

DATE: 4/07/2021

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BID NO.: 50-00133832

**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 12/31/2023

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

TBD

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

N/A

**THIS SECTION MUST BE COMPLETED BY BIDDER:**

FIRM NAME: Professional Service Industries, Inc.

ADDRESS: 724 Central Ave

CITY, STATE: Jefferson, LA ZIP: 70121

TELEPHONE: (504) 733-9411 FAX: (504) 733-9415

EMAIL ADDRESS: Ayodele.Love@intertek.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 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: 1

NUMBER: 2

NUMBER: \_\_\_\_\_

NUMBER: \_\_\_\_\_

TOTAL PRICE OF ALL BID ITEMS: \$ 10,316.50

AUTHORIZED SIGNATURE: [Signature]

TITLE: Business Development Manager

Ayodele A. Love  
Printed Name

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.

DATE: 4/07/2021

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## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00133832

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			TWO (2) YEAR CONTRACT TO PROVIDE ENVIRONMENTAL TESTING AND CONSULTING IN COORDINATION WITH DEMOLITION PROCEEDINGS FOR THE DEPT. OF INSPECTION AND CODE ENFORCEMENT, DANGEROUS BLDG ABATEMENT		
1	1.00	HR	0001 LDEQ Certified Contractor/Asbestos Supervisor	80 <sup>00</sup>	80 <sup>00</sup>
2	1.00	HR	0002 LDEQ Certified Asbestos Inspector	80 <sup>00</sup>	80 <sup>00</sup>
3	100.00	EA	0003 PLM Analysis Polarized Light Microscopy (PLM)  analysis is done to identify, classify and quantify Asbestos fiber concentration in bulk building materials, domestic & industrial insulations, sprayed & non-sprayed plasters, coatings, ceiling & flooring materials, floor tiles, caulks and adhesives. This is the sample analysis used by the lab when we submit bulk samples of suspect asbestos containing materials. 1-WK TAT	6.88	688 <sup>00</sup>
4	1.00	EA	0004 PCM Analysis The most common methodology used for  asbestos air testing is Phase Contrast Microscopy (PCM). This testing method involves using a PCM microscope to count the fibers present on the cassette filter in order to determine if the total fiber concentration is less than the EPA clearance level of 0.01 fibers/cc (fibers per cubic centimeter) 1. This is the sample analysis used by the lab when we submit daily air samples during the removal of asbestos containing materials under Chapter 51. 24 hr TAT	10.50	10.50
5	1.00	EA	0005 TEM Analysis Transmission electron microscopy (TEM)  is used to identify asbestos fibers in air and bulk samples. The TEM is capable of analyzing samples at high magnification (20,000X and higher) and identifies asbestos fibers by morphology, crystalline structure and elemental analysis. TEM also can positively identify asbestos directly, distinguishing it 1 WK TAT	56 <sup>00</sup>	56 <sup>00</sup>

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			from other fibers by scanning for its morphology and elemental composition.		
6	20.00	HR	0006 Emergency Asbestos Testing for Inspector OT rate	98 <sup>00</sup>	1,960 <sup>00</sup>
7	8.00	HR	0007 Emergency Asbestos Testing for Supervisor OT rate	135 <sup>00</sup>	1,080 <sup>00</sup>
8	4.00	EA	0008 For 3 Hour PLM Testing for Emergency Asbestos Testing	36 <sup>00</sup>	144 <sup>00</sup>
9	2.00	EA	0009 For 3 Hour PCM Testing for Emergency Asbestos Testing	34 <sup>00</sup>	68 <sup>00</sup>
10	15.00	EA	0010 For 3 Hour TEM Testing for Emergency Asbestos Testing	410 <sup>00</sup>	6,150 <sup>00</sup>

Statement of Qualifications

AFFIDAVIT

STATE OF Louisiana

PARISH/COUNTY OF Jefferson

BEFORE ME, the undersigned authority, personally came and appeared: Ayodele A.

Love, (Affiant) who after being by me duly sworn, deposed and said that

he/she is the fully authorized Business Development Manager of Professional Service Industries, Inc. (Entity),

the party who submitted a Statement of Qualifications (SOQ) to Provide Environmental Testing and consulting in coordination with demolition proceedings (Briefly describe the services the SOQ

will cover), 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:

Solicitation of 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 elected officials of the Parish of Jefferson, whether still holding office at the time of the affidavit or not, where the elected official, individually, either by **telephone or by personal contact**, solicited a campaign contribution or other monetary consideration from the Entity, including the Entity's officers, directors and owners, and employees owning twenty-five percent (25%) or more of the Entity, during the two-year period immediately preceding the date the affidavit is signed. Further, to the extent known to the Affiant, the date of any such solicitation is included on the attached list.

Choice B X there are **NO** solicitations for campaign contributions which would require disclosure under Choice A of this section.

Affiant further said:

Subcontractor Disclosures

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

**Choice A** \_\_\_\_\_ Affiant further said that attached is a listing of all subcontractors, excluding full time employees, who may assist in providing professional services for the aforementioned SOQ.

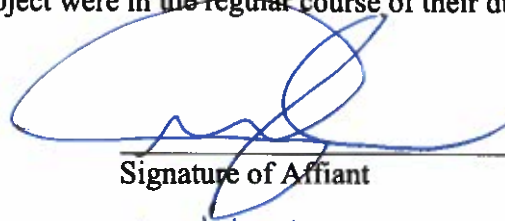
**Choice B**   X   There are **NO** subcontractors which would require disclosure under Choice A of this section.

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.



Signature of Affiant

Ayodele A. Love

Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 13 DAY OF May, 2021



Notary Public

Donald P. DiMaggio

Printed Name of Notary

33195

Notary/Bar Roll Number

My commission expires on my death

**PROFESSIONAL SERVICE INDUSTRIES, INC.**

**RESOLUTION**


Pursuant to the authority given to Garrett Smith, Assistant Secretary, by Professional Service Industries, Inc. (the "Corporation") Board Resolution dated November 30, 2011, the following resolution was passed at a formal meeting in Oakbrook Terrace, Illinois on the below date:

**BE IT RESOLVED**, Ayodele Love, Business Development Manager of the Corporation, in the normal course of his duties and responsibilities as assigned by the Corporation, is empowered to execute in the name of and on behalf of the Corporation contracts (including any related documentation or certifications included in the contract documents) for professional services with Jefferson Parish, known as the "Organization"

**BE IT FURTHER RESOLVED**, that the foregoing authority shall be and continue in full force and effect until revoked or modified by written notice. Said Organization is hereby authorized and directed to at all times rely upon the last notice received by it or any resolution as to the foregoing authority when such notice bears this Corporation's Seal and is signed by one purporting to be its Assistant Secretary.

**AND BE IT FURTHER RESOLVED**, that the Assistant Secretary of the Corporation is authorized to certify under the Corporate Seal of the Corporation, and said Organization is hereby authorized to rely upon such certification of the Assistant Secretary of the Corporation until it is formally advised of any changes therein by a subsequent certificate and under the Corporate Seal.

**IN WITNESS WHEREOF**, I have affixed my name as Assistant Secretary, and have caused the Corporate Seal of Professional Service Industries, Inc., to be hereto affixed, this 18<sup>th</sup> day of July, 2019.



Garrett Smith  
Assistant Secretary







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
09/29/2020

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> Marsh USA Inc. 2929 Allen Parkway, Suite 2500 Houston, TX 77019 Attn: Houston.Certs@Marsh.com	<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext):</b> <b>E-MAIL ADDRESS:</b>	<b>FAX (A/C, No):</b>
<b>INSURED</b> Professional Service Industries, Inc. and its subsidiaries 545 East Algonquin Road Arlington Heights, IL 60005	<b>INSURER(S) AFFORDING COVERAGE</b>	
CN102792561-(6)-PrPo-20-21	<b>INSURER A:</b> Zurich American Insurance Company	<b>NAIC #</b> 16535
	<b>INSURER B:</b> N/A	<b>NAIC #</b> N/A
	<b>INSURER C:</b> American Guarantee & Liability Ins Co	<b>NAIC #</b> 26247
	<b>INSURER D:</b> N/A	<b>NAIC #</b> N/A
	<b>INSURER E:</b> N/A	<b>NAIC #</b> N/A
	<b>INSURER F:</b>	

**COVERAGES****CERTIFICATE NUMBER:**

HOU-003703285-03

**REVISION NUMBER:** 6

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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		GLO541569307	10/01/2020	10/01/2021	EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 5,000,000
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		BAP 7296414-00	10/01/2020	10/01/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		AUC541569407 Excess of General Liability Auto and Workers' Comp.	10/01/2020	10/01/2021	EACH OCCURRENCE \$ 6,000,000 AGGREGATE \$ 6,000,000
A	<input checked="" type="checkbox"/> <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	WC 7296412-00 (AOS) WC 7296413-00 (WI)	10/01/2020 10/01/2020	10/01/2021 10/01/2021	<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)

**CERTIFICATE HOLDER**

Professional Service Industries, Inc. and its subsidiaries 545 East Algonquin Road Arlington Heights, IL 60005	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Manashi Mukherjee <i>Manashi Mukherjee</i>
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# **ADDITIONAL REMARKS SCHEDULE**

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<b>AGENCY</b> Marsh USA Inc.		<b>NAMED INSURED</b> Professional Service Industries, Inc. and its subsidiaries 545 East Algonquin Road Arlington Heights, IL 60005
<b>POLICY NUMBER</b>		
<b>CARRIER</b>	<b>NAIC CODE</b>	<b>EFFECTIVE DATE:</b>

## **ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**

**FORM NUMBER:** 25 **FORM TITLE:** Certificate of Liability Insurance

**Professional Liability:**

Policy #: EOC0206920-05

Carrier: Steadfast Insurance Company - NAIC #26387

Effective Dates: 09/30/2020 to 09/30/2021

Limit: \$5,000,000 Each Claim/Aggregate

SIR: \$1,000,000

**Contractor's Pollution Liability**

Policy #: CPO16503597

Carrier: AIG Specialty Insurance Company - NAIC #26883

Effective Dates: 10/01/2020 - 10/01/2021

Limit of Liability: \$5,000,000 Coverage A Each Loss

\$250,000 Coverage B Each Loss

\$10,000,000 Aggregate

Deductible: \$100,000 Each Loss

**Named Insured Includes:**

Professional Service Industries, Inc. dba Intertek-PSI

Professional Services Industries, Inc.

Professional Service Industries Holdings, Inc.

Pittsburgh Testing Laboratory, Inc.

Professional Services Industries Engineering, PLLC

PSI Acquisitions, Inc.

Midwest Engineering Services, Inc.

Wilson Inspection X-Ray Services, Inc

# STATE OF LOUISIANA

## DEPARTMENT OF ENVIRONMENTAL QUALITY

certifies that

*Jasmine J Wilson*

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

Asbestos Inspector

Accreditation No. JI206828

AI No. 206828

Date of Issuance August 14, 2020

Expiration July 2, 2021

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

  
Permit Support Services Division  
Office of Environmental Services

**STATE OF LOUISIANA**  
**DEPARTMENT OF ENVIRONMENTAL QUALITY**

certifies that

***Jasmine J Wilson***

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

**Asbestos Contractor/Supervisor**

Accreditation No. **AS206828**

AI No. **206828**

Date of Issuance **September 29, 2020**

Expiration **August 7, 2021**

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

  
Permit Support Services Division  
Office of Environmental Services

**STATE OF LOUISIANA**  
**DEPARTMENT OF ENVIRONMENTAL QUALITY**

certifies that

***Thomas K George***

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

**Asbestos Contractor/Supervisor**

Accreditation No. **JS112486**

AI No. **112486**

Date of Issuance **September 30, 2020**

Expiration **July 1, 2021**

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

  
\_\_\_\_\_  
Permit Support Services Division  
Office of Environmental Services

**STATE OF LOUISIANA**  
**DEPARTMENT OF ENVIRONMENTAL QUALITY**

certifies that

*Thomas K George*

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

**Asbestos Inspector**

Accreditation No. AI112486

AI No. 112486

Date of Issuance August 14, 2020

Expiration August 16, 2021

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

  
Permit Support Services Division  
Office of Environmental Services