

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 0 %

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF 7/31/17

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

TBD

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

39349

THIS SECTION MUST BE COMPLETED BY BIDDER:

FIRM NAME: RYCARS Construction, LLC

ADDRESS: P.O. Box 370, Kenner, LA 70063

CITY, STATE: Kenner, LA

ZIP: 70063

TELEPHONE: (504) 305-5309

FAX: (504) 305-5308

EMAIL ADDRESS: ryanburks@rycars.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 as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: 1

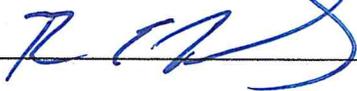
NUMBER: _____

NUMBER: _____

NUMBER: _____

TOTAL PRICE OF ALL BID ITEMS: \$ 316,425.00

AUTHORIZED

SIGNATURE: 

Ryan E. Burks

Printed Name

TITLE: President

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.: 50-00119467

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>FURNISH AND INSTALL ALL LABOR, MATERIALS AND EQUIPMET FOR THE INSTALLATION OF AN ELASTOMERIC SILICONE ROOF COATING SYSTEM AT THE JEFFERSON PARISH HUMAN SERVICE AUTHORITY BUILDING</p> <p>0010-INSTALLATION OF AN ELASTOMERIC SILICONE ROOF COATING SYSTEM AT THE JEFFERSON PARISH HUMAN SERVICES AUTHORITY BUILDING.</p> <p>BASE BID: ALL WORK DESCRIBED IN THE SPECIFICATION WITH THE EXCEPTION OF SECTIONS NINE (9) AND TEN (10).</p> <p>WE EXTEND THIS BID TO SUPPLY ALL LABOR, MATERIALS, AND EQUIPMENT TO REPAIR, CLEAN, TEST AND COATING OF THE ROOF AT HUMAN SERVICES AUTHORITY BUILDING LOCATED AT 5001 WESTBANK EXPRESSWAY, MARRERO, LA, 70072.</p>	\$162,360. ⁰⁰	\$162,360. ⁰⁰
2	1.00	SQFT	<p>0020-ANCILLARY WORK: PROVIDE A COST PER SQUARE FOOT TO REMOVE, REPAIR, AND REPLACE WATER DAMAGE. ROOFING MATERIALS DESCRIBED IN SECTION 9.0 OF THE SPECIFICATIONS. THIS LINE ITEM WILL ONLY BE USED IF NEEDED.</p>	\$10.00/SF	\$10.00/SF
3	1.00	ONLY	<p>0030-ALTERNATE ONE (1): SEE SECTION 10.0 OF THE SPECIFICATIONS. THIS LINE ITEM WILL BE ACCEPTED IF EXISTING BUDGET FOR THIS WORK IS SUFFICIENT.</p>	\$154,055. ⁰⁰	\$154,055. ⁰⁰

CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF
RYCARS Construction is a Limited Liability Company. See attached Certificate of Signature Authority
INCORPORATED.

AT THE MEETING OF DIRECTORS OF _____ N/A
INCORPORATED, DULY NOTICED AND HELD ON _____ N/A,
A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED. IT
WAS:

RESOLVED THAT _____ N/A, BE AND IS HEREBY
APPOINTED, CONSTITUTED AND DESIGNATED AS AGENT AND ATTORNEY-IN-
FACT OF THE CORPORATION WITH FULL POWER AND AUTHORITY TO ACT ON
BEHALF OF THIS CORPORATION IN ALL NEGOTIATIONS, BIDDING, CONCERNS
AND TRANSACTIONS WITH THE PARISH OF JEFFERSON OR ANY OF ITS AGENCIES,
DEPARTMENTS, EMPLOYEES OR AGENTS, INCLUDING BUT NOT LIMITED TO, THE
EXECUTION OF ALL BIDS, PAPERS, DOCUMENTS, AFFIDAVITS, BONDS, SURETIES,
CONTRACTS AND ACTS AND TO RECEIVE ALL PURCHASE ORDERS AND NOTICES
ISSUED PURSUANT TO THE PROVISIONS OF ANY SUCH BID OR CONTRACT, THIS
CORPORATION HEREBY RATIFYING, APPROVING, CONFIRMING, AND ACCEPTING
EACH AND EVERY SUCH ACT PERFORMED BY SAID AGENT AND ATTORNEY-IN-
FACT.

I HEREBY CERTIFY THE FOREGOING TO BE
A TRUE AND CORRECT COPY OF AN
EXCERPT OF THE MINUTES OF THE ABOVE
DATED MEETING OF THE BOARD OF
DIRECTORS OF SAID CORPORATION, AND
THE SAME HAS NOT BEEN REVOKED OR
RESCINDED.

N/A
SECRETARY-TREASURER

N/A
DATE

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

Ryan E. Burks

Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 1 DAY OF May, 2017.

Notary Public

Claudette Maderé

Printed Name of Notary

84527

Notary/Bar Roll Number

My commission expires Perpetual.



Print

Notary Search - Detail

Name: MS. CLAUDETTE MADERE
Address: P.O. BOX 365
DESTREHAN, LA 70047
Phone: (504) 417-0430
Notary ID Number: 84527
Parish: JEFFERSON with authority in the following parishes:
ORLEANS, PLAQUEMINES, ST. BERNARD
Agency: N/A
Notary Type: Non Attorney
Status: Active
Commission Date: 01/29/2007
Oath Date: 11/16/2006
Surety Expiration Date: 03/29/2020
Annual Report Current: Yes

[Back to Search Results](#) [New Search](#)

 **AIA** Document A310™ – 2010

Bid Bond

CONTRACTOR:
(Name, legal status and address)
RYCARS Construction, LLC

PO Box 370
Kenner, LA 70063

OWNER:
(Name, legal status and address)

Jefferson Parish Purchasing Department
200 Derbigny Street
Gretna, LA 70053
BOND AMOUNT: 5% of Amount Bid

SURETY:
(Name, legal status and principal place of business)

SureTec Insurance Company
1330 Post Oak Blvd. Suite 1100
Houston, TX 77056

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

PROJECT:

(Name, location or address, and Project number, if any)

Installation of an Elastomeric Silicone Roof Coating System at Jefferson Parish Human Services Authority Building

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 1st day of June 2017


(Witness)


(Witness)

RYCARS Construction, LLC
(Principal)  *(Seal)*

(Title) Ryan E. Burks President
SureTec Insurance Company
(Surety)  *(Seal)*

(Title) Kenneth Albert, Attorney-in-Fact

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that changes will not be obscured.

Init.

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061110

SureTec Insurance Company

LIMITED POWER OF ATTORNEY

Know All Men by These Presents, That SURETEC INSURANCE COMPANY (the "Company"), a corporation duly organized and existing under the laws of the State of Texas, and having its principal office in Houston, Harris County, Texas, does by these presents make, constitute and appoint

Steven M. Baas, Benjamin P. Dycus, Melissa Napier, Kenneth Albert

its true and lawful Attorney-in-fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings or other instruments or contracts of suretyship to include waivers to the conditions of contracts and consents of surety for, providing the bond penalty does not exceed

Five Million and 00/100 Dollars (\$5,000,000.00)

and to bind the Company thereby as fully and to the same extent as if such bond were signed by the President, sealed with the corporate seal of the Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney-in-Fact may do in the premises. Said appointment shall continue in force until 12/31/2018 and is made under and by authority of the following resolutions of the Board of Directors of the SureTec Insurance Company:

Be it Resolved, that the President, any Vice-President, any Assistant Vice-President, any Secretary or any Assistant Secretary shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

Attorney-in-Fact may be given full power and authority for and in the name of and of behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements or indemnity and other conditional or obligatory undertakings and any and all notices and documents canceling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be binding upon the Company as if signed by the President and sealed and effected by the Corporate Secretary.

Be it Resolved, that the signature of any authorized officer and seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signature or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached. (Adopted at a meeting held on 20th of April, 1999.)

In Witness Whereof, SURETEC INSURANCE COMPANY has caused these presents to be signed by its President, and its corporate seal to be hereto affixed this 13th day of April, A.D. 2017.

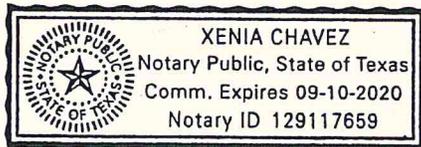
State of Texas ss:
County of Harris



SURETEC INSURANCE COMPANY

By: [Signature]
John Knox Jr., President

On this 13th day of April, A.D. 2017 before me personally came John Knox Jr., to me known, who, being by me duly sworn, did depose and say, that he resides in Houston, Texas, that he is President of SURETEC INSURANCE COMPANY, the company described in and which executed the above instrument; that he knows the seal of said Company; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said Company; and that he signed his name thereto by like order.



[Signature]
Xenia Chavez, Notary Public
My commission expires September 10, 2020

I, M. Brent Beaty, Assistant Secretary of SURETEC INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Company, which is still in full force and effect; and furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

Given under my hand and the seal of said Company at Houston, Texas this 1st day of June 2017, A.D.

[Signature]
M. Brent Beaty, Assistant Secretary

Any instrument issued in excess of the penalty stated above is totally void and without any validity.
For verification of the authority of this power you may call (713) 812-0800 any business day between 8:00 am and 5:00 pm CST.

Request for Taxpayer Identification Number and Certification

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

Print or type
 See Specific Instructions on page 2.

Name (as shown on your Income tax return) RYCARS Construction, LLC	
Business name/disregarded entity name, if different from above	
Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input checked="" type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ S <input type="checkbox"/> Other (see instructions) ▶	
Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____	
Address (number, street, and apt. or suite no.) 503 Coleman Place	Requester's name and address (optional)
City, state, and ZIP code Kenner, Louisiana 70062	
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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number	
[] [] [] - [] [] - [] [] [] []	
Employer identification number	
3 7 - 1 4 2 3 2 8 8	

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 on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ June 1, 2017
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General Instructions

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

Future developments. The IRS has created a page on www.irs.gov/w9 for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/30/2016

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 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 Van Meter Insurance Group 1240 Fairway Street Bowling Green, KY 42103	CONTACT NAME:		
	PHONE (A/C, No., Ext):	(270) 781-2020	FAX (A/C, No.): (270) 843-8808
INSURED RYCARS Construction LLC PO Box 370 Kenner, LA 70063	E-MAIL ADDRESS:		
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A:	Cincinnati Specialty Underwriters Insurance Company	13037
	INSURER B:	Ohio Casualty Group	24074
	INSURER C:	Rockhill Insurance Company	28053
	INSURER D:	Amerisafe, Inc.	
	INSURER E:	Alterra Excess & Surplus Insurance Company	33189
	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	ADD'L 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			CSU0033874	01/01/2017	01/01/2018	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							
	OTHER:							
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS			55369052 (LA)	01/01/2017	01/01/2018	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR							
C	<input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE			FF015407-01	01/01/2017	01/01/2018	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
	DED RETENTION \$							
D	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 type="checkbox"/> N/A	AVWCLA2562392017	01/01/2017	01/01/2018	<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
E	Inland Marine			MKLM6IM0051340	01/01/2017	01/01/2018	Leased/Rented	100,000
B	Commercial Auto			55374888 (GA)	01/01/2017	01/01/2018	Combined Single Lmt	1,000,000

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

CERTIFICATE HOLDER

CANCELLATION

Evidence of Coverage	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

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CUT-THROUGH ENDORSEMENT

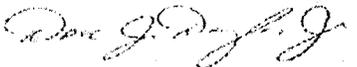
This endorsement modifies the policy to add the following special provisions:

1. The Reinsurer hereby agrees, at the request and with the agreement of the Reinsured, that if the Reinsured is declared insolvent, bankrupt, in liquidation or in dissolution, the Reinsurer shall, subject to all the conditions and limitations set forth in paragraph 2. below, make payment directly on behalf of the Reinsured to any third party those payments the Reinsured is legally obligated to pay under this policy of insurance.
2. The Reinsurer's liability to make payment, as described in paragraph 1. above is subject to the following conditions:
 - a. The Reinsured must actually have declared bankruptcy, be adjudicated to be insolvent, or in liquidation or dissolution before any payment is required by the Reinsurer under any circumstance or claim made;
 - b. The Reinsurer shall have no obligation to make payment unless it receives prior, written approval, in a form and content acceptable to the Reinsurer, from the relevant supervisor, rehabilitator, conservator, receiver or liquidator of the Reinsured which explicitly permits the Reinsurer to make such payments in full discharge of the Reinsurer's liability to the Reinsured, Named Insured or any other party;
 - c. The maximum amount that the Reinsurer shall be obligated to pay is limited as described in Section III-Limits of Insurance;
 - d. The Reinsurer shall have no obligation to make any payment if the Reinsured had no legal obligation to make any payment under the terms and conditions of this policy of insurance, including but not limited to, the exhaustion of any limit of insurance or aggregate limit of insurance;
 - e. Should the Reinsurer be requested to or required to make payment, it shall obtain all rights and defenses of the Reinsured as declared under this policy.

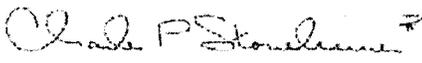
Reinsured: The Cincinnati Specialty Underwriters Insurance Company

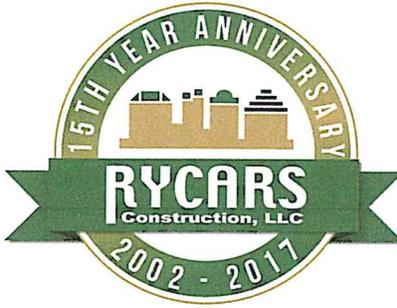
Reinsurer: The Cincinnati Insurance Company

The Cincinnati Specialty Underwriters Insurance Company

By: 

The Cincinnati Insurance Company

By: 



The Source for Commercial Roofing

Certification of Signature Authority

Be it known that as of March 12, 2017 the Members and Managers of RYCARS Construction, LLC (a Louisiana organized limited liability company) hereby authorizes and empowers its Member, Ryan E. Burks to negotiate for and sign any and all bid proposal documents and/or contracts which this Limited Liability Company might enter into for the furnishing of services for the Company under such terms, conditions and stipulates, and for such consideration as he might deem to the best interest of the Company.

Respectfully,
RYCARS Construction, LLC

A handwritten signature in blue ink, appearing to read "Ryan E. Burks", is written over the printed name.

Ryan E. Burks
Managing Member

A handwritten signature in blue ink, appearing to read "Louis E. McLendon", is written over the printed name.

Louis E. McLendon
Managing Member

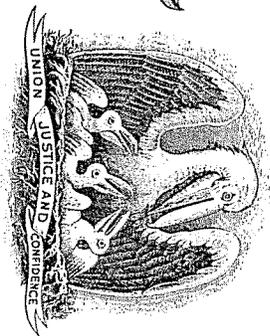
Company Seal



Corporate Office
503 Coleman Place
Kenner, Louisiana 70062
Telephone • 504.305.5309
Facsimile • 504.305.5308

Georgia Office
3450 Buffington Center • Suite B
Atlanta, Georgia 30349
Telephone • 404.209.9991
Facsimile • 404.209.9936

State of Louisiana



State Licensing Board for Contractors

This is to Certify that:

RYCARS CONSTRUCTION, LLC
P. O. Box 370
Kenner, LA 70063

is duly licensed and entitled to practice the following classifications

BUILDING CONSTRUCTION; SPECIALTY: ROOFING AND SHEET METAL, SIDING



Expiration Date: May 16, 2018

License No: 39349

Witness our hand and seal of the Board dated,
Baton Rouge, LA 17th day of May 2017


Director


Chairman

This License Is Not Transferrable


Treasurer

Username

Password

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Entity Dashboard

[Entity Overview](#)

[Entity Registration](#)

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[Exclusions](#)

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- [Inactive Exclusions](#)
- [Excluded Family Members](#)

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RYCARS CONSTRUCTION, LLC

DUNS: 015953024 CAGE Code: 33VA0
Status: Active

503 COLEMAN PL
KENNER, LA, 70062-7166,
UNITED STATES

Expiration Date: 01/17/2018
Purpose of Registration: All Awards

Entity Overview

Entity Registration Summary

Name: RYCARS CONSTRUCTION, LLC
Business Type: Business or Organization
Last Updated By: Ryan Burks
Registration Status: Active
Activation Date: 01/17/2017
Expiration Date: 01/17/2018

Exclusion Summary

Active Exclusion Records? No



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www?

Search Records	Disclaimers	FAPIS.gov
Data Access	GSA.gov/IAE	GSA.gov
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Louisiana State Licensing Board for Contractors



Contractor Information

Business Name RYCARS CONSTRUCTION, LLC
 Mailing Address P. O. Box 370
 Kenner, LA 70063
 Phone Number (504) 305-5309
 Fax Number (504) 305-5308
 Email Address info@rycars.com
 Website www.rycars.com

Active Licenses

License Number 39349
 Type Commercial License
 Status LICENSED
 Effective 05/17/2017
 Expiration 05/16/2018
 First Issued 05/16/2002

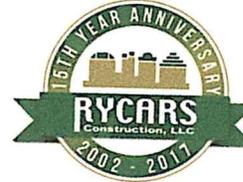
Classifications

Class	Qualifying Party	Parishes
BUILDING CONSTRUCTION	Ryan E. Burks	ALL
BUSINESS AND LAW	Ryan E. Burks	ALL
SPECIALTY: ROOFING AND SHEET METAL, SIDING	Ryan E. Burks	ALL

RYCARS Construction, LLC
Louisiana License # 39349

Sealed Bid Enc

"BID DOCUMENTS"
"SEALED BID ENCLOSED"



"The Source for Commercial Roofing"

Louisiana License # 39349

P.O. Box 370
503 Coleman Place
Kenner, Louisiana 70063
504-305-5309
www.rycars.com

**BID FOR: Installation of an Elastometric Silicone Roof
Coating System
Bid # 50-00119467
Bid Due June 1, 2017 By 2 P.M.**

**Submit To:
Jefferson Parish Purchasing Department
200 Derbigny Street, Suite 4400
Gretna, LA 70053**