

Image Excavation & Development, Inc.  
21664 Hwy. 40  
Bush, LA 70431  
Phone (985) 892-6001  
Fax (985) 893-0885  
Email skip@mageexcavation.net  
LA License # 54896  
Highway, Street, & Bridge Construction

Jefferson Parish  
Purchasing Department  
200 Derbigny Street, Suite 4400  
Gretna, Louisiana 70053

Bid Name: **Brown Avenue Drainage  
Improvements - 18th Street to Harold  
Street**  
Bid No.: **50-00131833**



## LOUISIANA UNIFORM PUBLIC WORK BID FORM

TO: Jefferson Parish  
Purchasing Department  
200 Derbigny Street, Suite 4400  
Gretna, Louisiana 70053  
*(Owner to provide name and address)*

BID FOR: Brown Avenue Drainage Improvements (18<sup>th</sup>  
Street to Harold Street)  
Public Works Project 2017-068-DR (2)  
Bid No. 50-00131833  
*(Owner to provide name of project)*

The undersigned bidder hereby declares and represents that she/he; a) has carefully examined and understands the Bidding Documents, b) has not received, relied on, or based his bid on any verbal instructions contrary to the Bidding Documents or any addenda, c) has personally inspected and is familiar with the project site, and hereby proposes to provide all labor, materials, tools, appliances and facilities as required to perform, in a workmanlike manner, all work and services for the construction and completion of the referenced project, all in strict accordance with the Bidding Documents prepared by: H. Davis Cole & Associates, LLC (HDCA) and dated: July, 2020  
*(Owner to provide name of entity preparing bidding documents.)*

Bidders must acknowledge all addenda. The Bidder acknowledges receipt of the following **ADDENDA**: (Enter the number the Designer has assigned to each of the addenda that the Bidder is acknowledging) NO. 1 Dated 09/10/2020, NO. 2 Dated 09/14/2020,  
NO. 3 Dated 09/17/2020, NO. 4 Dated 09/21/2020.

**TOTAL BASE BID:** For all work required by the Bidding Documents (including any and all unit prices designated "Base Bid"\* but not alternates) the sum of:

Five Hundred Nine Thousand Five Hundred Ninety Five Dollars and 00/100-----Dollars (\$ 509,595.00 )

**ALTERNATES:** For any and all work required by the Bidding Documents for Alternates including any and all unit prices designated as alternates in the unit price description.

**Alternate No. 1** *(Owner to provide description of alternate and state whether add or deduct)* for the lump sum of:

N/A Dollars (\$ N/A )

**Alternate No. 2** *(Owner to provide description of alternate and state whether add or deduct)* for the lump sum of:

N/A Dollars (\$ N/A )

**Alternate No. 3** *(Owner to provide description of alternate and state whether add or deduct)* for the lump sum of:

N/A Dollars (\$ N/A )

**NAME OF BIDDER:** Magee Excavation & Development L.L.C

**ADDRESS OF BIDDER:** 21664 Hwy 40 Bush, LA. 70431

**LOUISIANA CONTRACTOR'S LICENSE NUMBER:** 54896

**NAME OF AUTHORIZED SIGNATORY OF BIDDER:** Skip Magee

**TITLE OF AUTHORIZED SIGNATORY OF BIDDER:** Owner/ Member

**SIGNATURE OF AUTHORIZED SIGNATORY OF BIDDER\*\*:** 

**DATE:** September 24, 2020

### **THE FOLLOWING ITEMS ARE TO BE INCLUDED WITH THE SUBMISSION OF THIS LOUISIANA UNIFORM PUBLIC WORK BID FORM:**

\* The Unit Price Form shall be used if the contract includes unit prices. Otherwise it is not required and need not be included with the form. The number of unit prices that may be included is not limited and additional sheets may be included if needed.

\*\* **A CORPORATE RESOLUTION OR WRITTEN EVIDENCE** of the authority of the person signing the bid for the public work as prescribed by LA R.S. 38:2212(B)(5).

**BID SECURITY** in the form of a bid bond, certified check or cashier's check as prescribed by LA RS 38:2218.A is attached to and made a part of this bid.

**LOUISIANA UNIFORM PUBLIC WORK BID FORM**  
**UNIT PRICE FORM**

TO: Jefferson Parish  
Purchasing Department  
200 Derbigny Street, Suite 4400  
Gretna, Louisiana 70053  
*(Owner to provide name and address)*

BID FOR: Brown Avenue Drainage Improvements (18<sup>th</sup>  
Street to Harold Street)  
Public Works Project 2017-068-DR (2)  
Bid No. 50-00131833  
*(Owner to provide name of project)*

UNIT PRICES: This form shall be used for any and all work required by the Bidding Documents and described as unit prices. Amounts shall be stated in figures and only in figures.

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - CLEARING AND GRUBBING |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 201 (01)     | 1.00   | LUMP SUM         | 950.00     | 950.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - REMOVAL OF STRUCTURES & OBSTRUCTIONS |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 201 (02)     | 1.00  | LUMP SUM         | 1,400.00   | 1,400.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - TEMPORARY ENVIRONMENTAL CONTROLS |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 204          | 1.00  | LUMP SUM         | 500.00     | 500.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - TEMPORARY SURFACING (AGGREGATE, VEHICULAR MEASURE) |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 402          | 50.0  | CUBIC YARD       | 35.00      | 1,750.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - ASPHALTIC CONCRETE WEARING COURSE, LEVEL 1 SUPERPAVE |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 502          | 143.0   | TON              | 140.00     | 20,020.00   |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - MILLING ASPHALT PAVEMENT, 2" NOMINAL THICKNESS |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 509          | 1,038.0   | SQUARE YARD      | 2.00       | 2,076.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - FULL DEPTH ASPHALT PATCHING, MINIMUM 12" THICK |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 510          | 364.0   | SQUARE YARD      | 140.00     | 50,960.00   |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - REINFORCED CONCRETE PIPE ARCH (96") WHERE PIPE IS SUPPLIED BY CONTRACTOR |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 701 (02)     | 335.0   | LINEAR FOOT      | 1,127.00   | 377,545.00  |

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - REINFORCED CONCRETE PIPE (15") WHERE PIPE IS SUPPLIED BY CONTRACTOR |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 701 (10)     | 15.0   | LINEAR FOOT      | 98.00      | 1,470.00  |

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - BLIND TIE IN DRAIN PIPE TO RCPA (PER PARISH DETAIL) |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| 701 (XX)     | 2  | EACH             | 800.00     | 1,600.00  |

Wording for "DESCRIPTION" is to be provided by the Owner  
All quantities are estimated. The contractor will be paid upon actual quantities as verified by Owner.



**LOUISIANA UNIFORM PUBLIC WORK BID FORM**  
**UNIT PRICE FORM**

TO: Jefferson Parish  
Purchasing Department  
200 Derbigny Street, Suite 4400  
Gretna, Louisiana 70053  
*(Owner to provide name and address)*

BID FOR: Brown Avenue Drainage Improvements (18<sup>th</sup>  
Street to Harold Street)  
Public Works Project 2017-068-DR (2)  
Bid No. 50-00131833  
*(Owner to provide name of project)*

UNIT PRICES: This form shall be used for any and all work required by the Bidding Documents and described as unit prices. Amounts shall be stated in figures and only in figures.

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - TEE INLET (24") WITH CONCRETE PAD (PER PARISH DETAIL) |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| 702 (03) (B) | 4  | EACH             | 2,600.00   | 10,400.00   |

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - TEMPORARY TRAFFIC CONTROL |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| 713          | 1.00   | LUMP SUM         | 500.00     | 500.00  |

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - SEEDING |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| 717          | 1.00   | LUMP SUM         | 700.00     | 700.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - FERTILIZER |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| 718          | 1.00  | LUMP SUM         | 140.00     | 140.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - MOBILIZATION |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| 727          | 1.00  | LUMP SUM         | 7,014.50   | 7,014.50  |

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - CONSTRUCTION LAYOUT |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| 740          | 1.00   | LUMP SUM         | 1,500.00   | 1,500.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - INITIAL INSTALLATION AND FINAL REMOVAL OF DAMS |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| S1           | 1.00  | LUMP SUM         | 1.00       | 1.00  |

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - DAM REMOVAL AND REPLACEMENT |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| S2           | 1  | EACH             | 1.00       | 1.00  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - EXPLORATORY EXCAVATION |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| S3           | 3   | EACH             | 1.00       | 3.00  |

|              |  |                  |            |   |
|--------------|--|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - CONCRETE COLLAR |                  |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> ) |
| S4           | 1  | EACH             | 1,250.00   | 1,250.00  |

Wording for "DESCRIPTION" is to be provided by the Owner  
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**LOUISIANA UNIFORM PUBLIC WORK BID FORM**  
**UNIT PRICE FORM**

TO: Jefferson Parish  
Purchasing Department  
200 Derbigny Street, Suite 4400  
Gretna, Louisiana 70053  
*(Owner to provide name and address)*

BID FOR: Brown Avenue Drainage Improvements (18<sup>th</sup>  
Street to Harold Street)  
Public Works Project 2017-068-DR (2)  
Bid No. 50-00131833  
*(Owner to provide name of project)*

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|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - 12" PLASTIC STORM DRAIN PIPE |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| S5           | 15.0  | LINEAR FOOT      | 80.00      | 1,200.00  |

|              |  |                       |            |   |
|--------------|--|-----------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A - SAW CUTTING ASPHALT CONCRETE PAVEMENT |                       |            |   |
| REF. NO.     | QUANTITY:  | UNIT OF MEASURE:      | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| S6           | 2,743.00   | INCH – LINEAR<br>FOOT | 1.50       | 4,114.50  |

|              |   |                  |            |   |
|--------------|---|------------------|------------|---|
| DESCRIPTION: | <input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# N/A – CONSTRUCT RCPA/RCB ADAPTER STRUCTURE |                  |            |   |
| REF. NO.     | QUANTITY:   | UNIT OF MEASURE: | UNIT PRICE | UNIT PRICE EXTENSION <i>(Quantity times Unit Price)</i> |
| S7           | 1   | LUMP SUM         | 24,500.00  | 24,500.00   |

Wording for "DESCRIPTION" is to be provided by the Owner

All quantities are estimated. The contractor will be paid upon actual quantities as verified by Owner.

**Public Works Bid**

**AFFIDAVIT**

**STATE OF** Louisiana

**PARISH/COUNTY OF** St. Tammany

BEFORE ME, the undersigned authority, personally came and appeared: Skip Magee  
\_\_\_\_\_, (Affiant) who after being by me duly sworn, deposed and said that  
he/she is the fully authorized Owner/Member of Magee Excavation & Development, LLC (Entity),  
the party who submitted a bid in response to Bid Number 50-00131833, 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** x there are **NO** campaign contributions made which would require disclosure under Choice A of this section.

Affiant further said:

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** x \_\_\_\_\_ 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

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.

Affiant further said:

Affiant personally has not been convicted of, nor has he/she entered into a plea of guilty or nolo contendere to any of the crimes or equivalent federal crimes listed below. No individual partner, incorporator, director, manager, officer, organizer, or member, who has a minimum of a ten percent ownership in the Bidding Entity, has been convicted of, or has entered a plea of guilty or nolo contendere to any of the crimes or equivalent federal crimes listed below. A conviction of or plea of guilty or nolo contendere to the following state crimes or equivalent federal crimes shall permanently bar any person or the bidding entity from bidding on public projects:

- (a) Public bribery (R.S. 14:118)
- (b) Corrupt influencing (R.S. 14:120)
- (c) Extortion (R.S. 14:66)
- (d) Money laundering (R.S. 14:230)

A conviction of or plea of guilty or nolo contendere to the following state crimes or equivalent federal crimes shall bar any person or the bidding entity from bidding on public projects for a period of five years from the date of conviction or from the date of the entrance of the plea of guilty or nolo contendere:

- (a) Theft (R.S. 14:67)
- (b) Identity Theft (R.S. 14:67, 16)
- (c) Theft of a business record (R.S. 14:67.20)
- (d) False accounting (R.S. 14:70)
- (e) Issuing worthless checks (R.S. 14:71)
- (f) Bank fraud (R.S. 14:71.1)
- (g) Forgery (R.S. 14:72)
- (h) Contractors; misapplication of payments (R.S. 14:202)
- (i) Malfeasance in office (R.S. 14:134)

The five-year prohibition provided for in this section shall apply only if the crime was committed during the solicitation or execution of a contract or bid awarded pursuant to these provisions. If evidence is submitted substantiating that a false attestation has been made and the project must be readvertised or the contract cancelled, the awarded entity making the false attestation shall be responsible to the public entity for the costs of rebidding, additional costs due to increased costs of bids and any and all delay costs due to the rebid or cancellation of this project.

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



Affiant further said:

- (1) Entity is registered and participates in a status verification system to verify that all employees in the State of Louisiana are legal citizens of the United States or are legal aliens.
- (2) Entity shall continue, during the term of the contract, to utilize a status verification system to verify the legal status of all new employees in the State of Louisiana.
- (3) Entity shall require all subcontractors to submit to the Entity a sworn affidavit verifying compliance with statements (1) and (2).



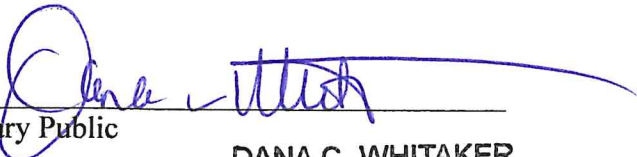
\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Skip Magee

\_\_\_\_\_  
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 21<sup>st</sup> DAY OF Sept, 2020.



\_\_\_\_\_  
Notary Public

DANA C. WHITAKER  
NOTARY ID #60015

\_\_\_\_\_  
Printed Name of Notary

\_\_\_\_\_  
Notary/Bar Roll Number

My commission expires at 11/1/2021.

ARTICLES OF ORGANIZATION  
OF  
MAGEE EXCAVATION & DEVELOPMENT, L.L.C.

The undersigned, acting pursuant to the Louisiana Limited Liability Company Law, La. Rev. Stat. §12:1301 et seq., adopts the following Articles of Organization:

ARTICLE I  
NAME

The name of the limited liability company is Magee Excavation & Development, L.L.C. (hereinafter, "Company").

ARTICLE II  
PURPOSE

The purpose of the Company is to engage in any lawful activity for which limited liability companies may be formed under the Louisiana Limited Liability Company Law.

ARTICLE III  
MANAGEMENT

The Company shall be managed by its Member. The single member is Skip C. Magee.

ARTICLE IV  
TERM

The term of the company shall be perpetual.

ARTICLE V  
RELIANCE ON CERTIFICATE

Persons dealing with the LLC may rely upon a certificate of the certifying official named below to establish the membership of any member, the authenticity of any records of the LLC, including, without limitation, the operating agreement, or the authority of any person to act on behalf of the LLC, including, without limitation, the authority to take actions referred to in La. Rev. Stat. § 12:1318 (B). **Skip C. Magee** is hereby named authorized certifying official of the LLC, and may exercise the full authority granted by La. Rev. Stat. § 12:1305 (C) (5) without the need to obtain the written approval or certification of any other certifying official.



**ARTICLE VI**  
**OPERATING AGREEMENT**

The Operating Agreement for the Company and all amendments to it shall be in writing. In the event of a conflict between the Articles of Organization and the Operating Agreement, the Articles of Organization shall govern.

**MAGEE EXCAVATION & DEVELOPMENT, L.L.C.**

  
Skip C. Magee, Manager/Organizer

**ACKNOWLEDGMENT**

**STATE OF LOUISIANA**

**PARISH OF ST. TAMMANY**

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

**SKIP C. MAGEE**

to me known to be the person who signed the foregoing instrument as Organizer, and who, having been duly sworn, acknowledged and declared, in the presence of the undersigned witnesses, that she signed such instrument as her free act and deed for the purposes mentioned therein.

**IN WITNESS WHEREOF**, the appearer, witnesses and I have hereunto fixed our hands on this 14<sup>th</sup> day of July, 2006.

**WITNESSES:**

Lauren A. McDonald  
**LAUREN A. MCDONALD**

Skip C. Magee  
**SKIP C. MAGEE, Organizer**

Nedra Roper  
**NEDRA ROPER**

Cheryl I. Magee  
**CHERYL I. MAGEE, NOTARY PUBLIC**  
**(Bar Roll No. 25150)**



**ACORD. CERTIFICATE OF INSURANCE**DATE (MM/DD/YY)  
12/16/19**PRODUCER**D R COMMERCIAL LINES  
OF BATON ROUGE, INC.  
P.O. BOX 5498  
COVINGTON, LA 70434THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION  
ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE  
HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR  
ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.**COMPANIES AFFORDING COVERAGE****COMPANY**

A LC&amp;I SIF

**COMPANY**  
B**COMPANY**  
C**COMPANY**  
D**INSURED**MAGEE EXCAVATION &  
DEVELOPMENT, LLC AND  
MAGEE BUILDERS LLC  
21664 HWY 40  
BUSH LA 70431**COVERAGES**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.

| CO<br>LTR | TYPE OF INSURANCE   | POLICY NUMBER | POLICY EFFECTIVE<br>DATE (MM/DD/YY) | POLICY EXPIRATION<br>DATE (MM/DD/YY) | LIMITS   |             |
|-----------|---|---------------|-------------------------------------|--------------------------------------|--|-------------|
|           | <b>GENERAL LIABILITY</b>  |               |                                     |                                      | GENERAL AGGREGATE                                    | \$          |
|           | <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY                           |               |                                     |                                      | PRODUCTS - COMP/OP AGG                               | \$          |
|           | <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR             |               |                                     |                                      | PERSONAL & ADV INJURY                                | \$          |
|           | <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT                            |               |                                     |                                      | EACH OCCURRENCE                                      | \$          |
|           |   |               |                                     |                                      | FIRE DAMAGE (Any one fire)                           | \$          |
|           |   |               |                                     |                                      | MED EXP (Any one person)                             | \$          |
|           |   |               |                                     |                                      |  |             |
|           | <b>AUTOMOBILE LIABILITY</b>   |               |                                     |                                      | COMBINED SINGLE LIMIT                                | \$          |
|           | <input type="checkbox"/> ANY AUTO   |               |                                     |                                      | BODILY INJURY<br>(Per person)                        | \$          |
|           | <input type="checkbox"/> ALL OWNED AUTOS  |               |                                     |                                      | BODILY INJURY<br>(Per accident)                      | \$          |
|           | <input type="checkbox"/> SCHEDULED AUTOS  |               |                                     |                                      | PROPERTY DAMAGE                                      | \$          |
|           | <b>GARAGE LIABILITY</b>   |               |                                     |                                      | AUTO ONLY - EA ACCIDENT                              | \$          |
|           | <input type="checkbox"/> ANY AUTO   |               |                                     |                                      | OTHER THAN AUTO ONLY:                                |             |
|           |   |               |                                     |                                      | EACH ACCIDENT  | \$          |
|           |   |               |                                     |                                      | AGGREGATE  | \$          |
|           | <b>EXCESS LIABILITY</b>   |               |                                     |                                      | EACH OCCURRENCE                                      | \$          |
|           | <input type="checkbox"/> UMBRELLA FORM  |               |                                     |                                      | AGGREGATE  | \$          |
|           | <input type="checkbox"/> OTHER THAN UMBRELLA FORM                               |               |                                     |                                      |  | \$          |
| A         | <b>WORKERS COMPENSATION AND<br/>EMPLOYERS' LIABILITY</b>                        | 20620-19      | 12/12/19                            | 12/12/20                             | <input checked="" type="checkbox"/> STATUTORY LIMITS |             |
|           | <input type="checkbox"/> THE PROPRIETOR/<br>PARTNERS/EXECUTIVE<br>OFFICERS ARE: |               |                                     |                                      | EACH ACCIDENT  | \$1,000,000 |
|           | <input checked="" type="checkbox"/> INCL  |               |                                     |                                      | DISEASE - POLICY LIMIT                               | \$1,000,000 |
|           | <input type="checkbox"/> EXCL   |               |                                     |                                      | DISEASE - EACH EMPLOYEE                              | \$1,000,000 |
|           | <b>OTHER</b>  |               |                                     |                                      |  |             |

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**

CO A: EXCAVATION &amp; DRIVERS / CLERICAL / CONTRACTOR-PROJECT MANAGER

**CERTIFICATE HOLDER**\*PROOF OF COVERAGE\*  
MAGEE EXCAVATION &  
DEVELOPMENT LLC AND  
MAGEE BUILDERS LLC  
21664 HWY 40, BUSH LA 70431  
\*PROOF OF COVERAGE\***CANCELLATION**SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE  
EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL  
10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,  
BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY  
OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE





MAGEEXC-01

SWRIGHT

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/18/2020

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><br>Insurance Underwriters, Ltd.<br>P. O. Box 6738<br>Metairie, LA 70009                               | <b>CONTACT NAME:</b> Sherri Wright                         |                       |               |
|   | <b>PHONE (A/C, No, Ext):</b> 174                           | <b>FAX (A/C, No):</b> |               |
|   | <b>E-MAIL ADDRESS:</b> swright@iulins.com                  |                       |               |
| <b>INSURED</b><br><br>Magee Excavation & Development, LLC & Magee Builders LLC<br>P.O. Box 245<br>Covington, LA 70434 | <b>INSURER(S) AFFORDING COVERAGE</b>                       |                       | <b>NAIC #</b> |
|   | <b>INSURER A : Travelers Indemnity of America</b>          |                       | <b>25666</b>  |
|   | <b>INSURER B : Travelers Property Casualty</b>             |                       | <b>25674</b>  |
|   | <b>INSURER C : AIG Specialty Ins. Co.</b>                  |                       | <b>26883</b>  |
|   | <b>INSURER D : St Paul Surplus Lines Insurance Company</b> |                       | <b>30481</b>  |
|   | <b>INSURER E :</b>   |                       |               |
| <b>INSURER F :</b>  |  |                       |               |

**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>A</b> | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC<br>OTHER: |           |          | <b>CO3P953730</b>   | <b>12/12/2019</b>       | <b>12/12/2020</b>       | EACH OCCURRENCE \$ <b>1,000,000</b>                                  |
|          |   |           |          |                     |                         |                         | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>300,000</b>          |
|          |   |           |          |                     |                         |                         | MED EXP (Any one person) \$ <b>5,000</b>                             |
|          |   |           |          |                     |                         |                         | PERSONAL & ADV INJURY \$ <b>1,000,000</b>                            |
|          |   |           |          |                     |                         |                         | GENERAL AGGREGATE \$ <b>2,000,000</b>                                |
|          |   |           |          |                     |                         |                         | PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b>                           |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
| <b>B</b> | <input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b><br><br><input checked="" type="checkbox"/> ANY AUTO<br>OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br>HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY  |           |          | <b>BA3P954289</b>   | <b>12/12/2019</b>       | <b>12/12/2020</b>       | COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b>              |
|          |   |           |          |                     |                         |                         | BODILY INJURY (Per person) \$  |
|          |   |           |          |                     |                         |                         | BODILY INJURY (Per accident) \$                                      |
|          |   |           |          |                     |                         |                         | PROPERTY DAMAGE (Per accident) \$                                    |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
| <b>C</b> | <input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> <b>EXCESS LIAB</b><br><br><input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE<br><br>DED <input checked="" type="checkbox"/> RETENTION \$ <b>10,000</b>   |           |          | <b>EBU020241734</b> | <b>10/15/2019</b>       | <b>10/15/2020</b>       | EACH OCCURRENCE \$ <b>9,000,000</b>                                  |
|          |   |           |          |                     |                         |                         | AGGREGATE \$ <b>9,000,000</b>  |
|          |   |           |          |                     |                         |                         | Prod Comp Ops \$ <b>9,000,000</b>                                    |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
| <b>D</b> | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N <b>N/A</b><br>If yes, describe under DESCRIPTION OF OPERATIONS below   |           |          |                     |                         |                         | PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> |
|          |   |           |          |                     |                         |                         | E.L. EACH ACCIDENT \$  |
|          |   |           |          |                     |                         |                         | E.L. DISEASE - EA EMPLOYEE \$  |
|          |   |           |          |                     |                         |                         | E.L. DISEASE - POLICY LIMIT \$                                       |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
|          |   |           |          |                     |                         |                         |  |
| <b>D</b> | <b>Professional Liab</b>  |           |          | <b>16N70437</b>     | <b>12/12/2019</b>       | <b>12/12/2020</b>       | Aggregate <b>2,000,000</b>   |
|          |   |           |          |                     |                         |                         | <b>D</b> <b>Pollution Liability</b>                                  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Policy forms included but not limited to holders when required by written contract subject to policy terms conditions and exclusions prior to any incident that could result in a claim: General Liability includes blanket: Primary Noncontributory, Additional Insured (Includes Products-Completed Operations) & Waiver of Subrogation. Auto Liability Symbol 1 Any Auto includes Blanket: Primary Noncontributory, Additional Insured, & Waiver of Subrogation.

## CERTIFICATE HOLDER

## CANCELLATION

For Verification Purposes Only  
Magee Excavation & Development, LLC  
P.O. Box 245  
Covington, LA 70434

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



**BID BOND**

KNOW ALL MEN BY THESE PRESENTS that we, the undersigned,

Magee Excavation & Development, L.L.C.

as PRINCIPAL, and

The Gray Insurance Company

as SURETY, are held and firmly bound unto the Parish of Jefferson, hereinafter called the "OWNER", in the penal sum of:

Five Percent (5%) of the Amount Bid

DOLLARS (\$ 5% ) lawful money of the United States, for the payment of which sum well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the Principal has submitted the accompanying Bid dated September 24th, 2020, for

**BROWN AVENUE DRAINAGE IMPROVEMENTS**  
**18<sup>TH</sup> STREET TO HAROLD STREET**  
**PUBLIC WORKS PROJECT NO. 2017-068-DR (2)**

NOW, THEREFORE, if the Principal shall not withdraw said Bid within the period specified therein after the opening of the same or, if no period be specified, within forty-five (45) days after the said opening, and shall within the period specified therefore or, if no period be specified, within twelve (12) days after the prescribed forms are presented to him for signature, enter into a written Contract with the Parish in accordance with the Bid as accepted, and give bond with good and sufficient surety or sureties, as may be required, for the faithful performance and proper fulfillment of such Contract; or in the event of the withdrawal of said Bid within the period specified, or the failure to enter into such Contract and give such bond within the time specified, if the Principal shall pay the Parish the difference between the amount specified in said Bid and the amount for which the Parish may procure the required work or supplies, or both, if the latter be in excess of the former, then the above obligation shall be void and of no effect, otherwise, to remain in full force and virtue.

IN WITNESS WHEREOF, the above bounded parties have executed this instrument under their several seals this 24th day of September, 2020, the name and corporate seal of each corporate party being hereto affixed and these presents signed by its undersigned representative, pursuant to authority of its governing body.

**BID BOND (continued)**

In Presence of:

\_\_\_\_\_  
(Individual Principal)

\_\_\_\_\_  
(Business Address, including Zip Code)

\_\_\_\_\_  
(Partnership)

\_\_\_\_\_  
(SEAL)

\_\_\_\_\_  
(Business Address, including Zip Code)

ATTEST:

  
\_\_\_\_\_  
Patti Magee

BY: \_\_\_\_\_

Magee Excavation & Development, L.L.C.  
(Corporate Principal)

P. O. Box 245, Covington, LA 70434

\_\_\_\_\_  
(Business Address, including Zip Code)

BY: 

AFFIX CORPORATE SEAL  
Skip C. Magee, Managing Member

ATTEST:

(See Attached Power of Attorney)

The Gray Insurance Company  
(Corporate Surety)

1225 W. Causeway Approach, Mandeville, LA 70471

\_\_\_\_\_  
(Business Address, including Zip Code)

BY: 

AFFIX CORPORATE SEAL  
Jeffrey E. Kropp, Attorney-in-Fact

Countersigned:

BY: 

\_\_\_\_\_  
Attorney-in-Fact\*  
Jeffrey E. Kropp

State of Louisiana

Resident Agent's License No. 488609



THE GRAY INSURANCE COMPANY  
THE GRAY CASUALTY & SURETY COMPANY

GENERAL POWER OF ATTORNEY

Bond Number: N/A

Principal: Magee Excavation & Development, L.L.C.

Project: Brown Avenue Drainage Improvements, 18th Street to Harold Street, Public Works Project No. 2017-068-DR (2)

KNOW ALL BY THESE PRESENTS, THAT The Gray Insurance Company and The Gray Casualty & Surety Company, corporations duly organized and existing under the laws of Louisiana, and having their principal offices in Metairie, Louisiana, do hereby make, constitute, and appoint **Edwin D. Schlesinger, William H. Ellsworth, Catherine R. Froeba, Jack T. Landry, Laura Burns, Jill K. Tucker, and Jeffrey E. Kropp of Metairie, Louisiana jointly and severally** on behalf of each of the Companies named above its true and lawful Attorney(s)-in-Fact, to make, execute, seal and deliver, for and on its behalf and as its deed, bonds, or other writings obligatory in the nature of a bond, as surety, contracts of suretyship as are or may be required or permitted by law, regulation, contract or otherwise, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed the amount of \$10,000,000.00.

This Power of Attorney is granted and is signed by facsimile under and by the authority of the following Resolutions adopted by the Boards of Directors of both The Gray Insurance Company and The Gray Casualty & Surety Company at meetings duly called and held on the 26<sup>th</sup> day of June, 2003.

"RESOLVED, that the President, Executive Vice President, any Vice President, or the Secretary be and each or any of them hereby is authorized to execute a power of Attorney qualifying the attorney named in the given Power of Attorney to execute on behalf of the Company bonds, undertakings, and all contracts of surety, and that each or any of them is hereby authorized to attest to the execution of such Power of Attorney, and to attach the seal of the Company; and it is

FURTHER RESOLVED, that the signature of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be binding upon the Company now and in the future when so affixed with regard to any bond, undertaking or contract of surety to which it is attached.

IN WITNESS WHEREOF, The Gray Insurance Company and The Gray Casualty & Surety Company have caused their official seals to be hereinto affixed, and these presents to be signed by their authorized officers this 12<sup>th</sup> day of September, 2011.



By:

*Michael T. Gray*  
Michael T. Gray  
President, The Gray Insurance Company  
and  
Vice President,  
The Gray Casualty & Surety Company

Attest:

*Mark S. Manguno*  
Mark S. Manguno  
Secretary,  
The Gray Insurance Company,  
The Gray Casualty & Surety Company



State of Louisiana

ss:

Parish of Jefferson

On this 12<sup>th</sup> day of September, 2011, before me, a Notary Public, personally appeared Michael T. Gray, President of The Gray Insurance Company and Vice President of The Gray Casualty & Surety Company, and Mark S. Manguno, Secretary of The Gray Insurance Company and The Gray Casualty & Surety Company, personally known to me, being duly sworn, acknowledged that they signed the above Power of Attorney and affixed the seals of the companies as officers of, and acknowledged said instrument to be the voluntary act and deed, of their companies.



*Lisa S. Millar*

Lisa S. Millar, Notary Public, Parish of Orleans  
State of Louisiana  
My Commission is for Life

I, Mark S. Manguno, Secretary of The Gray Insurance Company and The Gray Casualty & Surety Company, do hereby certify that the above and forgoing is a true and correct copy of a Power of Attorney given by the companies, which is still in full force and effect.

IN WITNESS WHEREOF, I have set my hand and affixed the seals of the Companies, this 24<sup>th</sup> day of September, 2020.



*Mark S. Manguno*

Mark S. Manguno, Secretary  
The Gray Insurance Company  
The Gray Casualty & Surety Company