

DATE: 6/20/2022

Page: 6

BID NO.: 50-00138463

**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 \_\_\_\_\_

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

N/A

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 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 6/20/22 W.C.

NUMBER: \_\_\_\_\_

NUMBER: \_\_\_\_\_

NUMBER: \_\_\_\_\_

TOTAL PRICE OF ALL BID ITEMS: \$ 108,743.00

AUTHORIZED

SIGNATURE: Wendy Chatelain

TITLE: Owner/Secretary-Treasurer

Wendy Chatelain

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.

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	879.00	HR	<p>THREE (3) YEAR LABOR ONLY CONTRACT TO TROUBLESHOOT AND REPAIR VARIOUS TYPES OF (HVAC) HEATING, VENTILATION AND AIR CONDITIONING EQUIPMENT</p> <p>0010 - HVAC - HEATING, VENTILATION &amp; A/C THREE (3) YEAR CONTRACT</p> <p>DEPARTMENT OF GENERAL SERVICES</p> <p>WE EXTEND THIS BID TO PROVIDE ALL LABOR, MATERIALS, TRANSPORTATION, SUPERVISION, AND EQUIPMENT NECESSARY FOR A THREE (3) YEAR LABOR ONLY CONTRACT TO TROUBLESHOOT REPAIR AND REPLACE/INSTALL VARIOUS MAKES AND MODELS OF (HVAC) HEATING, VENTILATION &amp; AIR CONDITIONING SYSTEMS FOR THE DEPARTMENT OF GENERAL SERVICES (PARISHWIDE) PER THE ATTACHED SPECIFICATIONS.</p> <p>** BELOW IS THE FIRST ITEM TO BE BID **</p> <p>TECHNICIAN NORMAL HOURLY RATE (7:00AM TO 5:00PM, MONDAY THRU FRIDAY)</p>	110.00	96,690.00
2	226.00	HR	<p>0020 - HELPER NORMAL HOURLY RATE (7:00AM TO 5:00PM, MONDAY THRU FRIDAY)</p>	48.00	10,848.00
3	1.00	HR	<p>0030 - TECHNICIAN BEFORE/AFTER HOURS WEEKDAY RATE (5:00PM TO 12:00AM, MONDAY THRU FRIDAY &amp; 12:00AM TO 7:00AM, TUESDAY THRU FRIDAY)</p>	130.00	130.00
4	24.00	HR	<p>0040 - HELPER BEFORE/AFTER HOURS WEEKDAY RATE (5:00PM TO 12:00AM, MONDAY THRU FRIDAY &amp; 12:00AM TO 7:00AM, TUESDAY THRU FRIDAY)</p>	20.00	480.00
5	1.00	HR	<p>0050 - TECHNICIAN AFTER HOURS WEEKEND RATE (FRIDAY 5:00PM TO 12:00AM,</p>	140.00	140.00



**LABOR ONLY CONTRACT TO TROUBLESHOOT AND REPAIR VARIOUS TYPES OF (HVAC)  
HEATING, VENTILATION, AND AIR CONDITIONING EQUIPMENT**

**Section 1.0 – Pre-Bid Conference:**

A Non-Mandatory Pre-Bid Conference and inspection of the site shall be held:

Location: GGB-200 DERBIGNY ST. SUITE 4400 GRETN, LA 70053  
Date: 06/20/2022  
Time: 10:00 AM

All prospective bidders are invited to attend this non-mandatory pre-bid conference which will be held; the date and location to be determined. However, failure to attend the non-mandatory pre-bid conference shall not relieve the bidder of responsibility for information discussed at the conference. Furthermore, failure to attend the non-mandatory pre-bid conference and inspection does not relieve the successful bidder from the necessity of furnishing materials or performing any work that may be required to complete the work in accordance with the specification with no additional cost to the owner. This conference is held to allow questions to be answered and to inspect the site with the owner's representative.

**Section 2.0 - Scope:**

We extend this proposal to cover the following:

- Labor, transportation, supervision, and equipment necessary to provide a three (3) year labor-only contract to troubleshoot, repair, and install various makes and models of (HVAC) Heating, Ventilation, and Air Conditioning Systems. (Parishwide).

**Section 3.0 Bonds:**

A bid bond will be required with bid submission in the amount of 5% of the total bid. Vendors must submit an electronic bid bond through the respective online clearinghouse bond management system(s) as indicated in the electronic bid solicitation on Central Auction House. Vendor shall indicate the electronic bid bond number in the location specified on the electronic bid envelope. No scanned paper copies of any bid bond will be accepted as part of the electronic bid submission.

**Section 4.0 – License:**

A copy of the front and, if applicable, the back of all licenses listed below shall be submitted with bid submission. Failure to submit this information with bid submission will deem the bid non-responsive.

**4.1 License(s) issued by the Louisiana State Licensing Board for Contractors:**

- Mechanical Statewide



#### Section 5.0 Specifications:

- A properly licensed technician shall only perform troubleshooting, replacement, and equipment repairs.
- The use of a helper will only be allowed upon approval from a Jefferson Parish representative.
- The use of a project estimator will only be allowed upon approval from a Jefferson Parish representative.
- All work shall be provided on an "as-needed" basis. There is no guarantee of the amount of work given throughout this contract.
- There shall be no minimum call-out time, work time, service time, etc., in terms of hours charged under the terms of this contract.
- Time charged to contract shall be from the time personnel arrives on site until the time personnel departs the site.
- Hourly pricing for a Project Estimator, if approved, shall include the following:
  - Engineering Planning
  - Consulting
  - Design
  - Cost Estimating and Construction Management
  - Provide insight and review of planned projects (*as to reduce cost and increase safety and efficiency*).
- Hourly pricing for a Technician and, if needed and approved, a helper shall include the following:
  - Labor for troubleshooting
  - Labor for repair work
  - Labor for software programming
  - Incidental equipment required to perform troubleshooting and repairs
  - Tools needed to perform troubleshooting and repairs
  - Software and computer equipment needed
  - Transportation/Travel time to and from the worksite and picking up parts, tools, equipment, etc.
- Technician and helper arriving at the worksite to perform services shall verify start time by meeting with an owner's representative and sign in (If available) on an owner-provided log book.

NOTE- Failure to sign in with a parish representative may cause non-payment of an invoice for services.
- Technician and helper departing from the work site shall verify departure time by meeting with an owner's representative and sign out (If available) on an owner-provided log book.

NOTE- Failure to sign out with a parish representative may cause non-payment of an invoice for services.
- In case of excessive downtime Jefferson Parish may provide an additional purchase order, not to exceed \$10,000.00, to the successful bidder to obtain the necessary part(s) to complete the repair work. Jefferson Parish will not allow any mark-up of the dealer's invoice cost.

**Section 6.0 – Response Time:**

Bidder must provide a workforce and necessary equipment and tools to respond to multiple facilities simultaneously if need be.

Bidder must respond within four (4) hours after receiving a reference number on non-emergency calls and within two (2) hours for emergency calls. If the bidder fails to respond to the site/location, Jefferson Parish shall reserve the right to cancel this contract.

**Section 7.0 – Safety Precautions:**

Safety precautions must be exercised to safeguard the welfare and safety of the people while any work is being performed.

**Section 8.0 – Permits:**

Bidder shall obtain any permits as required by the Jefferson Parish Department of Inspection and Code Enforcement and any municipality where work is performed.

The bidder shall be responsible for the payment of these permits. All permits must be obtained before the start of any project requiring permits.

**Section 9.0 – Warranty:**

The successful Bidder shall provide a minimum thirty (30) day warranty on all Labor. All parts purchased by the successful bidder shall have a full manufacturer warranty.

**Section 10.0 – Second Opinion:**

Jefferson Parish reserves the right to call for a second opinion on all work diagnoses before approving any repairs.

**Section Intentionally Left Blank**

**Section 11.0 Times work is to be performed:**

The below chart indicates normal, weekend, and before/after hours. These times are to be used for pricing according to the times identified.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
12:00 AM							
1:00							
2:00							
3:00							
4:00							
5:00							
6:00							
7:00							
8:00							
9:00							
10:00							
11:00							
12:00 PM							
1:00							
2:00							
3:00							
4:00							
5:00							
6:00							
7:00							
8:00							
9:00							
10:00							
11:00							

	WEEK END WORK HOURS
	BEFORE/AFTER WORK HOURS
	NORMAL WORK HOURS

June 20, 2022

**ADDENDUM #1**

**Bid Number: 50-00138463**

**Bid Opening Date: June 30, 2022**

**Description of Bid: Three Year Labor Only Contract to Troubleshoot & Repair Various Types of HVAC for the Jefferson Parish Department of General Services.**

---

**CLARIFICATION:**

Bid Form has been Revised per Addendum 1 to add Line 0090. Please discard the previous Bid Form and use the attached one. Bid Specs have been revised. Section 5.0 has been revised.

Sign in Sheet is attached.

Sincerely,

*Donna M. Evans*

Donna M. Evans  
Buyer II

Jefferson Parish Purchasing Department

<b>Bidders must acknowledge all addenda on the bid form. Bidder acknowledges receipt of This addendum on the bid form as indicated. Failure to do so will result in bid rejection.</b>
--

**This addendum is a part of the contract documents and modifies the original bidding documents and specifications. The contents of this addendum shall be included in the contract documents. Changes made by this addendum shall take precedence over the documents of earlier date.**



# PRE-BID CONFERENCE SIGN-IN SHEET

BID #:50-00138463 DESCRIPTION:THREE YEAR LABOR ONLY CONTRACT TO TROUBLESHOOT & REPAIR VARIOUS TYPES OF HVAC- JEFF PAR DEPT OF GENERAL SERVICES  
 LOCATION: GGB-200 DERBIGNY ST SUITE 4400 GRETNA, LA 70053

START TIME: 10:05 STOP TIME: 10:31

COMPANY NAME/ADDRESS	COMPANY REPRESENTATIVE	PHONE/FAX NO.	EMAIL ADDRESS	SIGN-IN TIME
JEFFERSON PARISH PURCHASING DEPARTMENT	DONNA M. EVANS	(504)364-2691	DMEVANS@JEFFPARISH.NET	
Atg Services LLC	Richard Mussachio	504-267-3800	rmussachio@atg-services-llc.com	9:51 am
Beacon A/C	Wendy Chatelain	504-467-8698	Wendy@beaconac.com	9:55 am
Beacon A/C	Dan Chatelain	504-467-8698	dan@beaconac.com	9:55 am
JPGS	Chris Frazier	504-364-2673	Cfrazier@jeffparish.net	10:11 am



06-03-2022

## Bid Bond in Accordance with Contract Specifications

SLA06038776

Beacon Air Conditioning, Heating &amp; Refrigeration, Inc.

Bond Number

Principal Name

315 E 3rd Street, Kenner, LA, 70062, US

Principal Address

*Wendy Chatelain*

Principal Signature

Jefferson Parish

Owner/Obligee Name

200 Derbigny Street, Gretna, LA, 70053, US

Owner/Obligee Address

### Bond Information

06-30-2022

Bid Date

Western Surety Company

Surety

22976

Contractor Vendor ID Number

50-00138463

Contract ID Number

Three-year labor only contract for heating, ventilation and air conditioning equipment for Department of General Services

Description of Job

Five Percent of amount bid

Amount of Bid Security

5%

Bid Security Maximum

Bid Security Percentage

David B Tidmore

Attorney-in-Fact

Bond Entered and Executed By

*David B Tidmore*

Attorney-In-Fact Signature

T&amp;T Agency, LLC

Primary Agency

Know all men by these presents that Western Surety Company, a Corporation duly organized under the laws of the State of SD, 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.





# 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 16th day of June, 2021.



WESTERN SURETY COMPANY

*Paul T. Brufat*

Paul T. Brufat, Vice President

State of South Dakota }  
County of Minnehaha }

ss

On this 16th day of June, 2021, before me personally came Paul T. Brufat, 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

March 2, 2026



*M. Bent*

M. Bent, 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 03 day of 06, 2022.



WESTERN SURETY COMPANY

*L. Nelson*

L. Nelson, Assistant Secretary

Form F4280-7-2012

Go to [www.cnasurety.com](http://www.cnasurety.com) > Owner / Oblige Services > Validate Bond Coverage, if you want to verify bond authenticity.



**Authorizing By-Law**

**ADOPTED BY THE SHAREHOLDERS OF WESTERN SURETY COMPANY**

This Power of Attorney is made and executed pursuant to and by authority of the following By-Law duly adopted by the shareholders of the Company.

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, and Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile.



Non-Public Works Bid

AFFIDAVIT

STATE OF LA

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/Officer of Beacon A/C, Heating & Refrig. (Entity), the party who submitted a bid in response to Bid Number 50-00138463, 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.

Wendy Chatelain  
Signature of Affiant

Wendy Chatelain  
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

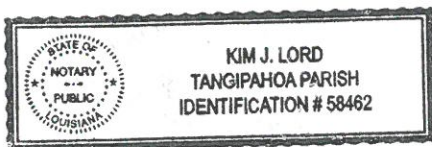
ON THE 3 DAY OF JUNE, 2022

[Signature]  
Notary Public

Kim J. Lord  
Printed Name of Notary

58462  
Notary/Bar Roll Number

My commission expires AT MY DEATH





June 17, 2022

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>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
Cynthia Lee Sheng	Credit Card	11/29/2021	\$500.00

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

Regards,

**Beacon Air Conditioning, Heating & Refrigeration, Inc.**

Wendy Chatelain  
Owner/Secretary-Treasurer

## CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF  
Beacon A/C, Heating & Refrigeration, Inc.  
INCORPORATED.

AT THE MEETING OF DIRECTORS OF Beacon A/C, Heating & Refrigeration, Inc.  
INCORPORATED, DULY NOTICED AND HELD ON June 17, 2022,  
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

6/17/2022

DATE





## State Licensing Board for Contractors

This is to Certify that:

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

is duly licensed and entitled to practice the following classifications

MECHANICAL WORK (STATEWIDE)



Expiration Date: July 15, 2023

License No: 35350

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

William B. McQuinn  
Director

Lee Mallett  
Chairman

Andy Demme  
Treasurer

This License Is Not Transferrable

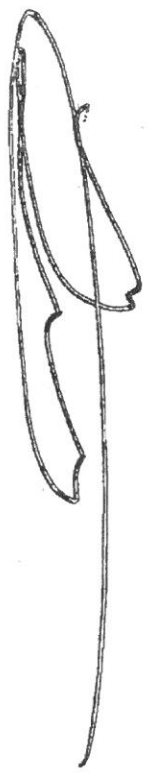
**Jefferson Parish**  
Inspection and Code Enforcement  
Regulatory Inspection's Division

**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: 1/1/2022

Expiration Date: 12/31/2022



Mechanical Section Chief

**THIS LICENSE IS NOT TRANSFERABLE**

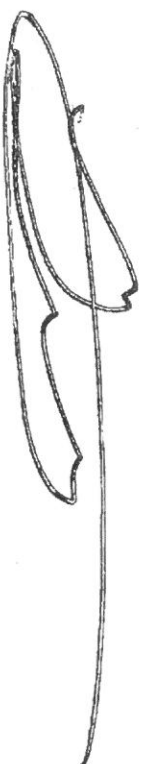
**Jefferson Parish**  
Inspection and Code Enforcement  
Regulatory Inspection's Division

**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: 1/1/2022

Expiration Date: 12/31/2022



Gasfitter Section Chief

**THIS LICENSE IS NOT TRANSFERABLE**





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/01/2021

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> Riverlands Insurance Services Inc. 492 West 5th Street  LaPlace LA 70068	<b>CONTACT NAME:</b> Kayla Landry, CISR <b>PHONE (A/C, No, Ext):</b> (985) 652-5505 <b>FAX (A/C, No):</b> (985) 652-4039 <b>E-MAIL ADDRESS:</b> klandry@rivins.com																					
<b>INSURED</b> Beacon Air Conditioning, Heating & Refrigeration, Inc. 315 E 3rd Street  Kenner LA 70062	<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>Wesco Insurance Company</td><td>25011</td></tr><tr><td>INSURER B:</td><td>Technology Insurance Co, Inc.</td><td>42376</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:	Wesco Insurance Company	25011	INSURER B:	Technology Insurance Co, Inc.	42376	INSURER C:			INSURER D:			INSURER E:			INSURER F:		
INSURER(S) AFFORDING COVERAGE		NAIC #																				
INSURER A:	Wesco Insurance Company	25011																				
INSURER B:	Technology Insurance Co, Inc.	42376																				
INSURER C:																						
INSURER D:																						
INSURER E:																						
INSURER F:																						

**COVERAGES****CERTIFICATE NUMBER:** 21-22**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	<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"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		WPP1931637 00	10/29/2021	10/29/2022	<table><tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr><tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$ 100,000</td></tr><tr><td>MED EXP (Any one person)</td><td>\$ 5,000</td></tr><tr><td>PERSONAL &amp; ADV INJURY</td><td>\$ 1,000,000</td></tr><tr><td>GENERAL AGGREGATE</td><td>\$ 2,000,000</td></tr><tr><td>PRODUCTS - COMP/OP AGG</td><td>\$ 2,000,000</td></tr><tr><td>Employee Benefits</td><td>\$ 1,000,000</td></tr></table>	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	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	Employee Benefits	\$ 1,000,000
EACH OCCURRENCE	\$ 1,000,000																				
DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000																				
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																				
Employee Benefits	\$ 1,000,000																				
	<b>AUTOMOBILE LIABILITY</b> <input 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						<table><tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr></table>	COMBINED SINGLE LIMIT (Ea accident)	\$	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$						
COMBINED SINGLE LIMIT (Ea accident)	\$																				
BODILY INJURY (Per person)	\$																				
BODILY INJURY (Per accident)	\$																				
PROPERTY DAMAGE (Per accident)	\$																				
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			WUM1849930 01	10/29/2021	10/29/2022	<table><tr><td>EACH OCCURRENCE</td><td>\$ 5,000,000</td></tr><tr><td>AGGREGATE</td><td>\$ 5,000,000</td></tr></table>	EACH OCCURRENCE	\$ 5,000,000	AGGREGATE	\$ 5,000,000										
EACH OCCURRENCE	\$ 5,000,000																				
AGGREGATE	\$ 5,000,000																				
B	<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 Y	N/A	TWC4020840	10/29/2021	10/29/2022	<table><tr><td><input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER</td><td></td></tr><tr><td>E.L. EACH ACCIDENT</td><td>\$ 1,000,000</td></tr><tr><td>E.L. DISEASE - EA EMPLOYEE</td><td>\$ 1,000,000</td></tr><tr><td>E.L. DISEASE - POLICY LIMIT</td><td>\$ 1,000,000</td></tr></table>	<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						
<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																				

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

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****CANCELLATION**

Jefferson Parish Department of General Services  
200 Derbigny Street  
Suite 3300  
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**

© 1988-2015 ACORD CORPORATION. All rights reserved.

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 follows:

THE PARISH OF JEFFERSON, ITS DISTRICTS, DEPARTMENTS AND AGENCIES  
UNDER THE DIRECTION OF THE PARISH PRESIDENT AND THE PARISH COUNCILJefferson Parish Department of General Services  
General Government Building  
200 Derbigny Street Suite 3300  
Gretna, LA 70053

Bid# 50-00138463




# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/14/2022

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>  Hylton S Petit, Jr 2705 Florida Ave Kenner, La 70062		<b>CONTACT</b> NAME: Hylton S Petit, Jr PHONE (A/C, No, Ext): 504-461-0171 E-MAIL: hylton.petit.b27x@statefarm.com FAX (A/C, No): 504-461-0289		
<b>INSURED</b>  Beacon A/C, Heating & Refrigeration, Inc. 315 E 3RD St Kenner, la 70062-7103		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
		INSURER A : State Farm Mutual Automobile Insurance Company		25178
		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
	<b>COMMERCIAL GENERAL LIABILITY</b> <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 - COMP/OP AGG \$ \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y	N	383 6773-B28-18G	02/28/2022	08/28/2022	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 \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<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	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> 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 JEFFERSON PARISH, ITS DISTRICTS, DEPARTMENTS  
AND AGENCIES UNDER THE DIRECTION OF THE PARISH  
PRESIDENT & 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






# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/14/2022

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>  Hylton S Petit, Jr 2705 Florida Ave Kenner, La 70062		<b>CONTACT</b> 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		
<b>INSURED</b>  Beacon A/C, Heating & Refrigeration, Inc. 315 E 3RD St Kenner, la 70062-7103		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
		INSURER A : State Farm Mutual Automobile Insurance Company		25178
		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
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y	N	383 6773-B28-18G	02/28/2022	08/28/2022	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 \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<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	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> 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

Jefferson Parish Department of General Services 200 Derbigny St., Ste 3300 Gretna, La 70053 <b>Bid# 50-00138463</b>	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 
--	---