

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

EXHIBIT E – PRICING PAGE

Contractor's Company Name: Meadow Ridge Construction
Contractor's Address: P.O. Box 36 Kenna WV 25248

Phone Number: 304-549-2537 - 304-761-6290

Fax Number: N/A

Email Address: Angie @ meadowridgeconstruction

WV Contractor's License Number: WV 061567

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:

Fifty-three thousand, eight hundred twelve dollars
and zero cents

(\$ 53,812.00)

(Total bid amount must be written in words and numbers.)

Authorized Signature: Angie Herless

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Meadow Ridge Ranch Construction, LLC
of Given, West Virginia, as Principal, and Erie Insurance
of Erie, PA, a corporation organized and existing under the laws of the State of PA
with its principal office in the City of Erie, as Surety, are held and firmly bound unto the State
of West Virginia, as Oblige, in the penal sum of Two Thousand Six Hundred Ninety and 66/100 (\$2690.60) for the payment of which,
well and truly to be made, we jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the
Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for
Furnish and install 1,200' feet of Razor Wire with scissor lift and remove 74' foot tall
conduit pole. (Perimeter Security Fence Project) at the Gene Spadaro Juvenile Center
located @ 106 Martin Drive, Mt. Hope, WV 25880

NOW THEREFORE,

(a) If said bid shall be rejected, or
(b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal
attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform
the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in
full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no
way impaired or affected by any extension of the time within which the Oblige may accept such bid, and said Surety does hereby
waive notice of any such extension.

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 30th day of September, 2025.

Principal Seal

Meadow Ridge Ranch Construction, LLC
(Name of Principal)

By X CE
(Must be President, Vice President, or
Duly Authorized Agent)

Owner, Christopher D. Dewese
(Title)

Surety Seal

Erie Insurance Property & Casualty Company
(Name of Surety)

Tony E. Lucas
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.**



**Erie
Insurance®**

**ERIE INSURANCE
PROPERTY & CASUALTY COMPANY
ERIE, PA 16530
LIMITED POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That ERIE INSURANCE PROPERTY & CASUALTY COMPANY, a corporation duly organized under the laws of the Commonwealth of Pennsylvania, does hereby make, constitute and appoint Philip Garlow, Jarred W. Hurley, Lora Fields, Tony Lucas, Linda Goff, Dan K. Bowen, Harold Payne, Jennifer Hines, Margaret Gunnoe, Jacqueline Fitch, Cody Javins, Ryan Fitzer, Tina White and Lisa Sword ----- individually, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver for and on its behalf, and as its act and deed: any and all bonds and undertakings of suretyship,

----- each in a penalty not to exceed the sum of five hundred thousand dollars (\$500,000.00).-----

And to bind ERIE INSURANCE PROPERTY & CASUALTY COMPANY thereby as fully and to the same extent as if such bonds and undertakings and other writings obligatory in the nature thereof were signed by the appropriate officer of ERIE INSURANCE PROPERTY & CASUALTY COMPANY and sealed and attested by one other of such officers, and hereby ratifies and confirms all that its said Attorney(s)-in-Fact may do in pursuance hereof.

The Power of Attorney is granted under and by authority of the following Resolutions adopted by the Board of Directors of ERIE INSURANCE PROPERTY & CASUALTY COMPANY on the 2nd day of September, 2016, and said Resolutions have not been amended or repealed:

"RESOLVED, that the Chief Executive Officer, or any Senior Vice President or Vice President shall have power and authority to: (a) Appoint Attorney(s)-in-Fact and to authorize them to execute on behalf of the Company, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof, and, (b) Remove any such Attorney-in-Fact at any time and revoke the power and authority given to him or her.

RESOLVED, that Attorney(s)-in-Fact shall have power and authority, subject to the terms and limitations of the Power of Attorney issued to them, to execute and deliver on behalf of the Company, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof. The corporate seal is not necessary for the validity of any bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof."

This Limited Power of Attorney is signed and sealed by facsimiles under and by virtue of the following Resolution adopted by the Board of Directors of ERIE INSURANCE PROPERTY & CASUALTY COMPANY on the 2nd day of September, 2016, and said Resolution has not been amended or repealed:

"RESOLVED, that the signature of Timothy G. NeCastro, as Chief Executive Officer of the Company, and the Seal of the Company may be affixed by the following facsimiles on any Limited Power of Attorney for the execution of bonds, undertakings, recognizances, contracts and other writings in the nature thereof, and the signature of Brian W. Bolash, as Secretary of the Company, the Seal of the Company, the signature of Sheila M. Hirsch, as Notary Public, and her notarial seal, may also be affixed by the following facsimiles to any certificate or acknowledgment of any such Limited Power of Attorney, and only under such circumstances shall said facsimiles be valid and binding on the Company."

IN WITNESS WHEREOF, ERIE INSURANCE PROPERTY & CASUALTY COMPANY has caused these presents to be signed by its Chief Executive Officer, and its corporate seal to be hereto affixed this 18th day of October, 2016.




Timothy G. NeCastro
Chief Executive Officer

COMMONWEALTH OF PENNSYLVANIA } ss.
COUNTY OF ERIE

On this 18th day of October, 2016, before me personally came Timothy G. NeCastro, to me known, who being by me duly sworn, did depose and say: that he is Chief Executive Officer of ERIE INSURANCE PROPERTY & CASUALTY COMPANY, the corporation described in and which executed the above instrument; that he knows the Seal of said corporation; that the Seal affixed to the said instrument is such corporate Seal; that it was so affixed by order of the Board of Directors of said corporation and that he signed his name thereto by like order.

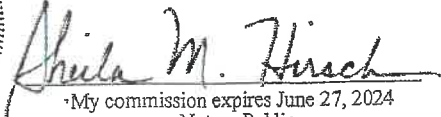
CERTIFICATE

I, Brian W. Bolash, Secretary of ERIE INSURANCE PROPERTY & CASUALTY COMPANY, do hereby certify that the original LIMITED POWER OF ATTORNEY, of which the foregoing is a full, true and correct copy, is still in full force and effect as of the date below.

In witness whereof, I have hereunto subscribed my name and affixed corporate Seal of the Company by facsimiles pursuant to the action of the Board of Directors of the Company,

this 30th day of September 2016




My commission expires June 27, 2024
Notary Public




Brian W. Bolash, Secretary



State of West Virginia
Agency Request for Quote

Proc Folder: 1789701

Doc Description: Perimeter Security Fence Project

Reason for Modification:

Addendum No. 1:

Proc Type: Agency Purchase Order

Date Issued

Solicitation Closes

Solicitation No

Version

2025-10-01

2025-10-06 10:30

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2

BID RECEIVING LOCATION

VENDOR

Vendor Customer Code:

V50000042345

Vendor Name:

Meadow Ridge Ranch Constr.

Address:

P.O. Box 36

Street:

City:

Kenna

State:

WV

Country:

USA

Zip:

25248

Principal Contact:

ANGIE HARLESS

Vendor Contact Phone:

304-549-2537

Extension:

FOR INFORMATION CONTACT THE BUYER

Philip K Farley

(304) 549-1050

philip.k.farley@wv.gov

Vendor
Signature X

Angie Harless

FEIN#

87-4836370

DATE

OCT 2, 2025

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

ADDITIONAL INFORMATION

The West Virginia Division of Corrections and Rehabilitation (DCR) is soliciting bids on behalf of Gene Spadaro Juvenile Center (GSJC), to establish a contract for a lump sum quotation for the perimeter security fence project. The facility is located at 106 Martin Drive, Mt. Hope, WV 25880 in Fayette County.

INVOICE TO		SHIP TO	
DIVISION OF CORRECTIONS - CENTRAL OFFICE 1124 SMITH STREET SECOND FLOOR CHARLESTON WV US		GENE SPADARO JUVENILE CENTER 106 MARTIN DR MT HOPE WV US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Total Bid Amount				\$53,812.00


Comm Code	Manufacturer	Specification	Model #
72154013	Master Helco	30" Super Maze Reinforced Concertina	

Extended Description:

Perimeter Security Fence Project

SCHEDULE OF EVENTS

Line	Event	Event Date
2	Mandatory Pre-Bid Meeting at 10:00 AM E.S.T.	2025-09-22
3	Deadline for Questions Due is 2:00 PM E.S.T.	2025-09-29
4	Bid Due By 10:30 AM E.S.T.	2025-10-06

	Document Phase	Document Description	Page 3
DCR2600000024	Final	Perimeter Security Fence Project	 \$53,812.00

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

Meadow Ridge Construction



project.

10/11

H/N

Attach additional pages if necessary
Revised 4/29/2024

Revised 4/29/2024

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.

Angie Harless Sales Manager Meadow Ridge Constr.
(Name, Title)
Angie Harless Sales Manager
(Printed Name and Title)
P. O. Box 36 Kenma WV 25248
(Address)
304-549-2537
(Phone Number) / (Fax Number)
angie@meadowridgeconstruction
(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 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..

Meadow Ridge Construction
(Company)
Angie Harless Sales Manager
(Authorized Signature) (Representative Name, Title)
Angie Harless 10-1-2025
(Printed Name and Title of Authorized Representative) (Date)
10-1-2025
(Date)
304-549-2537
(Phone Number) (Fax Number)
angie@meadowridgeconstruction
(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 addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> 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.

Meadow Ridge Ranch Construction

Company

Angelo Hanken

Authorized Signature

Oct 1, 2025

Date

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

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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: Angie Harker

Telephone Number: 304-549-2537

Fax Number: N/A

Email Address: Angie@meadowridge.construction

END OF SPECIFICATIONS



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

STATE OF WEST VIRGINIA,

COUNTY OF Jackson, TO-WIT:

I, Chris Deweese after being first duly sworn, depose and state as follows:

1. I am an employee of Meadow Ridge Ranch Construction LLC. Dba Meadow Ridge Fence Co. and
(Company Name)
2. I do hereby attest that Meadow Ridge Ranch Construction LLC. Dba Meadow Ridge Fence Co.
(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 Chris Deweese

Signature: [Signature]

Title: Owner

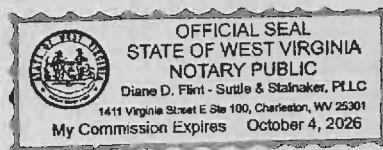
Company Name Meadow Ridge Ranch Construction LLC. Dba Meadow Ridge Fence Co.

Date 09/08/2025

Taken, subscribed and sworn to before me this 8th day of September, 2025.

By Commission expires Oct. 4, 2026

(Seal)



[Signature]
(Notary Public)



CONTRACTOR LICENSE

AUTHORIZED BY THE
West Virginia Contractor
Licensing Board

NUMBER: WV061567

CLASSIFICATION:

GENERAL BUILDING
MANUFACTURED HOME INSTALLATION
PLUMBING
SPECIALTY

MEADOW RIDGE RANCH CONSTRUCTION LLC
DBA MEADOW RIDGE CONSTRUCTION
PO BOX 36
KENNA, WV 25248

DATE ISSUED

FEBRUARY 23, 2025

EXPIRATION DATE

FEBRUARY 23, 2026

Authorized Signature

Chair, West Virginia Contractor
Licensing Board



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.

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Meadow Ridge Ranch Construction, LLC

2 Business name/disregarded entity name, if different from above

Meadow Ridge Construction

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☒ Individual/sole proprietor or single-member LLC

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

1045 Divide Ridge Rd

Requester's name and address (optional)

6 City, state, and ZIP code

Given WV 25245

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

8 7 4 8 3 6 3 7 0

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

Date ►

11-1-2024

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/15/2025

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. 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).

PRODUCER Garlow Insurance Agency, Inc. P O Box 5052 Charleston WV 25361		CONTACT NAME: Tony Lucas, Agent PHONE (A/C, No, Ext): (304)347-8972, Ext. 2043 FAX (A/C, No): (304)347-8973 E-MAIL: tlucas@garlowinsurance.com ADDRESS:
INSURED Meadow Ridge Ranch Construction, LLC 1045 Divide Ridge Rd Given WV 25245		INSURER(S) AFFORDING COVERAGE INSURER A: Erie Insurance Company NAIC # 26263 INSURER B: Erie Insurance Property & Casualty Company 26830 INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	Y	Q61-0165932	02/16/2025	02/16/2026	EACH OCCURRENCE \$ 1,000,000.00
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000.00					
	MED EXP (Any one person) \$ 5,000.00					
	PERSONAL & ADV INJURY \$ 1,000,000.00					
GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:						GENERAL AGGREGATE \$ 2,000,000.00
						PRODUCTS - COMP/OP AGG \$ 2,000,000.00
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$
	BODILY INJURY (Per person) \$					
	BODILY INJURY (Per accident) \$					
	PROPERTY DAMAGE (Per accident) \$					
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE	Y	Q26-6670039	02/16/2025	02/16/2026	EACH OCCURRENCE \$ 1,000,000.00
	DED RETENTION \$					AGGREGATE \$ 1,000,000.00
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> Y <input type="checkbox"/> N/A	Q86-6700333	02/17/2025	02/17/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	E.L. EACH ACCIDENT \$ 500,000.00					
	E.L. DISEASE - EA EMPLOYEE \$ 500,000.00					
	E.L. DISEASE - POLICY LIMIT \$ 500,000.00					
A	CRIME/EMPLOYEE DISHONESTY	Y	Q61-0165932	02/16/2025	02/16/2026	EMPLOYEE DISHONESTY \$25,000.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

City of Charleston
501 Virginia Street East

Charleston.

WV 25301

Fax:

Email:

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ACORD 25 (2016/03)

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**WEST VIRGINIA
STATE TAX DEPARTMENT
BUSINESS REGISTRATION
CERTIFICATE**

ISSUED TO:
**MEADOW RIDGE RANCH CONSTRUCTION, LLC
DBA MEADOW RIDGE CONSTRUCTION
1045 DIVIDE RIDGE RD
GIVEN, WV 25245-8272**

BUSINESS REGISTRATION ACCOUNT NUMBER: 2419-1731

This certificate is issued on: **02/08/2022**

*This certificate is issued by
the West Virginia State Tax Commissioner
in accordance with Chapter 11, Article 12, of the West Virginia Code.*

*The person or organization identified on this certificate is registered
to conduct business in the State of West Virginia at the location above.*

This certificate is not transferrable and must be displayed at the location for which issued.
This certificate shall be permanent until cessation of the business for which the certificate of registration was granted or until it is suspended, revoked or cancelled by the Tax Commissioner.

Change in name or change of location shall be considered a cessation of the business and a new certificate shall be required.

TRAVELING/STREET VENDORS: Must carry a copy of this certificate in every vehicle operated by them.
CONTRACTORS, DRILLING OPERATORS, TIMBER/LOGGING OPERATIONS: Must have a copy of this certificate displayed at every job site within West Virginia.

Meadow Ridge Constr;
P.O. Box 36
Kenner, WI 53248

Sealed Bid Gene Spadaro Juvenile Center Penmet Sec. Pen
Div of Administrative Services Page

1124 Smith Street Suite 2100
Chas. WI 53301

Meadow Ridge Construct

Buyer: Philip Ferley

Solict. #: ARFA 0608 DER 0000000024

10:30 AM Oct 6, 2025

Fax # 309-957-7622

