

TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
 (Owner to provide name and address of owner)

BID FOR: LABOR, MATERIALS & EQUIPMENT NEEDED FOR  
 THE CONSTRUCTION OF A MODULAR LANDSCAPE  
 RETAINING WALL & SOD INSTALLATION AT THE  
 JEFFERSON PARISH EMERGENCY OPERATIONS  
 (Owner to provide name of project and  
 other identifying information) CENTER

The undersigned bidder hereby declares and represents that she/he; a) has carefully examined and understands the Bidding Documents, b) has not received, relied on, or based his bid on any verbal instructions contrary to the Bidding Documents or any addenda, c) has personally inspected and is familiar with the project site, and hereby proposes to provide all labor, materials, tools, appliances and facilities as required to perform, in a workmanlike manner, all work and services for the construction and completion of the referenced project, all in strict accordance with the Bidding Documents prepared by: \_\_\_\_\_ and dated: August 3, 2021

Jefferson Parish  
 (Owner to provide name of entity preparing bidding documents.)

Bidders must acknowledge all addenda. The Bidder acknowledges receipt of the following ADDENDA: (Enter the number the Designer has assigned to each of the addenda that the Bidder is acknowledging) #1

TOTAL BASE BID: For all work required by the Bidding Documents (including any and all unit prices designated "Base Bid" \* but not alternates) the sum of:

Sixty-Six Thousand Seventy 00/100 Dollars (\$) 66,070.00

ALTERNATES: For any and all work required by the Bidding Documents for Alternates including any and all unit prices designated as alternates in the unit price description.

Alternate No. 1 (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$) 0.00

Alternate No. 2 (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$) 0.00

Alternate No. 3 (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$) 0.00

NAME OF BIDDER: Bayou Irrigation, Inc.  
 ADDRESS OF BIDDER: 14711 Harry Savoy Rd, St. Amant, LA 70774  
 LOUISIANA CONTRACTOR'S LICENSE NUMBER: 66382  
 NAME OF AUTHORIZED SIGNATORY OF BIDDER: Clay Durbin, Jr.  
 TITLE OF AUTHORIZED SIGNATORY OF BIDDER: President

SIGNATURE OF AUTHORIZED SIGNATORY OF BIDDER \*\*: Clay Durbin

DATE: 8/3/2021

THE FOLLOWING ITEMS ARE TO BE INCLUDED WITH THE SUBMISSION OF THIS LOUISIANA UNIFORM PUBLIC WORK BID FORM:

\* The Unit Price Form shall be used if the contract includes unit prices. Otherwise it is not required and need not be included with the form. The number of unit prices that may be included is not limited and additional sheets may be included if needed.

\*\* A CORPORATE RESOLUTION OR WRITTEN EVIDENCE of the authority of the person signing the bid for the public work as prescribed by LA-R.S. 38:2218 (B)(5).

BID SECURITY in the form of a bid bond, certified check or cashier's check as prescribed by LA-R.S. 38:2218.(A) is attached to and made a part of this bid.

LOUISIANA UNIFORM PUBLIC WORK BID FORM  
UNIT PRICE FORM

Bid# 50-00134974

TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
(Owner to provide name and  
address of owner)

LABOR, MATERIALS & EQUIPMENT NEEDED FOR  
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JEFFERSON PARISH EMERGENCY OPERATIONS  
CENTER  
(Owner to provide name of project  
and other identifying information)

UNIT PRICES: This form shall be used for any and all work required by the Bidding Documents and described as unit prices.  
Amounts shall be stated in figures and only in figures.

| DESCRIPTION: <input checked="" type="checkbox"/> Base Bid      0010 - DEMOLITION PREPARATION<br><input type="checkbox"/> Alt. # _____ |          |                 |             |  |
|---|----------|-----------------|-------------|--|
| REF NO.   | QUANTITY | UNIT OF MEASURE | UNIT PRICE  | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0010  | 1.00     | LPSM            | \$21,648.19 | \$21,648.19                                      |

| DESCRIPTION: <input checked="" type="checkbox"/> Base Bid      0020 - SIGNS AND BARRICADES<br><input type="checkbox"/> Alt. # _____ |          |                 |            |  |
|---|----------|-----------------|------------|--|
| REF NO.   | QUANTITY | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0020  | 1.00     | LPSM            | \$7,800.00 | \$7,800.00                                       |

| DESCRIPTION: <input checked="" type="checkbox"/> Base Bid      0030 - MODULAR BLOCK RETAINING WALL (WALL FACE)<br><input type="checkbox"/> Alt. # _____ |          |                 |            |  |
|---|----------|-----------------|------------|--|
| REF NO.   | QUANTITY | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0030  | 500.00   | SQFT            | \$42.92    | \$21,460.00                                      |

| DESCRIPTION: <input checked="" type="checkbox"/> Base Bid      0040 - RETAINING WALL CAP<br><input type="checkbox"/> Alt. # _____ |          |                 |            |  |
|---|----------|-----------------|------------|--|
| REF NO.   | QUANTITY | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0040  | 175.00   | LF              | \$27.69    | \$4,845.75                                       |

| DESCRIPTION: <input checked="" type="checkbox"/> Base Bid      0050 - #57 LIMESTONE<br><input type="checkbox"/> Alt. # _____ |          |                 |            |  |
|--|----------|-----------------|------------|--|
| REF NO.  | QUANTITY | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0050   | 25.00    | CUYD            | \$173.68   | \$4,342.00                                       |

| DESCRIPTION: <input checked="" type="checkbox"/> Base Bid      0060 - #610 LIMESTONE<br><input type="checkbox"/> Alt. # _____ |          |                 |            |  |
|---|----------|-----------------|------------|--|
| REF NO.   | QUANTITY | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0060  | 12.00    | CUYD            | \$173.68   | \$2,084.16                                       |

| DESCRIPTION: <input checked="" type="checkbox"/> Base Bid      0070 - FILTER FABRIC<br><input type="checkbox"/> Alt. # _____ |          |                 |            |  |
|--|----------|-----------------|------------|--|
| REF NO.  | QUANTITY | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0070   | 175.00   | SQYD            | \$1.18     | \$206.50   |

| DESCRIPTION: <input checked="" type="checkbox"/> Base Bid      0080 - BACKFILL MATERIAL<br><input type="checkbox"/> Alt. # _____ |          |                 |            |  |
|--|----------|-----------------|------------|--|
| REF NO.  | QUANTITY | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0080   | 15.00    | CUYD            | \$93.08    | \$1,396.20                                       |

Wording for "DESCRIPTION" is to be provided by the Owner.  
All quantities are estimated. The contractor will be paid based upon actual quantities as verified by the Owner.



LOUISIANA UNIFORM PUBLIC WORK BID FORM  
UNIT PRICE FORM

Bid# 50-00134974

TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
(Owner to provide name and  
address of owner)

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(Owner to provide name of project  
and other identifying information)

UNIT PRICES: This form shall be used for any and all work required by the Bidding Documents and described as unit prices.  
Amounts shall be stated in figures and only in figures.

|              |  |                 |            |  |
|--------------|--|-----------------|------------|--|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid      0090 - TOP DRESSING MATERIAL/GRADING |                 |            |  |
|              | <input type="checkbox"/> Alt. # _____  |                 |            |  |
| REF NO.      | QUANTITY   | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0090         | 10.00  | CUYD            | \$101.72   | \$1017.20  |

|              |  |                 |            |  |
|--------------|--|-----------------|------------|--|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid      0100 - CENTIPEDE SOD |                 |            |  |
|              | <input type="checkbox"/> Alt. # _____                                  |                 |            |  |
| REF NO.      | QUANTITY   | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
| 0100         | 250.00   | SQYD            | \$5.08     | \$1270.00  |

|              |                                       |                 |            |  |
|--------------|---------------------------------------|-----------------|------------|--|
| DESCRIPTION: | <input type="checkbox"/> Base Bid     |                 |            |  |
|              | <input type="checkbox"/> Alt. # _____ |                 |            |  |
| REF NO.      | QUANTITY                              | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
|              |                                       |                 |            |  |

|              |                                       |                 |            |  |
|--------------|---------------------------------------|-----------------|------------|--|
| DESCRIPTION: | <input type="checkbox"/> Base Bid     |                 |            |  |
|              | <input type="checkbox"/> Alt. # _____ |                 |            |  |
| REF NO.      | QUANTITY                              | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
|              |                                       |                 |            |  |

|              |                                       |                 |            |  |
|--------------|---------------------------------------|-----------------|------------|--|
| DESCRIPTION: | <input type="checkbox"/> Base Bid     |                 |            |  |
|              | <input type="checkbox"/> Alt. # _____ |                 |            |  |
| REF NO.      | QUANTITY                              | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
|              |                                       |                 |            |  |

|              |                                       |                 |            |  |
|--------------|---------------------------------------|-----------------|------------|--|
| DESCRIPTION: | <input type="checkbox"/> Base Bid     |                 |            |  |
|              | <input type="checkbox"/> Alt. # _____ |                 |            |  |
| REF NO.      | QUANTITY                              | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
|              |                                       |                 |            |  |

|              |                                       |                 |            |  |
|--------------|---------------------------------------|-----------------|------------|--|
| DESCRIPTION: | <input type="checkbox"/> Base Bid     |                 |            |  |
|              | <input type="checkbox"/> Alt. # _____ |                 |            |  |
| REF NO.      | QUANTITY                              | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
|              |                                       |                 |            |  |

|              |                                       |                 |            |  |
|--------------|---------------------------------------|-----------------|------------|--|
| DESCRIPTION: | <input type="checkbox"/> Base Bid     |                 |            |  |
|              | <input type="checkbox"/> Alt. # _____ |                 |            |  |
| REF NO.      | QUANTITY                              | UNIT OF MEASURE | UNIT PRICE | UNIT PRICE EXTENSION (Quantity times Unit Price) |
|              |                                       |                 |            |  |

Wording for "DESCRIPTION" is to be provided by the Owner.  
All quantities are estimated. The contractor will be paid based upon actual quantities as verified by the Owner.

## Public Works Bid

## AFFIDAVIT

STATE OF LouisianaPARISH/COUNTY OF AscensionBEFORE ME, the undersigned authority, personally came and appeared: Clay

Darbin, Jr., (Affiant) who after being by me duly sworn, deposed and said that he/she is the fully authorized President of Bayou Irrigation, Inc. (Entity),  
50-00134974  
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 \_\_\_\_\_

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 X

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



Affiant further said:

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

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.

Affiant further said:

Affiant personally has not been convicted of, nor has he/she entered into a plea of guilty or nolo contendere to any of the crimes or equivalent federal crimes listed below. No individual partner, incorporator, director, manager, officer, organizer, or member, who has a minimum of a ten percent ownership in the Bidding Entity, has been convicted of, or has entered a plea of guilty or nolo contendere to any of the crimes or equivalent federal crimes listed below. A conviction of or plea of guilty or nolo contendere to the following state crimes or equivalent federal crimes shall permanently bar any person or the bidding entity from bidding on public projects:

- (a) Public bribery (R.S. 14:118)
- (b) Corrupt influencing (R.S. 14:120)
- (c) Extortion (R.S. 14:66)
- (d) Money laundering (R.S. 14:230)

A conviction of or plea of guilty or nolo contendere to the following state crimes or equivalent federal crimes shall bar any person or the bidding entity from bidding on public projects for a period of five years from the date of conviction or from the date of the entrance of the plea of guilty or nolo contendere:

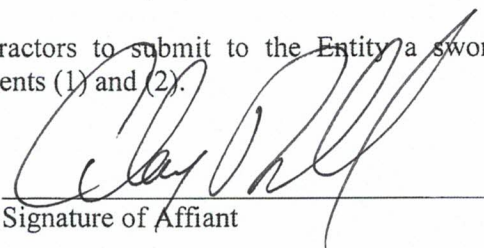
- (a) Theft (R.S. 14:67)
- (b) Identity Theft (R.S. 14:67, 16)
- (c) Theft of a business record (R.S. 14:67.20)
- (d) False accounting (R.S. 14:70)
- (e) Issuing worthless checks (R.S. 14:71)
- (f) Bank fraud (R.S. 14:71.1)
- (g) Forgery (R.S. 14:72)
- (h) Contractors; misapplication of payments (R.S. 14:202)
- (i) Malfeasance in office (R.S. 14:134)

The five-year prohibition provided for in this section shall apply only if the crime was committed during the solicitation or execution of a contract or bid awarded pursuant to these provisions. If evidence is submitted substantiating that a false attestation has been made and the project must be readvertised or the contract cancelled, the awarded entity making the false attestation shall be responsible to the public entity for the costs of rebidding, additional costs due to increased costs of bids and any and all delay costs due to the rebid or cancellation of this project.

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

Affiant further said:

- (1) Entity is registered and participates in a status verification system to verify that all employees in the State of Louisiana are legal citizens of the United States or are legal aliens.
- (2) Entity shall continue, during the term of the contract, to utilize a status verification system to verify the legal status of all new employees in the State of Louisiana.
- (3) Entity shall require all subcontractors to submit to the Entity a sworn affidavit verifying compliance with statements (1) and (2).

  
Signature of Affiant

Clay Durbin, Jr.  
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 3<sup>rd</sup> DAY OF Aug, 2021.

  
Notary Public

\_\_\_\_\_  
Printed Name of Notary

\_\_\_\_\_  
Notary/Bar Roll Number

My commission expires \_\_\_\_\_.

NOTARY PUBLIC  
SHIRLEY CAVALIER  
NOTARY PUBLIC #33273  
ASCENSION PARISH, LA  
MY COMMISSION IS FOR LIFE





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/03/2021

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).

|  |  |   |  |
|--|--|---|--|
| <b>PRODUCER</b><br>Acosta Insurance Agency, Llc<br>10661 Highway 431<br>PO Box 280<br>St. Amant LA 70774 |  | <b>CONTACT NAME:</b> Tammie Acosta<br><b>PHONE (A/C, No, Ext):</b> (225) 644-4334<br><b>FAX (A/C, No):</b> (225) 644-8184<br><b>E-MAIL ADDRESS:</b> tammie@acostaagency.net   |  |
| <b>INSURED</b><br>Bayou Irrigation Inc<br>14711 Harry Savoy Rd<br>Saint Amant LA 70774                   |  | <b>INSURER(S) AFFORDING COVERAGE</b><br><b>INSURER A:</b> EVANSTON INS CO<br><b>INSURER B:</b> PROGRESSIVE PALOVERDE INSURANCE COMP<br><b>INSURER C:</b> MARKEL/FIRST COMP<br><b>INSURER D:</b><br><b>INSURER E:</b><br><b>INSURER F:</b> |  |
|  |  | <b>NAIC #</b><br>35378<br>44695   |  |

**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"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  | X  | X        | 3AA409585     | 06/24/2021              | 06/24/2022              | 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   |  |          |               |                         |                         |  |   |
| GEN'L AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |  |  |          |               |                         |                         | GENERAL AGGREGATE \$ 2,000,000                   |   |
|   |  |  |          |               |                         |                         | PRODUCTS - COMP/OP AGG \$ Included               |   |
|   |  |  |          |               |                         |                         | \$   |   |
| B   | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input type="checkbox"/> HIRED AUTOS ONLY<br><input checked="" type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS ONLY |  |          | 03994676-4    | 12/03/2020              | 12/03/2021              | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 |   |
|   |  |  |          |               |                         |                         | BODILY INJURY (Per person) \$                    |   |
|   |  |  |          |               |                         |                         | BODILY INJURY (Per accident) \$                  |   |
|   |  |  |          |               |                         |                         | PROPERTY DAMAGE (Per accident) \$                |   |
|   |  |  |          |               |                         |                         | \$   |   |
|   | <b>UMBRELLA LIAB</b><br><b>EXCESS LIAB</b><br>DED RETENTION \$   |  |          |               |                         |                         | EACH OCCURRENCE \$                               |   |
|   |  |  |          |               |                         |                         | AGGREGATE \$                                     |   |
|   |  |  |          |               |                         |                         | \$   |   |
|   |  |  |          |               |                         |                         | \$   |   |
| C   | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N<br><input checked="" type="checkbox"/> Y | N/A      | X             | MWC0088675-03           | 01/01/2021              | 01/01/2022                                       | <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)

Labor, materials, & equipment needed for the construction of a modular landscape retaining wall & sod installation at the Jefferson Parish Emergency Operations & Communications Center

**CERTIFICATE HOLDER****CANCELLATION**

Jefferson Parish  
200 Derbigny Street  
General Government Building Suite 4400  
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

*Victoria E. Calderera*

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# Bayou Irrigation, Inc.



"Soaking the South"

14711 Harry Savoy Rd.  
St. Amant, LA 70774  
Ph: 225-572-3398  
Fax: 225-622-6172  
cbayouirrigation@yahoo.com

## CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF **BAYOU IRRIGATION, INC.**.

MEETING OF DIRECTORS, DULY NOTICED AND HELD ON **THURSDAY, APRIL 19, 2007.**

I, Clay Durbin, 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. I, THE UNDERSIGNED, IS CERTIFIED TO EXECUTE OR EXERCISE ALL BIDS, DOCUMENTS, AFFIDAVITS, BONDS, CONTRACTS, AND PURCHASE ORDERS ON BEHALF OF THE CORPORATION. THIS RESOLUTION HEREBY APPROVE, CONFIRM, AND ACCEPT EACH AND EVERY SUCH ACT PERFORMED BY THE UNDERSIGNED AGENT, AND ATTORNEY-IN-FACT.

THIS RESOLUTION IS TO BE A TRUE AND CORRECT COPY OF AN EXCERPT OF THE MINUTES OF THE ABOVE DATED MEETING. THIS DOCUMENT SINCE HAS NOT BEEN REVOKED OR RESCINDED.

Clay Durbin

PRINTED NAME

President

TITLE

Clay Durbin  
SIGNATURE

4/19/2007  
DATE

W. Fox McKeithen  
Secretary of State



# ARTICLES OF INCORPORATION

(R.S. 12:24)

Domestic Business Corporation  
Enclose \$60.00 filing fee  
Make remittance payable to  
Secretary of State  
Do Not Send Cash

Return to: Commercial Division  
P. O. Box 94125  
Baton Rouge, LA 70804-9125  
Phone (225) 925-4704  
Web Site: [www.sec.state.la.us](http://www.sec.state.la.us)

STATE OF LOUISIANA

PARISH/COUNTY OF ASCENSION

1. The name of this corporation is: BAYOU IRRIGATION INC.

2. This corporation is formed for the purpose of: (check one)

☒ Engaging in any lawful activity for which corporations may be formed.

☐ \_\_\_\_\_  
(use for limiting corporate activity)

3. The duration of this corporation is: (may be perpetual) PERPETUAL

4. The aggregate number of shares which the corporation shall have authority to issue is: 1000

5. The shares shall consist of one class only and the par value of each share is WITHOUT PAR VALUE  
(shares may be without par value) per share.

6. The full name and post office address of each incorporator is: \_\_\_\_\_

CLAY DURBIN, JR., 14711 HARRY SAUDY RD, ST AMANT LA 70774

7. Other provisions: \_\_\_\_\_

8. The corporations's federal tax identification number is: APPLIED FOR

Incorporator(s) Signature:

✓ Clay Durbin

Sworn to and subscribed before me, the undersigned Notary Public, on this date: July 26, 2000

RHONDA L. VINET  
NOTARY PUBLIC #65467  
COMMISSIONED FOR LIFE

Notary

RHONDA L. VINET  
NOTARY PUBLIC # 65467  
COMMISSIONED FOR LIFE





**Bond Number: SLA21825822**

**Contractor Information**

**Principal:** Bayou Irrigation, Inc.

**Address:** 14711 Harry Savoy Rd. Saint Amant Louisiana 70774 United States

**Owner/Obligee Information**

**Bond Form:** Bid Bond in accordance with Contract Specifications

**Owner/Obligee:** Jefferson Parish

**Address:** 200 Derbigny Street Gretna Louisiana 70053 United States

**Bond Information**

**Surety:** The Gray Casualty & Surety Company

**Bid Date:** 8/3/2021

**Estimated Contract Price:**

**Time For Completion:**

**Liquidated Damages:**

**Estimated Work On Hand:**

**Amount of Bid Security:** Five Percent of Amount Bid

**Contract # or IFB #:** 5000134974

**Description of Job:** LABOR, MATERIALS & EQUIPMENT NEEDED FOR THE CONSTRUCTION OF A MODULAR LANDSCAPE RETAINING WALL & SOD INSTALLATION AT THE JEFFERSON PARISH EMERGENCY OPERATIONS & COMMUNICATIONS CENTER

**Job Breakdown:**

**Electronic Bidding Information**

**Bid Security Percentage:** 5

**Bid Security Maximum:**

**Owner Assigned Contractor Number:**315054

**Primary Agency:**

McGriff Insurance Services, Inc.

Power of Attorney Limited to: \$10,000,000.00

**Executed**

**Entered By:** Anthony J. Kennedy - 7/20/2021 10:04:29 AM ET

**Approved & Executed By:**

*Anthony J. Kennedy*

Anthony J. Kennedy (Signed: 20-Jul-2021 12:30 PM EDT (UTC-04:00))

[Signature Information](#)

Know all men by these presents that The Gray Casualty & Surety Company, a Corporation duly organized under the laws of the State of Louisiana, are held and firmly bound unto the above owner/obligee by this transmission. The surety agrees to waive the Statute of

Fraud defense and further agrees that the owner/obligee is a third party beneficiary of the waiver for the purposes of enforcing this bid bond.

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