

DATE: 2/08/2018

INVITATION TO BID
THIS IS NOT AN ORDER

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BID NO.: 50-00122130

JEFFERSON PARISH

PURCHASING DEPARTMENT
P.O. BOX 9
GRETNA, 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	_____
INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK	_____
INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK	_____

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) _____

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: Bay Pest Control Company, Inc.	
SIGNATURE: (Must be signed here)	TITLE: President
PRINT OR TYPE NAME: Bruno Milanese	
ADDRESS: PO Box 1612	
CITY, STATE: Ocean Springs, MS	ZIP: 39566
TELEPHONE: 228 875-8908	FAX: 228 875-1627
EMAIL ADDRESS: mail@baypestcontrol.net	

TOTAL PRICE OF ALL BID ITEMS: \$ \$2,160.00

Bay Pest Control Company, Inc.

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INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00122130

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	24.00	MO	<p>TWO (2) YEAR PEST CONTROL CONTRACT FOR THE JEFFERSON PARISH ALARIO CENTER AND SEGNETTE FIELD BASEBALL STADIUM.</p> <p>0010 Labor, material and equipment necessary to provide pest control services including Halls A, B, C, and Kitchen (approximately 105,000 sq. ft.) at the Jefferson Parish Alario Center.</p> <p>Two (2) year contract for monthly service to control pests, rodents, roaches, ants, and insects at the Alario Center and Segnette Field Baseball Stadium located at 2000 Segnette Blvd., Westwego, LA 70094.</p> <p>See attached specifications.</p> <p>New contract start date: 11/04/2018 New contract end date: 11/03/2020</p> <p>Contact: Drew Copponex Phone: (504) 349-5525</p> <p>For a site visit, see contact above.</p>	\$ 75.00	\$ 1,800.00
2	24.00	MO	<p>0020 Segnette Field Baseball Stadium Pest Control Services (approximately 1,500 sq. ft.)</p>	\$ 15.00	\$ 360.00



CENTRALBIDDING
FROM CENTRAL AUCTION HOUSE

5000122130 PEST CONTROL SERVICES - TWO (2) YEAR CONTRACT
Jefferson Parish Government

Project documents obtained from www.CentralBidding.com
14-Feb-2018 01:37:29 PM



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/27/2018

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).

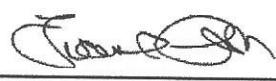
PRODUCER Select Insurance Agency, Inc. 676A White Plains Rd. Scarsdale, NY 10583-5008 Frank MacDonald	914-395-3131	CONTACT NAME: Jennifer Luisi PHONE (A/C, No, Ext): 914-395-3131 FAX (A/C, No): 914-395-0200 E-MAIL ADDRESS: certificates@selectagency.com	
	INSURER(S) AFFORDING COVERAGE		
INSURED Bay Pest Control Company, Inc. PO Box 1612 Ocean Springs, MS 39566	INSURER A:	Imperium Insurance Company	NAIC # 35408
	INSURER B:		
	INSURER C:		
	INSURER D:		
	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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Prop. Ded. \$2,500 <input checked="" type="checkbox"/> PollutioLiab Inc. GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		IIC-GL-04038-03 IIC-GL-04038-03 IIC-GL-04038-03	12/31/2017 12/31/2017 12/31/2017	12/31/2018 12/31/2018 12/31/2018	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 \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y		IIC-EX-00383-03	12/31/2017	12/31/2018	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	IIC-WC-00820-03	12/31/2017	12/31/2018	<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
A	Crime			IIC-CR-00064-02	12/31/2017	12/31/2018	Employee Dishonest 100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Bid#50-00122130
Jefferson Parrish, its Districts Departments and Agencies under the direction of the Parish President and the Parish Council are listed as additional insured when required by written contract

CERTIFICATE HOLDER JEFFE21 Jefferson Parish Purchasing Department PO Box 9 Gretna, LA 70054	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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