

DATE: 1/10/2018

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 4

BID NO.: 50-00121909

JEFFERSON PARISH

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

VENDOR: 27118 BLANK BID COPY VENDOR

BUYER: CGASPER

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

N/A

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

7 days

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

7 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 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) 12344

***** ALL BIDDERS MUST COMPLETE SECTION BELOW *****

FIRM NAME:

ARC MECHANICAL CONTRACTORS, INC.

SIGNATURE:

(Must be signed here)

Chester A. Cabirac

TITLE:

PRESIDENT

PRINT OR TYPE NAME:

CHESTER A. CABIRAC

ADDRESS:

PO BOX 6720

CITY, STATE:

SLIDELL, LA 70469

ZIP:

TELEPHONE:

(985) 661-9191

FAX:

(985) 661-9169

EMAIL ADDRESS:

arcmechanical@bellsouth.net

TOTAL PRICE OF ALL BID ITEMS: \$ 2,600⁰⁰/_{xx}

DATE: 1/10/2018

INVITATION TO BID FROM JEFFERSON PARISH - continued

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BID NO.: 50-00121909

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>REBUILD ONE 4" BACKFLOW PREVENTER AT FIRE STATION NO. 19. INCLUDES REPAIRS OF EXISTING INSULATION.</p> <p>0001 LABOR, MATERIAL, AND EQUIPMENT TO REBUILD ONE 4" BACKFLOW PREVENTER AT FIRE STATION NO. 19. INCLUDES REPAIRS OF EXISTING INSULATION.</p> <p>ADDRESS: 455 EDWARDS AVE. JEFFERSON, LA 70123</p> <p>PROPERTY MANAGER: MIKE DEFOURNEAUX (504) 756-1990</p> <p>FOR A SITE VISIT, SEE CONTACT ABOVE.</p>	<u>2,600⁰⁰/₈₄</u>	<u>2,600⁰⁰/₈₄</u>

Office:
985-661-9191
Fax:
985-661-9169



LA State Contractors
License # 12344
Email:
arcmechanical
@bellsouth.net

CORPORATE RESOLUTION

EXCERPT FROM THE MINUTES OF THE BOARD OF DIRECTORS OF ARC
MECHANICAL CONTRACTORS, INCORPORATED. A CORPORATION INCORPORATED
IN THE STATE OF LOUISIANA IN 1978.

AT THE MEETING OF DIRECTORS OF ARC MECHANICAL CONTRACTORS, INCORPORATED DULY
NOTICED AND HELD ON JANUARY 23, 2018 A QUORUM BEING THERE PRESENT, ON MOTION DULY
MADE AND SECONDED, IT WAS;

RESOLVED, THAT CHESTER A. CABIRAC, 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 JEFFERSON PARISH 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 THEREFORE 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 THAT 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.



PRESIDENT

1/23/2018

DATE

APPROVED:



SECRETARY/TREASURER



CERTIFICATE OF LIABILITY INSURANCE

ARCME-1

OP ID: CY

DATE (MM/DD/YYYY)

09/13/2017

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 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 Stiel Insurance Services of New Orleans, Inc. 433 Metairie Road Suite #520 Metairie, LA 70005 Louis Martello		CONTACT NAME: Louis Martello PHONE (A/C, No, Ext): 504-832-5733 FAX (A/C, No): 504-831-3604 E-MAIL ADDRESS: lmartello@stielinsurance.com		
INSURED ARC Mechanical Contractors Inc Mr. Chester Cabirac P O Box 6720 Slidell, LA 70469		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: American Casualty Co of		20427
		INSURER B: Continental Insurance Co. of		42625
		INSURER C: Continental Casualty Company		20443
		INSURER D: Columbia Casualty Co.		31127
		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
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			C1015152154	08/23/2017	08/23/2018	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
D	<input checked="" type="checkbox"/> Pollution			CBS6042957162	08/23/2017	08/23/2018	MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
							Pollution \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO			C2058039895	08/23/2017	08/23/2018	BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS						\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR						EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE			C2078422473	08/23/2017	08/23/2018	AGGREGATE \$ 5,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 10000						\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A	WC131456473	08/23/2017	08/23/2018	E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below			USL&H			E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Leased/Rented Eqpt			C1015152154	08/23/2017	08/23/2018	2500-Ded 125,000

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

Certificate holder to read: THE PARISH OF JEFFERSON, ITS DISTRICTS, DEPARTMENTS AND AGENCIES UNDER THE DIRECTION OF THE PARISH PRESIDENT AND THE PARISH COUNCIL DEPARTMENT OF GENERAL SERVICES.

CERTIFICATE HOLDER**CANCELLATION**

JEFFE17

The Parish of Jefferson, Its
Districts, Departments and
Agencies
200 Derbingy Street Ste3300
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

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