

DATE: 5/17/2021

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00134646

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

Within 10 days from the
date of Notice of Proceed.

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

Completed in Thirty(30) consecutive calendar days

from date of Notice to Proceed.

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) 33480

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: Central Monitoring Inc. dba Alarm Protection Services	
SIGNATURE: (Must be signed here)	TITLE: President
PRINT OR TYPE NAME: Spencer Smith	
ADDRESS: 4440 Trenton St.	
CITY, STATE: Metairie, LA	ZIP: 70006
TELEPHONE: (504) 455-5277	FAX: (504) 454-5079
EMAIL ADDRESS: accounting@securitybyaps.com	

TOTAL PRICE OF ALL BID ITEMS: \$ 6499.00

DATE: 5/17/2021

Page: 6

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00134646

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>Labor, materials and equipment necessary to upgrade fire alarm system for the Jefferson Parish Recreation Department</p> <p>0010 Labor, materials and equipment to upgrade fire alarm system</p> <p>Location: Williams Playlot 7744 Mistletoe Street Metairie, LA 70003</p> <p>*SEE ATTACHED SPECIFICATIONS*</p>	6499. ⁰⁰	6499. ⁰⁰



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/27/2021

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).

PRODUCER Alpha Insurance Agency, LLC 831 Lafayette St. Gretna LA 70053		CONTACT NAME: Meredith Brayden PHONE (A/C, No, Ext): (504) 227-1026 FAX (A/C, No): (504) 227-1047 E-MAIL ADDRESS: meredithb@alphala.com	
INSURED Central Monitoring, Inc, DBA: Alarm Protection Services 4440 Trenton St Metairie LA 70006		INSURER(S) AFFORDING COVERAGE INSURER A: Progressive Paloverde Ins. Co. NAIC # 44695 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	


COVERAGES **CERTIFICATE NUMBER:** CL2152702745 **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
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y		06394464-6	12/12/2020	06/12/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ HIRED/NON OWNED \$ 1,000,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	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/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

Bid # 5000134646
Jefferson Parish, its Districts, Departments and Agencies under the direction to the Parish President and the Parish Council as additional insureds regarding negligence by the contractor for the Comprehensive Automobile Liability policy.

CERTIFICATE HOLDER Williams Playlot 7744 Mistletoe St Metairie LA 70003	CANCELLATION 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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PRODUCER Alpha Insurance Agency, LLC 831 Lafayette St. Gretna LA 70053		CONTACT NAME: Meredith Brayden PHONE (A/C, No, Ext): (504) 227-1026 FAX (A/C, No): (504) 227-1047 E-MAIL ADDRESS: meredithb@alphala.com	
INSURED Central Monitoring, Inc, DBA: Alarm Protection Services 4440 Trenton St Metairie LA 70006		INSURER(S) AFFORDING COVERAGE INSURER A: Progressive Paloverde Ins. Co. NAIC # 44695 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL2152702745 **REVISION NUMBER:**

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	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y		06394464-7	06/12/2021	12/12/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ HIRED/NON OWNED \$ 1,000,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	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 <input type="checkbox"/>	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

Bid # 5000134646

Jefferson Parish, its Districts, Departments and Agencies under the direction of the Parish President and the Parish Council as additional insureds regarding negligence by the contractor for the Comprehensive Automobile Liability policy.

CERTIFICATE HOLDER**CANCELLATION**

Williams Playlot 7744 Mistletoe St Metairie LA 70003	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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CENTR-3

OP ID: LW

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/27/2021

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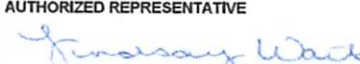
PRODUCER Bryan Duplantier Alliance Insurance Agency Serv 4444 York St., Ste. 100 Metairie, LA 70001-7407 Bryan Duplantier	504-831-2196	CONTACT NAME: Alliance Insurance Agency Serv	
		PHONE (A/C, No, Ext): 504-831-2196	FAX (A/C, No): 504-837-3389
		E-MAIL ADDRESS: Lindsay@alliance-ins.com	
INSURED Central Monitoring Inc Alarm Protection Services & Audio Professional Services Spencer Smith 4440 Trenton Street Metairie, LA 70006-6527	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Underwriters at Lloyd's London		15792
	INSURER B: Retailers Casualty Insurance		
	INSURER C: Houston Specialty Insurance Co		12936
	INSURER D:		
	INSURER E:		
INSURER F:			

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
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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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Professional Liab <input type="checkbox"/> Errors & Omission GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			OPL00333 4 INCLUDED	08/09/2020	08/09/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Emp Ben. \$ 1,000,000
C	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			DBHS180000203	12/12/2020	12/12/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 300,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	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 <input type="checkbox"/>	N/A	0999 11126	05/10/2021	05/10/2022	<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)

Bid # 5000134646 - Jefferson Parish, its Districts Departments and Agencies under the direction of the Parish President and the Parish Council as additional insureds regarding negligence by the contractor for the Commercial General Liability Insurance and the Automobile Liability Policies. Waiver of subrogation is included on the Work Comp Policy.

CERTIFICATE HOLDER	CANCELLATION
WILLIA7 Williams Playlot 7744 Mistletotee Street Metairie, LA 70003	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 

LABOR, MATERIALS AND EQUIPMENT TO UPGRADE FIRE ALARM SYSTEM AT WILLIAMS PLAYLOT FOR THE EASTBANK DEPARTMENT OF RECREATION

Bid # 50-134646

Section 1.0 – Site Visits:

Job site: Williams Playlot, 7744 Mistletoe Street, Metairie, LA 70003

To view jobsite, or set up an appointment, please contact Scott Muhoberac at 504-736-6999 smuhoberac@jeffparish.net. Monday through Friday from 7:00 am to 2:30 pm.

Section 2.0 – Scope:

The owners extend this bid to cover all labor, materials and necessary essentials to upgrade the fire alarm system at the above location.

Section 3.0 – Quantities/Inspection:

Bidders must inspect the site and perform their own measurements in order to determine the proper quantity of materials and equipment required to complete this project. All measurements given in these specifications are informational only.

Section 4.0 – Bid Specifications:

Where brand names, make, manufacturer, or stock numbers are specified, it is for the purpose of establishing certain minimum standards of quality. If you are submitting a substitute product of equal or better quality, complete product data will be required prior to award.

- Install (1) FireLite Addressable 50-point fire control panel. Model number ES-50X.
- Install (1) FireLite Addressable photoelectric smoke detector white no compatible with MS-9050. Model number SD365.
- Install (6) FireLite Addressable manual pull station. Model number BG-12LX.

Section 4.0 – Bid Specifications: Continued

- Install (4) System sensor fire strobe, red. Model number SRL.
- Install (3) System sensor horn strobe, red. Model number P2RL.
- Install (1) System sensor ceiling mount strobe, red. Model number SCRL.
- Install (1) Starlink fire dual path communicator cellular or IP Verizon panel powered. Model number SLE-LTEVI-FIRE.
- Install (7) System sensor wall surf MNT backbox red-comptble with REDCLNGSTRBE. Model number SBBGRL.
- Install (2) System sensor ceil surface MNT backbox red. Model number SBBCRL.
- Install (6) Firelite pull station backbox for BG series. Model number SB10
- Install (6) APS Conduit-1 2 – EMT 10 length. Model number CONDUIT .5IN EMT.
- Install (1) Genesis 18 gauge 4 conductor solid wire, red FPL 1000. Model number WG-41071104.
- Install (1) Genesis 16 gauge 4 conductor solid wire, red FPL 1000. Model number WG-41121004.
- Install (1) LSFM fire alarm submittal 1 – 25 devices NACs – smokes – heats only. Model number FIREALARM SUBMITTAL25

Section 6.0 – Hours of Work:

Work shall be performed during normal working hours. All work must be scheduled with owner representative 5 days in advance. The successful bidder shall work normal building working hours to provide a safe work environment at no extra charge to Jefferson Parish.

Section 7.0 – Cleaning Area and Safety:

Job site must be clean and free of all litter and debris daily and upon completion of the contract. Passageways must be kept clean and free of material, equipment and debris at all times. Inflammable material must be removed from the job site daily, because storage will not be permitted on the premises. Precautions must be exercised at all times to safeguard the welfare and safety of the general public, employees of Jefferson Parish, and other Parish officials.

Section 8.0 – Existing Structure:

Should any cutting, patching alteration, addition, or repairs to existing structure, wall, floor, ceiling or part of building be required of this project, the successful bidder shall restore the alteration to its original condition, with the same type materials, finish and workmanship.

Section 9.0 – Warranty:

The bidder must agree, upon written notice from the owner, promptly and without charge, and to the satisfaction of the owner, to make changes replacements, and corrections which may be required to make good all defects in materials and/or equipment under its intended use, within the warranty period, at no cost to the owner.

Section 10.0 – SDS (Safety Data Sheets):

The bidder shall notify the Jefferson Parish Department of Recreation contact person of any hazardous substances that will be bought to and/or used at the workplace.

Section 11.0 – Permits:

The successful bidder shall obtain any and all permits required by the Jefferson Parish Department of Inspection and Code Enforcements. The successful bidder shall also be responsible for payment of these permits. All permits must be obtained prior to the start of the project.

Section 12.0 – Pre-Construction Conference and Notice to Proceed:

A Pre-Installation Conference shall be held between the successful bidder and the owner before any work commences.

Section 13.0 – Construction Term:

Upon receiving a notice to proceed, the Bidder agrees that all work shall be completed as follows: Vendor agrees to commence actual physical work on the site with an adequate force and equipment within 10 days from the date of Notice of Proceed. All work shall be substantially completed in **THIRTY (30)** consecutive calendar days from date of Notice to Proceed.