

DATE: 8/31/2015

INVITATION TO BID
THIS IS NOT AN ORDER

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BID NO.: 50-00114352

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

VENDOR: DIAL ONE House OF DOORS

BUYER: LFRANCIS

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 is to be done in a workman-like manner, according to standard practices. Any deviations or alterations from the specifications must be indicated and backup documentation supplied with your quotation.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

30 DAYS

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

30 DAYS

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

30 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: _____

NUMBER: _____

NUMBER: _____

NUMBER: _____

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

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: <u>DIAL ONE HOUSE OF DOORS</u>	
SIGNATURE: (Must be signed here)	TITLE: <u>ESTIMATOR</u>
PRINT OR TYPE NAME: <u>JEFFREY C. MAUMUS</u>	
ADDRESS: <u>850 SAMS AVE.</u>	
CITY, STATE: <u>ELMWOOD, LA</u>	ZIP: <u>70123</u>
TELEPHONE: <u>(504) 734-1155</u>	FAX: <u>(504) 733-5246</u>
EMAIL ADDRESS: <u>JEFF@DIALONEHOUSEOFDOORS.COM</u>	

TOTAL PRICE OF ALL BID ITEMS: \$ 4489⁷⁰

DATE: 8/31/2015

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INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO: 50-00114352

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>INSTALLATION OF NEW INTERIOR DOOR FOR THE NEW MACHINE OFFICE</p> <p>0010 - FURNISH LABOR, MATERIALS AND EQUIPMENT AND FREIGHT TO PERFORM THE FOLLOWING: INSTALL NEW INTERIOR DOOR, FRAME AND HARDWARE IN THE NEW MACHINE OFFICE AT 4901 JEFFERSON HWY., SUITE B Interior Opening with Vision</p> <p>Job to include:</p> <ul style="list-style-type: none"> 1 Custom steel door, 18 gauge, polystyrene core, galvanized ✓ 1 Custom steel frame 16 gauge, galvanized ✓ 1 Dorma no. C880LRC626 cylindrical lock, grade 1, heavy duty ✓ 1 Dorma no. 8916 DST closer, super arm, thumbturn hold open, cushion stop ✓ 1 ABH no. 240HD concealed continuous geared hinge, heavy duty ✓ 1 NGP no. L-FRA100 vision, 24 inch x 30 inch, with 1/4 inch tempered safety glass ✓ 1 NGP no. 513 aluminum threshold, ADA Compliant ✓ 1 NGP no. 198NA sweep ✓ 1 NGP no. 130NA weather stripping ✓ 1 Labor: Install new door, frame and hardware ✓ <p>Contact Person is Superintendent Shane Dickerson Phone Number 504-736-8880</p>	2032 ³⁵	
2	1.00	JOB	<p>0020 - FURNISH LABOR, MATERIALS AND EQUIPMENT AND FREIGHT TO PERFORM THE FOLLOWING: INSTALL NEW EXTERIOR DOOR, FRAME AND HARDWARE IN THE NEW MACHINE OFFICE AT 4901 JEFFERSON HWY., SUITE B Exterior Opening</p> <p>Job to include:</p> <ul style="list-style-type: none"> 1 Custom steel door, 18 gauge, polystyrene core, galvanized ✓ 1 Custom steel frame 16 gauge, galvanized ✓ 1 Dorma no. 9300 Rim exit device, Grade 1, heavy duty, stainless steel ✓ 1 Dorma no. 8916 DST closer, super arm, thumbturn hold open, cushion stop ✓ 1 ABH no. 240HD concealed continuous geared hinge, heavy duty ✓ 1 NGP no. 513 aluminum threshold, ✓ 	2457 ³⁵	

DATE: 8/31/2015

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INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00114352

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			<p>ADA Compliant 1 NGP no. 198NA sweep 1 NGP no. 130NA weather stripping 1 Labor: install new door, frame and hardware</p> <p>Contact Person is Superintendent Shane Dickerson Phone Number 504-736-6680</p>		

Q U O T A T I O N

DIAL ONE HOUSE OF DOORS
850 SAMS AVENUE
HARAHAN, LOUISIANA 70123
(504)/734-1155

BILL TO:9705113
JEFF PARISH PURCHASING
P O BOX 9
SUITE 509
GRETN LA 70054 0009
(504)364-2678
(504)364-2693

SERVICE LOCATION:
JEFFERSON PARISH SEWERAGEQUOTE #: 8674
4901 JEFFERSON HWY
SUITE B/WELDERS SHOP DATE: 09/08/15
JEFFERSON, LA 70121 0000
(504)736-6678
(504)000-0000

ACCOUNT # SALESMAN
1404004 407

WE ARE PLEASED TO QUOTE YOU ON THE FOLLOWING:
FURNISH AND INSTALL EXTERIOR DOOR AND FRAME WITH
RIM EXIT DEVICE, CLOSER, FULL MORTISE CONT HINGE,
THRESHOLD, SWEEP AND WEATHERSTRIP
CONTACT: SHANE DICKERSON
JP BID#50-00114352 JP # 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
1	NS	2/11X6/11 DW16 FRM A60, ASA	191.85	191.85
1	NS	2/10+9/16X6/11 L18 DR A60,POLY	385.00	385.00
1	NS	DORMA 9300B 630 STAINLESSPANIC	798.00	798.00
1	NS	DORMA 8916DST CLOSR SUPR, H/O	362.00	362.00
1	NS	CFM85HD1 FULL MORTISE CONT HNG	114.00	114.00
1	TH17136	PEMKO 171A THRESHOLD, 36"	19.50	19.50
1	SW30	PEMKO 56AV SWEEP, 36"	6.00	6.00
1	WS3070	PEMKO 303AV W/S, 36X84	14.00	14.00
1	C4	4 HRS COMM SERV	567.00	567.00
0	FI	FURNISHED & INSTALLED	.00	.00

ACCEPTED BY: _____

DATE: _____

SUBTOTAL	SALES TAX	FREIGHT	MISC. CHG.	QUOTATION TOTAL
2457.35	.00	.00	.00	2457.35

Q U O T A T I O N

DIAL ONE HOUSE OF DOORS
850 SAMS AVENUE
HARAHAN, LOUISIANA 70123
(504)/734-1155

BILL TO:9705113
JEFF PARISH PURCHASING
P O BOX 9
SUITE 509
GRETN LA 70054 0009
(504)364-2678
(504)364-2693

SERVICE LOCATION:
JEFFERSON PARISH SEWERAGEQUOTE #: 8673
4901 JEFFERSON HWY
SUITE B/WELDERS SHOP DATE: 09/08/15
JEFFERSON, LA 70121 0000
(504)736-6678
(504)000-0000

ACCOUNT # SALESMAN
1404004 407

WE ARE PLEASED TO QUOTE YOU ON THE FOLLOWING:

FURNISH AND INSTALL 1 NEW INTERIOR DOOR AND FRAME
WITH 24X36 LITE, ENTRY LOCK, CLOSER, FULL MORTISE
CONT HINGE, THRESHOLD, SWEEP AND WEATHERSTRIP.
CONTACT: SHANE DICKERSON 736-6680
JP BID # 50-00114352 JOB 1

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
1	NS	2/11X6/11 DW16 FRM A60, ASA	191.85	191.85
1	NS	2/10+9/16X6/11 L18 DR POLY,A60	385.00	385.00
1	LKENLV2	LEVER ENTRY LOCKSET, US26D	59.00	59.00
1	NS	DORMA 8916 DST SUPR, THMB H/O	362.00	362.00
1	NS	CFM85HD1 FULL MORTISE CONT HNG	114.00	114.00
1	NS	VSL2430B LITE KIT	68.00	68.00
1	PCOL	CUT OUT LITE OR LOUVER	35.00	35.00
6	TG	1/4 CLR TEMP GLASS (MIN 2 FT)	10.50	63.00
1	PGD	GLAZE DOOR LITE	22.00	22.00
1	TH17136	PEMKO 171A THRESHOLD, 36"	19.50	19.50
1	SW30	PEMKO 56AV SWEEP, 36"	6.00	6.00
1	WS3070	PEMKO 303AV W/S, 36X84	14.00	14.00
1	C5	5 HRS COMM SERV	693.00	693.00

ACCEPTED BY: _____

DATE: _____

SUBTOTAL	SALES TAX	FREIGHT	MISC. CHG.	QUOTATION TOTAL
2032.35	.00	.00	.00	2032.35



CERTIFICATE OF LIABILITY INSURANCE

OP ID: AM

DATE (MM/DD/YYYY)

12/10/2014

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 Morrison Insurance Agency, Inc 4444 York Street, Suite 201 Metairie, LA 70001 Brewster G. Stalter, II		CONTACT NAME: PHONE (A/C, No. Ext): FAX (A/C, No): EMAIL ADDRESS: PRODUCER CUSTOMER ID #: HOUSE-4															
INSURED HOUSE OF DOORS, INC dba Dial One House of Doors 850 Sams Ave Harahan, LA 70123		INSURER(S) AFFORDING COVERAGE <table border="1"> <tr> <th>INSURER</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Northfield Insurance Company</td> <td>27887</td> </tr> <tr> <td>INSURER B: RSUI Indemnity</td> <td>22314</td> </tr> <tr> <td>INSURER C: Gemini Insurance Co</td> <td>10833</td> </tr> <tr> <td>INSURER D: Bridgefield Casualty Ins. Co.</td> <td>10335</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>		INSURER	NAIC #	INSURER A: Northfield Insurance Company	27887	INSURER B: RSUI Indemnity	22314	INSURER C: Gemini Insurance Co	10833	INSURER D: Bridgefield Casualty Ins. Co.	10335	INSURER E:		INSURER F:	
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INSURER C: Gemini Insurance Co	10833																
INSURER D: Bridgefield Casualty Ins. Co.	10335																
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 SOURCE (INSR, SUT)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY		WH004987	08/01/2014	08/01/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ excluded
	<input checked="" type="checkbox"/> Contractual		WH004987	08/01/2014	08/01/2015	PERSONAL & ADV INJURY \$ 1,000,000
A	<input type="checkbox"/> Liability INCL.					GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMPROP AGG \$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					\$
						\$
C	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY		PEL0008410	08/01/2014	08/01/2015	COMBINED SINGLE LIMIT (Per accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO		PEL0008410	08/01/2014	08/01/2015	BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS		PEL0008410	08/01/2014	08/01/2015	PROPERTY DAMAGE (PER ACCIDENT) \$
C	<input checked="" type="checkbox"/> HIRED AUTOS		PEL0008410	08/01/2014	08/01/2015	\$
	<input checked="" type="checkbox"/> NON-OWNED AUTOS					\$
						\$
						\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR				EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE	NHA068585	08/01/2014	08/01/2015	AGGREGATE \$ 5,000,000
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input type="checkbox"/> RETENTION \$					\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	0196-07123	01/01/2015	01/01/2016	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER \$ 1,000,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
						E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 CERTIFICATE HOLDER IS LISTED AS AN ADDITIONAL INSURED AND GRANTED A WAIVER OF SUBROGATION AS PER WRITTEN CONTRACT.

CERTIFICATE HOLDER

CANCELLATION

MASTER1

Master Certificate
 850 SAMS AVE
 HARAHAN, LA 70123

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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9/8/2015 9:51 AM

Adobe Acrobat D...

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Dial One House of Doors

850 Sams Avenue
Harahan, LA 70123

facsimile transmittal sheet

to:		from: Jeff Maumus Hollow Metal Estimator
LANIEL FRANCIS		
company:		date: 9/8/15
JEFFERSON PARISH PURCHASING OPT.		sender's direct number:
fax number:		504-734-1155 ext. 114
(504) 364-2493		
total no. of pages including cover: 7		
re:		fax number:
BID NO: 50-00114352		504-733-5246
4901 JEFFERSON HWY. SUITE B		jeff@dialonehouseofdoors.com