

Bid From:

Rotolo Consultants, Inc.

38001 Brownsvillage Rd.

Slidell, LA 70460

Jefferson Parish Vendor #197086

Bid For:

Furnish Labor, Materials and Equipment To Install Landscaping

At the Joseph S. Yenni Building for Jefferson Parish Parkways

Bid No.: 50-00145787

Bid To:

Jefferson Parish Purchasing Department

POB 9

Gretna, LA 70054-0009

DATE: 7/30/2024

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00145787

JEFFERSON PARISH

PURCHASING DEPARTMENT
P.O. BOX 9
GRETN, LA. 70054-0009
504-364-2678

VENDOR: 27118 BLANK BID COPY VENDOR

197086

PURCHASING SPECIALIST:
BBELLOW

As per LSA-RS 47:301 et seq., all governmental bodies are excluded from payment of sales taxes to any Louisiana taxing body. Quotations shall be based on F.O.B. Agency warehouse or jobsite, anywhere within the Parish as designated by the Purchasing Department.

JEFFERSON PARISH reserves the right to cancel all or any part of an order if not shipped promptly. No charges will be allowed for parking or cartage unless specified in quotation. The order must not be filled at a higher price than quoted. JEFFERSON PARISH reserves the right to cancel at any time and for any reason by issuing a THIRTY (30) day written notice to the contractor.

JEFFERSON PARISH is expecting all products to be new and all work to be done in workman-like manner, according to standard practices. Any deviations or alteration from the specifications must be indicated on the bid form for each item and upon request, product data for same must be submitted by the time specified by the Purchasing Department.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

TBD

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

10 DAYS FROM NTP

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

5 DAYS

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 by placing the addendum number as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: _____

NUMBER: _____

NUMBER: _____

NUMBER: _____

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 29959

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: Rotolo Consultants, Inc.	
SIGNATURE: (Must be signed here)	TITLE: CMO
PRINT OR TYPE NAME: Keith Dorr	
ADDRESS: 38001 Brownsvillage Rd.	
CITY, STATE: Slidell, LA	ZIP: 70460
TELEPHONE: (985) 643-2427	FAX: (985) 643-2691
EMAIL ADDRESS: estimating@rotoloconsultants.com	

TOTAL PRICE OF ALL BID ITEMS: \$ 42,163.00

DATE: 7/30/2024

INVITATION TO BID FROM JEFFERSON PARISH - continued

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BID NO.: 50-00145787

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>FURNISH LABOR, MATERIALS AND EQUIPMENT TO INSTALL LANDSCAPING AT THE JOSEPH S. YENNI BUILDING FOR JEFFERSON PARISH PARKWAYS</p> <p>0010 This project shall include minor grading, supply and installation of plant material, trees, sod and decorative stone in accordance with the provided plan and details.</p> <p>Location:</p> <p>Yenni Bldg. 1221 Elmwood Park Blvd. Jefferson, LA 70123</p> <p>***AS PER BID SPECIFICATIONS***</p>	\$ 42,163.00	\$ 42,163.00



Rotolo Consultants Incorporated

38001 Brownsvillage Rd. | Slidell, LA 70460

(985) 643-2427 | Fax (985) 643-2691

RotoloConsultants.com

To:	Jefferson Parish Purchasing Department	Contact:	
Address:	200 Derbigny St. Suite 4400	Phone:	(504) 364-2678
	Gretna, LA 70053	Fax:	(504) 364-2693
Project Name:	Jospeh S. Yenni Building - Landscape Improvements	Bid Number:	50-00145787
Project Location:	1221 Elmwood Park Blvd, Elmwood, LA	Bid Date:	8/6/2024

Item #	Item Description	Estimated Quantity	Unit	Unit Price	Total Price
001	Mobilization	1.00	LS	\$1,700.00	\$1,700.00
002	Site Prep - Fill - 2" Depth	25.00	CY	\$67.00	\$1,675.00
003	Tree Planting - White Fringe Tree - 30 Gallon	16.00	EACH	\$525.00	\$8,400.00
004	Tree Planting - Sweetbay Magnolia - 30 Gallon	8.00	EACH	\$475.00	\$3,800.00
005	Shrub Planting - Muhly Grass - 3 Gallon	94.00	EACH	\$39.50	\$3,713.00
006	Turf - 419 Bermuda Sodding	160.00	SY	\$12.00	\$1,920.00
007	Gravel Mulch - Mexican Beach Pebble - 4-5" Depth	900.00	SF	\$23.25	\$20,925.00
008	Drainage - Atrium Grate - 6" Round	1.00	EACH	\$30.00	\$30.00

Total Bid Price: \$42,163.00

Notes:

- The above pricing is reflective of the Landscape Plan included in the Bid Documents dated June 2024.
- Final Contract Price and Billing shall be based on the installed quantities at the Unit Prices stated above per Section 5.0 of the Bid Documents provided.
- Sales & Use Taxes are not included in the above pricing. Sales Tax Exemption Certificate shall be provided upon Notice of Award.
- Performance and Payment Bond is not included in the above pricing. If required, add 1.50%.
- Pricing is valid for a period of 45 Calendar Days unless a written Notice of Award and/or Agreement is executed.

ACCEPTED: The above prices, specifications and conditions are satisfactory and are hereby accepted. Buyer: _____ Signature: _____ Date of Acceptance: _____	CONFIRMED: Rotolo Consultants Inc. Authorized Signature: _____ Estimator: Blaine Frischhertz (985) 643-2427 ext. 106 blaine@rotoloconsultants.com
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/31/2024

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 Cadence Insurance, A Gallagher Company 4041 Essen Lane, Suite 400 Baton Rouge LA 70809	CONTACT NAME: Cheryl Ann Boudreaux	FAX (A/C, No): 225-336-4536	
	PHONE (A/C, No, Ext): 225-336-3245	E-MAIL ADDRESS: cheryl.boudreaux@cadenceinsurance.com	
INSURED Rotolo Consultants, Inc. 38001 Brownsville Road Slidell LA 70460	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Gray Insurance Company		36307
	INSURER B: Great American E&S Ins. Co.		37532
	INSURER C: Starstone Specialty Insurance Company		44776
	INSURER D: XL Specialty Insurance Company		37885
	INSURER E:		
INSURER F:			

COVERAGES

CERTIFICATE NUMBER: 906753976

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 INSD 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"/> CG 00 01 04 13 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		XSGL100091	7/1/2023	9/1/2024	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 \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		XSAL100101	7/1/2023	9/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		GXS100372 7089O231ALI	7/1/2024 7/1/2023	9/1/2024 9/1/2024	EACH OCCURRENCE \$ \$5,000,000 AGGREGATE \$ \$5,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N N/A	XSWC100094	7/1/2023	9/1/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER LOUISIANA E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B D	Cont&Site Pollution/Professional Leased/Rented Equipment/Property		PCME56604804 UM00159935MA24A	7/1/2024 7/1/2024	7/1/2025 7/1/2025	2,000,000 Per Occ \$300,000 Per Item Catastrophe Property 2,000,000 Agg \$500,000 Per Occur \$9,350,000

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

Subject to policy terms, conditions and exclusions; the certificate holder shall be considered an Additional Insured on a Primary and Non-Contributory basis in respects to General Liability (Additional Insured Form Includes Completed Operations), Automobile Liability and Excess policies when required by written contract or agreement with a Waiver of Subrogation granted in their favor in respects to General Liability, Automobile Liability, Worker's Compensation, and Excess policies when required by written contract, but only to the extent of the Named Insured's obligation to indemnify, defend and/or hold harmless the certificate holder when required by written contract.

Auto Physical Damage is included on the auto policy referenced above with a \$5,000 physical damage deductible.
See Attached...

CERTIFICATE HOLDER

CANCELLATION

MASTER CERTIFICATE

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

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ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Cadence Insurance, A Gallagher Company		NAMED INSURED Rotolo Consultants, Inc. 38001 Brownsville Road Slidell LA 70460	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

SEE EXTRA PAGE FOR THE GRAY INSURANCE PROGRAM ENDORSEMENTS

Subject to policy terms, conditions and exclusions; 30 Day Notice of Cancellation shall be given in respects to General Liability, Auto Liability and Workers Compensation and Excess policies referenced above.

Blanket Alternate Employer is included on the Worker's Compensation policy when required by written contract or agreement.

WORKERS COMPENSATION COVERAGE FOR OTHER STATES:

FLORIDA

Applies Per Statue - Includes Waiver of Subrogation to certificate holder when required by written contract

Policy No: GWC100445

Carrier: The Gray Insurance Company

Policy Dates: 7/1/2024-9/1/2024

E.L. EACH ACCIDENT - \$1,000,000

E.L. DISEASE - EA EMPLOYEE - \$1,000,000

E.L. DISEASE - POLICY LIMIT - \$1,000,000

ALABAMA, KANSAS, MISSISSIPPI, NEW MEXICO, OKLAHOMA, TENNESSEE, TEXAS

Applies Per Statue - Includes Waiver of Subrogation and 30 day Notice of Cancellation to certificate holder when required by written contract

Policy No: GWC100177

Carrier: The Gray Insurance Company

Policy Dates: 7/1/2023-9/1/2024

E.L. EACH ACCIDENT - \$1,000,000

E.L. DISEASE - EA EMPLOYEE - \$1,000,000

E.L. DISEASE - POLICY LIMIT - \$1,000,000

Excess Policies are follow form in respects to General Liability, Auto Liability and Workers Compensation.

CRIME COVERAGE:

Policy No: SAAE4990590500

Carrier: Great American Insurance Company

Policy Dates: 7/1/2024-7/1/2025

EMPLOYEE DISHONESTY - \$1,000,000 WITH \$25,000 DEDUCTIBLE PER OCCURRENCE - INCLUDES THEFT OF CLIENT PROPERTY

LEASED/RENTED EQUIPMENT COVERAGE:

Limit: \$300,000 per item/\$500,000 per occurrence - \$25,000 Deductible

Certificate Holder shown is loss payee with respect to leased/rented/borrowed equipment when required by written contract. Subject to policy terms and conditions, loss payee shall receive the amount the insured is obligated to pay for direct physical loss or damage to contractor's equipment by reason of their assumption of liability in a written contract or written agreement executed prior to the loss or damage for contractor's equipment that you lease or rent up to the maximum per item.