberly L. Miles, Tammy S. Selbe, Andrew K. Teeter, its true and lawful Attorneys-in-Fact: to make, execute, sign, acknowledge, affix the Company Seal to, deliver any and all surety bonds, undertakings, recognizances, and other contracts of indemnity and writings obligatory in the nature of a bond, for and on behalf of said Company and as an act and deed of said Company, NOT TO EXCEED TWO MILLION DOLLARS FOR ANY BOND OR CONTRACT PRICE.

IN WITNESS WHEREOF, First Indemnity of America Insurance Company of the State of New Jersey has executed these presents this

25th day of November, 2019.

Patrick J. Lynch, President

STATE OF NEW JERSEY **COUNTY OF MORRIS**

On this 25th day of November, 2019, before me came the above named officer of First Indemnity of America Insurance Company of New Jersey, to me personally known to be the individual and officer described herein, and acknowledge that he executed the foregoing instrument and affixed the seal of said corporation thereto by authority of this office.



ommission# ublic, State of New Jersey Commission E March 16.

CERTIFICATE

Excerpts of Resolutions (Article V, Paragraph 5, of the By-Laws of said Company) adopted by the Board of Directors of the First Indemnity of America Insurance Company of the State of New Jersey, November 25, 2019.

RESOLVED, on November 25, 2019, that the President, or any one of the Vice Presidents specially authorized to do so by the Board of Directors, or by the Executive Committee, shall have power to appoint Attorneys-in-Fact as the business of the company may require, or to authorize any person or persons to execute on behalf of the Company any bonds, undertakings, recognizances, stipulations, policies, contracts, agreements, deeds, and release and assignment of judgements, decrees, mortgages and instruments in the nature of mortgages, and also all other instruments and documents which the business of the Company may require and to affix the Seal of the Company thereto.

FURTHER RESOLVED, that the signatures and attestations of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating to the Power of Attorney by facsimile and any such Power of Attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond, undertaking, recognizances or other contract of indemnity of writing obligatory in the nature thereof.

I, Jane E. Lynch, Secretary of First Indemnity of America Insurance Company of New Jersey, do hereby certify that the foregoing excerpts of the Resolution adopted by the Board of Directors of the Corporation and the Powers of Attorney issued pursuant thereto, are true and correct and that both the Resolution and the Powers of Attorney are in full force and effect.

IN WITNESS WHEREOF, I have herewith set my hand and affixed the seal of said Corporation this 6th day of Ootber,

Hynch, Secretary

FP0026352



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

Proc Folder:	1789701	Reason for Modification:		
Doc Description:	Perimeter Security Fence Pr			
Proc Type:	Agency Purchase Order		0	
Date Issued	Solicitation Closes	Solicitation No	Version	
2025-09-14	2025-10-06 10:30	ARFQ 0603 DCR2600000024	1	

BID	RE	CEI	VIN	G L	OC.	ATI	ON

877	-	8	-	-	-
v		N	D	O.	ĸ

Vendor Customer Code: 00000011%교역8

Vendor Name: AllQuality LLC

Address: P.O. Box 7169

Street:

city: Charleston

State: West Virginia

country: United States zip: 25301

Principal Contact : Matthew Ellixson

Vendor Contact Phone: (304) 776-9473

Extension:

FOR INFORMATION CONTACT THE BUYER

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

Vendor

Signature X

FEIN# 22-3846602

DATE 10/6/2025

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

Date Printed:

Sep 14, 2025

Page 1

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

1	(Phone Number) / (Fax Number)
	(Email address)
	IFICATION AND SIGNATURE: By signing below, or submitting documentation through SIS, I certify that: I have reviewed this Solicitation/Contract in its entirety; that I understand
the req	uirements, terms and conditions, and other information contained herein; that this bid, offer
	posal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or
	proposed meets the mandatory requirements contained in the Solicitation/Contract for that t or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions
contain	ned in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or
	al for review and consideration; that I am authorized by the vendor to execute and submit this fer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to
bind th	e vendor in a contractual relationship; and that to the best of my knowledge, the vendor has
properi	y registered with any State agency that may require registration
3	All heality LLC
	(Company)
	Moject Manayer
	(Authorized Signature) (Representative Name, Title)
	Matthew Ellixson 10/5/25
	(Printed Name and Title of Authorized Representative) (Date)
	10/5/25
	(Date)
	(304)776-9473
	(Phone Number) (Fax Number)
	All Quality LLC 4@ AOL. COM
	(Email Address)

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.

(Name, Title)

(Address)

(Printed Name and Title)

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)	um received)
/	- Î
Addendum No. 1 Addendum No. 2	[] 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

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.

Authorized Signature

10/5/25

Date

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

Subcontractor List Submission (Construction Contracts Only) Bidder's Name: Check this box if no subcontractors will perform more than \$25,000.00 of work to complete the project. License Number if Required by W. Va. Code § 21-11-1 et. seq. Subcontractor Name



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

I, Mathaw Elixson, after being first duly sworn, depose and state as follows:
1. I am an employee of All Quality LLC; and,
2. I do hereby attest that All Quality LLC (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: Mathew Slixon
Signature:
Title: Project Manager
Company Name: All Quality LC
Date: 10/6/25
STATE OF WEST VIRGINIA,
COUNTY OF Kanewha , TO-WIT:
Taken, subscribed and sworn to before me this 6th day of October, 2025.
By Commission expires November 6, 2030
(Seal) Daniel Johnston
(Notary Public)

ARFQ 0608 DCR2600000024 REQUEST FOR QUOTATION PERIMETER SECURITY FENCE PROJECT GENE SPADARO JUVENILE CENTER

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

1.09 MISCELLANEOUS

A. Contract Manager

1. 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: Mathew Slisson

Telephone Number: (304) 776 - 9473

Fax Number: (304) 776-7267

Email Address: All Quality 11c 16 AOL.COM

END OF SPECIFICATIONS