

DATE: 6/30/2021

Page: 6

BID NO.: 50-00134973

BID FORM
Non Public Works

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

AS REQUIRED

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

25747

THIS SECTION MUST BE COMPLETED BY BIDDER:

FIRM NAME: KOSTMAYER CONSTRUCTION, LLC

ADDRESS: 1080 OLD SPANISH TRAIL, STE 14

CITY, STATE: SLIDELL LA

ZIP: 70458

TELEPHONE: (504) 837-3320

FAX: (504) 837-2278

EMAIL ADDRESS: HUNTER@Kostmayer.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 by placing the addendum number as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: #1

NUMBER: _____

NUMBER: _____

NUMBER: _____

TOTAL PRICE OF ALL BID ITEMS: \$ 340,000.00

AUTHORIZED SIGNATURE: [Signature]

TITLE: VICE PRESIDENT

HUNTER CHARBONNET

Printed Name

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.

DATE: 6/30/2021

Page 7

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00134973

SEALED BID

| ITEM NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES | UNIT PRICE QUOTED | TOTALS |
|----------------|----------|-----|--|----------------------|--------------|
| 1 | 2.00 | JOB | TWO YEAR CONTRACT FOR LABOR & EQUIPMENT FOR MAINTENANCE DREDGING OF THE INTAKE BASIN AT THE EASTBANK WATER TREATMENT PLANT TO REMOVE SILT ACCUMULATIONS FOR JEFFERSON PARISH WATER DEPARTMENT. 0010 - DREDGING-MOBILIZATION/ DEMOBILIZATION COST PER JOB | | |
| | | | | \$25,000.00 | \$50,000.00 |
| 2 | 2.00 | JOB | 0020 - DREDGING (COST BASED ON REMOVAL OF APPROXIMATELY 16,520 CUBIC YARDS OF MATERIAL PER DREDGE) | | |
| | | | | \$145,000.00 | \$290,000.00 |

CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF
Kostmayer Construction, LLC
INCORPORATED.

AT THE MEETING OF DIRECTORS OF Kostmayer Construction, LLC
INCORPORATED, DULY NOTICED AND HELD ON July 1st, 2021,
A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED. IT
WAS:

RESOLVED THAT Hunter Charbonnet, 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.

Maureen Golem

SECRETARY-TREASURER

7/1/21

DATE

BXS Insurance - Jim E. Brashier

Bond Number: SLA21388498

Contractor Information

Principal: Kostmayer Construction L.L.C. 504-837-3320

Address: 1080 Old Spanish Trail Ste 14 Slidell Louisiana 70458 United States

Owner/Obligee Information

Bond Form: Bid Bond in accordance with Contract Specifications

Owner/Obligee: Jefferson Parish

Address: 200 Derbigny Street Gretna Louisiana 70053 United States

Bond Information

Bid Date: 7/29/2021

Surety: Fidelity and Deposit Company of Maryland

Rider Present: [Click here to view](#)

Estimated Contract Price: \$400,000.00

Time For Completion:

Liquidated Damages:

Estimated Work On Hand:

Amount of Bid Security: Five Percent (5%) of the Amount Bid

Contract ID Number: 50-00134973

Description of Job: Two (2) year contract for Labor and Equipment for Maintenance Dredging of the Intake Basin at the Eastbank Water Treatment Plant to Remove Silt Accumulations for the Jefferson Parish Water Department

Job Breakdown:

Electronic Bidding Information

Bid Security Percentage: 5

Bid Security Maximum:

Contractor's State Vendor ID Number: 28824


Primary Agency:

BXS Insurance

Agency Power of Attorney Limited to: unlimited

Executed

Bond Entered By: Jim E. Brashier - 7/27/2021 11:31:10 AM ET

Bond Approved & Executed By: Jim E. Brashier - 7/28/2021 2:41:55 PM ET 

Know all men by these presents that Fidelity and Deposit Company of Maryland, a Corporation duly organized under the laws of the State of Illinois, are held and firmly bound unto the above owner/obligee by this transmission. The surety agrees to waive the Statute of Fraud defense and further agrees that the owner/obligee is a third party beneficiary of the waiver for the purposes of enforcing this bid bond.

Office of Risk Assessment
50 West Town Street
Third Floor - Suite 300
Columbus, Ohio 43215
(614)644-2858
Fax(614)644-3256
www.insurance.ohio.gov

Ohio Department of Insurance

Mike DeWine - Governor

Jillian Froment - Director

Certificate of Compliance



Issued 03/24/2020

Effective 04/02/2020

Expires 04/01/2021

I, Jillian Froment, hereby certify that I am the Director of Insurance in the State of Ohio and have supervision of insurance business in said State and as such I hereby certify that

FIDELITY AND DEPOSIT COMPANY OF MARYLAND, THE

of Illinois is duly organized under the laws of this State and is authorized to transact the business of insurance under the following section(s) of the Ohio Revised Code:

Section 3929.01 (A)

Allied Lines

Workers Compensation

Boiler & Machinery

Burglary & Theft

Commercial Auto - Liability

Commercial Auto - No Fault

Commercial Auto - Physical Damage

Credit

Earthquake

Fidelity

Financial Guaranty

Fire

Glass

Inland Marine

Multiple Peril - Commercial

Multiple Peril - Homeowners

Other Liability

Surety

FIDELITY AND DEPOSIT COMPANY OF MARYLAND, THE certified in its annual statement to this Department as of December 31, 2019 that it has admitted assets in the amount of \$325,319,001, liabilities in the amount of \$43,819,708, and surplus of at least \$281,499,293.

IN WITNESS WHEREOF, I have hereunto subscribed my name and caused my seal to be affixed at Columbus, Ohio, this day and date.

A handwritten signature in cursive script, appearing to read "Jillian Froment".

Jillian Froment, Director



THE FIDELITY AND DEPOSIT COMPANY

OF MARYLAND
1299 Zurich Way Schaumburg, IL 60196

Statement of Financial Condition As Of December 31, 2019

ASSETS

| | |
|---------------------------------------|-----------------------|
| Bonds | \$ 255,279,821 |
| Stocks | 21,280,401 |
| Cash and Short Term Investments | 2,878,421 |
| Reinsurance Recoverable | 25,356,035 |
| Federal Income Tax Recoverable | 140,480 |
| Other Accounts Receivable | 20,383,843 |
| TOTAL ADMITTED ASSETS | \$ 325,319,001 |

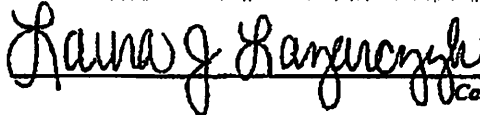
LIABILITIES, SURPLUS AND OTHER FUNDS

| | |
|---|-----------------------|
| Reserve for Taxes and Expenses | \$ 795,381 |
| Ceded Reinsurance Premiums Payable | 43,024,327 |
| Remittances and Items Unallocated | 0 |
| Payable to parents, subs and affiliates | 0 |
| Securities Lending Collateral Liability | 0 |
| TOTAL LIABILITIES | \$ 43,819,708 |
| Capital Stock, Paid Up | \$ 5,000,000 |
| Surplus | 276,499,293 |
| Surplus as regards Policyholders | 281,499,293 |
| TOTAL | \$ 325,319,001 |

Securities carried at \$164,223,431 in the above statement are deposited with various states as required by law.

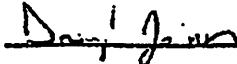
Securities carried on the basis prescribed by the National Association of Insurance Commissioners. On the basis of market quotations for all bonds and stocks owned, the Company's total admitted assets at December 31, 2019 would be \$322,248,132 and surplus as regards policyholders \$288,428,424.

I, LAURA J. LAZARCZYK, Corporate Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing statement is a correct exhibit of the assets and liabilities of the said Company on the 31st day of December, 2019.


Corporate Secretary

State of Illinois }
City of Schaumburg } SS:

Subscribed and sworn to, before me, a Notary Public of the State of Illinois, in the City of Schaumburg, this 25th day of February, 2020.


Notary Public



Non-Public Works Bid

AFFIDAVIT

STATE OF LA

PARISH/COUNTY OF St. Tammany

BEFORE ME, the undersigned authority, personally came and appeared: Aunter
CHARBONNET, (Affiant) who after being by me duly sworn, deposed and said that
he/she is the fully authorized VICE PRESIDENT of KOSTMAYEN CONSTRUCTION (Entity),
the party who submitted a bid in response to Bid Number 50-00134973 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 _____ 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.

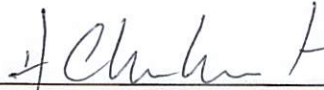
Choice B ✓ There are **NO** debts which would require disclosure under Choice A of this section.

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

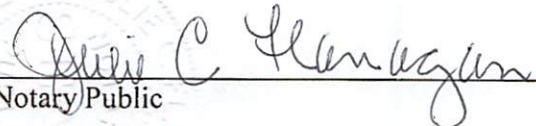
[The remainder of this page is intentionally left blank.]

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

HUNTER CHARBONNET
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME
ON THE 29th DAY OF July, 2021.


Notary Public

Printed Name of Notary Julie C. Flanagan #12204
LA Civil Law Notary Public
St. Tammany Parish, LA
Notary/Bar Roll Number My commission is for life

My commission expires With life.

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/30/2021

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 any rights to the certificate holder in lieu of such endorsement(s).

| | | |
|---|---|-----------------------------|
| PRODUCER USI Southwest 3850 N. Causeway Blvd., Suite 1200 Metairie, LA 70002 504 355-5000 | CONTACT NAME: Tania Fonseca | |
| | PHONE (A/C, No, Ext): 504-355-5050 | FAX (A/C, No): 610-537-9418 |
| INSURED Kostmayer Construction, L.L.C. 1080 Old Spanish Trail, Ste. 10 Slidell, LA 70458 | E-MAIL ADDRESS: Tania.Fonseca@usi.com | |
| | INSURER(S) AFFORDING COVERAGE | |
| | INSURER A : Ascot Insurance Company | NAIC # 23752 |
| | INSURER B : Navigators Insurance Company | 42307 |
| | INSURER C : Louisiana Workers' Comp Corp | 22350 |
| | 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 SUBR INSR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|--|--------------------|------------------------------------|--------------------------|--------------------------|---|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: | | MAPL211000014703 | 03/31/2021 | 03/31/2022 | EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$50,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$ |
| B | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY | | FA16BAP02018404 | 11/07/2020 | 11/07/2021 | COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| B | UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ | | HO21LIA95623301 HO21LIA95623302 | 03/31/2021 03/31/2021 | 03/31/2022 03/31/2022 | EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$ |
| C | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | N/A | 134932D | 11/07/2020 | 11/07/2021 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.I. EACH ACCIDENT \$1,000,000 E.I. DISEASE - EA EMPLOYEE \$1,000,000 E.I. DISEASE - POLICY LIMIT \$1,000,000 |
| A | Maritime Employer | | MAPL211000014703 | 03/31/2021 | 03/31/2022 | \$1,000,000 Per Occ. |


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

Any request for special coverages which are specifically required by contract or minimum insurance requirements should be forwarded to this office for review.

(See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

| | |
|--|--|
| The Parish of Jefferson, its Districts, Departments, and Agencie 1221 Elmwood Park Boulevard, Suite 909 New Orleans, 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  |

DESCRIPTIONS (Continued from Page 1)

COMPREHENSIVE GENERAL LIABILITY:

Independent Contractors

Includes automatic Additional Insured, Waiver of Subrogation and Primary Insurance endorsements that provide this status to the Certificate holder, only when there is a written contract between the named insured and the certificate holder that requires such status, and only with regard to work performed on behalf of the named insured.

Sudden and Accidental Pollution- 3 days discovery / 30 days reporting

30 Day Notice of Cancellation will be given to certificate holder on file with the company except 10 days for non-payment of premium

COMMERCIAL AUTOMOBILE:

Includes automatic Additional Insured, Waiver of Subrogation and Primary Insurance endorsements that provide this status to the Certificate holder, only when there is a written contract between the named insured and the certificate holder that requires such status, and only with regard to work performed on behalf of the named insured.

30 Day Notice of Cancellation will be given to certificate holder on file with the company except 10 days for non-payment of premium

WORKERS COMPENSATION:

U.S. Longshoremen & Harborworkers Coverage

Includes Alternate Employer and Waiver of Subrogation endorsements that provide this status to the Certificate holder, only when there is a written contract between the named insured and the certificate holder that requires such status, and only with regard to work performed on behalf of the named insured.

Outer Continental Shelf Act

Gulf of Mexico Extension

Limited Other States Endorsement

30 Day Notice of Cancellation will be given to certificate holder on file with the company except 10 days for non-payment of premium

MARITIME:

Includes automatic Alternate Employer and Waiver of Subrogation endorsements that provide this status to the Certificate holder, only when there is a written contract between the named insured and the certificate holder that requires such status, and only with regard to work performed on behalf of the named insured.

T.W.M. & C.

Death on High Seas

In Rem

Jones Act

30 Day Notice of Cancellation will be given to certificate holder on file with the company except 10 days for non-payment of premium

BUMBERSHOOT:

Follows form primary

Includes automatic Additional Insured, Waiver of Subrogation and Primary Insurance endorsements that provide this status to the Certificate holder, only when there is a written contract between the named insured and the certificate holder that requires such status, and only with regard to work performed on behalf of the named insured.

30 Day Notice of Cancellation will be given to certificate holder on file with the company except 10 days for non-payment of premium

POLICY PERIOD: March 31, 2021 12:01 am C.S.T. to March 31, 2022 12:01 am C.S.T.

HULL: LIMIT - Hull Value

Underwriters at Lloyds - Policy # GCP21516

AIHC/AITF (Includes Collision & Towers Liability)

PROTECTION & INDEMNITY: LIMIT OF LIABILITY \$1,000,000

Underwriters at Lloyds - Policy #GCP21516

SP-23 (Includes Excess Collision & Towers Liability)

DESCRIPTIONS (Continued from Page 1)

POLLUTION: LIMIT OF LIABILITY \$1,000,000 per occurrence

Starr Indemnity & Liability Co. - Policy # V1370521

Full Pollution under OPA/CERCLA

BUMBERSHOOT: LIMIT OF LIABILITY \$10,000,000

Standard Bumbershoot Form including Bumbershoot Supplementary Clauses

***Scheduled Underlying Coverage for Bumbershoot includes Protection & Indemnity, Vessel Pollution, General**

Liability, Auto Liability, Employers Liability and Maritime

Navigators Ins. Co. - Policy # HO19LIA95623301 50% Lead

Atlantic Specialty Insurance Co. - Policy # B5JH31439 50% Follow

Navigators Ins. Co. - Policy # HO19LIA95623302 50% Lead

Ascot Insurance Company - Policy # MAXS211000125702 50% Follow

NAVIGATION LIMITS: Inland waters, lakes, rivers, and other bodies of water within the U.S. not to exceed 25 miles offshore.

REMARKS: While the vessel(s) named herein is/are working for the above listed company, such company is named as an additional assured during that particular time and all rights of subrogation hereunder are waived with respect to the one for whom the vessel(s) is/are working at that particular time, as respects Hull, P&I, and Pollution policies, as per written contract. Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.

SCHEDULE OF VESSELS:

Vessel name - Type - Hull Limit

ORBA-1 - Barge - \$600,000

OU701 - Deck/Spud Barge - \$600,000

TADANO 1 - Deck Barge - \$600,000

MS. MARY - Deck Barge - \$100,000

MS. ASHLEY - Deck Barge - \$200,000

MS. VIRGINIA - Workboat #2516 - \$250,000

Darlene (S-24) - Workboat (tank barge) - \$2,000,000

2016 Scully Crew Boat - \$24,729

2016 Scully - Crew Boat - \$26,478

CP-12 - Deck Barge - \$10,000

2018 Scully - Crew Boat - \$31,996

MV Frances - 2017 Scully - Bareboat Barge - \$75,000

Steel Deck Barge - Deck Barge - \$250,000

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