



Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
 Charleston, WV 25305-0130

State of West Virginia  
 Solicitation Response

(10)

Proc Folder : 238522

Solicitation Description : STONE, AGGREGATE, CINDERS - MAT.&DEL. TO NON-ESTAB. LOCATION

Proc Type : Agency Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2016-11-09 13:00:00	SR 0803 ESR11081600000002017	1

VENDOR
000000173077 LETART CORPORATION INC

Solicitation Number: ARFQ 0803 DOT1700000009

Total Bid : \$0.00      Response Date: 2016-11-08      Response Time: 13:45:18

Comments:

**FOR INFORMATION CONTACT THE BUYER**  
 Angela Moorman  
 (304) 558-9427  
 angie.j.moorman@wv.gov

Signature on File      FEIN #      DATE

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	STONE, AGGREGATE, CINDERS - MAT.&DEL. TO NON-ESTAB.	0.00000	TON	\$0.000000	\$0.00

Comm Code	Manufacturer	Specification	Model #
11111600			

Extended Description : STONE, AGGREGATE, CINDERS - MAT.&DEL. TO NON-ESTAB. LOCATION



State of West Virginia  
Request For Quotation  
Highways

Procurement Folder : 238522

Document Description : STONE, AGGREGATE, CINDERS - MAT.&DEL. TO NON-ESTAB. LOCATION

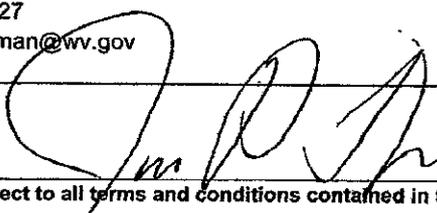
Procurement Type : Agency Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version	Phase
2016-10-18	2016-11-09 13:00:00	ARFQ 0803 DOT1700000009	1	Final

SUBMIT RESPONSES TO:	VENDOR
FINANCE & ADMINISTRATION DIVISION OF HIGHWAYS BLDG 5, RM A-220 1900 KANAWHA BLVD E CHARLESTON WV 25302 US	Vendor Name, Address and Telephone

FOR INFORMATION CONTACT THE

Angela Moorman  
(304) 558-9427  
angie.j.moorman@wv.gov

Signature X 

FEIN # 31-1349675

DATE 11/7/16

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

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		STATE OF WEST VIRGINIA VARIOUS LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Commodity Line Description	Qty	Unit Issue	Unit Price	Total Price
1	STONE, AGGREGATE, CINDERS - MAT.&DEL. TO NON-ESTAB.	0.00000	TON		

Commodity Code	Manufacturer	Model #	Specification
11111600			

**Extended Description**  
STONE, AGGREGATE, CINDERS - MAT.&DEL. TO NON-ESTAB. LOCATION

SCHEDULE OF EVENTS		
Line	Event	Event Date
1	Technical Question editing date	2016-10-21

<b>DOT1700000009</b>	<b>Document Phase</b> Final	<b>Document Description</b> STONE, AGGREGATE, CINDERS - MAT.&DEL. TO NON-ESTAB. LOCATION	<b>Page 3</b> <b>of 3</b>
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: ARFQ 0803 DOT170000009**

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.

Letart Corporation  
Full Company Name

  
Authorized Signature

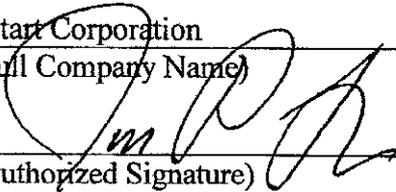
11/8/2016  
Date

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

**CERTIFICATION AND SIGNATURE PAGE**

By signing below, or submitting documentation through the West Virginia Vendor Self Service Portal website, 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.

Letart Corporation  
(Full Company Name)

  
(Authorized Signature)

Jon P. Thompson  
(Print or Type Name and Title of Signatory)

304-675-7516  
(Phone Number)

304-675-5388  
(Fax Number)

sandandgravel@zoomnet.net  
(Email address)

11/8/2016  
(Date)

**Form pre-approved by DOH legal division on July 12, 2016.  
Attorney signature not required.**

**REQUEST FOR QUOTATION**  
**Stone, Aggregate and Cinders**  
**Materials and Delivery by the Vendor to Non-Established WVDOH Locations**

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- 8.2 The following remedies shall be available to Agency upon default.
- 8.2.1 Immediate cancellation of the Contract.
  - 8.2.2 Immediate cancellation of one or more delivery orders issued under this Contract.
  - 8.2.3 Any other remedies available in law or equity.

**9. MISCELLANEOUS:**

- 9.1 **No Substitutions:** Vendor shall supply only Contract Items submitted in response ion unless a contract modification is approved in accordance with the provisions contained in this Contract.
- 9.2 **Vendor Supply:** Vendor must carry sufficient inventory of the Contract Items being offered to fulfill its obligations under this Contract. By signing its bid, Vendor certifies that it can supply the Contract Items contained in its bid response.
- 9.3 **Reports:** Vendor shall provide quarterly reports and annual summaries to the Agency showing the Agency's items purchased, quantities of items purchased and total dollar value of the items purchased. Vendor shall also provide reports, upon request, showing the items purchased during the term of this Contract, the quantity purchased for each of those items and the total value of purchases for each of those items. Failure to supply such reports may be grounds for cancellation of this contract.
- 9.4 **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: Jon P. Thompson**  
**Telephone Number: 304-675-7516**  
**Fax Number: 304-675-5388**  
**Email Address: sandandgravel@zoomnet.net**

**INFORMATION ATTACHMENT**

**Vendor's Storage Sites**

**2016/2017 Stone and Aggregate - Materials and Delivery by Vendor to Non-Established WVDOH Locations**

VENDOR NAME \_\_ Letart Corporation

**Mandatory - Vendor shall complete this form and return with bid submission.**

**A Vendor may submit more than one Vendor's Storage Sites information on one Information Attachment form ONLY if bid pricing is the SAME for all Storage Sites and all WVDOH locations bid. A separate bid submission and Information Attachment form MUST be submitted when bid price varies between Vendor's Storage Sites.**

**Limestone, Sandstone, Gravel, Sand, Blast Furnance Slag and Steel Slag**

a) SOURCE OF MATERIAL ( <u>all</u> sources for which bid prices apply (e.g., Quarry location if Sandstone or Limestone; dredging or pit location if Gravel; production plant name and location if Slag)
Letart Corporation, Plant #1, Gallipolis Ferry, WV
Mountain Materials, Valley Quarry, Olive Hill, KY
Mountain Materials, Brushy Quarry, Carter, KY
Melvin Stone, Waterloo Quarry, Oak Hill, OH
Latham Limestone, Latham Quarry, Latham, OH
b) EXACT LOCATION OF VENDOR'S STORAGE SITE(S): A separate bid schedule <b>must</b> be submitted when bid price varies between Vendors' storage sites.
Letart Corporation, Plant #1, 10298 Huntington Road, Gallipolis Ferry, WV 25515

<b>Cinders</b>
c) SOURCE OF MATERIAL: Name and Location of plant which produces Cinder material.
d) EXACT LOCATION OF VENDOR'S STORAGE SITE(S) A separate bid schedule <b>must</b> be submitted when bid price varies between Vendors' storage sites.

Material and delivery by the Vendor to Non-Established WVDOH locations, ONLY.

		Bid Price per Ton Items A-W and AA F.O.B. Vendor's Storage Site		
Contract Item	Description of Material	Limestone, Sandstone, Gravel, Sand	Blast Furnace Slag	Steel Slag
A	Class 1 Aggregate	22.00		
B	Class 2 Aggregate			
C	Class 10 Aggregate			
D	AASHTO #1 Aggregate	22.25		
E	AASHTO #3 Aggregate			
F	AASHTO #4 Aggregate	22.25		
G	AASHTO #467 Aggregate			
H	AASHTO #57 Aggregate	23.50		
I	AASHTO #67 Aggregate			
J	AASHTO #7 Aggregate			
K	AASHTO #8 Aggregate	23.70		
L	AASHTO #9 Aggregate			
M	Stone for Gabions	23.00		
N	Fine Aggregate	6.00		
OA	Limestone Standard Abrasives			
OB	Sandstone Standard Abrasives			
PA	Limestone Modified Abrasives			
PB	Sandstone Modified Abrasives			
Q	Rip Rap	26.75		
R	Shot Rock			
S	AASHTO #8 Modified			
T	AASHTO #9 Modified			
U	Pea Gravel	8.00		
V	#11 Limestone Abrasives			
W	Quarry Waste			
AA	Cinders			
Items A-W and AA (Except for Q and R):				
X1	Haul by Vendor - First Ton-Mile	2.17		
X2	Haul by Vendor - Additional Ton-Mile	0.17		
Items Q and R ONLY:				
Y1	Haul by Vendor - First Ton-Mile			
Y2	Haul by Vendor - Additional Ton-Mile			

# State of West Virginia

## VENDOR PREFERENCE CERTIFICATE

Certification and application is hereby made for Preference in accordance with *West Virginia Code*, §5A-3-37. (Does not apply to construction contracts). *West Virginia Code*, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the *West Virginia Code*. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Vendor Preference, if applicable.

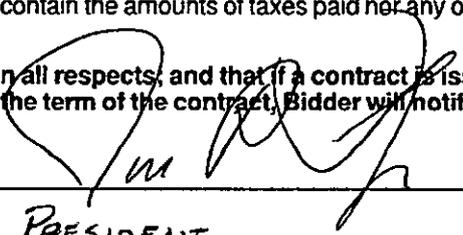
1. **Application is made for 2.5% vendor preference for the reason checked:**
  - Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
  - Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification;
  - Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; or,
  - Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
2. **Application is made for 2.5% vendor preference for the reason checked:**
  - Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
3. **Application is made for 2.5% vendor preference for the reason checked:**
  - Bidder is a nonresident vendor that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's bid; or,
4. **Application is made for 5% vendor preference for the reason checked:**
  - Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5. **Application is made for 3.5% vendor preference who is a veteran for the reason checked:**
  - Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
6. **Application is made for 3.5% vendor preference who is a veteran for the reason checked:**
  - Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
7. **Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with *West Virginia Code* §5A-3-59 and *West Virginia Code of State Rules*.**
  - Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) rescind the contract or purchase order; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Bidder hereby certifies that this certificate is true and accurate in all respects, and that if a contract is issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: LETART CORPORATION

Signed: 

Date: 11/8/16

Title: PRESIDENT

\*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.

STATE OF WEST VIRGINIA  
Purchasing Division

# PURCHASING AFFIDAVIT

**MANDATE:** 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 exceeds 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 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: LETART CORPORATION

Authorized Signature: [Signature] Date: 11/8/16

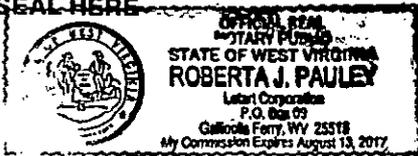
State of WV

County of Mason, to-wit:

Taken, subscribed, and sworn to before me this 8 day of November, 2016

My Commission expires August 13, 2017.

AFFIX SEAL HERE



NOTARY PUBLIC

[Signature: Roberta J. Pauley]

Purchasing Affidavit (Revised 08/01/2015)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/7/2016

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 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).

<b>PRODUCER</b> Jon W. Parrack II 809 Viand Street  Point Pleasant WV 25550	<b>CONTACT NAME:</b> Jon Parrack II <b>PHONE (A/C No. Ext):</b> (304) 675-4132 <b>E-MAIL ADDRESS:</b> parrackj1@nationwide.com	<b>FAX (A/C No.):</b> (304) 675-7836
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> LETART CORPORATION, INC PO BOX 430  GALLIPOLIS FERRY WV 25515-0430	<b>INSURER A:</b> Nationwide Mutual Insurance Company	<b>NAIC #</b> 23787N
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**      **CERTIFICATE NUMBER:** CL1611700037      **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	ADULT SUBR INSR 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  GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		ACP5735986230	5/1/2016	5/1/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPPOP AGG \$ 2,000,000 Multi Policy Disc \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE  <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

**CERTIFICATE HOLDER****CANCELLATION**

State of West Virginia  
 1900 Kanawha Blvd E  
 Charleston, WV 25305

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**

Stephanie Hart/HARTS1

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**Additional Named Insureds**

**Other Named Insureds**

THOMPSON & SONS, INC

Corporation, Additional Insured

## ADDITIONAL COVERAGES

Ref #	Description	Coverage Code	Form No.	Edition Date
	State surcharge 1	STSR1		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
				\$52.45
	Emp Pract Liab	EPLIC		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
100,000			5,000	Premium
	Schedule Mod Factor 1	SCH01		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
	Misc Property	MISC		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
				\$140.00
	Lrg Prem Disc	LPDP		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium