Solicitation Response(SR) Dept: 0310 ID: ESR09202100000001960 Ver.: 1 Function: New

Modified by batch, 09/21/2021

304-532-3659

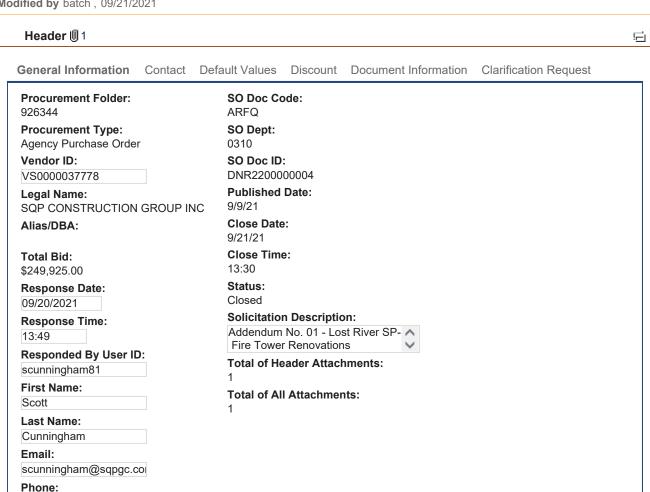


Exhibit A - Pricing Page

REQUEST FOR QUOTATION

West Virginia Division of Natural Resources - Parks and Recreation Section Rehabilitation and Renovation of Fire Tower at Lost River State Park (Rebid)

Name of Vendor:	SQP CONSTRUCTION GROUP INC.
Address of Vendor:	281 SMILEY DRIVE ST. ALBANS, WV 25177
Phone Number of Vendor:	304-741-4300

We, the undersigned, having examined the site and being familiar with the local conditions affecting the cost of the work and also being familiar with the general conditions to vendors, drawings, and specifications, hereby proposes to furnish all materials, equipment, and labor to complete all work in a workmanlike manner, as described in the Bidding documents.

Total Bid

The Total Bid shall consist of construction of the facility and related work described in the drawings and specifications. **Total Bid** shall be indicated in the space below.

Total Bid: Lump sum for all labor, materials, and equipment as stipulated in the Bidding Documents, *written in figures*.

\$249,925.00

Total Bid: Lump sum for all labor, materials, and equipment as stipulated in the Bidding Documents, *written in words*.

Two Hundred Forty Nine Thousand, Nine Hundred Twenty Five Dollars

BID BOND

	KNOW ALL MEN BY THESE PRES	SENTS, That we	e, the undersigned	SQP Co	nstructio	n Group	o, Inc
of							demnity Insurance Company
	Bala Cynwyd			-			r the laws of the State of
	with its principal office in t						
	Virginia, as Obligee, in the penal sur						
well and	truly to be made, we jointly and sev	erally bind ours	elves, our heirs, a	dministrato	ors, execut	tors, succ	cessors and assigns.
-	The Condition of the above obligation of Administration a certain bid or over Fire Tower Renovation	r proposal, atta	ched hereto and m	nade a part	hereof, to	enter in	
the agre full force event, e	I hereto and shall furnish any other ement created by the acceptance of a and effect. It is expressly underst exceed the penal amount of this oblig The Surety, for the value received, paired or affected by any extension	oted and the P bonds and insu f said bid, then tood and agreed pation as herein	rance required by this obligation sha it that the liability of stated.	the bid or il be null a of the Sure	proposal, nd void, o ety for any ations of s	and shal therwise and all said Sure	this obligation shall remain in claims hereunder shall, in no try and its bond shall be in no
waive n	otice of any such extension.						
	WITNESS, the following signatures						
Surety,	or by Principal individually if Principa	al is an individua	al, this 21st d	lay of	Septerni	ber	<u>, 2021</u> .
Principa	il Seal			SQP (Must b	(Name	oup, Inc. of Principal) ent, Vice President, or norized Agent)
Surety S	Seal			Ву:	delphia Ir	(Name	y Insurance Company of Syrety)

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.

PHILADELPHIA INDEMNITY INSURANCE COMPANY One Bala Plaza, Suite 100 Bala Cynwyd, PA 19004-0950

Power of Attorney

KNOW ALL PERSONS BY THESE PRESENTS: That PHILADELPHIA INDEMNITY INSURANCE COMPANY (the Company), a corporation organized and existing under the laws of the Commonwealth of Pennsylvania, does hereby constitute and appoint <u>Douglas P. Taylor</u>, <u>Andrew K. Teeter</u>, <u>Kimberly L. Miles</u>, <u>and Tammy S. Selbe of USI insurance Services</u>, <u>LLC</u> its true and lawful Attorney-in-fact with full authority to execute on its behalf bonds, undertakings, recognizances and other contracts of indemnity and writings obligatory in the nature thereof, issued in the course of its business and to bind the Company thereby, in an amount not to exceed \$50,000,000.000.000.

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of PHILADELPHIA INDEMNITY INSURANCE COMPANY on the 14th of November, 2016.

RESOLVED:

That the Board of Directors hereby authorizes the President or any Vice President of the Company: (1) Appoint Attorney(s) in Fact and authorize the Attorney(s) in Fact to execute on behalf of the Company bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof and to attach the seal of the Company thereto; and (2) to remove, at any time, any such Attorney-in-Fact and revoke the authority given. And, be it

FURTHER RESOLVED:

That the signatures of such officers and the seal of the Company may be affixed to any such Power of Attorney or certificate relating thereto by facsimile, and any such Power of Attorney so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the Company in the future with respect to any bond or undertaking to which it is attached.

IN TESTIMONY WHEREOF, PHILADELPHIA INDEMNITY INSURANCE COMPANY HAS CAUSED THIS INSTRUMENT TO BE SIGNED AND ITS CORPORATE SEALTO BE AFFIXED BY ITS AUTHORIZED OFFICE THIS 27TH DAY OF OCTOBER, 2017.



(Seal)

Hoemmag

Robert D. O'Leary Jr., President & CEO Philadelphia Indemnity Insurance Company

On this 27th day of October, 2017, before me came the individual who executed the preceding instrument, to me personally known, and being by me duly sworn said that he is the therein described and authorized officer of the PHILADELPHIA INDEMNITY INSURANCE COMPANY; that the seal affixed to said instrument is the Corporate seal of said Company; that the said Corporate Seal and his signature were duly affixed.

COLUMN TALTH OF PENNEYS WANTE NOTATION DEAL Margan Krages Notary Public Longs Narran Tag. Managarary County	Notary Public:	Moreyan Knopp				
My Commission Elipses Dept. 25, 2211 Vicint P. N. Vigitoniand Schutter of Actual	residing at:	Bala Cynwyd, PA				
(Notary Seal)	My commission expires:	September 25, 2021				
Simples and the Bonne of Atton	ney issued pursuant thereto on t executed the Power of Attorney	DEMNITY INSURANCE COMPANY he 27th day of October, 2017 are true are as President, was on the date of execut	nd correct a	ind are still in tull torce a	na enect. 1 a	to further certify
n Testimony Whereof I have sub	scribed my name and affixed the	he facsimile seal of each Company this		day of	, 20	P
And the second	*	ELSON				

Edward Sayago, Corporate Secretary
PHILADELPHIA INDEMNITY INSURANCE COMPANY

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.

Donald O. Gatewood, President	
(Name, Title) Donald O. Gatewood, President	
(Printed Name and Title)	
281 Smiley Drive, St. Albans, WV 25177	
(Address) 304-741-4300	
(Phone Number) / (Fax Number)	
dgatewood@sqpgc.com	
(email address)	

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

SQP Construction Group Inc.
(Company)
111 1000
(Authorized Signature) (Representative Name, Title)
Donald O. Gatewood, President
(Printed Name and Title of Authorized Representative)
September 20, 2021
(Date)
304-741-4300
(Phone Number) (Fax Number)

REQUEST FOR QUOTATION

West Virginia Division of Natural Resources – Parks and Recreation Section Rehabilitation & Renovation of the Fire Tower at Lost River State Park (Rebid)

- 9.4.2 Final Inspection: Vendor shall participate in a final inspection with the Agency's project manager. The purpose of the final inspection will be to identify deficiencies that need to be remedied prior to Agency's final acceptance of the work. Vendor shall at all times be obligated to perform in accordance with the Contract and must take all actions necessary to ensure that work complies with requirements of Contract prior to final acceptance. Final acceptance does not waive or release Vendor from its obligation to ensure that work complies with the Contract requirements. Vendor shall submit any warranty documents to the Agency project manager at final inspection.
- 9.4.3 Final Payment: Upon satisfactory completion of the project the vendor will provide the Agency with an "Affidavit of Debts and Claims" on a form prescribed by the Agency prior to release of any retainage or final payment.
- 10. FACILITIES ACCESS: Performance of Contract Services may require access cards and/or keys to gain entrance to Agency's facilities. In the event that access cards and/or keys are required: Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
 - 10.2 Vendor will be responsible for controlling cards and keys and will pay replacement fee if the cards or keys become lost or stolen.
 - 10.3 Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
 - 10.4 Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
 - 10.5 Vendor shall inform all staff of Agency's security protocol and procedures.

11. MISCELLANEOUS:

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

Contract Manager:	Donald O. Gatewood	
Telephone Number:	304-741-4300	
Fax Number:		
Email Address:	dgatewood@sqpgc.com	

STATE OF WEST VIRGINIA Purchasing Division

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 §5A-3-10a, 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: SQP Construction Group Inc.	1	
Authorized Signature:	President	Date:September 20, 2021
State of West Virginia		
County of Putnam to-wit:		
Taken, subscribed, and sworn to before me this 20 da	y of September	, 20 <mark>21</mark> .
My Commission expires May 24	, 20_26	4
AFFIX SEAL HERE	NOTARY PUBLIC	AS
		Purchasing Affidavit (Revised 01/19/2018)

OFFICIAL SEAL
NOTARY PUBLIC
STATE OF WEST VIRGINIA
Scott Cunningham
SOP Construction Group Inc.
281 Smiley Drive
St. Albans W 25177
My Commission Expires May 24, 2026

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: ARFQ DNR22*04

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.

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(Check the box next to each addendum received)

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

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.

SOP	Constru	than	Group	Inc.
Company			2	
Authorized Signatu	M	fre.	Dent	
Authorized Signatu	ire	E	C	
Septe	em ber	20.	2021	
Date				

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



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

STATE OF WEST VIRGINIA, COUNTY OF Putnam, TO-WIT: I, Donald O. Gatewood , after being first duly sworn, depose and state as follows: I am an employee of ___SQP Construction Group Inc. 1. (Company Name) I do hereby attest that <u>SQP Construction Group Inc.</u> 2. (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: Donald O. Gatewood Signature: Title: President Company Name: SQP Construction Group Inc. Date: September 20, 2021 Taken, subscribed and sworn to before me this ____day of _September By Commission expires May 24, 2026 (Seal)

OFFICIAL SEAL
NOTARY PUBLIC
STATE OF WEST VIRGINIA
Scott Cunningham
SQP Construction Group inc.
281 Smiley Drive
St. Albans WY 25177
My Commission Expires May 24, 2026

Rev. July 7, 2017