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2525 Quail Drive, Baton Rouge, 70808 (225) 765-2301



## Louisiana State Licensing Board for Contractors



### Contractor Information

**Business Name** BEACON AIR CONDITIONING, HEATING AND REFRIGERATION, INC.  
**Mailing Address** 317 Third Street  
Kenner, LA 70062  
**Phone Number** (504) 467-8698  
**Fax Number** (504) 466-4996  
**Email Address** shelley512@cox.net

### Active Licenses

**License Number** 35350  
**Type** Commercial License  
**Status** LICENSED  
**Effective** 07/16/2015  
**Expiration** 07/15/2018  
**First Issued** 07/15/1999

### Classifications

Class	Qualifying Party	Parishes
BUSINESS AND LAW	Larroux, Eugene J.	ALL
MECHANICAL WORK (STATEWIDE)	Larroux, Eugene J.	ALL

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[Translate »](#)

DATE: 9/19/2016

INVITATION TO BID  
THIS IS NOT AN ORDER

Page: 4

BID NO.: 50-00117750

**JEFFERSON PARISH**

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

VENDOR:

BUYER: DREAMEY

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

6 weeks

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

6 weeks

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

3 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: Addendum #1

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

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

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

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 35350

<b>*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***</b>	
FIRM NAME: <u>Beacon Air Conditioning Heating &amp; Refrigeration</u>	
SIGNATURE: <u>Eugene Larroux</u>	TITLE: <u>Pres</u>
(Must be signed here)	
PRINT OR TYPE NAME: <u>Eugene Larroux</u>	
ADDRESS: <u>317 East 3rd Street</u>	
CITY, STATE: <u>Kenner, LA</u>	ZIP: <u>70062</u>
TELEPHONE: <u>(504) 466-8698</u>	FAX: <u>(504) 466-4996</u>
EMAIL ADDRESS: <u>merrickbeacon@bellsouth.net</u>	

TOTAL PRICE OF ALL BID ITEMS: \$ 15,400.00

DATE: 9/19/2016

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## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00117750

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>Labor, materials, &amp; equipment necessary to remove, dispose of and replace A/C and thermostat for Jefferson Parish Drainage Department:</p> <p>0010 Furnish labor, materials and equipment necessary to perform the following: Remove and dispose of existing 10 ton Trane system from building. All refrigerant shall be recovered as per EPA guidelines. Contractor shall provide and install the following. All equipment is Daikin</p> <ol style="list-style-type: none"><li>12.5 ton air handler DAT12044 12.5T AH 460</li><li>10 ton condenser DX115A1204 10T 460 R41AC</li><li>35 K heater AHKD35-4 35 KW heater</li><li>Low ambient kit LAKT01</li><li>rubber isolators</li></ol> <p>ALSO INSTALL (1) Honeywell Thermostat T7361F-2010</p> <p>Eastbank Drainage Department 4901 Jefferson Hwy Suite D Jefferson, La 70121 If site visit is needed contact person: Richard Davis 726-8764</p>	15,400 <sup>00</sup>	15,400 <sup>00</sup>



# CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YYYY)  
 9/20/2016

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).

<b>PRODUCER</b> Riverlands Insurance Services Inc. 492 West 5th Street LaPlace LA 70068 <b>INSURED</b> Beacon Air Conditioning, Heating & Refrigeration, 317 E 3rd Street Kenner LA 70062		<b>CONTACT</b> Kayla Williams NAME: Kayla Williams PHONE (A/C No. Ext.): (985) 652-5505 FAX (A/C No.): (985) 652-4035 E-MAIL: kwilliams@rivins.com ADDRESS:	
		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: America First INSURER B: Ohio Security Insurance Company INSURER C: Bridgefield Casualty Insurance Co INSURER D: INSURER E: INSURER F:	<b>NAIC #</b> 10335

**COVERAGES**

CERTIFICATE NUMBER: 16-17 w/excess

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 SUBR INSD Y/YD	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: POLICY <input checked="" type="checkbox"/> PRO <input type="checkbox"/> JECT <input type="checkbox"/> LOC OTHER:		BK8558178871	1/31/2016	1/31/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Employee Benefits \$ 25,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEF. RETENTION \$		ES055818871	3/10/2016	1/31/2017	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
C	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	019803840	1/31/2016	1/31/2017	PER STATUTE 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
A	Employment Practices Liab		BK8558178871	1/31/2016	1/31/2017	Each Claim 12,500 Aggregate 12,500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Bid Number 50-00117750

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.

Waiver of Subrogation is provided with respects to the WC as required by written contract.

**CERTIFICATE HOLDER**
**CANCELLATION**

The Parish of Jefferson, Its Districts, D & Agencies Under the Direction of the Parish President & the Parish Council  
 Eastbank Drainage Department  
 4901 Jefferson Hwy Ste D  
 Jefferson, LA 70121

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

Kayla Williams/KAYWIL

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## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/13/2016

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	StateFarm Hyllton S Petit, Jr 2705 Florida Ave. Kenner, La 70062	CONTACT NAME: Hyllton S Petit Jr PHONE (A/C No. Ex): 504-461-0171 E-MAIL: hyllton.petit.h27x@statefarm.com ADDRESS: 2705 Florida Ave. Kenner, La 70062	FAX (A/C No.): 504-461-0289
INSURED	Beacon Air Cond Inc 317 F 3 Rd St Kenner, La 70062-7103	INSURER(S) AFFORDING COVERAGE INSURER A: State Farm Mutual Automobile Insurance Company INSURER B: INSURER C: INSURER D: 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 EXCLUSIONS 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.

INSTR	TYPE OF INSURANCE	APPR. RTRN	INSO	WVD	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMITS
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:							EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/PROP AGG \$ COMBINED SINGLE LIMIT (Ea occurrence) \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS LEASED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS	N	N		098-9278-F13-18F	08/13/2016	12/13/2016	BODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per accident) \$ 1,000,000 PROPERTY DAMAGE (Per accident) \$ 1,000,000
	UMBRELLA LIAB EXCESS LIAB DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>							EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? (Mandatory in RI) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A					PER STATUTE <input type="checkbox"/> OTH- ER <input type="checkbox"/> 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**

THE PARISH OF JEFFERSON, ITS DISTRICTS,  
DEPARTMENTS AND AGENCIES UNDER THE DIRECTION  
OF THE PARISH PRESIDENT AND THE PARISH COUNCIL  
Jefferson Parish Department of Environmental Affairs  
4901 Jefferson Hwy., Suite E Jefferson, La 70122  
Bid# 50-110830

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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# JEFFERSON PARISH

Department of Purchasing

Michael S. Yenni  
Parish President

Brenda J. Campos  
Director

September 28, 2016

## ADDENDUM # 1

Bid No.: 50-00117750

Bid Opening Date: 09/29/2016

Extended Date: 10/05/2016

For: Labor, materials & equipment necessary to remove, dispose of and replace A/C and thermostat for Jefferson Parish Drainage Department.

The bid opening has been extended until Wednesday October 5, 2016.

Correction to specification of license.

1. Remove line one stating vendor must have Louisiana Commercial Electrical License.
2. Replace with: Vendor must have a Louisiana Commercial Electrical or Mechanical license. Proof must be attached to the bid.

Sincerely,

Donna Reamey

Donna Reamey, Buyer II  
Jefferson Parish Purchasing Department

Bidders must acknowledge all addenda on the bid form. Bidder acknowledges receipt of this addendum on the bid form as indicated. Failure to do so will result in bid rejection.

This addendum is a part of the contract documents and modifies the original bidding documents and specifications. The contents of this addendum shall be included in the contract documents. Changes made by this addendum shall take precedence over the documents of earlier date.

This addendum is a part of the contract documents and modifies the original bidding documents and specifications. The contents of this addendum shall be included in the contract documents. Changes made by this addendum shall take precedence over the documents of earlier date.

Eugene Lanouf  
Pres  
9/28/16

General Government Bldg. - 200 Derbigny St. - Suite 4400 - Gretna, LA 70053  
Office 504.364.2673 -- Fax 504.364.2659  
Email: [Purchasing@jeffparish.net](mailto:Purchasing@jeffparish.net) Website: [www.jeffparish.net](http://www.jeffparish.net)