


Purchase Change Request			 Marshall University Office of Purchasing One John Marshall Drive Huntington, WV 25755-4100		Order # MU21HHCHILLER (P2101781)
FY 23	Buyer MW	Date 04/18/2023	Account	P.O. Date 05/10/2021	Contract MU21HHCHILLER
Document <input type="checkbox"/> Requisition (Cancellation only) <input type="checkbox"/> Regular Purchase Order <input type="checkbox"/> Contract Purchase Order <input checked="" type="checkbox"/> Open End Contract Purchase <input type="checkbox"/> Agreement			Document Action <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Cancellation <input checked="" type="checkbox"/> Increase/Decrease <input type="checkbox"/> Unused Balance <input type="checkbox"/> Freight <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Extension Error </div> <div> <input type="checkbox"/> Error in Total Amount <input type="checkbox"/> Change of Account <input type="checkbox"/> Change of Vendor Name/Address <input type="checkbox"/> Other </div> </div>		
Vendor Name, Address, Phone #, etc. Casto Technical Services Inc. 540 Leon Sullivan Way, PO Box 627 Charleston, WV 25322			Vendor Code 550539186		BOG Unit Name & Address Marshall University Office of Purchasing One John Marshall Drive Huntington, WV 25755-4100
Ph# 304-346-0549		Fax		FEIN# 550539186	
Item#	Quantity	Description of Change	Unit Price	Extended Price	
		<p style="text-align: center;">Change Order # <u>2</u></p> <p style="text-align: center;">CHILLER MAINTENANCE AND REPAIR</p> <p>To renew the contract according to all terms, conditions, and specifications contained in the original contract. To increase the yearly pricing agreement by 1.0% as contained in the proposal dated 04/18/2023.</p> <p>Effective date of renewal 05/01/2023 through 04/30/2024.</p> <p>Renewal # 2 of 4 Renewals Remaining: (2) two (1) year periods.</p>			
Reason for Change: TO RENEW CONTRACT AND INCREASE PRICING.			Previous Total	\$ OPEN-END	
			Increase	\$	
			Decrease	\$	
			New Total	\$ OPEN-END	

Approved:

Authorized Signature



Date

4/18/23

N/A

Attorney General if required

Date



April 17, 2023
Casto Technical Services Inc
540 Leon Sullivan Way, PO Box 627
Charleston, WV 25322
Re: Contract Renewal for MU21HHCHILLER (P2101781)

To Whom it May Concern-

The above referenced contract expires 04/30/2023. There is a provision for renewal upon written mutual agreement of the parties.

Please annotate on the bottom of this letter, with your signature and date, if you agree to extend contract
MU21HHCHILLER effective May 1, 2023 through April 30, 2024 under the same terms and conditions.

Please return the letter and the enclosures signed in the original to the noted below.

Marshall University Office of Purchasing
One John Marshall Drive
Huntington, WV 25755-4100

If you have any questions, please feel free to call me at 304-696-2598

Sincerely,

Rebecca Maynard
Purchasing Assistant III

I agree to extend the current contract #MU21HHCHILLER (P2101781) an additional one (1) year period under the same terms and conditions.

____ Yes ____ No

 X Yes, subject to the following changes indicated below or in the attached letter.

April Dunlap _____ 4/18/2023
Signature Date

April Dunlap _____
Printed Name

Sales Support _____
Title

Comments: _____



CASTO Technical Services

We make buildings work...Better!

Marshall University
Harless Hall
One John Marshall Drive
Huntington, WV 25755

April 18, 2023

RE: MU21HHCHILLER

It has been our pleasure serving you this past year. Our records indicate that your HVAC Maintenance Agreement will expire on **April 30, 2023**. Under the terms and conditions of your existing Agreement, the pricing is reviewed annually.

Based upon this annual review, we propose the following:

The current Agreement price is **\$24,261** billed in monthly payments of **\$2,021.75**. Casto Technical Services understands that these are tough economic times, and we are making every effort to control the costs for our valued customers. Inflation has affected us all. As of today, the cumulative rate of inflation is **6.04%**. Casto wants to be fair to our valued customers. Therefore, we are requesting a **1%** increase for your HVAC Maintenance Agreement Renewal.

With the proposed increase, the renewal price will be **\$24,504**, billed in monthly payments of **\$2,042**. The Renewal will begin **May 1, 2023**, and expire on **April 30, 2024**. The labor rate and Terms and Conditions of the agreement will remain the same.

We thank you for using Casto Technical Services as a vendor for your HVAC needs, and we look forward to continuing to serve you.

Sincerely,



Name: April Dunlap
Inside Sales Support


Authorized Signature

We Make Building Work...BETTER!!!

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: Casto Technical Services

Authorized Signature: April Dunlap Date: 4/18/2023

State of West Virginia

County of Raleigh, to-wit:

Taken, subscribed, and sworn to before me this 18th day of April, 2023.

My Commission expires May 15, 2028.

AFFIX SEAL HERE



NOTARY PUBLIC

Patricia A. Moya

Purchasing Affidavit (Revised 01/19/2018)

WV Number	Company	DBA	Address	City	State	Zip	County	Phone	Classification*	Expires
WV001241	CASIO TECHNICAL SERVICES INC	CASIO TECHNICAL SERVICES INC	PO BOX 627	CHARLESTON	WV	253220627	20	304-346-0549	A D F	8/13/2023

Records 1 to 1 of 1 Records

View Classifications

(Note if a classification letter or number appears above that is not listed below please email Licensing@wv.gov for more information or call 304-558-7890)

Vendor/Customer

Vendor/Customer	Legal Name	Alias/DBA	Vendor Active Status	Customer Active Status	Previous Name
000000202407	CASTO TECHNICAL SERVIC		Active	Inactive	
✓ 000000202408	CASTO TECHNICAL SERVICES INC		Active	Inactive	

From 1 to 2 of 2 First Prev Next Last [Attachments](#)Save [Undo](#) [Delete](#) [Insert](#) [Copy](#) [Paste](#) [Search](#)

▼ General Info

Vendor/Customer :	000000202408	Restrict Use by Department :	
Legal Name :	CASTO TECHNICAL SERVIC	Miscellaneous Account :	
Alias/DBA :		Internal Account :	
Vendor Active Status :	Active	Third Party Only :	
Vendor Approval Status :	Complete	Third Party Vendor :	
Customer Active Status :	Inactive	Third Party Customer :	
Customer Approval Status :	Incomplete	Inventory Customer :	
Location Name :		Healthcare Provider :	
First Name :		Never Archive :	
Middle Name :		Restrict VSS Access :	No
Last Name :		Discontinue - No New Business :	
Company Name :	CASTO TECHNICAL SERVIC	Prevent MA Reference :	
Previous Name :		PunchOut Enabled :	
Previous Street :		Re-PunchOut Enabled :	
Previous City :		Electronic Order Enabled :	
Previous State/Province :		W-9 Received :	
Previous Country :		W-9 Received Date :	
		W-8 Received :	
		W-8 Received Date :	
		Accepts Credit Cards :	
		Active From :	05/11/1983
		Active To :	
		Last Usage Date :	04/18/2023
		Department :	
		Unit :	

▼ Headquarters

Headquarters Account :	Yes	Web Address http:// :	
Headquarters Account Code :	000000202408	Catalog DUNS :	
Headquarters Account Legal Name :	CASTO TECHNICAL SERVIC	Catalog Extended DUNS :	
Franchise Account :		Catalog Unique Entity Identifier :	
		Taxpayer ID Number :	*****9186
		Taxpayer ID Number Type :	EIN

▼ Organization

Organization Type :	Company	1099 Indicator :	No
1099 Classification :	Corporation	1042-S Indicator :	No
1042-S Ch. 3 Recipient Code :		Taxpayer ID Number :	550539186
1042-S Ch. 4 Status Code :		Taxpayer ID Number Type :	EIN
Number of Employees :		Detailed TIN Type :	
Merchant ID :		Foreign Tax ID :	
Sex :		GIIN :	
Date of Birth :		1042-S Recipient Account Number :	
Marital Status :		W-8 Form :	
Annual Income :		Tax Profile :	NOTAX
IRS Country of Residence :		Tax Profile Name :	No Tax
IRS Country Sub Code :		EBIC Number :	
Contract Withholding Exempt :		IAEC Number :	
National Provider ID :		Web Address http:// :	
Assigning Authority :		Employee ID :	
CAGE Code :		Employee Status :	
Permanent Staffed Office in State :		Supplier Shared Secret :	

▼ Disbursement Options

Category :	DIRC	Hold Payment :	
Description :	Direct Payments	Hold Payment Authorized By :	
Default Type :	Check	Hold Payment Authorized On :	
Default Priority :	99	Hold Reason :	
Default Format :	REG		
Default Format Description :		Prevent New Spending :	
Scheduled Payment Day :		Prevent New Orders :	Not Active
Single Payment Indicator :		Third Party Code :	
Name on Check :	Legal Name	Third Party Name :	
Eligible for VCA Payments :		Third Party Approved By :	
VCA Effective From Date :		Third Party Approved On :	
VCA Effective To Date :			
VCA Primary Email :			
VCA Secondary Email :			

VCA Comments :

Third Party Reason :

Always Infer Third Party Vendor :
Third Party Address ID :



▼ Prenote/EFT

Generate EFT Payment : ☐

ABA Number :

Bank Name :

Account Type :

Account Number :

Routing ID Number :

Bank Phone Number :

Prenote Requested Date :

Prenote Return Reason :

Prenote Return Reason Message :

Foreign Correspondent Bank Name :

Foreign Correspondent Bank Branch Country Code :

Account Number Linkage to Provider Identifier :

Reason for Submission :

EFT Format :

EFT Format Description :

EFT Status :

Last Status Change :

EFT Status Description :

Prenote Return Reason Explanation :

W-9 Mailing Date : 07/31/2001

W-9 Response Date : 12/31/2001

▼ Remittance Advice

Remittance Advice Required :

Remittance Advice Format :

Remittance Advice Format Description :

Remittance Advice Transmission Mode :

▼ Vendor Terms

Number of Days 1 :

Number of Days 3 :

Discount Percent 1 :

Discount Percent 3 :

Discount Always 1 :

Discount Always 3 :

Number of Days 2 :

Number of Days 4 :

Discount Percent 2 :

Discount Percent 4 :

Discount Always 2 :

Discount Always 4 :

▼ Accounts Receivable

Default Receipt Type :

Default Billing Profile :

Cost Accounting Funding Type :

Credit/Debit Card Type :

Credit/Debit Card Number :

Name on Card :

Credit/Debit Card Expiration Month :

Credit/Debit Card Expiration Year :

Bill Headquarters :

Bankruptcy :

Central Statement BPRO :

Central Statement Billing Location :

Central Statement Address ID :

Suppress Central Statement :

Suppress Central Past Due Statement :

▼ eMALL

DUNS : 088908199

Extended DUNS :

Unique Entity Identifier :

Internet Catalog :

VSS Registered :

Preferred Ordering Method :

Pcard Acceptance Level :

Create Certification Document :

Vendor Preference Level : 99

▼ Location Information

*Verify My Locations by : Create My Own

Vendor Verification Based On : Migrated vendor accounts ha

Vendor Verification Password :

Send Activation Code :

Activation Email Address :

Activation Code :

Confirm Activation Code :

Requestor Name :

Requestor Phone Number :

Confirm Verifications :

► Fee and Vendor Compliance Holds

Fee Exempt : ☐

Registration Application Date : 04/08/2022

Registration Effective Date : 04/30/2022

Registration Expiration Date : 04/30/2023

Pre-Registration Code :

Tax Clearance :

Unemployment Insurance :

Worker's Compensation :

Secretary of State Registration :

Federal Debarred :

► Executive Compensation

▼ Additional Information

Miscellaneous Field 1 :

Miscellaneous Field 2 :

Miscellaneous Field 3 :

Miscellaneous Field 4 :

Miscellaneous Field 5 :

Miscellaneous Field 6 :

Miscellaneous Flag 1 :

Miscellaneous Flag 2 :

Miscellaneous Flag 3 :

Miscellaneous Field 7 :

▼ Travel

Traveler :

Travel Policy :

Allow Traveler Advances :

PCard ID :

▼ Change Management

Created By : conversion

Last Modified By : interface

Conversion User

interface User

Created On : 06/03/2014

Last Modified On : 12/02/2021

Last Approved By : interface

Comments : Renewal Payment by Credit Card on 4/16/15

Interface User

Last Approved On : 12/02/2021

Date Registered : 06/03/2014

[Top](#)

CREATE DOCUMENT> [Create New Record](#) [Modify Existing Record](#)

UPDATE> [Headquarters](#) [Add 1099 Information Entry](#) [Add 1042-S Reporting Information Entry](#) [Vendor Business Types By Commodity](#)

SEARCH BY> [Master Contacts](#) [Master Addresses](#) [Vendor Commodity](#) [Vendor Addresses](#) [Vendor Business Types](#) [Vendor Service Areas](#) [VCM Query](#) [Historical Vendor Information](#)

[Vendor Transaction History](#)

Client#: 535275

18CASTOTEC

ACORDTM**CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YYYY)
10/21/2022

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).

PRODUCER McGriff Insurance Services 300 Summers Street, Suite #650 Charleston, WV 25301 304 346-0806	CONTACT NAME: Janet Poling PHONE (A/C, No, Ext): 304 346-0806 FAX (A/C, No): 8887513002 E-MAIL ADDRESS: CertificatesVAWV@mcgriff.com	
	INSURER(S) AFFORDING COVERAGE	
INSURED Casto Technical Services Inc. P O Box 627 Charleston, WV 25322	INSURER A: Phoenix Insurance Company NAIC # 25623	
	INSURER B: Travelers Property Casualty Co of Amer 25674	
	INSURER C: Travelers Indemnity Co of CT 25682	
	INSURER D: The Cincinnati Insurance Company 10677	
	INSURER E: Charter Oak Fire Insurance Company 25615	
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 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 <input checked="" type="checkbox"/> XCU Included <input checked="" type="checkbox"/> Contractual Liab. GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X	X	CO7H238280	10/27/2022	10/27/2023	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
E	AUTOMOBILE LIABILITY <input checked="" 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	X	X	8106N9734012	10/27/2022	10/27/2023	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 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 <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$10,000	X	X	CUP8J31294A2	10/27/2022	10/27/2023	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	X	N/A	UB7J35462A22 Includes Employers 23-4-2	10/27/2022	10/27/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER EL. EACH ACCIDENT \$1,000,000 EL. DISEASE - EA EMPLOYEE \$1,000,000 EL. DISEASE - POLICY LIMIT \$1,000,000
D	Leased or Rented From Others			ENP0409411	10/27/2022	10/27/2023	\$100,000 Limit \$1,000 Deductible

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

** Workers Comp Information **

Other States Coverage

Proprietors/Partners/Executive Officers/Members Excluded:

H N Casto Jr, Officer

(See Attached Descriptions)

CERTIFICATE HOLDER**CANCELLATION**

Marshall University
125 Old Main
One John Marshall Drive
Huntington, WV 25755-4500

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

Gregory T. Gordon

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DESCRIPTIONS (Continued from Page 1)

Marshall University is included as an Additional Insured on the General Liability section of the policy as required by written contract.