

DATE: 8/04/2021

INVITATION TO BID  
THIS IS NOT AN ORDER

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BID NO.: 50-00135544

**JEFFERSON PARISH**

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

VENDOR: #66297 / A-1 SIGNS LLC

BUYER: DABRAHAM

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 to be done in workman-like manner, according to standard practices. Any deviations or alteration from the specifications must be indicated on the bid form for each item and upon request, product data for same must be submitted by the time specified by the Purchasing Department.

**DELIVERY: FOB JEFFERSON PARISH**

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES	9/30/21
INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK	10/5/21
INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK	10/15/21

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: N/A  
NUMBER: N/A  
NUMBER: N/A  
NUMBER: N/A

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 29198

<b>*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***</b>	
FIRM NAME: A-1 SIGNS LLC	
SIGNATURE: (Must be signed here)	TITLE: PRESIDENT
PRINT OR TYPE NAME: LLOYD BLAUVELT	
ADDRESS: 3950 METROPOLITAN STREET	
CITY, STATE: NEW ORLEANS LA	ZIP: 70126
TELEPHONE: (504 ) 947-8381	FAX: (504 ) 947-8790
EMAIL ADDRESS: sales@a-1signsinc.com	

TOTAL PRICE OF ALL BID ITEMS: \$ 5,442.00

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**SEALED BID**

**SEALED BID**

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>Labor, material, equipment necessary to provide and install a River Ridge decorative sign on Jefferson Highway</p> <p>0010 Labor, Materials, Freight and necessary essentials to provide and install one (1) new high density urethane decorative sign located in the vicinity of 11312 Jefferson Highway, River Ridge, LA 70123</p> <p>Department Contact: Drawings Heta Babin or Bryan Parks 1901 Ames Blvd. Marrero, LA 70072 504-349-5800</p>	5,442.00	5,442.00



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/11/2021

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

<b>PRODUCER</b> Eustis Insurance & Benefits, a Marsh & McLennan Agency LLC Company 110 Veterans Memorial Blvd. Ste 200 Metairie LA 70005	<b>CONTACT NAME:</b> Roslynn Bolling <b>PHONE (A/C, No, Ext):</b> <b>E-MAIL:</b> Roslynn.Bolling@marshmma.com <b>ADDRESS:</b>	<b>FAX (A/C, No):</b>
<b>INSURED</b> A-1 Signs, Inc., A-1 Signs, LLC Attn: Mrs. Pam Blauvelt 3950 Metropolitan Street New Orleans LA 70126-5443	<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>
	<b>INSURER A:</b> Hanover American Insurance Company	36064
	<b>INSURER B:</b> Hanover Insurance Company	22292
	<b>INSURER C:</b> LUBA Casualty Insurance Company	12472
	<b>INSURER D:</b> Scottsdale Insurance Company	41297
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES****CERTIFICATE NUMBER:** 785714185**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 WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <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:		LZOD58188303	5/15/2021	5/15/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		AWOD58191803	5/15/2021	5/15/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0		UHOD58188703	5/15/2021	5/15/2022	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input checked="" type="checkbox"/> N/A		028000018320121	5/15/2021	5/15/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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
D	Equipment Floater		CPS7363710	5/15/2021	5/15/2022	Leased/Rented Equipment 30,000

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

With respects to the above General Liability policy, the certificate holder will be considered as an additional insured if required by written contract subject to endorsement's CG 2010 (04/13) and CG 2037 (04/13) terms and conditions.

With respects to the above General Liability policy, the certificate holder will be provided a waiver of subrogation if required by written contract subject to endorsement's #421-2915 (06-15) terms and conditions.

With respects to the above General Liability policy, the policy is primary and non-contributory if required by written contract subject to endorsement's #421-2915 (06-15) terms and conditions.  
See Attached...

**CERTIFICATE HOLDER**

Jefferson Parish, its Districts, Departments and Agencies  
under the direction of the Parish President  
and the Parish Council  
Purchasing Department  
200 Derbigny St.  
General Government Bldg., Suite 4400  
Gretna LA 70053

**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: \_\_\_\_\_

LOC #: \_\_\_\_\_

**ADDITIONAL REMARKS SCHEDULE**Page 1 of 1

AGENCY Eustis Insurance & Benefits,		NAMED INSURED A-1 Signs, Inc., A-1 Signs, LLC Attn: Mrs. Pam Blauvelt 3950 Metropolitan Street New Orleans LA 70126-5443	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

**ADDITIONAL REMARKS****THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

With respects to the above General Liability policy, the policy provides a blanket 30 day notice of cancellation if required by written contract subject to endorsement's #401-1235 (12-14) terms and conditions.

With respects to the above Auto policy, the certificate holder will be considered as an additional insured on a primary and non-contributory basis if required by written contract subject to endorsement's #461-0478 (12-12) terms and conditions.

With respects to the above Auto policy, the certificate holder will be provided a waiver of subrogation if required by written contract subject to endorsement's #461-0155 (09-97) terms and conditions.

With respects to the above Auto policy, the policy provides a blanket 30 day notice of cancellation if required by written contract subject to endorsement's #401-1235 (12-14) terms and conditions.

With respects to the above Workers Compensation policy, the certificate holder will be provided a waiver of subrogation if required by written contract, subject to endorsement's #WC 00 03 13 (04/84) terms and conditions.

With respects to the above Workers Compensation policy, the policy provides a blanket 30 day notice of cancellation if required by written contract subject to endorsement's #WC 99 03 02 (12-10) terms and conditions.

The Umbrella policy is excess over the above General Liability, Auto and Workers Compensation policies subject to the Umbrella policy's terms, conditions and exclusions.

Bid No.: 50-135544





## State of Louisiana State Licensing Board for Contractors

This is to Certify that:

A-1 SIGNS, INCORPORATED  
3950 Metropolitan St.  
New Orleans, LA 70126

is duly licensed and entitled to practice the following classifications

SPECIALTY: SIGNS, SCOREBOARDS, DISPLAYS, BILLBOARDS (ELECTRICAL & NON-ELECTRICAL)



Expiration Date: July 21, 2023

License No: 29198

Witness our hand and seal of the Board dated,  
Baton Rouge, LA 22nd day of July 2020

Will B. McCoy Director

Lee Malott Chairman

Andy Murre Treasurer

This License Is Not Transferrable