

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 _____%

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF _____.

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 _____

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

35350

THIS SECTION MUST BE COMPLETED BY BIDDER:

FIRM NAME: Beacon Air Conditioning, Heating & Refrigeration, Inc.

ADDRESS: 315 E. 3rd Street

CITY, STATE: Kenner, LA ZIP: 70062

TELEPHONE: (504) 467-8698 FAX: (504) 466-4996

EMAIL ADDRESS: Wendy@beaconac.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: _____
NUMBER: _____
NUMBER: _____
NUMBER: _____

TOTAL PRICE OF ALL BID ITEMS: \$ 6,400.00

AUTHORIZED SIGNATURE: Wendy Chatelain

Wendy Chatelain

Printed Name

TITLE: Owner - Secretary / Treasurer

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.: 50-00131357

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			TWO (2) YEAR LABOR ONLY CONTRACT FOR TROUBLESHOOTING AND REPAIRING VARIOUS MAKES AND MODELS OF (HVAC) HEATING, VENTILATION AND AIR CONDITIONING SYSTEMS FOR THE DEPARTMENT OF FIRE SERVICES		
1	10.00	HR	0010 - HEATING, VENTILATION, & AIR CONDITIONS SYSTEMS (HVAC)	105.00	1,050.00
			NORMAL HOURLY RATE, 7:00 AM - 5:00 PM, MONDAY - FRIDAY, EXCLUDING HOLIDAYS PER TECHNICIAN PER HOUR		
2	10.00	HR	0020 - NORMAL HOURLY RATE 7:00 AM - 5:00 PM, MONDAY - FRIDAY, EXCLUDING HOLIDAYS PER HELPER PER HOUR	50.00	500.00
3	10.00	HR	0030 - BEFORE/AFTER HOURS WEEKDAY RATE 5:00 PM - 12:00 AM, MONDAY - THURSDAY & 12:00 AM - 7:00 AM, TUESDAY - FRIDAY PER TECHNICIAN PER HOUR	130.00	1,300.00
4	10.00	HR	0040 - BEFORE/AFTER HOURS WEEKDAY RATE 5:00 PM - 12:00 AM, MONDAY - THURSDAY & 12:00 AM - 7:00 PM, TUESDAY - FRIDAY PER HELPER PER HOUR	25.00	250.00
5	10.00	HR	0050 - AFTER HOURS WEEKEND RATE FRIDAY 5:00 PM - 12:00 AM, SATURDAY & SUNDAY ALL DAY, & MONDAY 12:00 AM - 7:00 AM (AUTHORIZATION REQUIRED) PER TECHNICIAN PER HOUR	140.00	1,400.00
6	10.00	HR	0060 - AFTER HOURS WEEKEND RATE FRIDAY 5:00 PM - 12:00 AM, SATURDAY & SUNDAY ALL DAY, & MONDAY 12:00 AM - 7:00 AM (AUTHORIZATION REQUIRED) PER HELPER PER HOUR	30.00	300.00
7	10.00	HR	0070 - HOLIDAY RATES 12:00 AM - 11:59 PM (PROVIDE A LIST OF COMPANY HOLIDAYS PER CALENDAR YEAR UPON REQUEST) PER TECHNICIAN PER HOUR	140.00	1,400.00
8	10.00	HR	0080 - HOLIDAY RATES 12:00 AM - 11:59 PM (PROVIDE A LIST OF	20.00	200.00

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00131357

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
9	1.00	EA	COMPANY HOLIDAYS PER CALENDAR YEAR UPON REQUEST) PER HELPER PER HOUR 0090 - NON-BIDDABLE, PARTS THIS IS A NON-BIDDABLE LINE ITEM AND IS FOR PARTS NEEDED TO COMPLETE A REPAIR UP TO \$5,000.00 PER JOB WITH THE APPROVAL FROM THE REQUESTING DEPARTMENT		

Non-Public Works Bid

AFFIDAVIT

STATE OF Louisiana

PARISH/COUNTY OF Jefferson

BEFORE ME, the undersigned authority, personally came and appeared: _____

Wendy Chatelain, (Affiant) who after being by me duly sworn, deposed and said that he/she is the fully authorized Owner-Secretary/Treasurer of Beacon Air Conditioning (Entity), the party who submitted a bid in response to Bid Number 50-00131357, to the Parish of Jefferson.

Affiant further said:

Campaign Contribution Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A X Attached hereto is a list of all campaign contributions, including the date and amount of each contribution, made to current or former elected officials of the Parish of Jefferson by Entity, Affiant, and/or officers, directors and owners, including employees, owning 25% or more of the Entity during the two-year period immediately preceding the date of this affidavit or the current term of the elected official, whichever is greater. Further, Entity, Affiant, and/or Entity Owners have not made any contributions to or in support of current or former members of the Jefferson Parish Council or the Jefferson Parish President through or in the name of another person or legal entity, either directly or indirectly.

Choice B _____ there are **NO** campaign contributions made which would require disclosure under Choice A of this section.

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.

Wendy Chatelain
Signature of Affiant

Wendy Chatelain
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

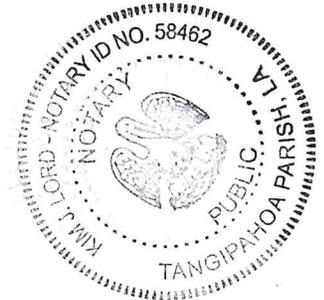
ON THE 7 DAY OF July, 2020

[Signature]
Notary Public

Kim J. Lord
Printed Name of Notary

58462
Notary/Bar Roll Number

My commission expires AT MY DEATH





June 11, 2020

To Whom It May Concern:

Below is a listing of Beacon Air Conditioning's contributions for Jefferson Parish campaigns:

<u>Campaign For</u>	<u>Check No.</u>	<u>Check Dated</u>	<u>Amount</u>
Dominick Impastato	32363	7/05/2017	\$300.00
Dominick Impastato	34304	9/04/2019	\$200.00
Jennifer Van Vrancken	34301	8/30/2019	\$200.00

Should you have any questions or require additional information, please do not hesitate to contact the undersigned.

Regards,

Beacon Air Conditioning, Heating & Refrigeration, Inc.

A handwritten signature in blue ink that reads "Wendy Chatelain".

Wendy Chatelain
Owner

Print

Notary Search - Detail

Name: MS. KIM J. LORD
Address: 255 HICKORY AVE.
HARAHAN, LA 70123
Phone: (504) 737-8922
Phone 2: (504) 234-8683
Notary ID Number: 58462
Parish: TANGIPAHOA with STATEWIDE JURISDICTION
Agency: N/A
Notary Type: Non Attorney
Status: Active
Commission Date: 03/10/1999
Oath Date: 03/08/1999
Surety Expiration Date: 02/07/2024
Annual Report Current: Yes

Notary Events

Suspension From: 05/11/2020 To: 05/12/2020

Deceased, Inactivated, Leave of Absence, Pre-Assessment Registration, Pre-Assessment Taken, Resigned, Retirement, and Revoked events are not available prior to February 11, 2012.

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

CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF
Beacon Air Conditioning, Heating & Refrigeration, Inc.
INCORPORATED.

AT THE MEETING OF DIRECTORS OF Beacon Air Conditioning, Heating & Refrigeration
INCORPORATED, DULY NOTICED AND HELD ON July 27, 2020,
A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED. IT
WAS:

RESOLVED THAT Wendy Chatelain, 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.



Wendy Chatelain
SECRETARY-TREASURER

7/27/2020
DATE

R. Kyle Ardoin
Secretary of State



DOMESTIC CORPORATION
ANNUAL REPORT
For Period Ending
4/3/2020



32200200D



2020

Mailing Address Only (INDICATE CHANGES TO THIS ADDRESS IN THIS BOX)
32200200 D
BEACON AIR CONDITIONING, HEATING AND REFRIGERATION, INC.

315 E. 3RD ST.
KENNER, LA 70062

(INDICATE CHANGES TO THIS ADDRESS IN THIS BOX)
Registered Office Address in Louisiana (Do not use P. O. Box)
315 E. 3RD ST.
KENNER, LA 70062

Issued Shares, if any: 1,000

Federal Tax ID Number

Our records indicate the following registered agents for the corporation. Indicate any changes or deletions below. All agents must have a Louisiana address. Do not use a P. O. Box.
A NEW REGISTERED AGENT REQUIRES A NOTARIZED SIGNATURE
DANIEL DAVID CHATELAIN, II
720 PASADENA AVENUE METAIRIE, LA 70001

I hereby accept the appointment of registered agent(s).

Sworn to and subscribed before me on
NOTARY NAME MUST BE TYPED OR PRINTED WITH NOTARY #

New Registered Agent Signature

Notary Signature

Date

This report reflects a maximum of three officers or directors from our records for this corporation. Indicate any changes or deletions below. Include a listing of all names along with each title held and their address. Do not use a P. O. Box. If additional space is needed attach an addendum.

DANIEL DAVID CHATELAIN, II
720 PASADENA AVENUE METAIRIE, LA 70001
WENDY CHATELAIN
720 PASADENA AVENUE METAIRIE, LA 70001

President, Director

Secretary/Treasurer, Director

Our records indicate the following addresses for the corporation. Indicate any changes below.

Principal office address (Do not use a P. O. Box):
315 E. 3RD ST. KENNER, LA 70062

The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to the fine or imprisonment or both under R.S. 14:133.

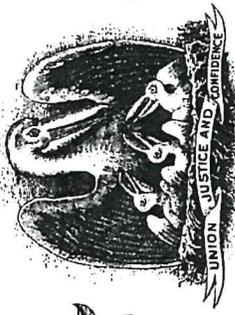
SIGN →	To be signed by an officer, director or agent Daniel David Chatelain, II (SIGNED ELECTRONICALLY)	Title President, Director	Phone	Date 03/05/2020
	Signee's address	Email Address ON FILE	(For Office Use Only)	

Enclose filing fee of \$30.00
Make remittance payable to Secretary of State
Do Not Send Cash
Do Not Staple
web site: www.sos.louisiana.gov

Return by: 4/3/2020
To: Commercial Division
P. O. Box 94125
Baton Rouge, LA 70804-9125
Phone (225) 925-4704

DO NOT STAPLE

State of Louisiana



State Licensing Board for Contractors

BEACON AIR CONDITIONING, HEATING AND REFRIGERATION,
INC.
315 E. 3rd Street
Kenner, LA 70062

This is to Certify that:

is duly licensed and entitled to practice the following classifications

MECHANICAL WORK (STATEWIDE)



Witness our hand and seal of the Board dated,
Baton Rouge, LA 16th day of July 2020

W. S. M... Director

Expiration Date: July 15, 2023

License No: 35350

This License Is Not Transferrable

Chairman

Andy...

Treasurer

Jefferson Parish

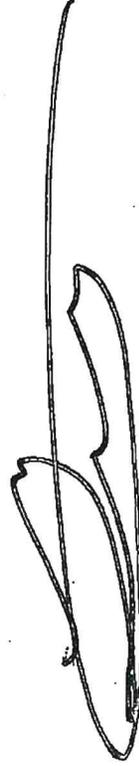
Inspection and Code Enforcement
Regulatory Inspection's Division

Active Gas # 60663

This is to certify that **DANIEL CHATELAIN II** having qualified in accordance with Jefferson Parish Ordinances is hereby granted authorization to engage in the above field as authorized by law.

Issue Date: 1/1/2020

Expiration Date: 12/31/2020



Gasfitter Section Chief

THIS LICENSE IS NOT TRANSFERABLE

Jefferson Parish

Inspection and Code Enforcement
Regulatory Inspection's Division

Active Mechanical # 60662

This is to certify that **DANIEL CHATELAIN II** having qualified in accordance with Jefferson Parish Ordinances is hereby granted authorization to engage in the above field as authorized by law.

Issue Date: 1/1/2020

Expiration Date: 12/31/2020



Mechanical Section Chief

THIS LICENSE IS NOT TRANSFERABLE

Refrigerant Transition And Recovery Program

Program approval by U.S. EPA: 11/21/00

Daniel Chatelain, II

Universal

technician as required by 40 CFR Part 82, Subpart F

Certification Number

101125218

Date Certified

1/14/03

**Pennsylvania College
of Technology**

PENNSYLVANIA



Certifications

Type I - Small Appliances

Type II - High Pressure and Very High
Pressure Appliances

Type III - Low Pressure Appliances

Universal - Type I, II, and III

This card issued by
Pennsylvania College of Technology
One College Avenue
Williamsport, PA 17701
570-327-4775



Western Surety Company

BID BOND
(Percentage)

Bond Number: 11049

KNOW ALL PERSONS BY THESE PRESENTS, That we _____
Beacon Air Conditioning Heating & Refrigeration Inc of
317 Third Street, Kenner, LA 70063, hereinafter
referred to as the Principal, and Western Surety Company,
as Surety, are held and firmly bound unto Jefferson Parish, Purchasing Dept
of 200 Derbigny Street, Gretna. LA 70053,
hereinafter referred to as the Obligee, in the sum of 5% Amount Bid (5% AB %) percent of the greatest
amount bid, for the payment of which we bind ourselves, our legal representatives, successors and assigns, jointly
and severally, firmly by these presents.

WHEREAS, Principal has submitted or is about to submit a proposal to Obligee on a contract for _____
Bid No 5000131357 Two Year Laabor Only Contract Repairs of Hvac, Heating, Ventilaion & Air Conditioning
Systems Equipment for Various Buildings for Jefferson Parish,Dept of Fire Services.

NOW, THEREFORE, if the said contract be awarded to Principal and Principal shall, within such time as may be
specified, enter into the contract in writing and give such bond or bonds as may be specified in the bidding or
contract documents with surety acceptable to Obligee; or if Principal shall fail to do so, pay to Obligee the
damages which Obligee may suffer by reason of such failure not exceeding the penalty of this bond, then this
obligation shall be void; otherwise to remain in full force and effect.

SIGNED, SEALED AND DATED this 30 day of July, 2020.

BeaconAirConditioningHeating&Refrigeration,Inc
(Principal)
By Wendy Chatelain (Seal)

Western Surety Company
(Surety)
By David B. Tidmore (Seal)
David B Tidmore Lic No 114461 Attorney-in-Fact

Western Surety Company

POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT

Know All Men By These Presents, That WESTERN SURETY COMPANY, a South Dakota corporation, is a duly organized and existing corporation having its principal office in the City of Sioux Falls, and State of South Dakota, and that it does by virtue of the signature and seal herein affixed hereby make, constitute and appoint

David B Tidmore, Individually

of Metairie, LA, its true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on its behalf bonds, undertakings and other obligatory instruments of similar nature

- In Unlimited Amounts -

and to bind it thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of the corporation and all the acts of said Attorney, pursuant to the authority hereby given, are hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Law printed on the reverse hereof, duly adopted, as indicated, by the shareholders of the corporation.

In Witness Whereof, WESTERN SURETY COMPANY has caused these presents to be signed by its Vice President and its corporate seal to be hereto affixed on this 21st day of September, 2018.



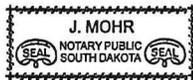
WESTERN SURETY COMPANY

Paul T. Bruflat, Vice President

State of South Dakota }
County of Minnehaha } ss

On this 21st day of September, 2018, before me personally came Paul T. Bruflat, to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is the Vice President of WESTERN SURETY COMPANY described in and which executed the above instrument; that he knows the seal of said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said corporation and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said corporation.

My commission expires
June 23, 2021



J. Mohr, Notary Public

CERTIFICATE

I, L. Nelson, Assistant Secretary of WESTERN SURETY COMPANY do hereby certify that the Power of Attorney hereinabove set forth is still in force, and further certify that the By-Law of the corporation printed on the reverse hereof is still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said corporation this 30 day of July, 2020.



WESTERN SURETY COMPANY

L. Nelson, Assistant Secretary



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/15/2020

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: Kayla Landry PHONE (A/C, No, Ext): (985) 652-5505 FAX (A/C, No): (985) 652-4039 E-MAIL ADDRESS: klandry@rivins.com																						
INSURED Beacon Air Conditioning, Heating & Refrigeration, Inc. 315 E 3rd Street Kenner LA 70062		<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>Ohio Security Insurance Company</td> <td>24082</td> </tr> <tr> <td>INSURER B:</td> <td>Bridgefield Casualty Insurance Co</td> <td>10335</td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Ohio Security Insurance Company	24082	INSURER B:	Bridgefield Casualty Insurance Co	10335	INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER E:																								
INSURER F:																								

COVERAGES CERTIFICATE NUMBER: 19-20 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 VVD	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"/> PROJECT <input type="checkbox"/> LOC OTHER:			BKS1959087358	10/29/2019	10/29/2020	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	\$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> RETENTION \$ 10,000			USO1959087358	10/29/2019	10/29/2020	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$ 5,000,000
								\$
B	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 checked="" type="checkbox"/> Y <input type="checkbox"/> N/A			196-47488	10/29/2019	10/29/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER	
							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 Liability			BKS1855818871	10/29/2019	10/29/2020	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 # 50-00131357
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 Jefferson Parish Department of Fire Services 834 S. Clearview Parkway Jefferson LA 70123	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 

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AGENCY CUSTOMER ID: 00029524

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY Riverlands Insurance Services Inc.		NAMED INSURED Beacon Air Conditioning, Heating & Refrigeration, Inc.	
POLICY NUMBER			
CARRIER	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

The full certificate holder reads as followed:

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

Jefferson Parish Department of Fire Services
834 S. Clearview Parkway
Jefferson, LA 70123

Bid # 50-00131357



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/29/2020

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  Hylton S Petit, Jr 2705 Florida Ave. Kenner, La 70062	CONTACT NAME: Hylton S Petit Jr PHONE (A/C, No, Ext): 504-461-0171 E-MAIL ADDRESS: hylton.petit.b27x@statefarm.com	FAX (A/C, No): 504-461-0289
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: State Farm Mutual Automobile Insurance Company	NAIC # 25178
INSURED Beacon Air Cond Inc 317 E 3 Rd St Kenner, La 70062-7103	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 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
	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 - COM/POP AGG \$ \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	Y	N	702 2978-D19-18T	04/19/2020	10/19/2020	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 EXCESS LIAB <input type="checkbox"/> OCCUR <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				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> 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

CANCELLATION

THE PARISH OF JEFFERSON, ITS DISTRICTS, DEPARTMENTS AND AGENCIES UNDER THE DIRECTION OF THE PARISH PRESIDENT AND THE PARISH COUNCIL
200 Derbigny St.
Gretna, La 70053

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

Bid # 50-00131357

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/29/2020

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.

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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																				
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A :</td> <td>State Farm Mutual Automobile Insurance Company</td> <td>25178</td> </tr> <tr> <td>INSURER B :</td> <td></td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A :	State Farm Mutual Automobile Insurance Company	25178	INSURER B :			INSURER C :			INSURER D :			INSURER E :			INSURER F :	
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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 - COM/OP AGG	\$
								\$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	N	N	702 2978-D19-18T	04/19/2020	10/19/2020	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) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE OTH-ER	
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							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 Jefferson Parish Department of Fire Services 834 S. Clearview Parkway Jefferson, La 70123 Bid # 50-00131357	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 
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600 North Street, Baton Rouge, 70802 (225) 765-2301 Text-To-Verify: 1 (855) 999-7896 

Louisiana State Licensing Board for Contractors

Contractor Information

Business Name BEACON AIR CONDITIONING, HEATING AND REFRIGERATION, INC.
Mailing Address 315 E. 3rd Street
 KENNER, LA 70062
Phone Number (504) 467-8698
Fax Number (504) 466-4996
Email Address david@beaconac.com
Website http://null

Active Licenses

License Number 35350
Type Commercial License
Status LICENSED
Effective 07/16/2020
Expiration 07/15/2023
First Issued 07/15/1999

Classifications

Class	Qualifying Party	Parishes
BUSINESS AND LAW	Daniel David Chatelain II	ALL
MECHANICAL WORK (STATEWIDE)	Daniel David Chatelain II	ALL