

Otwell's Trucking LLC  
10387 River Road  
Ama, LA 70031

**Bid No.: 50-00141266**

**Two Year Contract for Heavy Equipment  
Rental (Part II) on an as needed basis for the  
East & West Bank Department of Public  
Works – All Divisions**

**Bid Date: April 6, 2023 2:00 PM**

**Bid Address: Central Bidding Online**

**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 \_\_\_\_\_.

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

As Needed

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

N/A**THIS SECTION MUST BE COMPLETED BY BIDDER:**FIRM NAME: Otwell's Trucking LLCADDRESS: 10387 River RoadCITY, STATE: Ama, LA ZIP: 70031TELEPHONE: ( 504 ) 667-5452 FAX: (      )     EMAIL ADDRESS: john@otwellservices.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: \_\_\_\_\_

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

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

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

TOTAL PRICE OF ALL BID ITEMS: \$ 43,205.00 Forty Three Thousand Two Hundred Five DollarsAUTHORIZED SIGNATURE: [Signature]Steven Otwell

Printed Name

TITLE: President / Member

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.

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00141266

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			Two(2) Year Contract for Heavy Equipment Rental (Part II) on an as needed basis for the East and West Bank Department of Public Works - All Divisions		
1	2.00	MI	0010 CRAWLER TRACTOR D-3 DRAWBAR, 68 HP	\$ 95.00	\$ 190.00
			Crawler tractors with angle dozers, wide tracks (LGP) approximate horsepower as indicated and supplied with adequate working winch.		
2	4.00	HR	0020 CRAWLER TRACTOR D-3 DRAWBAR, 68HP	\$ 190.00	\$ 760.00
3	30.00	MI	0030 CRAWLER TRACTOR D-3 DRAWBAR, 96HP	\$ 95.00	\$ 2850.00
4	16.00	HR	0040 CRAWLER TRACTOR D-3 DRAWBAR, 96HP	\$ 190.00	\$ 3040.00
5	2.00	MI	0050 CRAWLER TRACTOR D-3 DRAWBAR, 110HP	\$ 95.00	\$ 190.00
6	4.00	HR	0060 CRAWLER TRACTOR D-3 DRAWBAR, 110HP	\$ 190.00	\$ 760.00
7	15.00	MI	0070 CRAWLER TRACTOR D-3 DRAWBAR, 120HP	\$ 95.00	\$ 1425.00
8	175.00	HR	0080 CRAWLER TRACTOR D-3 DRAWBAR, 120HP	\$ 190.00	\$ 33250.00
9	4.00	HR	0090 PILE DRIVER ATTACHMENT 60FT LEADS AND 3500 LB HAMMER	\$ No Bid	\$ No Bid
10	4.00	HR	0100 ONE TRACTOR WITH 5th WHEEL, OIL- FIELD BED, AND ROLLING TAIL	\$ 185.00	\$ 740.00

Non-Public Works Bid

AFFIDAVIT

STATE OF Louisiana

PARISH/COUNTY OF Jefferson

BEFORE ME, the undersigned authority, personally came and appeared: Steven  
Otwell, (Affiant) who after being by me duly sworn, deposed and said that  
he/she is the fully authorized Member of Otwell's Trucking Entity),  
the party who submitted a bid in response to Bid Number 50-00141266, 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.

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


*[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

Steven Otave II  
\_\_\_\_\_  
Printed Name of Affiant

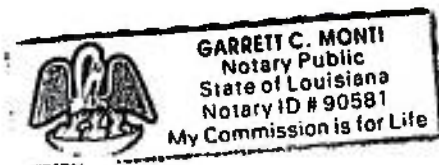
SWORN AND SUBSCRIBED TO BEFORE ME  
ON THE 6th DAY OF April, 2023.

  
\_\_\_\_\_  
Notary Public

Garrett C. Monti  
\_\_\_\_\_  
Printed Name of Notary

90581  
\_\_\_\_\_  
Notary/Bar Roll Number

My commission expires with life



State of  
Louisiana  
Secretary of  
State



COMMERCIAL DIVISION  
225.925.4704

Fax Numbers  
225.932.5317 (Admin. Services)  
225.932.5314 (Corporations)  
225.932.5318 (UCC)

Name	Type	City	Status
OTWELL'S TRUCKING LLC	Limited Liability Company	ANA	Active

#### Previous Names

Business: OTWELL'S TRUCKING LLC  
Charter Number: 42052086K  
Registration Date: 10/27/2015  
Domicile Address

10387 RIVER ROAD  
AMA, LA 70031

#### Mailing Address

10387 RIVER ROAD  
AMA, LA 70031

#### Status

Status: Active

Annual Report Status: In Good Standing

File Date: 10/27/2015

Last Report Filed: 9/27/2021

Type: Limited Liability Company

#### Registered Agent(s)

Agent:	STEVEN OTWELL
Address 1:	10387 RIVER ROAD
City, State, Zip:	AMA, LA 70031
Appointment Date:	10/27/2015
Agent:	CARY BURELE
Address 1:	115 CHOCTAW DRIVE
City, State, Zip:	LULING, LA 70070
Appointment Date:	7/23/2021

Officer(s) Additional Officers: No

Officer:	STEVEN OTWELL
Title:	Member
Address 1:	10387 RIVER ROAD
City, State, Zip:	AMA, LA 70031
Officer:	CARY BURELE
Title:	Member
Address 1:	115 CHOCTAW DRIVE
City, State, Zip:	LULING, LA 70070

#### Amendments on File (2)

Description	Date
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Domestic LLC Agent/Donkile Change	7/23/2021
Appointing, Change, or Resign of Officer	7/27/2021

Print





OTWETRU-01

JGUIDRY

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/22/2023

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> License # 231432 Hub International Gulf South 3861 Ambassador Caffery Parkway Suite 550 Lafayette, LA 70503	<b>CONTACT NAME:</b> Rachael Bernard	
	<b>PHONE (A/C, No, Ext):</b>	<b>FAX (A/C, No):</b>
<b>INSURED</b> Ottwell's Trucking LLC Ottwell Services LLC 10387 River Road Ama, LA 70031	<b>E-MAIL ADDRESS:</b> rachael.bernard@hubInternational.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> New York Marine & General Insurance	<b>NAIC #</b> 16608
	<b>INSURER B:</b> Lloyd's of London	<b>15792</b>
	<b>INSURER C:</b> LUBA Casualty Insurance Company	<b>12472</b>
	<b>INSURER D:</b> XL Specialty Insurance Company	<b>37885</b>
<b>INSURER E:</b> Travelers Property Casualty Company of America	<b>25674</b>	
<b>INSURER F:</b>		

## 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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			ML202200002232	7/18/2022	7/18/2023	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 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000 CLAIMS EXPENSE \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			AU202200017065	7/18/2022	7/18/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 25,000			OTTR2022070263	7/18/2022	7/18/2023	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ Aggregate \$ 1,000,000
C	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 checked="" type="checkbox"/> N	N/A	028000022700122	9/16/2022	9/16/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Motor Truck Cargo			UM00096627MA22A	11/6/2022	7/18/2023	Limit Per PowerUnit 500,000
E	Equipment Floater			QT-660-7S242155-TIL-22	8/27/2022	11/6/2023	Total Insured Value 752,024

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

## CERTIFICATE HOLDER

## CANCELLATION

Insured Copy

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



## ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY <b>Hub International Gulf South</b>		License # 231432	NAMED INSURED <b>Otwell's Trucking LLC Otwell Services LLC 10387 River Road Ama, LA 70031</b>
POLICY NUMBER <b>SEE PAGE 1</b>			
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>	EFFECTIVE DATE: <b>SEE PAGE 1</b>	

## ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

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

## FORMS AND ENDORSEMENTS:

General Liability Policy Includes:  
Marine Contractors' Legal Liability  
Sudden & Accidental Pollution  
Blanket Additional Insured (AI)/ Waiver of Subrogation (WOS)/Loss Payee  
Blanket Additional Insured- Lessor of Leased Equipment  
Primary & Non-Contributory  
Per Project Aggregate  
Railroad Protective Liability Extension Clause  
Contractual Liability Extension  
Action Over Indemnity  
Rigger's Legal Liability  
Other Work Endorsement  
Blanket 30 Day NOC  
In Rem

## Auto Policy Includes:

Blanket Additional Insured  
Blanket Waiver of Subrogation  
Blanket Primary Wording  
Employee as Insured  
Employee Hired Auto  
Coverage Extension for Rental Vehicles  
Uninsured Motorists Coverage - Bodily Injury  
Blanket 30 Day NOC  
MCS90  
BCM91X  
Auto Policy Deductibles: \$3,000 Comp & \$3,000 Collision

## Motor Truck Cargo: All Risk Coverage

\$500,000 Limit for all vehicles excluding dumping operations  
\$2,500 Deductible per claim except \$5,000 deductible for items valued over \$250,000

## Umbrella Policy Includes:

Underlying Policies: Marine General Liability and Commercial Auto Liability  
Blanket Waiver of Subrogation Where Required by a Written Contract on a Follow Form Basis  
Blanket Additional Insured Where Required by a Written Contract on a Follow Form Basis  
Blanket Primary and Non Contributory Where Required by a Written Contract

## Workers Compensation Policy Includes:

Blanket Waiver of Subrogation Where Required by a Written Contract and USL&amp;H Coverage

## Equipment Policy includes:

\$250K Leased/Rented CCC Limit



04-05-2023

**Bid Bond in Accordance with Contract Specifications**

SLA04059249

Ottwell's Trucking LLC

Bond Number

Principal Name

10387 River Road, Ama, LA, 70031, US

Principal Address

Principal Signature

Jefferson Parish

200 Derbigny Street, Gretna, LA, 70053, US

Owner/Obligee Name

Owner/Obligee Address

**Bond Information**

04-06-2023

Bid Date

American Alternative Insurance  
Corporation  
Surety

328377

Contractor Vendor ID Number

50-00141266

Contract ID Number

2 Yr Contract for Heavy Equipment (Part II) on an as needed basis for the East &amp; West Bank Department of Public Works

Description of Job

Five Percent of Total Amount Bid

5%

Amount of Bid Security

Bid Security Maximum

Bid Security Percentage

Meghann C Turner

Attorney-in-Fact

Surety Bond Brokers of LA Inc.

Bond Entered and Executed By

Primary Agency

Attorney-In-Fact Signature

Know all men by these presents that American Alternative Insurance Corporation, a Corporation duly organized under the laws of the State of DE, are held and firmly bound unto the above owner/obligee by the 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.





# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Otwell's Trucking LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☒ S Corporation ☐ Partnership ☐ Trust/estate

☒ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) S  
Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

10387 River Road

6 City, state, and ZIP code

Ama, LA 70031

Requester's name and address (optional)

7 List account number(s) here (optional)

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

OR

Employer identification number

8 0 - 0 9 7 7 1 3 9

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign  
Here

Signature of  
U.S. person ▶

Date ▶

7/25/2022

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

Otwell's Trucking  
10387 River Road  
Ama, LA 70031

Bid No.: 50-00141266

Two Year Contract for Heavy Equipment  
Rental (Part II) on an as needed basis for the  
East & West Bank Department of Public  
Works – All Divisions

### **Equipment Owned by Otwell's Trucking**

- 2020 John Deere 550K Crawler Dozer
  - Serial # 1T0550KKTMF390988
- 2021 John Deere 650K Crawler Dozer
  - Serial # 1T0650KKVMF403282