



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

State of West Virginia  
 Solicitation Response

Proc Folder : 716643  
 Solicitation Description : ADDENDUM #1  
 Proc Type : Agency Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2020-06-11 13:30:00	SR 0803 ESR06112000000007491	1

VENDOR
000000199783 FAIRFAX MATERIALS INC

Solicitation Number: ARFQ 0803 DOT2000000045

Total Bid : \$0.00                      Response Date: 2020-06-11                      Response Time: 09:44:47

Comments:

**FOR INFORMATION CONTACT THE BUYER**  
 Tina L Lewis  
 (304) 558-9398  
 tina.l.lewis@wv.gov

Signature on File	FEIN #	DATE
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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	EA		

Comm Code	Manufacturer	Specification	Model #
11111600			

**Extended Description :** STONE, AGGREGATE, CINDERS - MAT.&DEL. TO NON-ESTAB. LOCATION PER ATTACHED PRICING PAGE AND INFORMATION ATTACHMENT FORM











REQUEST FOR QUOTATION  
Stone and Aggregate Materials and Delivery by Vendor to Non-Established Locations

**10.4 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 shall provide and maintain the Agency with current email addresses, billing/payment addresses, phone numbers, fax numbers, and any changes to the Contract Manager during the life of the contract. Vendor should list its Contract Manager and his or her contact information below.

Contract Manager: Jim Eber  
Telephone Number: 301-777-1777/cell 301-268-7302  
Fax Number: \_\_\_\_\_  
Email Address: jim@aggmgt.com



2020-2021

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

		Bid Price per Ton Items A-W, Z and AA F.O.B. Vendor's Storage Site		
Contract Item	Description of Material	Limestone,	Blast Furnace	
		Gravel, Sand	Slag	Steel Slag
A	Class 1 Aggregate	12.50		
B	Class 2 Aggregate	12.50		
C	Class 10 Aggregate	12.50		
D	AASHTO #1 Aggregate			
E	AASHTO #3 Aggregate			
F	AASHTO #4 Aggregate	16.25		
G	AASHTO #467 Aggregate	16.45		
H	AASHTO #57 Aggregate	16.25		
I	AASHTO #67 Aggregate	16.25		
J	AASHTO #7 Aggregate			
K	AASHTO #8 Aggregate	16.25		
L	AASHTO #9 Aggregate	19.15		
M	Stone for Gabions	18.40		
N	Fine Aggregate	20.50		
OA	Limestone Standard Abrasives	13.80		
OB	Sandstone Standard Abrasives			
OC	Steel Slag for SRIC			
PA	Limestone Modified Abrasives	16.25		
PB	Sandstone Modified Abrasives			
Q	Rip Rap	18.50		
R	Shot Rock	12.95		
S	AASHTO #8 Modified	16.25		
T	AASHTO #9 Modified	19.15		
U	Pea Gravel			
V	#11 Limestone Abrasives			
W	Quarry Waste	9.75		
Z	Imbricated Stone	23.50		
AA	Cinders			
	Items A-W and AA (Except for Q, R and Z):			
X1	Haul by Vendor - First Ton-Mile	2.15		
X2	Haul by Vendor - Additional Ton-Mile	0.5		
	Items Q, R and Z ONLY:			
Y1	Haul by Vendor - First Ton-Mile	3.15		
Y2	Haul by Vendor - Additional Ton-Mile	0.5		

**Attachment B - INFORMATION FORM**

**Vendor's Storage Sites**

**Stone and Aggregate - Material and Delivery by Vendor to Non-Established Locations ONLY**  
Mandatory - Vendor shall complete this form and return with bid submission or bid will be Disqualified.

VENDOR NAME Fairfax Materials Inc.

Vendors should be sure to write their name on each Information Form AND their matching Pricing Pages.

Vendor may submit more than one Vendor Storage Sites information on ONE Information Form ONLY IF PRICING is the SAME for all Storage Sites & DOH locations bid. IF PRICING VARIES between Storage Sites, Vendor MUST submit a Separate Information Form.

**Information for LIMESTONE, SANDSTONE, GRAVEL, SAND, BLAST FURNACE SLAG, and STEEL SLAG:**

a) SOURCE OF MATERIAL - list all sources for which bid prices apply

(Sandstone/Limestone Quarry name & location; Gravel Dredging or pit name & location; Slag Production plant name & location)

Scherr Quarry, 704 Old Scherr Rd, New Creek, WV 26743	
Ours Quarry, 1996 Morgantown RD, Petersburg, WV 26847	
Thomas Plant(FINE AGGREGATE ONLY) 25128 Seneca Trails, Thomas, WV 26292	

b) EXACT LOCATION OF VENDOR'S STORAGE SITE(S):

Reminder: A separate bid schedule **must** be submitted when bid price varies between Vendor's storage sites.

Scherr Quarry, 704 Old Scherr Rd, New Creek, WV 26743	
Ours Quarry, 1996 Morgantown RD, Petersburg, WV 26847	
Thomas Plant(FINE AGGREGATE ONLY) 25128 Seneca Trails, Thomas, WV 26292	

**SOURCES for CINDERS only:**

c) SOURCE OF MATERIAL - Name and Location of plant which produces Cinder material:


d) EXACT LOCATION OF VENDOR'S STORAGE SITE(S):

Reminder: A separate bid schedule **must** be submitted when bid price varies between Vendor's storage sites.


Client#: 32334

LAURSAN

**ACORD™**

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)  
12/30/2019

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 any rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> CBIZ Insurance Svcs., Inc. 44 Baltimore Street Cumberland, MD 21502 301 777-1500	<b>CONTACT NAME:</b> Maria Mayles <b>PHONE (A/C, No, Ext):</b> 301 777-1500 <b>E-MAIL ADDRESS:</b> mmayles@cbiz.com	<b>FAX (A/C, No):</b> 855-288-6106													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Travelers Property Casualty Co of Am.</td> <td>25674</td> </tr> <tr> <td>INSURER B : RSUI Indemnity Co.</td> <td>22314</td> </tr> <tr> <td>INSURER C : Rockwood Casualty Insurance Company</td> <td>35505</td> </tr> <tr> <td>INSURER D : Travelers Prop. Cas. Co. of America</td> <td>25674</td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Travelers Property Casualty Co of Am.	25674	INSURER B : RSUI Indemnity Co.	22314	INSURER C : Rockwood Casualty Insurance Company	35505	INSURER D : Travelers Prop. Cas. Co. of America	25674	INSURER E :		INSURER F :
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**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 INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> BI/PD Ded:10000 GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		Y6300152L504TIL1	12/31/2019	12/31/2020	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 - COM/PO/ AGG \$2,000,000 \$
D	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY		8101L554122	12/31/2019	12/31/2020	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$		Y6300152L504TIL1	12/31/2019	12/31/2020	EACH OCCURRENCE \$15,000,000 AGGREGATE \$15,000,000 \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WC455854	12/31/2019	12/31/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
A	<b>Contr Equipment</b>		QT6600E360100	12/31/2019	12/31/2020	\$49,762,584 Limit 2% ded., \$1K minimum \$10K maximum

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Excess Liability (Insurer B) Policy #NHA085237; Eff 12/31/2019-12/31/2020; Limit: \$5,000,000.  
 CRFQ DOT 1800000026  
 State of West Virginia is Additional Insured

<b>CERTIFICATE HOLDER</b>  State of West Virginia 1900 Kanawha Blvd East, Bldg.5 Charleston, WV 25305	<b>CANCELLATION</b>  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 <i>Edward R. Seward</i>
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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 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: (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: Fairfax Materials Inc.

Authorized Signature:  Date: 6/10/2020


State of Maryland

County of Allegany, to-wit:

Taken, subscribed, and sworn to before me this 10<sup>th</sup> day of June, 2020.

My Commission expires December 15th, 2023.

AFFIX SEAL HERE

NOTARY PUBLIC 

Nicole Rea Stevens  
Notary Public  
Allegany County Maryland  
My Commission Expires  
December 15, 2023

STATE OF WEST VIRGINIA  
Notary Public

NOTARIAL CERTIFICATE

I, the undersigned, a Notary Public for the State of West Virginia, do hereby certify that the foregoing instrument was duly executed and acknowledged before me on this 15th day of December, 2023, at the County of Mingo, State of West Virginia, by the person or persons named therein, and that the signers are duly qualified to execute the same.

I hereby certify that the foregoing instrument was duly executed and acknowledged before me on this 15th day of December, 2023, at the County of Mingo, State of West Virginia, by the person or persons named therein, and that the signers are duly qualified to execute the same.

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NOTARY PUBLIC

My Commission Expires

December 15, 2023

December 15, 2023

My Commission Expires

December 15, 2023

My Commission Expires

*[Signature]*

My Commission Expires

December 15, 2023

Nicole Ren Stevens  
Notary Public  
Mingo County, West Virginia  
My Commission Expires  
December 15, 2023