

DATE: 3/02/2023

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00141401

JEFFERSON PARISH

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

VENDOR: 27118 BLANK BID COPY VENDOR

BUYER: SFOLSE

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	<u>2 weeks</u>
INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK	<u>3 weeks</u>
INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK	<u>3 days</u>

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: _____
 NUMBER: _____
 NUMBER: _____
 NUMBER: _____

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 55529

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: AHG Services, LLC	
SIGNATURE: (Must be signed here)	TITLE: Principal
PRINT OR TYPE NAME: Douglas A Guthans	
ADDRESS: 2225 Piedmont Street	
CITY, STATE: Kenner, LA	ZIP: 70062
TELEPHONE: (504)267-3800	FAX: (504)267-3801
EMAIL ADDRESS: dguthans@ahgservicesllc.com	

TOTAL PRICE OF ALL BID ITEMS: \$ 12,762.00

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00141401

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>LABOR & MATERIALS NEEDED TO REMOVE OLD, AND SUPPLY & INSTALL A NEW HVAC SYSTEM AT THE HUMAN SERVICES BUILDING FOR THE JEFFERSON PARISH DEPARTMENT OF GENERAL SERVICES</p> <p>0010 - PROVIDE ALL LABOR, MATERIALS, EQUIPMENT, TRANSPORTATION, CRANE SERVICES, AND ALL OTHER INCIDENTALS NECESSARY TO REMOVE ONE (1) EXISTING 3-TON SPLIT HVAC SYSTEM AND SUPPLY AND INSTALL ONE (1) NEW 3-TON AMERICAN STANDARD SPLIT HVAC SYSTEM AT THE FOLLOWING LOCATIONS:</p> <p>HUMAN SERVICES BUILDING 5001 WESTBANK EXPRESSWAY MARRERO, LA 70072.</p> <p>***PLEASE SEE ATTACHED SPECIFICATIONS***</p>	\$12,762.00	\$12,762.00

State of Louisiana



State Licensing Board for Contractors

This is to Certify that:

AHG SERVICES, L.L.C.
2225 Piedmont Street
Kenner, LA 70062

is duly licensed and entitled to practice the following classifications

BUILDING CONSTRUCTION; HEAVY CONSTRUCTION; MECHANICAL WORK (STATEWIDE); MUNICIPAL AND PUBLIC WORKS CONSTRUCTION; PLUMBING (STATEWIDE); SPECIALTY: STEAM AND HOT WATER HEATING IN BUILDINGS OR PLANTS



Expiration Date: June 1, 2025

License No: 55529

Witness our hand and seal of the Board dated,
Baton Rouge, LA 2nd day of June 2022

Will S. May Jr.
Director

Lee Mallett
Chairman

Andy P. ...
Treasurer

This License Is Not Transferrable

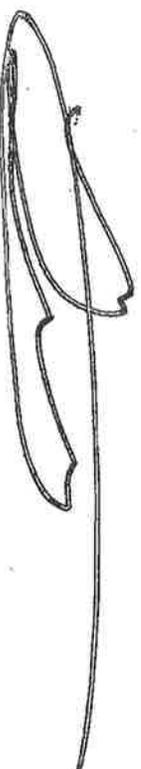
Jefferson Parish
Inspection and Code Enforcement
Regulatory Inspection's Division

Active Mechanical # 60764

This is to certify that **DOUGLAS GUTHANS**
having qualified in accordance with Jefferson Parish Ordinances is hereby granted
authorization to engage in the above field as authorized by law.

Issue Date: 6/1/2022

Expiration Date: 5/31/2023



Mechanical Section Chief

THIS LICENSE IS NOT TRANSFERABLE



03-09-2023

Bid Bond in Accordance with Contract Specifications

SLA03095795

AHG Services, LLC

Bond Number

Principal Name

2225 Piedmont St., Kenner, LA, 70062, US

Principal Address

Principal Signature

Jefferson Parish

200 Derbigny Street, Gretna, LA, 70053, US

Owner/Obligee Name

Owner/Obligee Address

Bond Information

03-13-2023

Great American Insurance Company

309081

Bid Date

Surety

Contractor Vendor ID Number

50-00141401

Contract ID Number

Bid No. 50-00141401 - Labor & Materials Needed to Remove Old, and Supply & Install a New HVAC System at the Human Services Building for the Jefferson Parish Department of General Services

Description of Job

Five Percent of the Total Amount Bid

5%

Amount of Bid Security

Bid Security Maximum

Bid Security Percentage

Jack Landry

Attorney-in-Fact

Insurance Underwriters, Ltd.

Bond Entered and Executed By

Primary Agency

Attorney-In-Fact Signature

Know all men by these presents that Great American Insurance Company, a Corporation duly organized under the laws of the State of OH, 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.





AHGSERV-01

SWEETS

CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YYYY)
 3/9/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Insurance Underwriters, Ltd. P. O. Box 6738 Metairie, LA 70009	CONTACT NAME: Jonathan Landry, CIC PHONE (A/C. No, Ext): (504) 620-1795 202 FAX (A/C. No): (504) 883-2535 E-MAIL ADDRESS: jclandry@iulins.com														
INSURED AHG Services, LLC. 2225 Piedmont Street Kenner, LA 70062	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Phoenix Insurance Company</td> <td>25623</td> </tr> <tr> <td>INSURER B : Travelers Property Casualty</td> <td>25674</td> </tr> <tr> <td>INSURER C : LUBA</td> <td>12472</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Phoenix Insurance Company	25623	INSURER B : Travelers Property Casualty	25674	INSURER C : LUBA	12472	INSURER D :		INSURER E :		INSURER F :	
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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
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <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:			CO8293B742	4/10/2022	4/10/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			BA9M063347	4/10/2022	4/10/2023	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"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			CUP3K417649	4/10/2022	4/10/2023	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	22512122	4/10/2022	4/10/2023	<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)
 See attached Acord 101 Additional Remarks Schedule for additional information

Bid: 5000141401 Labor & Materials Needed to Remove Old, and Supply & Install A New HVAC System at The Human Services Building for The Jefferson Parish Department of General Services

CERTIFICATE HOLDER

CANCELLATION

Jefferson Parish Purchasing Department 200 Derbigny Street Suite 4400 General Government Building 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
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ADDITIONAL REMARKS SCHEDULE

AGENCY Insurance Underwriters, Ltd.		NAMED INSURED AHG Services, LLC. 2225 Piedmont Street Kenner, LA 70062	
POLICY NUMBER SEE PAGE 1		EFFECTIVE DATE: SEE PAGE 1	
CARRIER SEE PAGE 1	NAIC CODE SEE P 1		

ADDITIONAL REMARKS

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

Additional Information

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 Policy 04/10/22 to 04/10/23:

Designated Project(s) General Aggregate Limit per form CG D2 11 01 04

Blanket Additional Insured per form CG D2 46 04 19 (Includes Products-Completed Operations If Required By Contract)

XTend Endorsement for Contractors form CG D3 16 02 19 Includes the following:

Blanket Waiver of Subrogation

Blanket Additional Insured Governmental Entities

Blanket Primary and Non-Contributory Insurance if Required by Written Contract per form CG T1 00 02 19

Blanket/Designated 30 Day Notice of Cancellation (IL T4 05 05 19)

Auto Liability Policy 04/10/22 to 04/10/23

Blanket Additional Insured per form CA F1 06 02 15 Business Auto Extension Endorsement - Louisiana

Blanket Waiver of Subrogation per form CA F1 06 02 15 Business Auto Extension Endorsement - Louisiana

Blanket Additional Insured-Primary and Non-Contributory per form CA T4 99 02 16 & CA T8 02 04 21

Loss Payable Clause per form CA T4 45 04 09 (Loss payee on file for loss to a covered auto, as interest may appear)

Additional Insured (Lessor): Any lessor of a "leased auto" under a leasing or rental agreement of less than 6 months per form CA T4 52 02

Blanket 30 Day Notice of cancellation as per form IL T4 05

Short Term Hired Auto - Additional Insured and Loss Payee as per form 52 02 16

Worker's Compensation 04/10/22-04/10/23

Blanket 30 DNOC as per form WC 99 03 02

Blanket Waiver of Subrogation Where Required by Written Contract as per form WC 00 03 13

Blanket Alternate Employer Endorsement Where Required by Written Contract per forms WC 00 03 01 A

Officers Excluded: Douglas Guthans

Excess Follow-Form and Umbrella Liability Insurance Policy, 04/10/22-04/14/23

Waiver of Subrogation & Primary Non-contributory blanket as required by written contract

Underlying Policies:

General Liability Policy 04/10/22 to 04/10/23

Auto Liability Policy 04/10/22 to 04/10/23

Worker's Compensation 04/10/22-04/10/23

Equipment Floater Policy 04/10/22-04/10/23

Blanket loss payee on leased/rented equipment as required by written contract. Deductible \$1,000