

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 ✓

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)

73398**THIS SECTION MUST BE COMPLETED BY BIDDER:**FIRM NAME: ASE Services, LLCADDRESS: 821 Little Farms AveCITY, STATE: Metairie, LAZIP: 70003TELEPHONE: (504) 466-3303FAX: (504) 466-3301EMAIL ADDRESS: bsteale@aseservicesllc.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: NO Addenda

NUMBER: _____

NUMBER: _____

NUMBER: _____

TOTAL PRICE OF ALL BID ITEMS: \$ 916.00

AUTHORIZED

SIGNATURE: [Signature]Todd Desselles

Printed Name

TITLE: VP of Operations

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.: 50-00142134

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			Three (3) Year, Labor Only Contract to Troubleshoot, Repair and Program Electrical Systems (Parish-Wide) for the Jefferson Parish Department of General Services		
1	1.00	HR	0010 - ELECTRICIAN NORMAL HOURLY RATE (7:00AM TO 5:00PM, MONDAY THRU FRIDAY)	\$ 95.00	\$ 95.00
2	1.00	HR	0020 - ELECTRICIAN'S HELPER NORMAL HOURLY RATE (7:00AM TO 5:00PM, MONDAY THRU FRIDAY)	\$ 45.00	\$ 45.00
3	1.00	HR	0030 - ELECTRICIAN BEFORE/AFTER HOURS WEEKDAY RATE (5:00PM TO 12:00AM, MONDAY THRU FRIDAY & 12:00AM TO 7:00AM TUESDAY THRU FRIDAY)	\$ 142.50	\$ 142.50
4	1.00	HR	0040 - ELECTRICIAN'S HELPER BEFORE/AFTER HOURS WEEKDAY RATE (5:00PM TO 12:00AM, MONDAY THRU FRIDAY & 12:00AM TO 7:00AM TUESDAY THRU FRIDAY)	\$ 67.50	\$ 67.50
5	1.00	HR	0050 - ELECTRICIAN AFTER HOURS WEEKEND RATE (FRIDAY 5:00PM TO 12:00AM, SATURDAY AND SUNDAY ALL DAY, MONDAY 12:00AM TO 7:00AM) AUTHORIZATION REQUIRED	\$ 142.50	\$ 142.50
6	1.00	HR	0060 - ELECTRICIAN'S HELPER AFTER HOURS WEEKEND RATE (FRIDAY 5:00PM TO 12:00AM, SATURDAY AND SUNDAY ALL DAY, MONDAY 12:00AM TO 7:00AM) AUTHORIZATION REQUIRED	\$ 67.50	\$ 67.50
7	1.00	HR	0070 - ELECTRICIAN HOLIDAY RATE (12:00AM TO 11:59PM)	\$ 190.00	\$ 190.00
8	1.00	HR	0080 - ELECTRICIAN'S HELPER HOLIDAY RATE (12:00AM TO 11:59PM)	\$ 80.00	\$ 80.00
9	1.00	HR	0090 - PROJECT ESTIMATOR	\$ 86.00	\$ 86.00



06-12-2023

Bid Bond in Accordance with Contract Specifications

SLA06126251

ASE Services LLC

Bond Number

Principal Name

821 Little Farms Ave, Metairie, LA, 70003, US

Principal Address

Principal Signature

Jefferson Parish

200 Derbigny Street, Gretna, LA, 70053, US

Owner/Obligee Name

Owner/Obligee Address

Bond Information

06-13-2023

Travelers Casualty and Surety Company
of America

140747

Bid Date

Surety

Contractor Vendor ID Number

50-00142134

Contract ID Number

Bid# 50-00142134, 3 Year Labor Only Contract to Troubleshoot, Repair and Program Electrical Systems (Parish-Wide) for the Jefferson Parish Department of General Services

Description of Job

Five Percent of the Amount Bid

5%

Amount of Bid Security

Bid Security Maximum

Bid Security Percentage

Jim E Brashier

Attorney-in-Fact

Cadence Insurance

Bond Entered and Executed By

Primary Agency

Attorney-In-Fact Signature

Know all men by these presents that Travelers Casualty and Surety Company of America, a Corporation duly organized under the laws of the State of CT, are held and firmly bound unto the above owner/obligee by the 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.





Travelers Casualty and Surety Company of America
Travelers Casualty and Surety Company
St. Paul Fire and Marine Insurance Company
Farmington Casualty Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, St. Paul Fire and Marine Insurance Company, and Farmington Casualty Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint **Jim E Brashier** of **Biloxi**, **MS**, their true and lawful Attorney(s)-in-Fact to sign, execute, seal and acknowledge the following bond:

Surety Bond No.:
OR **SLA06126251**
Project Description:


Principal: **ASE Services LLC**
Obligee: **Jefferson Parish**

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this **21st** day of **April**, **2021**.



State of Connecticut

City of Hartford ss.

By: 
Robert L. Raney, Senior Vice President

On this the **21st** day of **April**, **2021**, before me personally appeared **Robert L. Raney**, who acknowledged himself to be the Senior Vice President of each of the Companies, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

My Commission expires the **30th** day of **June**, **2026**




Anna P. Nowik, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of each of the Companies, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, **Kevin E. Hughes**, the undersigned, Assistant Secretary of each of the Companies, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this **12** day of **06**, **2023**




Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.

Please refer to the above-named Attorney(s)-in-Fact and the details of the bond to which this Power of Attorney is attached.



CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE MEMBERS
OF
ASE SERVICES, LLC.

AT THE MEETING OF THE MEMBERS OF ASE SERVICES, LLC., DULY NOTICED AND HELD ON FEBRUARY 15, 2022, A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED AND PASSED UNANIMOUSLY. IT WAS:

RESOLVED, THAT TODD DESSELLES BE AND ARE HEREBY APPOINTED, CONSTITUTED AND DESIGNATED AS AGENTS AND ATTORNEYS-IN-FACT OF THE LLC WITH FULL POWER AND AUTHORITY TO ACT ON BEHALF OF THIS COMPANY IN ALL CONCERNS REGARDING BIDS, ESTIMATES, AND CONTRACTS FOR ANY TYPE OF CONSTRUCTION IN THE STATES OF LOUISIANA, TEXAS, FLORIDA, ALABAMA, AND MISSISSIPPI. TODD DESSELLES HAS THE AUTHORITY TO CONSUMATE, SIGN DOCUMENTS, CONTRACTS, BID FORMS, AFFIDAVITS, AND BID BONDS FOR ANY PUBLIC OR PRIVATE BID SOLICITATION ON BEHALF OF ASE SERVICES, LLC. TODD DESSELLES HAS THE AUTHORITY TO SIGN DOCUMENTS ON BEHALF OF THIS COMPANY, WHICH WILL BIND THE COMPANY.

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 MEMBERS OF SAID COMPANY, AND THE SAME HAS NOT BEEN REVOKED OR RESCINDED



MANAGER, TODD M. DESSELLES

6/8/2023
DATE

Non-Public Works Bid

AFFIDAVIT

STATE OF Louisiana

PARISH/COUNTY OF Jefferson

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

Todd Desjardes, (Affiant) who after being by me duly sworn, deposed and said that he/she is the fully authorized Manager of ASE Services LLC (Entity), the party who submitted a bid in response to Bid Number 50-00142134, 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

Todd Dessehes

Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 8th DAY OF June, 2023.



Notary Public

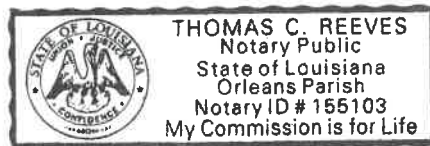
Thomas C. Reeves

Printed Name of Notary

155103

Notary/Bar Roll Number

My commission expires at death.



CERTIFICATE OF LIABILITY INSURANCE

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 Alliant Insurance Services, Inc. 909 Poydras St #2650 New Orleans, LA 70112	CONTACT NAME: Sylvia Cuevas	
	PHONE (A/C, No, Ext): (504) 312-4930	FAX (A/C, No):
	E-MAIL ADDRESS: Sylvia.Cuevas@alliant.com	
	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A : American Casualty Company of Reading, Pennsylvania	20427
	INSURER B : Continental Insurance Company	35289
	INSURER C : National Fire Insurance Company of Hartford	20478
INSURED ASE Services, LLC 1208 Bert St La Place, LA 70068	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES

COVERAGE: 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		
A	X	COMMERCIAL GENERAL LIABILITY			7015368162	8/1/2022	8/1/2023	EACH OCCURRENCE	\$ 1,000,000	
		CLAIMS-MADE	X	OCCUR				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	
								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	
		GEN'L AGGREGATE LIMIT APPLIES PER:					POLLUTION AGGRE	\$ 2,000,000		
		POLICY	X	PRO-JECT						
		OTHER:								
B	X	AUTOMOBILE LIABILITY			7015368176	8/1/2022	8/1/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
		ANY AUTO OWNED AUTOS ONLY		SCHEDULED AUTOS				BODILY INJURY (Per person)	\$	
		HIRED AUTOS ONLY	X	NON-OWNED AUTOS ONLY				BODILY INJURY (Per accident)	\$	
								PROPERTY DAMAGE (Per accident)	\$	
									\$	
									\$	
B	X	UMBRELLA LIAB	X	OCCUR	7015368209	8/1/2022	8/1/2023	EACH OCCURRENCE	\$ 1,000,000	
		EXCESS LIAB		CLAIMS-MADE				AGGREGATE	\$ 1,000,000	
		DED	X	RETENTION \$				10,000		\$
C	X	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N		7 15368193	8/1/2022	8/1/2023	PER STATUTE	OTH-ER	
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N	N/A				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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is listed as an additional insured as respects general liability, Automobile Liability, and Umbrella coverages, as required by contract.

General

Liability additional Insured shall apply to ongoing and completed operations.

Excess Liability follows forms

Waiver of subrogation in favor of certificate holder, as respects general liability, auto, workers compensation and umbrella coverages, as required by contract

SEE ATTACHED ACORD 101

CERTIFICATE HOLDER

**Jefferson Parish
Purchasing Dept
P.O. Box 9
Gretna, LA 70054**

AUTHORIZED REPRESENTATIVE

JOHN N. HARPER



ADDITIONAL REMARKS SCHEDULE

AGENCY Alliant Insurance Services, Inc.		NAMED INSURED ASE Services, LLC 1208 Bert St La Place, LA 70068	
POLICY NUMBER SEE PAGE 1			
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

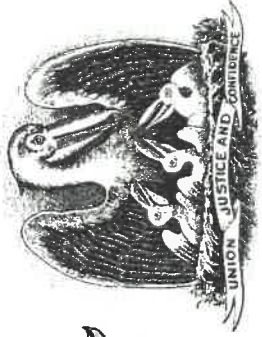
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: **ACORD 25** FORM TITLE: **Certificate of Liability Insurance**

Description of Operations/Locations/Vehicles:

Primary & Non-Contributory, as respects general liability, umbrella liability and auto liability, as required by contract

Damage to Rented Premises limit increased to \$500,000 per Contractors GL Extention Endorsement- Form CNA74705XX (1-15)

State of



Louisiana

State Licensing Board for Contractors

This is to Certify that:

ASE SERVICES, LLC
1208 Bert St.
La Place, LA 70068

is duly licensed and entitled to practice the following classifications

ELECTRICAL



Expiration Date: January 29, 2026

License No: 73398

Witness our hand and seal of the Board dated,
Baton Rouge, LA 30th day of January 2023

Will B. McCP

Director

See mallett

Chairman

Andy Murrell

Treasurer

This License Is Not Transferrable