

DATE: 1/13/2020

INVITATION TO BID  
THIS IS NOT AN ORDER

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BID NO.: 50-00129321

**JEFFERSON PARISH**

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

VENDOR: ACCU-AIR Enterprises

BUYER: MBUTTERY

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: 1  
NUMBER: \_\_\_\_\_  
NUMBER: \_\_\_\_\_  
NUMBER: \_\_\_\_\_

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 834 517044

<b>*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***</b>	
FIRM NAME:	<u>ACCU-AIR</u> <u>owned</u>
SIGNATURE: (Must be signed here)	<u>J.C. Smith</u> TITLE:
PRINT OR TYPE NAME:	<u>J.C. Smith</u>
ADDRESS:	<u>345 Elemen AV</u> <u>70807</u>
CITY, STATE:	<u>Baton Rouge LA</u> ZIP:
TELEPHONE:	<u>225 1 270-6305</u> FAX:
EMAIL ADDRESS:	<u>JCyouRACmanSSS@9mail.com</u>

TOTAL PRICE OF ALL BID ITEMS: \$ 15000

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## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00129321

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	6.00	EA	<p>TWO (2) YEAR CONTRACT TO PROVIDE HVAC SYSTEMS MAINTENANCE AND REPAIR FOR THE PUBLIC WORKS EAST BANK WAREHOUSE</p> <p>0010 SCHEDULE AND SERVICE FOUR(4) AIR CONDITIONING AND HEATING SYSTEMS THREE (3) TIMES PER YEAR FOR A ROUTINE TRIANNUAL MAINTENANCE AND INSPECTION TO INCLUDE LABOR, MATERIALS CLEANERS AND PARTS IN COST FOR THE FOLLOWING, BUT NOT LIMITED TO:</p> <ul style="list-style-type: none"> <li>-INSPECT UNIT FOR PROPER REFRIGERANT LEVEL AND ADJUST ACCORDINGLY</li> <li>-CLEAN DRAIN LINES AND VACUUM DEBRIS IN CONDENSATE PANS</li> <li>-CLEAN EVAPORATOR COILS</li> <li>-INSPECT BELTS AND REPLACE AS NEEDED</li> <li>-CHECK DUCT WORK FOR AIR LEAKS AND SEAL IF NEEDED</li> <li>-REPLACE AIR FILTERS</li> </ul> <p>TWO (2) YEAR CONTRACT FOR LABOR, MAINTENANCE AND REPAIRS FOR FOUR(4) AIR CONDITIONING AND HEATING SYSTEMS. ONE (1) ABOVE THE WAREHOUSE BREAK ROOM/METER ROOM AND THREE (3) LOCATED ABOVE THE WAREHOUSE OFFICES AND SCADA DEPARTMENT</p> <p>LOCATION: PUBLIC WORKS EAST BANK WAREHOUSE 4901 JEFFERSON HIGHWAY SUITE C JEFFERSON, LA. 70121</p> <p>FOR SITE VISIT CONTACT: GERALD LOHNER 504.736.4652 GLOHNER@JEFFPARISH.NET</p>	<p>\$7500</p>	<p>\$15000</p>
2	2.00	EA	<p>0020 SCHEDULE ANNUAL MAINTENANCE AND INSPECTIONS TO INCLUDE, LABOR, MATERIAL, CLEANERS AND PARTS IN COST ON FOUR(4) AIR CONDITIONING AND HEATING SYSTEMS FOR THE FOLLOWING BUT NOT LIMITED TO:</p> <ul style="list-style-type: none"> <li>-CLEAN DRAIN LINE AND VACUUM DEBRIS FROM CONDENSATE PANS</li> <li>-CLEANS CONDENSER COILS INSIDE AND OUTSIDE OF UNIT</li> <li>-CLEAN EVAPORATOR COILS</li> <li>-LUBRICATE MOTORS</li> <li>-INSPECT BELTS AND REPLACE IF NEEDED</li> <li>-CHECK DUCT WORK FOR AIR LEAKS AND SEAL IF NEEDED</li> <li>-CHECK REFRIGERANT LEVEL AND ADJUST IF NECESSARY</li> </ul> <p>***REVISED PER ADDENDUM #1***</p>	<p>\$7500</p>	

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## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00129321

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			-CHECK HEATER/AC OPERATION -CHECK SAFETY CONTROLS AND CONTROL BOX -CHECK THERMOSTATS AND RESET AS NEEDED -CHECK WIRING AND ELECTRICAL COMPONENTS AND REPAIR AS NECESSARY -REPLACE AIR FILTERS -CLEAN DUCTS AND COVERS AS NEEDED		
3	5.00	LB	0030 R-22 REFRIGERANT PER POUND	\$75.00	
4	5.00	LB	0040 R-410A REFRIGERANT PER POUND	\$75.00	
5	1.00	HR	0050 HOURLY RATE FOR 2ND TECHNICIAN SERVICE/LABOR FOR ALL SERVICE WORK NOT INCLUDED IN THE MAINTENANCE UNITS TO BE SERVICED: MODEL TTA 0906400AA S/N 16335KHKA W/AIR HANDLER MODEL TWE 060A400CA S/N N483KDJ5H W/AIR HANDLER MODEL TWE 180B400CA S/N 16246W1HYA W/AIR HANDLER MODEL TTA 090G400AA S/N 16246W1HYA W/AIR HANDLER	30.00	
6	1.00	HR	0060 HOURLY RATE PER 1ST TECHNICIAN SERVICE/LABOR FOR ALL SERVICE WORK NOT INCLUDED IN THE MAINTENANCE ***REVISED PER ADDENDUM #1*** BIDDERS MUST SUBMIT THIS COPY.	\$30.00	




# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/17/2019

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>  <b>State Farm</b> BILL BARKAS 8888 JEFFERSON HWY BATON ROUGE LA 70809		<b>CONTACT NAME:</b> HEATHER WEBER <b>PHONE (A/C No. Ext):</b> 225-924-3452 <b>FAX (A/C No.):</b> 225-924-3779 <b>E-MAIL ADDRESS:</b> HEATHER@BILLBARKAS.COM
<b>INSURED</b> ACU-AIR ENTERPRISE INC 345 ELMER AVE BATON ROUGE LA 70807		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> State Farm Fire and Casualty Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>

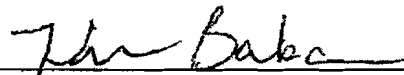
**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <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:	Y	Y	98CAS1478	10/16/2019	10/16/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> 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) \$
	<b>UMBRELLA LIAB</b> <b>EXCESS LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> 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 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)

**CERTIFICATE HOLDER****CANCELLATION**

Jefferson Parish Dept of Purchasing 200 Derbigny St Suite 400  Grenta 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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