

DATE: 6/22/2022

Page: 6

BID NO.: 50-00138834

**BID FORM**  
Non Public Works

All Public Work Projects are required to use the Louisiana Uniform Public Work Bid Form

All prices must be held firm unless an escalation provision is requested in this bid. Jefferson Parish will allow one escalation during the term of the contract, which may not exceed the U.S. Bureau of Labor Statistics National Index for all Urban Consumers, unadjusted 12 month figure. The most recently published figure issued at the time an adjustment is requested will be used. A request must be made in writing by the vendor, and the escalation will only be applied to purchases made after the request is made.

Are you requesting an escalation provision?

YES \_\_\_\_\_ NO ✓

MAXIMUM ESCALATION PERCENTAGE REQUESTED 0 %

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF 8-18-22

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

7-22-22

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

66382

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

FIRM NAME: Bayou Irrigation, Inc.

ADDRESS: 14711 Harry Savoy Rd.

CITY, STATE: Saint Amant, LA ZIP: 70774

TELEPHONE: (225) 937-9047 FAX: (225) 622-6172

EMAIL ADDRESS: haze.durbin@bayouirrigationinc.com

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form by placing the addendum number as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: #1

NUMBER: #2

NUMBER: #3

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

TOTAL PRICE OF ALL BID ITEMS: \$ 115,000.00

AUTHORIZED SIGNATURE: Clay Durbin

TITLE: President

Clay Durbin

Printed Name

SIGNING INDICATES YOU HAVE READ AND COMPLY WITH THE INSTRUCTIONS AND CONDITIONS.

NOTE: All bids should be returned with the BID NUMBER and BID OPENING DATE indicated on the outside of the envelope submitted to the Purchasing Department.

DATE: 6/22/2022

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INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00138834

SEALED BID

| ITEM<br>NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES   | UNIT PRICE<br>QUOTED | TOTALS     |
|----------------|----------|-----|---|----------------------|------------|
| 1              | 1.00     | JOB | FURNISH LABOR, MATERIALS AND EQUIPMENT<br>TO RENOVATE PARC DES FAMILIES DOG<br>PARK<br><br>0001 - Labor, Materials, & Equipment<br>Necessay to Renovate Parc des Familles<br>Dog Park | 115,000.00           | 115,000.00 |

| Line |                                     | Cost          |
|------|-------------------------------------|---------------|
| 1    | Division 01 - Mobilization          | \$ 8,816.06   |
| 2    | Division 22 - Plumbing              | \$ 2,316.73   |
| 3    | Division 32 - Exterior Improvements | \$ 103,867.21 |
| 4    |                                     | \$ -          |
| 5    |                                     | \$ -          |
| 6    |                                     | \$ -          |
| 7    |                                     | \$ -          |
| 8    |                                     | \$ -          |
| 9    |                                     | \$ -          |
| 10   | Total                               | \$ 115,000.00 |

Non-Public Works Bid

AFFIDAVIT

STATE OF Louisiana

PARISH/COUNTY OF Ascension

BEFORE ME, the undersigned authority, personally came and appeared: Clay  
Durbin, (Affiant) who after being by me duly sworn, deposed and said that  
he/she is the fully authorized agent of Bayou Irrigation, Inc. (Entity),  
50-00138834  
the party who submitted a bid in response to Bid Number \_\_\_\_\_, 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.

Clay Durbin

Signature of Affiant

Clay Durbin

Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 19 DAY OF July, 2022.

Donna Sheets

Notary Public

Donna Sheets

Printed Name of Notary

32596

Notary/Bar Roll Number

**DONNA SHEETS**  
NOTARY PUBLIC #32596  
ASCENSION PARISH, LA  
MY COMMISSION IS FOR LIFE

My commission expires upon death.



07-18-2022

**Bid Bond in Accordance with Contract Specifications**

SLA07182884

Bayou Irrigation, Inc.

**Bond Number****Principal Name**

14711 Harry Savoy Road, Saint Amant, LA, 70774, US

**Principal Address****Principal Signature**

Jefferson Parish

200 Derbigny Street, Gretna, LA, 70053, US

**Owner/Obligee Name****Owner/Obligee Address****Bond Information**

07-19-2022

The Ohio Casualty Insurance Company

315054

**Bid Date****Surety****Contractor Vendor ID Number**

5000138834

**Contract ID Number**

Furnish Labor, Materials and Equipment to Renovate Parc Des Familles Dog Park for the Jefferson Parish Department of Parks and Recreation

**Description of Job**

Five Percent of Amount Bid

5%

**Amount of Bid Security****Bid Security Maximum****Bid Security Percentage**

Anthony J Kennedy

Attorney-in-Fact

McGriff Insurance Services, Inc.

**Bond Entered and Executed By****Primary Agency****Attorney-In-Fact Signature**

**Know all men by these presents that** The Ohio Casualty Insurance Company, a Corporation duly organized under the laws of the State of NH, 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.



# Bayou Irrigation, Inc.



"Soaking the South"

14711 Harry Savoy Rd.  
St. Amant, LA 70774  
Ph: 225-572-3398  
Fax: 225-622-6172  
cbayouirrigation@yahoo.com

## CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF BAYOU IRRIGATION, INC..

MEETING OF DIRECTORS, DULY NOTICED AND HELD ON THURSDAY, APRIL 19, 2007.

I, Clay Durbin, IS HEREBY APPOINTED, CONSTITUTED, AND DESIGNATED AS AGENT AND ATTORNEY-IN-FACT OF THE CORPORATION WITH FULL POWER AND AUTHORITY TO ACT ON BEHALF OF THIS CORPORATION IN ALL NEGOTIATIONS, BIDDING, CONCERNS, AND TRANSACTIONS. I, THE UNDERSIGNED, IS CERTIFIED TO EXECUTE OR EXERCISE ALL BIDS, DOCUMENTS, AFFIDAVITS, BONDS, CONTRACTS, AND PURCHASE ORDERS ON BEHALF OF THE CORPORATION. THIS RESOLUTION HEREBY APPROVE, CONFIRM, AND ACCEPT EACH AND EVERY SUCH ACT PERFORMED BY THE UNDERSIGNED AGENT, AND ATTORNEY-IN-FACT.

THIS RESOLUTION IS TO BE A TRUE AND CORRECT COPY OF AN EXCERPT OF THE MINUTES OF THE ABOVE DATED MEETING. THIS DOCUMENT SINCE HAS NOT BEEN REVOKED OR RESCINDED.

Clay Durbin  
PRINTED NAME

President  
TITLE

[Signature]  
SIGNATURE

4/19/2007  
DATE



W. Fox McKeithen  
Secretary of State



# ARTICLES OF INCORPORATION

(R.S. 12:24)

Domestic Business Corporation  
Enclose \$60.00 filing fee  
Make remittance payable to  
Secretary of State  
Do Not Send Cash

Return to: Commercial Division  
P. O. Box 94125  
Baton Rouge, LA 70804-9125  
Phone (225) 925-4704  
Web Site: [www.sec.state.la.us](http://www.sec.state.la.us)

STATE OF LOUISIANA

PARISH/COUNTY OF ASCENSION

1. The name of this corporation is: BAYOU IRRIGATION INC.

2. This corporation is formed for the purpose of: (check one)

☒ Engaging in any lawful activity for which corporations may be formed.

☐ \_\_\_\_\_  
(use for limiting corporate activity)

3. The duration of this corporation is: (may be perpetual) PERPETUAL

4. The aggregate number of shares which the corporation shall have authority to issue is: 1000

5. The shares shall consist of one class only and the par value of each share is WITHOUT PAR VALUE  
(shares may be without par value) per share.

6. The full name and post office address of each incorporator is: \_\_\_\_\_

CLAY DURBIN, JR., 14711 HARRY SAUDY RD., ST AMANT LA 70774

7. Other provisions: \_\_\_\_\_

8. The corporations's federal tax identification number is: APPLIED FOR

Incorporator(s) Signature:

Clay Durbin

Sworn to and subscribed before me, the undersigned Notary Public, on this date: July 26, 2000

RHONDA L VINET  
NOTARY PUBLIC #65467  
COMMISSIONED FOR LIFE

Notary

RHONDA L VINET  
NOTARY PUBLIC # 65467  
COMMISSIONED FOR LIFE



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/19/2022

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

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

|  |  |  |  |
|--|--|--|--|
| <b>PRODUCER</b><br>Acosta Insurance Agency, Llc<br>10661 Highway 431<br>PO Box 280<br>St. Amant LA 70774 |  | <b>CONTACT NAME:</b> Tammie Acosta<br><b>PHONE (A/C, No, Ext):</b> (225) 644-4334<br><b>E-MAIL ADDRESS:</b> tammie@acostaagency.net<br><b>FAX (A/C, No):</b> (225) 644-8184  |  |
| <b>INSURED</b><br>Bayou Irrigation<br>14711 Harry Savoy Rd<br>Saint Amant LA 70774                       |  | <b>INSURER(S) AFFORDING COVERAGE</b><br><b>INSURER A:</b> EVANSTON INS CO<br><b>INSURER B:</b> PROGRESSIVE PALOVERDE INSURANCE COMP.<br><b>INSURER C:</b> MARKEL/FIRST COMP<br><b>INSURER D:</b><br><b>INSURER E:</b><br><b>INSURER F:</b> |  |
|  |  | <b>NAIC #</b><br>35378<br>44695  |  |

**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"/> <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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: | X  | X        | 3AA486518     | 06/24/2022              | 06/24/2023              | 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 \$ Included<br>\$ |
|          | <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 checked="" type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS ONLY   |  |          | 03994676-4    | 12/03/2021              | 12/03/2022              | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$   |
|          | <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br>DED <input type="checkbox"/> RETENTION \$  |  |          |               |                         |                         | 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  | Y/N<br><input checked="" type="checkbox"/> Y | N/A      | X             | MWC0088675-03           | 01/01/2022              | 01/01/2023  |

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

Jefferson Parish, its Districts Departments and Agencies under the direction of the Parish President and the Parish Council as additional insured regarding negligence by the contractor for the Commercial General Liability and the Comprehensive Automobile Liability policies.

Bid 50-00138834

Renovate Parc Des Familles Dog Park

**CERTIFICATE HOLDER****CANCELLATION**

|  |   |
|--|---|
| Jefferson Parish<br>200 Derbigny Street<br>General Government Building Suite 4400<br>Gretna LA 70053 | <b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b><br><br><b>AUTHORIZED REPRESENTATIVE</b><br><i>Victoria E. Calderera</i> |
|--|---|

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LOUISIANA DEPARTMENT OF  
**AGRICULTURE & FORESTRY**

**CERTIFICATION CARD**

**COMMERCIAL PESTICIDE APPLICATOR**

SCOTT GUIDRY

118 CATALPA DRIVE

HOUMA LA 70360

00051352

Exp. Date: 12/31/2022



*Mike Strain*

MIKE STRAIN, DVM COMMISSIONER



CERTIFIED, LICENSED OR REGISTERED

CATEGORY

3-Ornamental & Turf Pest Control  
GS-General Standards

RECERTIFY BY

3/30/2024

3/30/2024

52812000

SIGNATURE: \_\_\_\_\_

855-452-5323

LDAF EMERGENCY HOTLINE

800-222-1222

LA POISON CONTROL CENTER