

DATE: 6/28/2022

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00138884

JEFFERSON PARISH

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

VENDOR: 27118 BLANK BID COPY VENDOR

BUYER: BBELLOW

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

2 weeks

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

7-14 days

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

3-5 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 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) 35350

| | |
|--|-------------------------------|
| *** ALL BIDDERS MUST COMPLETE SECTION BELOW *** | |
| FIRM NAME: <u>Beacon Air Conditioning, Heating & Refrigeration, Inc.</u> | |
| SIGNATURE: <u>Wendy Chatelain</u> (Must be signed here) | TITLE: <u>Owner/Secretary</u> |
| PRINT OR TYPE NAME: <u>Wendy Chatelain</u> | |
| ADDRESS: <u>315 E. 3rd Street</u> | |
| CITY, STATE: <u>Kenner, LA</u> | ZIP: <u>70062</u> |
| TELEPHONE: <u>(504) 467-8698</u> | FAX: <u>(504) 466-4996</u> |
| EMAIL ADDRESS: <u>Wendy@beaconac.com</u> | |

TOTAL PRICE OF ALL BID ITEMS: \$ 12,550.00

DATE: 6/28/2022

INVITATION TO BID FROM JEFFERSON PARISH - continued

Page: 6

BID NO.: 50-00138884

SEALED BID

| ITEM NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES | UNIT PRICE QUOTED | TOTALS |
|----------------|----------|-----|--|----------------------|-----------|
| 1 | 1.00 | JOB | <p>FURNISH LABOR, MATERIALS AND EQUIPMENT TO INSTALL A CENTRAL AIR CONDITIONING AND HEATING SYSTEM FOR JEFFERSON PARISH EASTBANK PUMP STATION WAREHOUSE OFFICE</p> <p>0010 - PURCHASE AND INSTALLATION OF ONE NEW 2.5 TON AIR CONDITIONING SYSTEM WITH ELECTRIC HEAT. VENDOR WILL FABRICATE SHEET METAL RETURN, SUPPLY PLENUM AND ROUTE R-8 FLEX DUCT TO FOUR (4) SUPPLY REGISTERS. OUTDOOR CONDENSING UNIT WILL BE MOUNTED ON FABRICATED PLATFORM. PRICE TO INCLUDE ALL MATERIALS NEEDED FOR A COMPLETE INSTALL.</p> <p>EXCLUSION: ELECTRICAL POWER FEED TO OUTDOOR UNIT AND INDOOR AIR HANDLER UNIT TO BE PERFORMED BY A LICENSED ELECTRICIAN * 60 AMP INDOOR / 30 AMP OUTDOOR</p> <p>MATERIALS NEEDED: 1-AMERICAN STANDARD 2.5 TON 14 SEER OUTDOOR CONDENSING UNIT 1-AMERICAN STANDARD 2.5 TON AIR HANDLER UNIT 1-10KW ELECTRIC HEAT STRIP</p> <p>**SPECIFICATIONS ARE ATTACHED**</p> <p>SERVICE LOCATION: EASTBANK PUMP STATION WAREHOUSE OFFICE 4800 LAKE VILLA DRIVE METAIRIE, LA 70002</p> | 12,550.00 | 12,550.00 |

**Labor, Materials and Equipment for Central Air Conditioning and Heating System
for the Suburban Office Building.**

Section 1.0 – Site Visits:

4800 Lake Villa Drive, Metairie, La 70006

To request a site visit contact Robert Federico at (504) 838-4371 or rfederico@jeffparish.net

Section 2.0 – Scope:

This bid shall cover all labor, materials, and equipment required to install a central air conditioning and heating system at the Suburban warehouse according to the below specifications.

Section 3.0 – Quantities/Inspection:

Bidders must inspect the site and perform their own inspections in order to determine the proper quantity of materials and equipment required to complete this project. All quantities listed are estimates and shall not be used by contractors for bidding and construction.

Section 4.0 - License requirements:

A Louisiana State Contractor's License is required in the following categories:

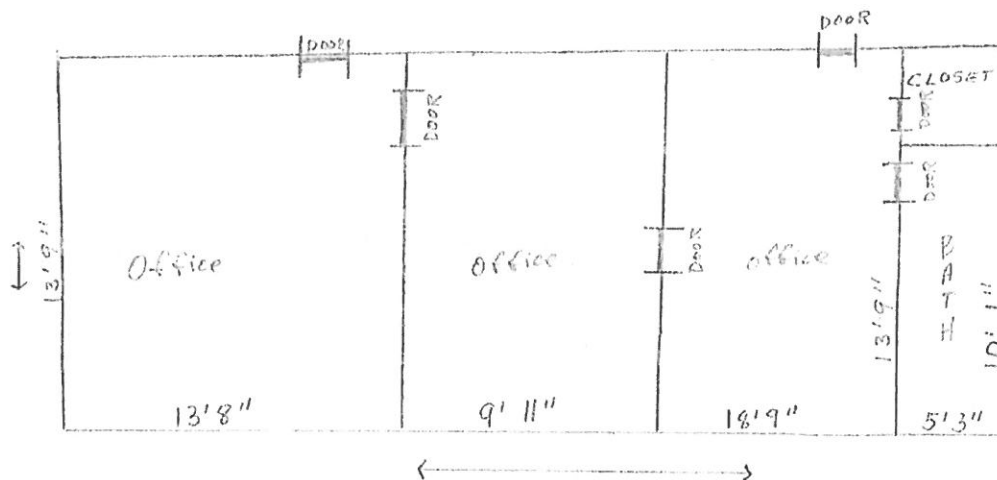
- **Mechanical Work (Statewide)**

A LA State Contractor's License will be required in accordance with LSA R.S. 37-2150 et. seq. and such license number will be shown on the outside of the bid electronic envelope. Failure to comply will cause the bid to be rejected. When submitting the bid electronically, the license number must be entered in the appropriate field in the electronic procurement system. Failure to comply will cause the bid to be rejected.

Section 5.0 – Bid Specifications:

Floor plan:

FIGURE 1: ESTIMATED OFFICE DIMENSIONS



4800 LAKEVILLA DR.
Suburban Warehouse Office

(3 offices and bath will have supply registers.)

Installation:

- Furnish and install outdoor American Standard 2.0 Ton, 14 SEER Outdoor Condensing Unit or equal
- Furnish and install American Standard 2.0 Ton Air Handler Unit or equal with 10 kw electric heat strip
- 60 amp indoor electrical service and 30 amp outdoor electrical service will be provided by the Parish in the required location by code. Coordination with the Parish is required for timing and location.
- Bidding contractor will be responsible for connecting to electrical service.
- Spin-in combination scoop and volume damper for all round taps.
- Aluminum side wall registers & ceiling diffusers with opposed blade volume dampers.
- Provide sufficient platform for A/C unit.
- Provide 30x20 rectangular filter grille for internal line return air plenum.
- Diffusers & registers shall be mounted in pre-insulated boxes.
- All seams and joints taped in ductwork.
- ½" thick Armaflex on suction applied on copper refrigerant lines as recommended by manufacturer.
- Fabricate sheet metal return, supply plenum and route R-6 flex duct with insulation to four (4) supply registers following other requirements.

Bid #50-00138884

- Air conditioning and thermostat controls shall be Honeywell or Lennox or approved equal.
- Thermostat location shall be 60" above the floor in the designated locations
- Outdoor condensing platform shall be mounted on a raised fabricated platform minimum 1 foot, and placed on a poured 5"-6" poured concrete platform.
- All registers to be placed square to room and are not below joists/bottom chords or in the way of box beams and light fixtures.
- Install condensate drain with a clean out tee at the air handler. The tee shall have a removable cap for clean out purposes.
- Adjustable hot and cold air vents (white in color).
- System start up, testing and adjustment.
- Warranty and Service Work.

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 (8:00am – 4:00pm) 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. 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 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:

1. Warranty includes manufacturer standard warranty.

Section 10.0 – Construction Term:

Upon receiving a notice to proceed, the Bidder agrees that all work shall be completed as follows: Vendor will be given six (6) weeks after the purchase order has been issued to complete all work.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/28/2022

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 Riverlands Insurance Services Inc. 492 West 5th Street LaPlace LA 70068 | CONTACT NAME: Kattie Troxler, CISR, CIC PHONE (A/C, No, Ext): (985) 652-5505 FAX (A/C, No): (985) 652-4039 E-MAIL ADDRESS: ktroxler@rivins.com INSURER(S) AFFORDING COVERAGE INSURER A: Wesco Insurance Company INSURER B: Technology Insurance Co, Inc. INSURER C: INSURER D: INSURER E: INSURER F: |
| INSURED Beacon Air Conditioning, Heating & Refrigeration, Inc. 315 E 3rd Street Kenner LA 70062 | NAIC # 25011 42376 |

COVERAGES**CERTIFICATE NUMBER:** 21-22**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"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | Y | Y | WPP1931637 00 | 10/29/2021 | 10/29/2022 | 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 Employee Benefits \$ 1,000,000 |
| | <input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| | <input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 | | | WUM1849930 01 | 10/29/2021 | 10/29/2022 | EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ |
| | <input type="checkbox"/> 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 Y | N/A | TWC4020840 | 10/29/2021 | 10/29/2022 | <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# 50-00138884

Full Certificate Holder:

THE PARISH OF JEFFERSON, ITS DISTRICTS, DEPARTMENTS AND AGENCIES
UNDER THE DIRECTION OF THE PARISH PRESIDENT AND THE PARISH COUNCIL

General Aggregate Limit applies per project. Cert Holder is listed as an additional insured and a Waiver of Subrogation is provided in favor of the certificate holder with respects to the GL policy.

CERTIFICATE HOLDER**CANCELLATION**Jefferson Parish - Eastbank Pump Station
Warehouse Office
4500 Lake Villa Dr.
Metairie LA 70002

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

Kattie B. Troxler

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/14/2022

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PRODUCER



Hylton S Petit, Jr
2705 Florida Ave
Kenner, La 70062

CONTACT NAME: Hylton S Petit, Jr
PHONE (A/C, No, Ext): 504-461-0171 FAX (A/C, No): 504-461-0289
E-MAIL ADDRESS: hylton.petit.b27x@statefarm.com

INSURED

Beacon A/C, Heating & Refrigeration, Inc.
315 E 3RD St
Kenner, la 70062-7103

| INSURER(S) AFFORDING COVERAGE | | NAIC # |
|-------------------------------|--|--------|
| INSURER A : | State Farm Mutual Automobile Insurance Company | 25178 |
| INSURER B : | | |
| INSURER C : | | |
| 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 |
|----------|--|-----------|----------|------------------|-------------------------|-------------------------|--|
| | 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 type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY | Y | N | 383 6773-B28-18G | 02/28/2022 | 08/28/2022 | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per accident) \$ 1,000,000 PROPERTY DAMAGE (Per accident) \$ 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 OTH-ER 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

THE JEFFERSON PARISH, ITS DISTRICTS, DEPARTMENTS
AND AGENCIES UNDER THE DIRECTION OF THE PARISH
PRESIDENT & THE PARISH COUNCIL
200 DERBIGNY ST., GRETN, LA 70053

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

Hylton S Petit, Jr