

DATE: 11/06/2018

INVITATION TO BID  
THIS IS NOT AN ORDER

Page: 4

BID NO.: 50-00124736

**JEFFERSON PARISH**

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

VENDOR: 27118 BLANK BID COPY VENDOR

BUYER: DMEVANS

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

7 DAYS

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

ASAP

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

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 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) 52782

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

FIRM NAME:		<u>Forsythe Fence Co LP</u>	
SIGNATURE:	(Must be signed here)	TITLE:	<u>Project Manager</u>
PRINT OR TYPE NAME:		<u>CASEY KAUFFMAN</u>	
ADDRESS:			
<u>376 ALMEDIA RD</u>			
CITY, STATE:		ZIP:	<u>70087</u>
<u>ST ROSE LA</u>			
TELEPHONE:	<u>504 738-5060</u>	FAX:	<u>504 468-9811</u>
EMAIL ADDRESS:			
<u>Casey.forsythe.fence@gmail.com</u>			

TOTAL PRICE OF ALL BID ITEMS: \$ \_\_\_\_\_

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>FURNISH LABOR, MATERIALS AND EQUIPMENT TO REMOVE EXISTING FENCE AN INSTALL A NEW ROLLER GATE AND GATE OPERATOR</p> <p>0010 LABOR AND MATERIALS TO REMOVE AND HAUL AWAY EXISTING MANUALLY OPERATING GATE AND POSTS. SUPPLY AND INSTALL A NEW SIX FOOT HIGH HEAVY DUTY ROLLER GATE WITH HARDWARE AND ALL NECESSARY COMPONENTS. THE FENCE SHALL BE EQUIPPED WITH A GATE OPERATOR, SIX REMOTES, A KEY PAD, AND HARDWARE FOR SAFETY LOOP AND FIRE EXIT.</p> <p>THE BID SHALL INCLUDE ALL NECESSARY ELECTRICAL WORK TO MAKE THE GATE FUNCTIONAL.</p> <p>FOR SITE VISIT: CONTACT ANNETTE GUILLOT OR SCOTT BERTHELOT (504)436-9150</p> <p><i>25 1/2 FT</i></p> <p><i>3221 River Rd</i> <i>Bridge City</i> <i>Westwego</i></p> <p><i>Fire Training Center</i></p>	<p><del>\$9980.00</del> <i>\$9980.00</i></p>	<p><del>\$9980.00</del> <i>\$9980.00</i></p>

**Forsythe Fence Co. L.L.P.**

376 Almedia Road  
Saint Rose, LA 70087

Louisiana Law requires a  
State Fire Marshall License  
for Gate Operators Systems  
Forsythe Fence Co LLP  
LASFM Firm # F-1720

**Estimate**

Date	Estimate Number
11/19/2018	10844
504-738-5060	Fax# 504-468-9811

LA LIC #52782

[www.ForsytheFence.com](http://www.ForsytheFence.com)

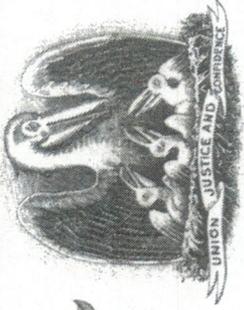
Bill to Address: Jefferson Parish Bid No.50-00124736		<b>Estimate expires 15 DAYS from above date</b>		Contract#	
				LA 1Call#	
				Mark @	
				X date:	11/19/2018
Custom Installation Location:	Email Address	Terms		<b>Please Be Advised: Some Parishes may require a permit for the installation of a fence/gate.  CUSTOMER IS RESPONSIBLE FOR OBTAINING THE PERMIT.</b>	
		Complete			
	Customer #      Alt. #	Sales	Casey		
Item Name	Description			Amount	
Install Gate & Operator	Install (1) 26'w x 6' Chain Link Roll Gate -commercial grade material - sch40 gate frame and posts - 9 gauge wire fill - includes all hardware  Install (1) Viking H-10 Commercial Grade slide gate operator -includes all safety features and programming - includes 2 remotes ***Need electrical withing 25' of the unit***				
Install Chain Link Fence	Quote includes all material and labor			9,980.00	
				<b>Total</b>	<b>\$9,980.00</b>

**Customer Conditions**

Wood Fence customer understands that there is no warranty on wood fence materials. Also, customer understands that it is normal for fence boards to shrink and contract thus leaving spaces between boards, also boards and 2"x4" runner will warp to some degree and develop small cracks. Also, Forsythe Fence Co LLP is not responsible for any ground shrinkage or ground cracking that may cause wood or chain link fences to lean. All gates will sag to a certain degree. Customer should have all gates adjusted once or twice a year. Customer also agrees that Forsythe Fence Co LLP is not responsible or liable for damages to any underground pipes, wires, etc. Property Owner is responsible for locating property stakes. Forsythe Fence Co does not assume responsibility regarding property lines or in any way guarantee their accuracy.

**Acceptance: The above proposal when accepted by the company becomes a contract between two parties and is not subject to cancellation. Silence on the part of the company shall not be construed as an acceptance of this proposal. In case Payment is not made as specified in (terms of payment) the company reserves legal right to repossess all materials used on this job without recourse. Should it become necessary for vendor to place the contract in the hands of an attorney, the vendee shall agree to pay all principal and interest and all attorney's fees. At our discretion we may include photographs of our work on your project to be used on social media. Once a deposit has been collected a 10% processing fee of full project cost will be deducted from deposit refund if project is cancelled or postponed by the customer or customer's representative.**

# State of Louisiana



## State Licensing Board for Contractors

This is to Certify that:

FORSYTHE FENCE CO. LLP  
9708 Bromeliad Circle  
River Ridge, LA 70123

is duly licensed and entitled to practice the following classifications

SPECIALTY: FENCING



Expiration Date: February 18, 2021

License No: 52782

Witness our hand and seal of the Board dated,  
Baton Rouge, LA 19th day of February 2018

*Will S. McP*  
Director

*Lee Mallett*  
Chairman

*Andy [Signature]*  
Treasurer

This License Is Not Transferrable

**CERTIFICATE OF LIABILITY INSURANCE**

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER <b>McGriff Insurance Services</b> 111 Veterans Blvd - Suite 401 Metairie, LA 70005 504 777-7070	CONTACT NAME: <b>Charlotte LeBlanc</b>
	PHONE (A/C, No, Ext): <b>504 777-7065</b> FAX (A/C, No): <b>877-709-2750</b> E-MAIL ADDRESS: <b>charlotte.leblanc@mcgriffinsurance.com</b>
INSURED  <b>Forsythe Fence L.L.P</b> <b>9708 Bromeliad Circle</b> <b>River Ridge, LA 70123</b>	INSURER(S) AFFORDING COVERAGE      NAIC #
	INSURER A : FCI Insurance Company <b>10178</b>
	INSURER B : Luba Casualty Insurance Company <b>12472</b>
	INSURER C :
	INSURER D :
	INSURER E :

**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 INSR	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"/> PD GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: 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			GL0018364	10/16/2018	10/16/2019	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 - COMP/OP AGG      \$2,000,000					
		COMBINED SINGLE LIMIT (Ea accident)      \$					
		BODILY INJURY (Per person)      \$					
		BODILY INJURY (Per accident)      \$					
		PROPERTY DAMAGE (Per accident)      \$					
	UMBRELLA LIAB      OCCUR						EACH OCCURRENCE      \$
	EXCESS LIAB      CLAIMS-MADE						AGGREGATE      \$
	DED      RETENTION \$						
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			028000018194118	03/10/2018	03/10/2019	<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)

(See Attached Descriptions)

CERTIFICATE HOLDER	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  <i>McGriff</i>