

DATE: 11/02/2020

INVITATION TO BID  
THIS IS NOT AN ORDER

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BID NO.: 50-00132508

## JEFFERSON PARISH

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

VENDOR: 27118 BLANK BID COPY VENDOR

BUYER: RSCOTT

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

12-10-2020

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

12-10-2020

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

12-20-2020

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: ADDENDUM #1NUMBER: ADDENDUM #2

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

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

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

|  |                            |
|--|----------------------------|
| *** ALL BIDDERS MUST COMPLETE SECTION BELOW ***        |                            |
| FIRM NAME:<br><u>A-SELECTSPRINKLES, INC.</u>           |                            |
| SIGNATURE:<br>(Must be signed here) <u>Karl Hinkel</u> | TITLE:<br><u>PRESIDENT</u> |
| PRINT OR TYPE NAME:<br><u>KARL HINKEL</u>              |                            |
| ADDRESS:<br><u>4309 CALIFORNIA AVE</u>                 |                            |
| CITY, STATE:<br><u>Kenner, LA</u>                      | ZIP:<br><u>70065</u>       |
| TELEPHONE:<br><u>(504) 416-5426</u>                    | FAX:<br>( )                |
| EMAIL ADDRESS:<br><u>ASELECTSPRINKLE@aol.com</u>       |                            |

TOTAL PRICE OF ALL BID ITEMS: \$ 12,553.00

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## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00132508

SEALED BID

| ITEM<br>NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES   | UNIT PRICE<br>QUOTED | TOTALS           |
|----------------|----------|-----|---|----------------------|------------------|
| 1              | 1.00     | JOB | <p>Labor, materials and equipment necessary<br/>to install an automatic lawn irrigation<br/>system for the Jefferson Parish<br/>Recreation Department</p> <p>0010 Labor, material and equipment to<br/>install an automatic lawn irrigation<br/>system</p> <p>Location:<br/>Mike Miley Playground<br/>Stadium<br/>6716 W. Metairie Avenue<br/>Metairie, LA 70003</p> <p><b>**SPECS ATTACHED**</b></p> | <u>12,533.00</u>     | <u>12,533.00</u> |



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/24/2020

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>Martin Insurance Agency Inc<br>4700 Orleans Avenue<br>P.O. Box 19600<br>New Orleans LA 70179-0600 |  | <b>CONTACT NAME:</b> Cynthia Estep<br><b>PHONE (A/C, No, Ext):</b> (504) 486-8133<br><b>E-MAIL ADDRESS:</b> cynthia@martin-agency.com<br><b>FAX (A/C, No):</b> (504) 482-3514                    |  |
| <b>INSURED</b><br>A Select Sprinklers Inc dba Karl Hinkel<br>4309 California Avenue<br>Kenner LA 70065-5372          |  | <b>INSURER(S) AFFORDING COVERAGE</b><br><b>INSURER A:</b> Scottsdale Insurance Co.<br><b>INSURER B:</b> LWCC<br><b>INSURER C:</b><br><b>INSURER D:</b><br><b>INSURER E:</b><br><b>INSURER F:</b> |  |
|  |  | <b>NAIC #</b><br>41297   |  |

**COVERAGES****CERTIFICATE NUMBER:** 20-21 COI**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><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 type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |           |          | CPS3953936    | 07/31/2020              | 07/31/2021              | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000<br>MED EXP (Any one person) \$ 5,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>Prop Damage Extension \$ 25,000 |
|          | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input type="checkbox"/> HIRED AUTOS ONLY<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS ONLY   |           |          |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$   |
|          | <b>UMBRELLA LIAB</b><br><b>EXCESS LIAB</b><br><input type="checkbox"/> OCCUR<br><input type="checkbox"/> CLAIMS-MADE<br><b>DED</b> <b>RETENTION \$</b>  |           |          |               |                         |                         | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$  |
|          | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below<br>Y/N<br><input checked="" type="checkbox"/> Y   | N/A       |          |               |                         |                         | PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/><br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000  |
|          |   |           |          |               |                         |                         |   |

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

**CERTIFICATE HOLDER****CANCELLATION**Louisiana Department of Agriculture and Forestry  
5825 Florida Blvd

Baton Rouge

LA 70806

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

**A-SELECT SPRINKLERS, INC.**  
**4309 California Ave. Kenner, La. 70065 Phone: 504-416-5434**  
**e-mail:aselectsprinkler@aol.com / Web site: aselectsprinklers.com**  
**Licensed and Fully Insured**

**Date:** 11-30-20  
**To:** Rae Lynn Hartman  
**Firm:** Jefferson Parish  
**e-mail:** RScott@jeffparish.net  
**Re:** Mike Miley Baseball Outfield

Ma'am:

We are pleased to submit our quote for the installation of an automatic lawn irrigation system at the above referenced.

**Scope of work:**

Install an automatic lawn irrigation system for the front and rear bed and turf areas of the above referenced.

The system will include but is not limited to the following: (Values are approximations)

|                     |  |
|---------------------|--|
| One                 | Rainbird Modular Automatic Timer                                   |
| One                 | Rain Sensor / Automatically turns off system under rain conditions |
| Six                 | Lawn Zones   |
| Twenty-four         | Rainbird SS Falcon heads   |
| Two-thousand-thirty | Linear feet of 1-1/2" class 200 piping                             |

Our price for the work above is in the amount of \$12,553.00.

The following information is provided so that you can understand the terms and conditions of our service.

This quotation includes all labor, material, taxes, tools, insurance and transportation to install the system to meet or exceed industry standards. All backfilling of trenches will be with excavated materials only. No new soil or sod is included in this quotation.

The owner will provide adequate water supplies, electrical power for the automatic timer and identify all underground utilities.

All labor and material is warranted for a period of one year. An additional two year material only warranty for the automatic timer is provided by the manufacturer.

A partial payment request of up to 60% of the total contract price may be requested at the time of material delivery / start of installation. Incremental billing requests may occur as installation progresses. At the completion of the installation a final payment request for the balance due will be submitted. Unless otherwise noted all payment are due upon request. An interest charge may be assessed against all late payments.

## A-SELECT SPRINKLERS, INC.

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Mike Miley Field

November 30, 2020

Unless otherwise noted all pricing will remain valid for a period of thirty (30) days from the above date, and contingent upon start of work to occur within a period of time not to exceed ninety (90) days from the acceptance of the proposal.

Thank you for the opportunity to submit this proposal.

Yours truly,

*Karl Hinkel*

Karl Hinkel

Acceptance: \_\_\_\_\_

Date: \_\_\_\_\_ Amount \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

e-mail: \_\_\_\_\_