

DATE: 9/22/2015

INVITATION TO BID
THIS IS NOT AN ORDER

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BID NO.: 50-00114526

JEFFERSON PARISH

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

VENDOR: MARBLEIZED MEMORIES, LLC

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 _____

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK _____

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK _____

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

LW D

NUMBER:

2

LW D

NUMBER: _____

NUMBER: _____

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

N/A

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***

FIRM NAME:

MARBLEIZED MEMORIES, LLC

SIGNATURE:

(Must be signed here)

Lee W. Deibel

TITLE:

OWNER

PRINT OR TYPE NAME:

LEE W. DEIBEL

ADDRESS:

450 HICKORY AVE.

CITY, STATE:

HARRAHAN, LA

ZIP:

70123

TELEPHONE:

504 737-2812

FAX:

() NONE

EMAIL ADDRESS:

MMLLC@COX.net

TOTAL PRICE OF ALL BID ITEMS: \$ 1632.00

DATE: 9/22/2015

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INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00114526

SEALED BID

| ITEM NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES | UNIT PRICE QUOTED | TOTALS |
|----------------|----------|-----|--|----------------------|---------|
| 1 | 1.00 | EA | <p>RENOVATIONS TO EXISTING PLAQUE FOR THE JEFFERSON PARISH EAST BANK REGIONAL LIBRARY</p> <p>0010 - Stainless Steel Plaque Noting the Renovations to the North Kenner Library</p> <p>SPECIFICATIONS</p> <p>Material Composition: C304 Stainless Steel Alloy</p> <p>Corners: 1/4 inch Rounded</p> <p>Lettering: Etched</p> <p>Finish: Brushed</p> <p>The lettering on the new plaque shall match the existing plaque. A photo of the existing plaque is attached. (See attachment A)</p> <p>Sample of the wording for the new plaque is attached. (See attachment B)</p> <p>A proof copy shall be submitted for approval by the successful bidder before the order is placed.</p> <p>The existing plaque can be viewed by appointment in the Maintenance Office at the East Bank Regional Library, 4747 W. Napoleon Avenue, 70001.</p> <p>For an appointment please call (504) 838-1100 and ask for maintenance or (504) 849-8818 and ask for Jeannie Hobbie.</p> <p>Attachment A: Photo of Original Plaque Attachment B: Lettering of New Plaque</p> | 1632.00 | 1632.00 |



COMMON POLICY DECLARATIONS

Policy Number M008002119

M008001891

Renewal of Number

Item 1. Named Insured and Mailing Address:

MARBLEIZED MEMORIES, LLC

1005 NEYREY DRIVE
METAIRIE

LA 70001

Item 2. Policy Period From: 04/17/2015 To: 04/17/2016 Term 366 Day(s)

12:01 A. M. Standard Time at the address of the Named Insured as stated herein

Item 3. Business Description:

APARTMENT AND WHOLESALE AWARDS DISTRIBUTOR

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

This policy consists of the following coverage parts for which a premium is indicated. Where no premium is shown, there is no coverage. This premium may be subject to adjustment.

| Coverage Part(s) | Form No and Edition Date | Premium |
|---|--------------------------|-------------|
| Commercial General Liability Coverage Part | | \$ 750.00 |
| Property Coverage Part | | \$ 3,434.00 |
| Equipment Breakdown Coverage | | \$ |
| Inland Marine Coverage Part | | \$ |
| Terrorism Coverage | | \$ |
| NOTICE | Subtotal | \$ 4,184.00 |
| This insurance policy is delivered as surplus lines coverage under the Louisiana Insurance code. | POLICY FEE | \$ 250.00 |
| In the event of insolvency of the company issuing this contract, the policyholder or claimant is not covered by the Louisiana Insurance Guaranty Association which guarantees only specific types of policies issued by insurance companies authorized to do business in Louisiana. | STATE TAX | \$ 221.70 |
| Audit Period Annual unless otherwise stated: | | \$ |
| This surplus lines policy has been procured by the following licensed Louisiana surplus lines broker: | | \$ |
| Item 4. Forms and endorsements applicable to all Coverage Parts: | | \$ |
| See Schedule of Forms and Endorsements | | \$ |
| Wayne J. Forest, Sr. | | \$ |
| Agent No.: 008 | | \$ |
| General Agent: FOREST INSURANCE FACILITIES INC. | | \$ |
| Address: PO BOX 7125 | | \$ |
| METAIRIE | | \$ |
| LA 70010 | | \$ |
| Producer Code No.: | | \$ |
| Producer Name: | | \$ |
| Producer Address: | | \$ |
| | Total | \$ 4,655.70 |

"IMPORTANT"
SEE FIF1 (12/13)
Attached at Inception

Wayne J. Forest, Sr.
Agent No.: 008
General Agent: FOREST INSURANCE FACILITIES INC.
Address: PO BOX 7125
METAIRIE LA 70010

Producer Code No.:

Producer Name:

Producer Address:

Wayne J. Forest, Sr.

Countersigned 04/27/2015 MGF/JAR
DATE

By _____
COUNTERSIGNATURE

THIS COMMON POLICY DECLARATIONS AND THE SUPPLEMENTAL DECLARATIONS, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND ENDORSEMENTS COMPLETE THE ABOVE NUMBER POLICY.

IN WITNESS WHEREOF, this Company has caused the Policy to be signed by its President and its Secretary and countersigned by a duly authorized representative.

President

Secretary



COMMERCIAL PACKAGE/ GENERAL LIABILITY PROPOSAL FOR: MARBLEIZED MEMORIES & LEE W. DEIBEL/R.J. ANDREW

04/17/15 TO 04/17/16 RENEWAL PROPOSAL
COVERAGE PROVIDED BY: ATLANTIC CASUALTY
A.M. BEST RATING: A-VII

KEY COVERAGES:

OCCURRENCE FORM

LIMITS OF LIABILITY:

\$2,000,000 POLICY GENERAL AGGREGATE
\$1,000,000 PRODUCTS/COMPLETED OPERATIONS AGGREGATE
\$1,000,000 PERSONAL/ADVERTISING INJURY
\$1,000,000 EACH OCCURRENCE
\$ 100,000 FIRE LEGAL LIABILITY
\$ 5,000 MEDICAL PAYMENTS

DEDUCTIBLES:

\$500 BODILY INJURY/PROPERTY DAMAGE PER CLAIM

HAZARD SCHEDULE:

| LOC | CLASS CODE | CLASSIFICATION | EXPOSURE |
|-----|---------------|--|--------------------|
| 001 | 12362 | WHOLESALE TROPHY BUSINESS | \$200,000 in sales |
| 001 | 60010 | APARTMENT 1 UPSTAIRS NO TENANTS or CUSTOMERS - FOR INSURED'S USE ONLY | 2700 Square Feet |

Package (Property & General Liability) Policy Notable Endorsements/Exclusions:

MINIMUM EARNED PREMIUM ENDORSEMENT; DESIGNATED PREMISES ENDORSEMENT; ASSAULT & BATTERY EXCLUSION; PUNITIVE DAMAGES EXCLUSION; NEW ENTITIES EXCLUSION; EMPLOYMENT PRACTICES EXCLUSION; COMMUNICABLE DISEASE EXCLUSION; SEXUAL ACTIONS EXCLUSION; LEASED WORKERS AND RELATED PRACTICES EXCLUSION INDEPENDENT CONTRACTORS EMPLOYEES OR LEASED WORKERS EXCLUSION; LEAD POISONING EXCLUSION; HIRING AND SUPERVISION PRACTICES EXCLUSION; PROFESSIONAL /E&O EXCLUSION; LIQUOR LIABILITY EXCLUSION; FUNGUS EXCLUSION; FUNGUS EXCLUSION; MOLD EXCLUSION; EXTERIOR INSULATION AND FINISH SYSTEM EXCLUSION; CROSS SUIT EXCLUSION; TERRORISM EXCLUSION; INTELLECTUAL PROPERTY INFRINGEMENT AND BREACH OF CONTRACT EXCLUSION. FLOOD DAMAGE IS NOT COVERED REGARDLESS OF HOW CAUSED; TOTAL POLLUTION EXCLUSION; COMMUNICABLE DISEASE EXCLUSION; ASBESTOS OR SILICA EXCLUSION; DAMAGE BY ANIMALS EXCLUSION; BACTERIA, VIRUS, AND ORGANIC PATHOGEN EXCLUSION; TOTAL POLLUTION EXCLUSION; CHROMATED COPPER ARSENATE EXCLUSION; SNOW AND ICE REMOVAL EXCLUSION; MENTAL INJURY EXCLUSION; VOLUNTEER WORKERS EXCLUSION; NUCLEAR ENERGY LIAB EXCLUSION; CERTIFIED ACTS OF TERRORISM; ASBESTOS; MICROORGANISMS, BIOLOGICAL ORGANISMS, BIOAEROSOLS OR ORGANIC CONTAMINANTS; AUTHORITIES; RADIOACTIVE CONTAMINATION; WAR AND CIVIL WAR; THERE IS NO COVERAGE FOR THEFT OF ANY PROPERTY OUTSIDE OF THE BUILDING

**Insurance Declaration Affidavit
Worker's Compensation**

AFFIDAVIT

STATE OF LOUISIANA

PARISH/COUNTY OF JEFFERSON

BEFORE ME, the undersigned authority, personally came and appeared, LEE WM. DEIBEL, (Affiant) who after being duly sworn, deposed and said that he/she is the fully authorized OWNER of MARBLEIZED MEMORIES, LLC (Entity), the party who submitted a Proposal/Contract/Bid/RFP/SOQ No. 50-00114526, to Jefferson Parish.

Affiant further said:

- (1) That affiant has no employees in which Worker's Compensation Insurance is required pursuant to state law.
- (2) That if affiant hires employees such that they would be required under state law to obtain Worker's Compensation Insurance, affiant will notify Jefferson Parish and obtain the proper coverage.

Lee Wm. Deibel
Signature of Affiant

LEE WM. DEIBEL
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

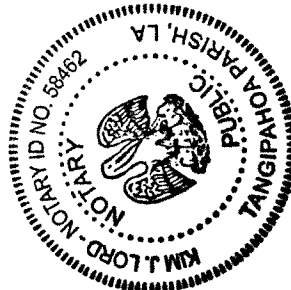
ON THE 29th DAY OF SEPTEMBER, 2015

[Signature]
Notary Public

Kim J. Lord
Printed Name of Notary

58462
Notary/Bar Roll Number

My commission expires AT MY DEATH





Louisiana Auto Insurance Identification Card
1-800-841-3000 AGENT: Not Applicable

GEICO GENERAL INSURANCE COMPANY
One GEICO Center • Macon, GA 31295-0001
NAIC Code: 35882

An insurer authorized to transact business in Louisiana has issued the Motor Vehicle Policy identified hereon. The coverage provided by this policy meets the minimum liability insurance limits prescribed by law.

Policy Number
4209-74-15-88

Effective Date
04-30-15

Expiration Date
10-30-15

Year
2003

Make
CHEV

Model
SILVER1500

Vehicle ID No.
2GCEK19T031198915

Insured: Rebecca G Andrew
Ricky J Andrew

Excluded Driver(s): NONE

**THIS CARD MUST BE CARRIED IN THE VEHICLE AT ALL TIMES AS
EVIDENCE OF LIABILITY INSURANCE**