

DATE: 6/26/2019

Page: 5

BID NO.: 50-00126972

**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 X

MAXIMUM ESCALATION PERCENTAGE REQUESTED n/a %

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF n/a.

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)**

57179

**THIS SECTION MUST BE COMPLETED BY BIDDER:**

FIRM NAME: Aerostar SES LLC

ADDRESS: 3749 North Causeway Boulevard, Suite A

CITY, STATE: Metairie, Louisiana

ZIP: 70002

TELEPHONE: ( 504 ) 486-8368

FAX: ( 504 ) 486-8360

EMAIL ADDRESS: cmcnees@aerostar.net

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 as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: \_\_\_\_\_

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

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

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

TOTAL PRICE OF ALL BID ITEMS: \$ 9,291.75

AUTHORIZED  
SIGNATURE: 

Chris McNees

Printed Name

TITLE: Senior Program Manager

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.**

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00126972

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			TWO (2) YEAR CONTRACT TO PROVIDE ENVIRONMENTAL TESTING AND CONSULTING IN COORDINATION WITH DEMOLITION PROCEEDINGS FOR THE DEPARTMENT OF INSPECTION & CODE ENFORCEMENT,DANGEROUS BUILDING ABATEMENT		
1	1.00	HR	0001 LDEQ Certified Contractor/Asbestos Supervisor	\$75.00	\$75.00
2	89.00	HR	0002 LDEQ Certified Asbestos Inspector	\$55.00	\$4,895.00
3	193.00	EA	0003 PLM Analysis	\$8.25	\$1,592.25
4	1.00	EA	0004 PCM Analysis	\$7.50	\$7.50
5	1.00	EA	0005 TEM Analysis	\$60.00	\$60.00
6	20.00	HR	0006 Emergency Asbestos Testing for Inspector	\$55.00	\$1,100.00
7	8.00	HR	0007 Emergency Asbestos Testing for Supervisor	\$75.00	\$600.00
8	4.00	EA	0008 For 3 Hour PLM Testing for Emergency Asbestos Testing	\$33.00	\$132.00
9	2.00	EA	0009 For 3 Hour PCM Testing for Emergency Asbestos Testing	\$70.00	\$140.00
10	2.00	EA	0010 For 3 Hour TEM Testing for Emergency Asbestos Testing	\$345.00	\$690.00

## Aerostar SES LLC (ASL) Signature Authority

The following ASL Managers are granted formal authority and responsibility to execute the documents referenced herein within the limits established below:

Jim Madaj	General Manager (\$10,000,000 limit)
Scott Hughes	Jacksonville Division Manager (\$7,000,000 limit)
Chris McNees	Non-Federal Environmental Manager (\$1,000,000 limit on commercial awards)
Tiffany Seibt	Mobile Division Manager (\$5,000,000 limit)
Leon Carrero	Senior Program Manager (\$5,000,000 limit)

The following administrative personnel have formal authority and responsibility to execute the documents described below:

Terri Clemens	General Counsel
Diane White	Contracts Manager
Tammy Jackson	Accounting Manager
Leah Taylor	Human Resources Manager
Brian Smith	Aerostar Division Controller
Marsha Gerrard	Administrative Manager
Michael Bock	Tax, License and Leasing Administrator

The following signatory authority levels are established for obligating the firm:

Document	Level of Authority
Non-disclosure Agreements	General Manager, and General Counsel and Contracts Manager upon receipt of approval from General Manager
Teaming Agreements	General Manager, General Counsel and Contracts Manager upon receipt of approval from Basil Skelton
Partnerships/Joint Ventures	General Manager upon receipt of approval by Basil Skelton, who must first receive approval from BBNC
Leases	General Manager, Jacksonville Division Manager, Leasing Administrator, and General Counsel
Proposals	General Manager, Jacksonville Division Manager, Non-Federal Environmental Manager, Mobile Division Manager, and Senior Program Manager. Proposals for work outside the U.S. can only be signed by the General Manager upon receipt of BBNC approval
New Government Contracts*	General Manager, Jacksonville Division Manager, Senior Program Manager, Mobile Division Manager, Contracts Manager, General Counsel, and Administrative Manager upon approval
Government Option Year Extensions*	General Manager, Jacksonville Division Manager, Senior Program Manager, Mobile Division Manager, Contracts Manager, General Counsel, and Administrative Manager upon approval
Subcontracts*	General Manager, Jacksonville Division Manager, Contracts Manager, and General Counsel
New Task Orders – Government*	General Manager, Jacksonville Division Manager, Senior Program Manager, Mobile Division Manager, Contracts Manager, General Counsel, and Administrative Manager upon approval
Task Order Renewals – Government*	General Manager, Jacksonville Division Manager, Senior Program Manager, Mobile Division Manager, Contracts Manager, General Counsel, and Administrative Manager upon approval
Modifications – Government*	General Manager, Jacksonville Division Manager, Senior Program Manager, Mobile Division Manager, Contracts Manager, General Counsel, and Administrative Manager upon approval


Commercial Contracts*	General Manager, Jacksonville Division Manager, Senior Program Manager, Non-Federal Environmental Manager, Mobile Division Manager, Contracts Manager, and General Counsel
Partial and Final Releases	General Manager, Jacksonville Division Manager, Contracts Manager, General Counsel, Accounting Manager, and Aerostar Division Controller
Indirect Purchase Orders	General Manager, Jacksonville Division Manager, Non-Federal Environmental Manager, Senior Program Manager, Mobile Division Manager (under \$25,000), Accounting Manager and Aerostar Division Controller (under \$2,500)
Direct Purchase Orders	Project Superintendents and above
Offer Letters	General Manager, Jacksonville Division Manager, Human Resources Manager, and Administrative Manager
Bonds	General Counsel, Contracts Manager, and Administrative Manager upon approval
Licenses and Registrations	General Manager, General Counsel, Tax and License Administrator

\*All contractual documents must be reviewed by contracting before signing.

Each individual granted signature authority herein must sign his or her name only. The use of signature stamps is not permitted. Electronic signatures are permitted, but can only be used by the individual with that signature, or by others with express written permission. Written permissions must be kept with signatures as proof of authority to sign.

Approved:

Effective Date:

  
 \_\_\_\_\_  
 Jim Madaj

May 22, 2018

**Non-Public Works Bid****AFFIDAVIT**STATE OF FloridaPARISH/COUNTY OF Duval

BEFORE ME, the undersigned authority, personally came and appeared: Chris  
McNees, (Affiant) who after being by me duly sworn, deposed and said that  
he/she is the fully authorized Senior Program Manager of Aerostar SES LLC (Entity),  
the party who submitted a bid in response to Bid Number 50-00126972, 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.

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

*[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.

Signature of Affiant

Chris McNees

Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 19<sup>th</sup> DAY OF July, 2019.

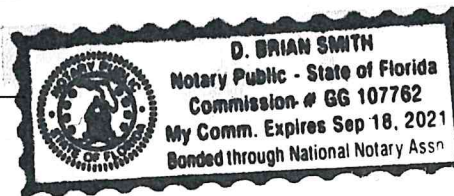
Notary Public

D. BRIAN SMITH

Printed Name of Notary

GG107762

Notary/Bar Roll Number



My commission expires 9-18-2021.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
03/28/2019

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> Marsh & McLennan Agency LLC 1031 W. 4th Ave, Suite 400 Anchorage, AK 99501		<b>CONTACT</b> NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:	
216466-CAS-GAWE-2019		<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Aerostar Environmental and Construction LLC 1006 Floyd Culler Court Oak Ridge, TN 37830		<b>NAIC #</b>	
		INSURER A : Zurich American Insurance Co 16535	
		INSURER B : Allied World Specialty Insurance Company 16624	
		INSURER C : Navigators Specialty Insurance Company 36056	
		INSURER D : Evanston Insurance Company 35378	
		INSURER E : American Zurich Insurance Company 40142	
		INSURER F :	

**COVERAGES** **CERTIFICATE NUMBER:** SEA-003564977-19 **REVISION NUMBER:** 1

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
D	<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:			MKL5ENV101566	04/01/2019	04/01/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BAP9275450 18	04/01/2019	04/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			SF19EXC7251671C	04/01/2019	04/01/2020	EACH OCCURRENCE \$ 10,000,000
D	<input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			MKL5EUE100489	04/01/2019	04/01/2020	AGGREGATE \$ 10,000,000 \$
E	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input checked="" type="checkbox"/> N	N/A		WC 5888448 14	04/01/2019	04/01/2020	<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
B	Leased / Rented Equipment			0308-6733	04/01/2019	04/01/2020	Per Item Limit 500,000 Deductible Per Occurrence 5,000

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

## CERTIFICATE HOLDER

Evidence of Insurance

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE  
of Marsh USA Inc.

Kirk C. Leadbetter

*Kirk C. Leadbetter*

© 1988-2016 ACORD CORPORATION. All rights reserved.

AGENCY CUSTOMER ID: 216466

LOC #: Anchorage

**ADDITIONAL REMARKS SCHEDULE**

Page 2 of 2

AGENCY Marsh & McLennan Agency LLC		NAMED INSURED Aerostar Environmental and Construction LLC 1006 Floyd Culler Court Oak Ridge, TN 37830
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

This is evidence of insurance procured and developed under the Alaska Surplus Lines Law, AS 21:34. It is not covered by the Alaska Insurance Guaranty Association Act, AS 21.80. This insurance was placed through the following Surplus Lines Broker: Worldwide Facilities, Inc. - Company C & D.

Per Project Aggregate - designated construction project general agg subject to a \$10M max

STATE OF LOUISIANA  
DEPARTMENT OF ENVIRONMENTAL QUALITY

certifies that

*Kerry Meaux*

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

Asbestos Inspector

Accreditation No. MI181612

AI No. 181612

Date of Issuance June 17, 2019

Expiration May 22, 2020

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

*Paul Bergeron*

Permit Support Services Division  
Office of Environmental Services

STATE OF LOUISIANA  
DEPARTMENT OF ENVIRONMENTAL QUALITY

certifies that

*Kerry Meaux*

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

Asbestos Contractor/Supervisor

Accreditation No. MS181612

AI No. 181612

Date of Issuance June 17, 2019

Expiration May 21, 2020

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

*Paul Bergeron*  
Permit Support Services Division  
Office of Environmental Services

STATE OF LOUISIANA  
DEPARTMENT OF ENVIRONMENTAL QUALITY

certifies that

*Mason G Stevenson*

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

Asbestos Inspector

Accreditation No. SI103390

AI No. 103390

Date of Issuance November 28, 2018

Expiration September 27, 2019

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

*Paul Bergeron*

Permit Support Services Division  
Office of Environmental Services

STATE OF LOUISIANA  
DEPARTMENT OF ENVIRONMENTAL QUALITY

certifies that

**Mason G Stevenson**

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

**ASBESTOS CONTRACTOR/SUPERVISOR**

Accreditation No. 05103390

AI No. 103390

Date of Issuance 3/26/2019

Expiration 3/14/2020

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

*Paul Bergeron*

Permit Support Services Division  
Office of Environmental Services

STATE OF LOUISIANA  
DEPARTMENT OF ENVIRONMENTAL QUALITY

certifies that

***Daniel Riggs***

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

**ASBESTOS INSPECTOR**

Accreditation No. 01196119

AI No. 196119

Date of Issuance 5/14/2019

Expiration 4/18/2020

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

*Paul Bergeron*

Permit Support Services Division  
Office of Environmental Services

STATE OF LOUISIANA  
DEPARTMENT OF ENVIRONMENTAL QUALITY

certifies that

***Daniel Riggs***

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

**ASBESTOS CONTRACTOR/SUPERVISOR**

Accreditation No. 9S196119

AI No. 196119

Date of Issuance 10/1/2018

Expiration 8/31/2019

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

Christopher Maynard  
Permit Support Services Division  
Office of Environmental Services

STATE OF LOUISIANA  
DEPARTMENT OF ENVIRONMENTAL QUALITY

certifies that

*Dylan G Hales*

Has complied with all requirements of the Louisiana Department of Environmental Quality  
and is authorized to perform the duties of

Asbestos Inspector

Accreditation No. AI209168

AI No. 209168

Date of Issuance November 28, 2018

Expiration August 16, 2019

Failure to comply with all applicable provisions of La. R.S. 2025.E. (1)(a) and La. R.S. 2025.F. (2)(a)  
may result in civil and/or criminal enforcement actions by the State.

*Paul Bergeron*

Permit Support Services Division  
Office of Environmental Services

# State of Louisiana

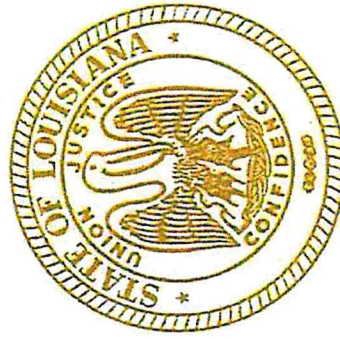


## State Licensing Board for Contractors

This is to Certify that:  
AEROSTAR SES LLC  
11181 St. Johns Industrial Pkwy N  
Jacksonville, FL 32246

is duly licensed and entitled to practice the following classifications

SPECIALTY: HAZARDOUS WASTE TREATMENT OR REMOVAL



Expiration Date: June 21, 2022

License No: 57179

Witness our hand and seal of the Board dated,  
Baton Rouge, LA 22nd June 2019

*Will B. McCoy*

Director

*Lee Madgett*

Chairman

*Andy Duvall*

Treasurer

This License Is Not Transferrable

FOR PUBLIC DISPLAY - NOT TRANSFERABLE

ISSUED BY

SHERIFF AND EX-OFFICIO TAX COLLECTOR-JEFFERSON PARISH, LOUISIANA

## 2019 Occupational License Tax

AEROSTAR SES LLC  
11181 ST JOHNS INDUSTRIAL PKWY N  
JACKSONVILLE, FL 32246



License # 136543285

Account # 11313865

### Location Address

3749 N CAUSEWAY BLVD #A  
METAIRIE, LA

Business Class 541620  
Environmental Consulting Services

License Class 1740  
Retail Mdse/Service/Rental/etc

Tax	Interest	Penalty	Other	Total	Payment
\$180.00	\$0.77	\$9.00	(\$0.06)	\$189.71	\$189.71

*Joseph P. Lopinto, III*

JOSEPH P. LOPINTO, III  
SHERIFF & TAX COLLECTOR

*Gregory A. Ruppert*

Gregory A. Ruppert, Director  
Bureau of Revenue and Taxation

Pursuant to Jefferson Parish Code of Ordinances Chapter 35, Article VI, Section 35-153, the issuance of this occupational license to the person or firm named hereon is a receipt for payment of said tax and entitles the recipient to operate a business at the location shown, provided said business is operated within the confines of the application thereof, and does not violate any parish or state criminal, health, or zoning laws. This license will expire December 31, 2019.

**RENEWAL APPLICATIONS ARE DUE PRIOR TO MARCH 1.**



Office of the Secretary  
Compliance Programs  
PO Box 94245 | Baton Rouge, LA 70804-9245  
ph: 225-379-1382 | fx: 225-379-1865

John Bel Edwards, Governor  
Shawn D. Wilson, Ph.D., Secretary

January 3, 2019

Aerostar SES, LLC  
Michael J. Bock  
3749 North Causeway Blvd, Suite A  
Metairie LA 70002

Dear Michael J. Bock:

We have received your firm's disadvantaged business enterprise annual affidavit. Based on the information which you provided we have concluded that your firm continues to meet the eligibility requirements of our program and remains certified for only the following specific work categories that fall under the listed NAICS codes:

NC541620-Environmental Consulting Services  
NC562910-Remediation Services  
C20-Environmental Impact Assessments  
C63-Environmental Remediation


*Please note that per the federal regulations, suppliers only receive 60% goal credit towards the materials they provide. Also note that A Louisiana Contractor's License is required by any contractor performing work in excess of \$50,000 with the exception of electrical, mechanical and plumbing which are required to have a license if work is in excess of \$10,000. You may contact the State Licensing Board for Contractors at (225) 765-2301 for more information. Your firm's certification will be recognized by all participants of the Louisiana Unified Certification Program. This includes all entities receiving federal transportation funding within the boundaries of our state.*

Due to recent changes in the Federal Regulations which govern our DBE program, firms which have been certified will no longer have an expiration date, however you will be required to submit an annual affidavit with all supporting documents stating that your firm continues to meet the eligibility requirements of the program. This form will be sent to you approximately 4 weeks prior to your anniversary date (**December 31, 2019**). You must notify our office immediately, regarding any changes which affect the social and economic disadvantage, size, ownership or control of your firm.

We reserve the right to withdraw this certification, if at any time, it is determined that DBE certification was knowingly obtained by the submission of false, misleading or incorrect data. We, further reserve the right to request additional information and/or conduct an on-site visit at any time during your certification period.

If we can be of further assistance, please don't hesitate to contact the DBE Certification Unit at (225) 379-1382.

Sincerely yours,



Rhonda Wallace  
DBE/SBE Programs Manager

# STATE & LOCAL DISADVANTAGED BUSINESS ENTERPRISE PROGRAM

1340 Poydras Street, Suite 1800 | New Orleans, LA 70112



January 9, 2019

Michael J. Bock  
**Aerostar SES, LLC**  
3749 North Causeway Boulevard, Suite A  
Metairie, Louisiana 70002

Dear Mr. Bock,

As a firm certified as a Disadvantaged Business Enterprise (DBE) through the Louisiana Department of Transportation, Louisiana Unified Certification Program (LAUCP), **Aerostar SES, LLC**, is granted provisional certification as a DBE by the City of New Orleans with all the rights associated with such certification pursuant to Mayor Mitchell J. Landrieu's Executive Order MJL 10-02 signed June 3, 2010.

Provisional certification qualifies **Aerostar SES, LLC** to bid as a DBE firm on City of New Orleans procurement opportunities. Additionally, any firm seeking to hire **Aerostar SES, LLC** as a DBE subcontractor on City of New Orleans procurement opportunities may consider the firm as a DBE when calculating the DBE participation percentage on a bid.

Please provide proof of LAUCP certification along with a copy of this letter when submitting a bid on a City of New Orleans procurement opportunity.

A copy of Executive Order MJL 10-02 can be found on our website [www.nola.gov](http://www.nola.gov).

If you have any questions, please contact me at 504.658.8425.

Sincerely,

***Rocsean Spencer***

Rocsean Spencer, Certification Coordinator  
Office of Supplier Diversity  
City of New Orleans

**Request for Taxpayer  
Identification Number and Certification**

Give Form to the  
requester. Do not  
send to the IRS.

#290526

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**BRISTOL BAY NATIVE CORPORATION**

2 Business name/disregarded entity name, if different from above  
**Aerostar SES LLC**

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  
☐ Individual/sole proprietor or single-member LLC  
☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate  
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ \_\_\_\_\_  
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.  
☐ Other (see instructions) ▶ \_\_\_\_\_

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3).  
Exempt payee code (if any) **5**  
Exemption from FATCA reporting code (if any) \_\_\_\_\_  
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)  
**1006 FLOYD CUTTER COURT**

6 City, state, and ZIP code  
**OAK RIDGE, TN 37830**

7 List account number(s) here (optional)

Requester's name and address (optional)

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
				-				

or

Employer identification number									
9	2	-	0	0	4	2	0	4	1

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ *James E. Spohnmeyer* Date ▶ *2-10-2015*

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.  
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/w9](http://www.irs.gov/w9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1088 (home mortgage interest), 1088-E (student loan interest), 1088-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.