

INVITATION TO BID

THIS IS NOT AN ORDER

Page: 4

BID NO.: 50-00132563

DATE: 10/13/2020

JEFFERSON PARISH

PURCHASING DEPARTMENT

P.O. BOX 9

GRETN, LA, 70054-0009

504-364-2678

VENDOR: 27118 BLANK BID COPY VENDOR

BUYER: RSCOTT

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

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

1 to 2 weeks  
7 days  
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)

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

FIRM NAME:

Craftman Ship

SIGNATURE:

C. Lucado

(Must be signed here)

PRINT OR TYPE NAME:

Colin Lucado

ADDRESS:

2601 Old Spanish Trail

CITY, STATE:

Slidell LA

ZIP:

70460

TELEPHONE:

985 768-0747

FAX:

( )

EMAIL ADDRESS:

ColinLucado@gmail.com

TOTAL PRICE OF ALL BID ITEMS: \$ 5480.00

DATE: 10/13/2020

INVITATION TO BID FROM JEFFERSON PARISH - continued

SEALD BID

Page: 5

BID NO.: 50-00132563

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>Labor, material and equipment necessary to grind and prep concrete floors at the Mike Wiley Stadium bathrooms and install new floor coating for the Jefferson Parish Recreation Department</p> <p>0001 Labor and Material to grind and prep concrete floors at Mike Wiley Stadium's bathrooms and install new floor coating</p> <p>see attached specifications</p>	\$5,480.00	\$5,480.00





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/16/2020

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).



PRODUCER  
Grant P Gravois Insurance Agency Inc.  
302 Fremaux Ave  
Slidell, La 70458

INSURED  
Colin A Luckado II  
2601 Old Spanish Trail  
Slidell, LA. 70461

## CERTIFICATE NUMBER:

## REVISION NUMBER:

CONTACT NAME: Brittany Palao	PHONE (A/C, No. Ext): 985-643-4276	FAX (A/C, No.): 985-643-4277
E-MAIL ADDRESS: Brittany@grantiytravols.com		
INSURER(S) AFFORDING COVERAGE		
INSURER A: State Farm Mutual Automobile Insurance Company	NAIC #	25178
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSR LTR	TYPE OF INSURANCE	ADDL SUBR	INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY						
	CLAIMS-MADE						
	OCUR						
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	POLICY						
	PRO-JECT						
	LOC						
	OTHER:						
	AUTOMOBILE LIABILITY			3166 186-F01-18D	06/01/2020	12/01/2020	
	ANY AUTO						
	OWNED						
	AUTOS ONLY						
	HIRE						
	AUTOS ONLY						
	NON-OWNED						
	AUTOS ONLY						
	UMBRELLA LIAB						
	EXCESS LIAB						
	CLAIMS-MADE						
	OCUR						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?						
	(Mandatory in NH)						
	DESCRIPTION OF OPERATIONS below						
	E.L. DISEASE - POLICY LIMIT						
	E.L. DISEASE - EA EMPLOYEE						
	E.L. EACH ACCIDENT						
	PER						
	STATUTE						
	OTH-						
	EACH OCCURRENCE						
	AGGREGATE						
	PROPERTY DAMAGE (Per accident)						
	BODILY INJURY (Per person)						
	BODILY INJURY (Per accident)						
	COMBINED SINGLE LIMIT (Ea accident)						
	EACH OCCURRENCE						
	DAMAGE TO RENTED PREMISES (Ea occurrence)						
	MED EXP (Any one person)						
	PERSONAL & ADV INJURY						
	GENERAL AGGREGATE						
	PRODUCTS - COM/OP AGG						
	OTHER:						

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.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)	2002 GMC C1500 Pickup	VIN#2GTEC19V821332096
The Jefferson Parish in Districts Departments and agencies under the direction of Parish Counsel shall be named additional insured on this auto policy.		

## CERTIFICATE HOLDER

## CANCELLATION

Jefferson Parish Purchasing Dept Bid# 50-00132563 200 Dirbiny St. Ste 4400 Gretna, LA. 70053	AUTHORIZED REPRESENTATIVE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
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The ACORD name and logo are registered

ACORD 25 (2016/03)

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/14/20

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> BENNETT INSURANCE INC 328 Sun Valley Drive Slidell, LA 70458		<b>INSURED</b> Colin Lukkado 44790 Pontchartrain Drive Apt 815 Slidell, LA 70458	
<b>INSURER A:</b> Wesco Insurance Company		<b>INSURER F:</b>	
<b>INSURER B:</b> LCI-SIF		<b>INSURER E:</b>	
<b>INSURER C:</b>		<b>INSURER D:</b>	
<b>INSURER(s) AFFORDING COVERAGE</b>		<b>INSURER(s) AFFORDING COVERAGE</b>	
<b>NAIC #</b>		<b>NAIC #</b>	
<b>ADDRESS:</b> becky@grantsinsurance.com		<b>ADDRESS:</b> becky@grantsinsurance.com	
<b>E-MAIL</b>		<b>E-MAIL</b>	
<b>PHONE (A/C No. Ext):</b> (985)643-5096		<b>PHONE (A/C No. Ext):</b> (985)643-5096	
<b>FAX (A/C No.):</b> (985)643-3651		<b>FAX (A/C No.):</b> (985)643-3651	

## 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	TYPE OF INSURANCE	ADSL	INSUR	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMITS
<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY	<input checked="" type="checkbox"/>	Y	NW166954900	05/10/20	05/19/21	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$50,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$1,000,000 COMBINED SINGLE LIMIT (Per accident) BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$
<input type="checkbox"/>	ANY AUTO OWNED HIRE NON-OWNED AUTOS ONLY SCHEDULED AUTOS ONLY	<input type="checkbox"/>					
<input type="checkbox"/>	UMBRELLA LIAB	<input type="checkbox"/>					
<input type="checkbox"/>	EXCESS LIAB	<input type="checkbox"/>					
<input type="checkbox"/>	RETENTION \$	<input type="checkbox"/>					
<input type="checkbox"/>	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/>	N/A	27253	05/10/20	05/10/21	E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
This General Liability policy is endorsed to include Parks and Recreation. The Jefferson Parish in Districts Departments and agencies under the direction of Parish Counsel shall be named additional insured on this General Liability policy.

## CERTIFICATE HOLDER

## CANCELLATION

Jefferson Parish Purchasing Dept Bid# 50-00132563 200 Dribiny St. Ste 4400 Gretna, La. 70053	AUTHORIZED REPRESENTATIVE [Redacted Signature]
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SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.