

ADDITIONAL INFORMATION

The West Virginia Division of Corrections and Rehabilitation (DCR) is soliciting bids 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 the Mount Olive Correctional Complex and Jail, 1 Mountainside Way, Mount Olive, West Virginia 25185 in Fayette County.

INVOICE TO		SHIP TO	
MT OLIVE CORRECTIONAL CENTER ONE MOUNTAINSIDE WAY		DIVISION OF CORRECTIONS	
MT OLIVE WV		MT OLIVE CORRECTIONAL CENTER 1 MOUNTAINSIDE WAY	
US		MT OLIVE WV US	

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

Comm Code	Manufacturer	Specification	Model #
72151201			

Extended Description:
Equipment and Systems Maintenance and Repairs Contract

SCHEDULE OF EVENTS

<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	Non-Mandatory Pre-Bid Meeting at 10:00 AM E.S.T.	2024-12-09
2	Deadline for Questions Due is 2:00 PM E.S.T.	2024-12-11
3	Bid Due By 10:30 AM E.S.T.	2024-12-18

	Document Phase	Document Description	Page
DCR250000061	Final	Equipment and Systems Maintenance and Repairs at MOCCJ	3

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

Mount Olive Correctional Complex and Jail

ARFQ 0608 DCR250000061 - 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	\$ 9,750.00	\$ 19,500.00

Subtotal A: \$19,500.00

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	\$ 105.00	\$ 10,500.00
Overtime Labor Rate	Hour	16	\$ 142.00	\$ 2,272.00
Holiday Labor Rate	Hour	8	\$ 164.00	\$ 1,312.00
Emergency Labor Rate	Hour	8	\$ 143.00	\$ 1,144.00

Subtotal B: \$ 15,228.00

New Equipment, Devices, and Parts Markup Percentage Quote	Estimated New Equipment, Devices, and Parts Markup Percentage Cost **	New Equipment, Devices, and Parts Markup Percentage	New Equipment, Devices, and Parts Markup Percentage Extended Amount
Parts	\$20,000.00	20%	\$ 24,000.00

Subtotal C: \$ 24,000.00

OVERALL COST (by adding subtotals A, B, and C) \$ 58,728.00

Bidder/Vendor Information:	
Name:	TRI-STATE ROOFING & SHEET METAL CO OF WV
West Virginia Contractors License	WV000104
Address:	PO BOX 1231 CHARLESTON, WV 25324
Phone No.:	304-755-8135
Fax No.:	304-755-575
Email Address:	CHARLESTON@TRI-STATESERVICE.COM
Authorized Signature	

NOTES:

* Quantities are estimated for bid evaluation purposes only.

** Estimated cost for bid evaluation purposes only.

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.

TRI-STATE ROOFING & SHEET METAL CO OF WV

Company



Authorized Signature

12/18/2024

Date

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

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.

SAM CLEAVENGER, HVAC SERVICE MANAGER

(Name, Title)

SAM CLEAVENGER, HAC SERVICE MANAGER

(Printed Name and Title)

PO BOX 1231 CHARLESTON, WV 25324

(Address)

304-755-8135/ 304-755-5275

(Phone Number) / (Fax Number)

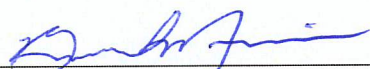
CHARLESTON@TRI-STATESERVICE.COM

(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 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..

TRI-STATE ROOFING & SHEET METAL CO OF WV

(Company)



(Authorized Signature) (Representative Name, Title)

BRANDON C MERRIMAN, VICE PRESIDENT 12/18/2024

(Printed Name and Title of Authorized Representative) (Date)

12/18/2024

(Date)

304-755-8135/ 304-755-5275

(Phone Number) (Fax Number)

BMERRIMAN@TRI-STATESERVICE.COM

(Email Address)



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

I, BRANDON C MERRIMAN, after being first duly sworn, depose and state as follows:

1. I am an employee of TRI-STATE ROOFING & SHEET METAL CO OF WV; and,
(Company Name)
2. I do hereby attest that TRI-STATE ROOFING & SHEET METAL CO OF WV
(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: BRANDON C MERRIMAN

Signature: 

Title: VICE PRESIDENT

Company Name: TRI-STATE ROOFING & SHEET METAL CO OF WV

Date: 12/18/2024


STATE OF WEST VIRGINIA,

COUNTY OF PUTNAM, TO-WIT:

Taken, subscribed and sworn to before me this 18 day of DECEMBER, 2024.

By Commission expires MARCH 12, 2029

(Seal)


(Notary Public)



ARFQ 0608 DCR2500000061
REQUEST FOR QUOTATION
EQUIPMENT AND SYSTEMS MAINTENANCE AND REPAIRS CONTRACT
MOUNT OLIVE CORRECTIONAL COMPLEX AND JAIL

1.15 CONTRACTOR DEFAULT:

- A. The following shall be considered a Contractor default under this Contract.
- 1) Failure to perform Contract Services in accordance with the requirements contained herein.
 - 2) Failure to comply with other specifications and requirements contained herein.
 - 3) Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.
 - 4) Failure to remedy deficient performance upon request.

1.16 CONTRACT MANAGER:

- 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.

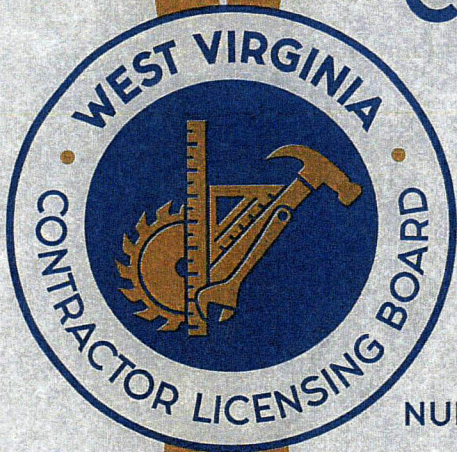
Contract Manager: SAM CLEAVENGER

Telephone Number: 304-755-8135

Fax Number: 304-755-5275

Email Address: CHARLESTON@TRI-STATESERVICE.COM

END OF SPECIFICATIONS



CONTRACTOR LICENSE

AUTHORIZED BY THE
West Virginia Contractor
Licensing Board

NUMBER: WV000104

CLASSIFICATION:

HEATING, VENTILATING & COOLING
SPECIALTY
ROOFING
CRANE

TRI STATE ROOFING & SHEET METAL CO
DBA TRI STATE ROOFING & SHEET METAL CO
PO BOX 1231
CHARLESTON, WV 25324-1231

DATE ISSUED

AUGUST 01, 2024

EXPIRATION DATE

AUGUST 01, 2025

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.