

DATE: 7/23/2018

Page: 5

BID NO.: 50-00123661

BID FORM
Non Public Works

All Public Work Projects are required to use the Louisiana Uniform Public Work Bid Form

All prices must be held firm unless an escalation provision is requested in this bid. Jefferson Parish will allow one escalation during the term of the contract, which may not exceed the U.S. Bureau of Labor Statistics National Index for all Urban Consumers, unadjusted 12 month figure. The most recently published figure issued at the time an adjustment is requested will be used. A request must be made in writing by the vendor, and the escalation will only be applied to purchases made after the request is made.

Are you requesting an escalation provision?

YES _____ NO X

MAXIMUM ESCALATION PERCENTAGE REQUESTED _____%

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF Contract

For the purposes of comparison of bids when an escalation provision is requested, Jefferson Parish will apply the maximum escalation percentage quoted by the bidder to the period to which it is applied in the bid. The initial price and the escalation will be used to calculate the total bid price. It will be assumed, for comparison of prices only, that an equal amount of material or labor is purchased each month throughout the entire contract.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES _____

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 53760

THIS SECTION MUST BE COMPLETED BY BIDDER:

FIRM NAME: Boland Marine & Industrial, LLC

ADDRESS: 1000 Tchoupitoulas Street

CITY, STATE: New Orleans, LA ZIP: 70130

TELEPHONE: (504) 581-5800 FAX: (504) 581-5814

EMAIL ADDRESS: wlhaley@bolandmar.com

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: _____

NUMBER: _____

NUMBER: _____

NUMBER: _____

TOTAL PRICE OF ALL BID ITEMS: \$ 90,000.00

AUTHORIZED SIGNATURE: Walter Haley

Walter Haley

Printed Name

TITLE: Operations Manager

SIGNING INDICATES YOU HAVE READ AND COMPLY WITH THE INSTRUCTIONS AND CONDITIONS.

NOTE: All bids should be returned with the BID NUMBER and BID OPENING DATE indicated on the outside of the envelope submitted to the Purchasing Department.

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00123661

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	100.00	HR	MACHINE SHOP SERVICES FOR THE JEFFERSON PARISH DEPARTMENT OF PUBLIC WORKS DRAINAGE PUMP STATIONS & ALL JEFFERSON PARISH AGENCIES & MUNICIPALITIES TWO (2) YEAR CONTRACT		
			0010 - Large Lathe Work	\$30.00	\$3,000.00
2	100.00	HR	General purpose turning, facing, boring, and threading on work pieces up to 42" in diameter and up to 342" in length.		
			***** NO PRE-BID CONFERENCE WILL BE HELD FOR THIS BID *****	\$55.00	\$5,500.00
3	100.00	HR	0020 - Medium Lathe Work		
			General purpose turning, facing, boring, and threading on work pieces up to 20" in diameter and up to 374" in length.	\$55.00	\$5,500.00
4	100.00	HR	0030 - Small Lathe Work		
			General purpose turning, facing, boring, and threading on work pieces up to 16" in diameter and up to 60" in length. Includes bar stock threading up to 2" in diameter, using hollow spindle.	\$30.00	\$3,000.00
5	100.00	HR	0040 - Large Vertical Axis Boring Mill I Work		
			General purpose turning, facing, and boring on work pieces up to 36" in height and up to 66" in diameter.	\$55.00	\$5,500.00
6	100.00	HR	0050 - Small Vertical Axis Boring Mill I Work		
			General purpose turning, facing, and boring on work pieces up to 24" in height and up to 48" in diameter.	\$55.00	\$5,500.00
			0060 - Medium Horizontal Axis Boring Mill Work		
			General purpose turning, facing, and		

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00123661

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
7	100.00	HR	boring on work pieces up to 20" in width or in height and up to 60" in length. 0070 - Large Horizontal Axis Boring Mill Work	\$30.00	\$3,000.00
8	100.00	HR	General purpose turning, facing, and boring on work pieces up to 66" in width or in height and up to 108" in length. 0080 - Large Radial Arm Drill Press Work	\$30.00	\$3,000.00
9	100.00	HR	General purpose drilling of holes up to 2", tapping up to 2" n.c., reaming, and spot facing on work pieces up to 48" in height and up to 96" in diameter. 0090 - Medium Drill Press Work	\$30.00	\$3,000.00
10	100.00	HR	General purpose drilling of holes up to 1", tapping up to 2" n.c., reaming, and spot facing on work pieces up to 15" in height and weight generally less than 200 pounds. 0100 - Medium Milling Machine Work	\$55.00	\$5,500.00
11	100.00	HR	General purpose milling work, particularly for keyseating of shafts up to 8" in diameter and keyway widths up to 1-1/2". 0110 - Small Milling Machine Work	\$55.00	\$5,500.00
12	100.00	HR	General purpose milling, drilling, facing, spot facing, and keyseating done on a bridgeport of small work pieces generally less than 200 pounds in weight 0120 - Keyway Cutting	\$30.00	\$3,000.00
13	100.00	HR	Keyseating of the bore of couplings, impellers, and similar pieces with hub length up to 18", diameter up to 66", and keyways up to 1-1/2" in width. 0130 - Saw Work	\$30.00	\$3,000.00

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00123661

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
14	100.00	HR	Transverse cutting of round bars, beams, and other long shapes up to 12" in size (diameter or depth). 0140 - Lapping Machine Work	\$30.00	\$3,000.00
15	100.00	HR	Facing mechanical seals on work pieces up to 12" in diameter. 0150 - Dynamic Balancing	\$55.00	\$5,500.00
16	100.00	HR	Balancing rotating elements up to 96" in length, 36" in diameter, and 2500 pounds in weight at rotative speeds 900 rpm maximum. 0160 - Miscellaneous Assembly Work	\$55.00	\$5,500.00
17	100.00	HR	This item does not invoice any of the machining operations but may be necessary prior to or after said operations. The workmen would not necessarily be skilled craftsmen as required for machining operations, but skilled in the handling of work pieces, wrench operations, and so forth. 0170 - Miscellaneous Measurement Work	\$55.00	\$5,500.00
18	100.00	HR	This item does not invoice any of the machining operations but may be necessary prior to or after said operations. The measurement work would consist of taking precise measurements with inside or outside devices. 0180 - Millwright Work	\$55.00	\$5,500.00
19	100.00	HR	On-site erection (leveling, aligning, and setting) of large pump station machinery including but not limited to horizontal-shaft propeller pumps up to 168" in diameter, vertical-shaft propeller pumps up to 96" in diameter, reduction gearboxes up to 3100hp rating, diesel engines up to 4000 hp rating, electric motors up to 800 hp rating, and associative shafting and couplings by skilled craftsmen as required for precision millwright operations. 0190 - Supervisory Erection Specialist	\$55.00	\$5,500.00

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00123661

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
20	100.00	HR	<p>On-site coordination and supervision of item 0170 millwright work by a highly skilled erection and alignment specialist.</p> <p>0210 - 400a Welding Machine/Burning Apparatus Work</p>	\$55.00	\$5,500.00
21	100.00	HR	<p>This item is for the making of wellments to be subsequently machined (under other categories) using either raw stock materials and/or partially machined components. Included herein would be any welding associative with propeller reconditioning.</p> <p>9999A - (Non-Biddable) Non-Bid Item</p> <p>Non-bid item for vendor to provide invoicing only to charge procurement cost. A copy of actual invoicing showing the contractors procurement cost for such items shall be submitted with request for payment. All required materials must be noted on the estimate form along with who is to supply and the cost of the material.</p> <p>Bidders are to leave the unit price quoted blank for this item. This item shall not be included in the total of all items quoted. This line is to be used as a reference to process invoices.</p>	\$0.00	\$0.00
22	100.00	HR	<p>9999B - (Non-Biddable) Non-Bid Item</p> <p>Premium Time Work - 1.5 times the regular hour rates. Premium time will apply only when work is performed on weekends, Jefferson Parish legal holidays, or before 7:00 AM and after 5:00 PM.</p> <p>Bidders are to leave the unit price quoted blank for this item. This item shall not be included in the total of all items quoted. This line is to be used as a reference to process invoices.</p>	\$0.00	\$0.00
TOTAL					\$90,000.00

📍 2525 Quail Drive, Baton Rouge, 70808 📞 (225) 765-2301 💬 Text-To-Verify: 1 (855) 999-7896 

Louisiana State Licensing Board for Contractors

Contractor Information

Business Name BOLAND MARINE & INDUSTRIAL, L. L.C. ✓
Mailing Address P. O. Box 53287
New Orleans, LA 70153
Phone Number (504) 581-5800
Fax Number (504) 581-5814
Email Address mkeim@bolandmar.com
Website http://

Active Licenses

License Number 53760
Type Commercial License
Status LICENSED
Effective 09/17/2018
Expiration 09/16/2021
First Issued 09/16/2010

Classifications

Class	Qualifying Party	Parishes
BUSINESS AND LAW	Walter Leadell Haley Sr.	ALL
MUNICIPAL AND PUBLIC WORKS CONSTRUCTION ✓	Walter Leadell Haley Sr.	ALL
SPECIALTY: INSTALLATION OF EQUIPMENT, MACHINERY AND ENGINES ✓	Walter Leadell Haley Sr.	ALL
SPECIALTY: ORNAMENTAL IRON AND STRUCTURAL STEEL ERECTION, STEEL BUILDINGS	Walter Leadell Haley Sr.	ALL
SPECIALTY: POWER PLANTS	Walter Leadell Haley Sr.	ALL
SPECIALTY: RIGGING, HOUSE MOVING, WRECKING AND DISMANTLING	Walter Leadell Haley Sr.	ALL

BID BOND

Conforms with the American Institute of Architects,
A.I.A. Document No. A-310

THE **GRAY** SURETY OFFICE
P.O. Box 6202 Phone: (504) 780-7440
Metairie, LA 70009-6202 FAX: (504) 780-9211

KNOW ALL MEN BY THESE PRESENTS:

That Boland Marine and Industrial, LLC
(Name of Principal)
of 1000 Tchoupitoulas St., New Orleans, LA 70130
(Address of Principal)
hereinafter called the Principal, and ☒ The Gray Casualty & Surety Company ☐ The Gray Insurance Company of Metairie, Louisiana,
a corporation duly organized under the laws of the State of Louisiana, as Surety, hereinafter called the Surety, are held and firmly bound unto
Jefferson Parish Purchasing Department
(Name of Oblige) as Obligee, hereinafter called the Obligee,
in the sum of five (5%) percent of the total amount of this bid Dollars \$ _____,
for the payment of which sum and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors, administrators,
successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has submitted a bid 5000123661 Two year contract for the supply of machine shop service
(Job Number) (Full Name of Job)
for the Jefferson Parish Dept of Public Works, Drainage Pump Stations and all Jefferson Parish Agencies and Municipalities
(Location of Job)

NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a Contract with the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be specialized in the bidding or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the Obligee the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the Obligee may in good faith contract with another party to perform the Work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect.

Signed this 21th DAY of August A.D. 2018

By: Boland Marine and Industrial, LLC SEAL
Mike Leoni
(Principal) (Signature and Title)

Violeta Sanchez
(Witness)

By: The Gray Casualty & Surety SEAL
Elizabeth M. Blancher
(Surety) (Attorney-in-Fact)

Denise Douth
(Witness)

The Gray Surety Office

P.O. Box 6202 Metairie, Louisiana 70009-6202 Phone: (504) 780-7440 Fax: (504) 780-9211

THE GRAY INSURANCE COMPANY
THE GRAY CASUALTY & SURETY COMPANY

218505

GENERAL POWER OF ATTORNEY

KNOW ALL BY THESE PRESENTS, THAT The Gray Insurance Company and The Gray Casualty & Surety Company, corporations duly organized and existing under the laws of Louisiana, and having their principal offices in Metairie, Louisiana, do hereby make, constitute, and appoint **Thomas J. McMahon, Jr., Elizabeth M. Blancher, R.L. Swayze, Raymond J. Posecai, Jr., Beverly Jo Baumy, and Clint Romig of Metairie, Louisiana jointly and severally** on behalf of each of the Companies named above its true and lawful Attorney(s)-in-Fact, to make, execute, seal and deliver, for and on its behalf and as its deed, bonds, or other writings obligatory in the nature of a bond, as surety, contracts of suretyship as are or may be required or permitted by law, regulation, contract or otherwise, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed the amount of \$10,000,000.00

This Power of Attorney is granted and is signed by facsimile under and by the authority of the following Resolutions adopted by the Boards of Directors of both The Gray Insurance Company and The Gray Casualty & Surety Company at meetings duly called and held on the 26th day of June, 2003.

"RESOLV ED, that the President, Executive Vice President, any Vice President, or the Secretary be and each or any of them hereby is authorized to execute a power of Attorney qualifying the attorney named in the given Power of Attorney to execute on behalf of the Company bonds, undertakings, and all contracts of surety, and that each or any of them is hereby authorized to attest to the execution of such Power of Attorney, and to attach the seal of the Company; and it is

FURTHER RESOLVED, that the signature of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be binding upon the Company now and in the future when so affixed with regard to any bond, undertaking or contract of surety to which it is attached.

IN WITNESS WHEREOF, The Gray Insurance Company and The Gray Casualty & Surety Company have caused their official seals to be hereinto affixed, and these presents to be signed by their authorized officers this 12th day of September, 2011.



By:

Michael T. Gray
Michael T. Gray
President, The Gray Insurance Company
and
Vice President,
The Gray Casualty & Surety Company

Attest:

Mark S. Manguno
Mark S. Manguno
Secretary,
The Gray Insurance Company,
The Gray Casualty & Surety Company



State of Louisiana

SS:

Parish of Jefferson

On this 12th day of September, 2011, before me, a Notary Public, personally appeared Michael T. Gray, President of The Gray Insurance Company and Vice President of The Gray Casualty & Surety Company, and Mark S. Manguno, Secretary of The Gray Insurance Company and The Gray Casualty & Surety Company, personally known to me, being duly sworn, acknowledged that they signed the above Power of Attorney and affixed the seals of the companies as officers of, and acknowledged said instrument to be the voluntary act and deed, of their companies.



Lisa S. Millar

Lisa S. Millar, Notary Public, Parish of Orleans
State of Louisiana
My Commission is for Life

I, Mark S. Manguno, Secretary of The Gray Insurance Company and The Gray Casualty & Surety Company, do hereby certify that the above and forgoing is a true and correct copy of a Power of Attorney given by the companies, which is still in full force and effect.

IN WITNESS WHEREOF, I have set my hand and affixed the seals of the Companies this 21st day of August, 2018



Mark S. Manguno
Mark S. Manguno, Secretary
The Gray Insurance Company
The Gray Casualty & Surety Company

Non-Public Works Bid

AFFIDAVIT

STATE OF LOUISIANA

PARISH/COUNTY OF ORLEANS

BEFORE ME, the undersigned authority, personally came and appeared: WALTER HALEY
_____, (Affiant) who after being by me duly sworn, deposed and said that
he/she is the fully authorized REPRESENTATIVE of BOLAND MARINE (Entity),
50-00123661
the party who submitted a bid in response to Bid Number _____, to the Parish of
Jefferson.

Affiant further said:

Campaign Contribution Disclosures

(Choose A or B, if option A is indicated please include the required
attachment):

Choice A X Attached hereto is a list of all campaign contributions, including
the date and amount of each contribution, made to current or
former elected officials of the Parish of Jefferson by Entity,
Affiant, and/or officers, directors and owners, including
employees, owning 25% or more of the Entity during the two-year
period immediately preceding the date of this affidavit or the
current term of the elected official, whichever is greater. Further,
Entity, Affiant, and/or Entity Owners have not made any
contributions to or in support of current or former members of the
Jefferson Parish Council or the Jefferson Parish President through
or in the name of another person or legal entity, either directly or
indirectly.

Choice B _____ there are NO campaign contributions made which would require
disclosure under Choice A of this section.

Debt Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all debts owed by the affiant to any elected or appointed official of the Parish of Jefferson, and any and all debts owed by any elected or appointed official of the Parish to the Affiant.

Choice B X _____ There are **NO** debts which would require disclosure under Choice A of this section.

Affiant further said:

That Affiant has employed no person, corporation, firm, association, or other organization, either directly or indirectly, to secure the public contract under which he received payment, other than persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project or in securing the public contract were in the regular course of their duties for Affiant; and

[The remainder of this page is intentionally left blank.]

That no part of the contract price received by Affiant was paid or will be paid to any person, corporation, firm, association, or other organization for soliciting the contract, other than the payment of their normal compensation to persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project were in the regular course of their duties for Affiant.

Walter Haley
Signature of Affiant

WALTER HALEY
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

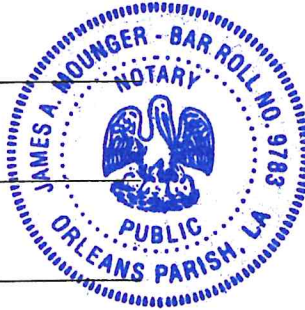
ON THE 15 DAY OF August, 2018

[Signature]
Notary Public

Printed Name of Notary

Notary/Bar Roll Number

My commission expires December





August 21, 2018

2017 Charitable contribution

1/31/17	Ben Zahn – Campaign = \$500.00
1/31/17	Committee to elect – Jennifer Van Vranken for Council = \$500.00
5/4/17	Michael S. Yenni = \$500.00
7/14/17	Campaign Fund for Dominik Impastato = \$300.00
11/3/17	Mike Yenni Campaign = \$1,000.00

2016 Uncharitable Contribution

7/18/16	Tina Miceli, Campaign = \$500.00
9/17/16	Polly Thomas Campaign = \$500.00

[Print](#)

Notary Search - Detail

Name: MR. JAMES A. MOUNGER
Address: 1539 JACKSON AVE.,STE.600
NEW ORLEANS, LA 70130
Phone: (504) 821-6031
Notary ID Number: 24220
Parish: ORLEANS with STATEWIDE JURISDICTION
Agency: N/A
Notary Type: Attorney
Bar Roll #: 9783
Status: Active
Commission Date: 09/25/1969
Oath Date: 10/17/1969
Surety Expiration Date: Not Required
Annual Report Current: Not Applicable

[Back to Search Results](#)[New Search](#)

CORPORATE RESOLUTION

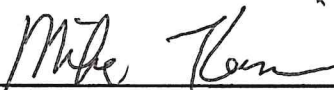
EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF
BOLAND MARINE & INDUSTRIAL, LLC

INCORPORATED.

AT THE MEETING OF DIRECTORS OF BOLAND MARINE
INCORPORATED, DULY NOTICED AND HELD ON 8/17/18,
A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED. IT
WAS:

RESOLVED. THAT WALTER HALEY, BE AND IS HEREBY
APPOINTED, CONSTITUTED AND DESIGNATED AS AGENT AND ATTORNEY-IN-
FACT OF THE CORPORATION WITH FULL POWER AND AUTHORITY TO ACT ON
BEHALF OF THIS CORPORATION IN ALL NEGOTIATIONS, BIDDING, CONCERNS
AND TRANSACTIONS WITH THE PARISH OF JEFFERSON OR ANY OF ITS AGENCIES,
DEPARTMENTS, EMPLOYEES OR AGENTS, INCLUDING BUT NOT LIMITED TO, THE
EXECUTION OF ALL BIDS, PAPERS, DOCUMENTS, AFFIDAVITS, BONDS, SURETIES,
CONTRACTS AND ACTS AND TO RECEIVE AND RECEIPT THEREFOR ALL
PURCHASE ORDERS AND NOTICES ISSUED PURSUANT TO THE PROVISIONS OF
ANY SUCH BID OR CONTRACT, THIS CORPORATION HEREBY RATIFYING,
APPROVING, CONFIRMING, AND ACCEPTING EACH AND EVERY SUCH ACT
PERFORMED BY SAID AGENT AND ATTORNEY-IN-FACT.

I HEREBY CERTIFY THE FOREGOING TO BE
A TRUE AND CORRECT COPY OF AN
EXCERPT OF THE MINUTES OF THE
ABOVE DATED MEETING OF THE BOARD
OF DIRECTORS OF SAID CORPORATION,
AND THE SAME HAS NOT BEEN
REVOKED OR RESCINDED.



SECRETARY-TREASURER

MIKE KEIM

8/17/18

DATE

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. BOLAND MARINE & INDUSTRIAL LLC	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.) 1000 TCHOUPITOU LAS STREET	Requester's name and address (optional)
	6 City, state, and ZIP code NEW ORLEANS, LA 70130	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
			-			-		
or								
Employer identification number								
8	5	-	0	4	8	5	2	7

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶ <i>Mike Rein</i>	Date ▶ 8/21/18
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



State Licensing Board for Contractors

This is to Certify that:

BOLAND MARINE & INDUSTRIAL, L. L.C.
P. O. Box 53287
New Orleans, LA 70153

is duly licensed and entitled to practice the following classifications

MUNICIPAL AND PUBLIC WORKS CONSTRUCTION; SPECIALTY: INSTALLATION OF EQUIPMENT,
MACHINERY AND ENGINES; SPECIALTY: ORNAMENTAL IRON AND STRUCTURAL STEEL ERECTION,
STEEL BUILDINGS; SPECIALTY: POWER PLANTS; SPECIALTY: RIGGING, HOUSE MOVING, WRECKING
AND DISMANTLING



Expiration Date: September 16, 2018

License No: 53760

Witness our hand and seal of the Board dated,
Baton Rouge, LA 17th day of September 2015

Will S. McCoy

Director

Lee M. Delt

Chairman

Andy Delt

Secretary-Treasurer

This License Is Not Transferrable



BOLAMAR-01

APELLEGAL

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/26/2018

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

PRODUCER License # 231432 Hub International Gulf South 3510 N. Causeway Boulevard, Suite 300 Metairie, LA 70002		CONTACT NAME: PHONE (A/C, No, Ext): (800) 256-2842 FAX (A/C, No): (504) 834-2995 E-MAIL ADDRESS:	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Stonington Insurance Company	
		INSURER B: Lloyd's of London	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

INSURED

Boland Marine & Industrial LLC
1000 Tchoupitoulas Street
New Orleans, LA 70130

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 INSD	SUBR 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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			SL18MGLM1159	02/01/2018	02/01/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			SL18XS1M11591	02/01/2018	02/01/2019	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ Annual Agg \$ 10,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Maritime Employers L			B1368M180144	02/01/2018	02/01/2019	Limit of Liability 1,000,000

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

CERTIFICATE HOLDER

CANCELLATION

Jefferson Parish its District Department and Agencies under the direction for the Parish President and the Parish Council
200 Derbigny Street
Gretna, LA 70053

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



AGENCY CUSTOMER ID: BOLAMAR-01

APELLEGAL

LOC #: 1

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Hub International Gulf South	License # 231432	NAMED INSURED Boland-Marine & Industrial-LLC 1000 Tchoupitoulas Street New Orleans, LA 70130
POLICY NUMBER SEE PAGE 1		
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Additional Terms/Conditions:

General Liability Policy contains:

Underwriters agree that, where required by written insured contract, any person firm or organization is included as additional insured but only in respect to liability for bodily injury and/or property damage arising out of operations performed by or on behalf of the Named Insured under written insured contract with such additional insured and then, subject to the terms, conditions, exclusions and Limits of Insurance of the policy, only to the extent required under said written insured contract.

Underwrites agree to waive their rights of subrogation against any principal where such waiver is required by a written insured contract executed prior to loss.

Coverage is extneded to the Gulf of Mexico.

It is agreedt that any claim covered by this policy, shall be considered covered even though asserted in an action commenced on the basis of In Rem jurisdiction instead of In Personam jurisdiction.

Watercraft exclusion is deleted with respect to watercraft not owned and not operated by the Named Insured.

Subject to the terms and conditions of the policy, it is agreed that where the Named Insured is obligated under the terms of a written insured contract to specifically provide primary insurance coverage to any person or entity which is also an additional insured under this policy, that this policy will be primary but only in relation to any other applicable policy where such person or entity is provided coverage as a Named Insured.

Underwriters will agree to provide 30 days written notice of cancellation to this policy to any third party whose name and contact information is provided by the Named Insured and where such notice is required by written insured contract.



BOLAMAR-02

AMY

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/25/2018

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

PRODUCER Eustis Insurance, Inc. 110 Veterans Memorial Boulevard Suite 200 Metairie, LA 70005	CONTACT NAME:		
	PHONE (A/C, No, Ext): (504) 586-0440	FAX (A/C, No): (504) 565-5219	
	E-MAIL ADDRESS: info@eustis.com		
INSURED Boland Marine & Indl, LLC 1000 Tchoupitoulas St New Orleans, LA 70130	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : United Specialty Insurance Co.		12537
	INSURER B : Louisiana Worker's Comp Corp		22350
	INSURER C :		
	INSURER D :		
	INSURER E :		
	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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			SDXLA00049500	08/28/2017	08/28/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	78798	01/31/2018	01/31/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
With respect to the above Automobile Liability policy, the certificate holder will be considered as an additional insured if required by written contract subject to the endorsement (Q ADLIN-B 0814) terms and conditions.

With respect to the above Automobile Liability policy, the certificate holder is provided a Waiver of Subrogation if required by written contract subject to the endorsement (Q WAIVER-B 0814) terms and conditions.

With respect to the above Workers Compensation policy, the certificate holder is provided a Waiver of Subrogation if required by written contract subject to SEE ATTACHED ACORD 101

CERTIFICATE HOLDER

CANCELLATION

Jefferson Parish its District Department and Agencies
under the direction for the Parish President
and the Parish Council
200 Derbigny Street
Gretna, LA 70053

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



AGENCY CUSTOMER ID: BOLAMAR-02

AMY

LOC #: 1

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Eustis Insurance, Inc.		NAMED INSURED Boland Marine & Indl, LLC 1000 Tchoupitoulas St New Orleans, LA 70130	
POLICY NUMBER SEE PAGE 1			
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:
the (WC 00 0313) terms and conditions and Longshore and Harbor Workers Compensation Act Coverage (WC 00 0106A) terms and conditions.

Copies of the policy's forms or endorsements referenced above are available upon request