

DATE: 6/17/2019

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 4

BID NO.: 50-00126925

JEFFERSON PARISH

PURCHASING DEPARTMENT
P.O. BOX 9
GRETN, LA. 70054-0009
504-364-2678VENDOR: Hy-Tech Roofing Services, Inc

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

30

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

30

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

30

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: 1 - 6/21/19NUMBER: 2 - 6/27/19

NUMBER: _____

NUMBER: _____

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) LALIC# 20572

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: <u>Hy-Tech Roofing Services, Inc</u>	
SIGNATURE: <u>[Signature]</u> (Must be signed here)	TITLE: <u>PRESIDENT</u>
PRINT OR TYPE NAME: <u>LESTER J. HAYDEL JR</u>	
ADDRESS: <u>10371 AIRLINE HWY</u>	
CITY, STATE: <u>ST ROSE LA.</u>	ZIP: <u>70087</u>
TELEPHONE: <u>(504) 464-7467</u>	FAX: <u>(504) 464-6011</u>
EMAIL ADDRESS: <u>LHAYDEL@HYTECHROOFING.NET</u>	

TOTAL PRICE OF ALL BID ITEMS: \$ 29,1020

DATE: 6/17/2019

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INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00126925

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	LABOR, MATERIALS & EQUIPMENT NEEDED TO REPAIR & RETROFIT EXISTING ROOF DRAINS FOR THE JEFFERSON PARISH EMERGENCY OPERATIONS & COMMUNICATIONS CENTER 0010 - LABOR & MATERIALS TO REPAIR AND RETROFIT TWENTY (20) EXISTING ROOF DRAINS LOCATED AT THE: JEFFERSON PARISH EMERGENCY OPERATIONS AND COMMUNICATIONS CENTER 910 3RD ST. GRETN, LA 70053 ***PLEASE SEE ATTACHED SPECIFICATIONS***	\$29,620	\$29,620



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

06/27/2019

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.

PRODUCER Stone Insurance, Inc. 111 Veterans Blvd, Suite 1420 Metairie LA 70005-3055		CONTACT NAME: Belinda Cosse PHONE (A/C, No, Ext): (504) 832-4161 E-MAIL ADDRESS: belinda.cosse@stone-insurance.com PRODUCER CUSTOMER ID: 00009699	
		FAX (A/C, No): (504) 835-6657	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: AGCS Marine Insurance Co	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 19/20 **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	<input checked="" type="checkbox"/> PROPERTY	MXI930798240147	05/01/2019	05/01/2020	<input type="checkbox"/> BUILDING	\$
	<input type="checkbox"/> CAUSES OF LOSS				<input type="checkbox"/> PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC				<input type="checkbox"/> BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				<input type="checkbox"/> EXTRA EXPENSE	\$
	<input type="checkbox"/> SPECIAL				<input type="checkbox"/> RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE				<input type="checkbox"/> BLANKET BUILDING	\$
	<input type="checkbox"/> WIND				<input type="checkbox"/> BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD				<input type="checkbox"/> BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> Bld Risk/Ins				<input checked="" type="checkbox"/> Bld Risk/Inst Float	\$ 150,000
	<input type="checkbox"/> DEDUCTIBLES				<input checked="" type="checkbox"/> Rented Equipment	\$ 165,000
A	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY	05/01/2019	05/01/2020	<input checked="" type="checkbox"/> Deductible	\$ 1,000
	<input type="checkbox"/> CAUSES OF LOSS	Inland Marine				\$
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER				\$
	<input checked="" type="checkbox"/> All Risk	MXI930798240147				\$
	<input type="checkbox"/> CRIME					\$
	<input type="checkbox"/> TYPE OF POLICY					\$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
						\$
						\$
						\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: Jefferson Parish Emergency Operations & Communications Center - Repair & Retrofit Existing Roof Drains.

CERTIFICATE HOLDER

Jefferson Parish, its Districts Departments & Agencies under the President & the Parish Council
1221 Elmwood Park Blvd.
Harahan LA 70123

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

Jeff Schwane

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/27/2019

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).

PRODUCER Stone Insurance, Inc. 111 Veterans Blvd, Suite 1420 Metairie LA 70005-3055		CONTACT NAME: Belinda Cosse PHONE (A/C, No, Ext): (504) 832-4161 FAX (A/C, No): (504) 835-6657 E-MAIL ADDRESS: belinda.cosse@stone-insurance.com	
INSURED Hy-Tech Roofing Services Inc, Hy-Tech Roofing & Sheet Metal, LLC & Pelican Roll Forming, LLC 10371 Airline Highway St. Rose LA 70087		INSURER(S) AFFORDING COVERAGE INSURER A: Princeton Excess & Surplus Lines Insurance Co INSURER B: Travelers Casualty Ins Co of America INSURER C: Bridgefield Employers Ins Co INSURER D: StarStone Specialty Insurance Company INSURER E: INSURER F:	

COVERAGES**CERTIFICATE NUMBER:** 19/20**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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			QYA3GL000000200	05/01/2019	05/01/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <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			BA5E592803	05/01/2019	05/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			O85643190ALI	05/01/2019	05/01/2020	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
	<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 <input type="checkbox"/>	N/A	0196-40795	05/01/2019	05/01/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER 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)

Re: Jefferson Parish Emergency Operations & Communications Center - Repair & Retrofit Existing Roof Drains.
The certificate holder is included as an additional insured on the above referenced general liability and auto liability policies, where required by written contract. A waiver of subrogation in favor of the certificate holder is included on the above referenced general liability, auto liability, and workers compensation policies, where required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

Jefferson Parish, its Districts Departments & Agencies under the President & the Parish Council
1221 Elmwood Park Blvd.
Harahan LA 70123

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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Authorized Applicator

This is to acknowledge that

HY-TECH ROOFING SERVICES INC.

has successfully met all requirements
for authorization from **The Garland Company, Inc.**,
as an installer of Garland Roofing Systems
on the following project

Jefferson Parish EOCC Retrofit
Drains



Scott Craft, General Manager
Issued: 06/20/2019
Expiration: 12/31/2019



Scott Schneidewind, CDT
Gulf Coast East Regional Manager



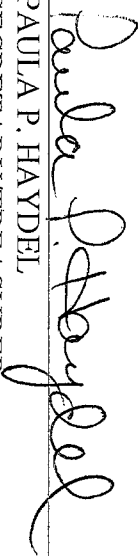
RESOLUTION

At a meeting of the Board of Directors of Hy-Tech Roofing Services, Inc., held on the 30th day of September, 1988, it was

RESOLVED that Lester J. Haydel, Jr., President of Hy-Tech Roofing Services, Inc., is authorized to execute any and all bid documents and contracts for and on behalf of this corporation.

RESOLVED that Paula P. Haydel, Secretary-Treasurer of Hy-Tech Roofing Services, Inc., has the authority to execute all bids and contracts.

I hereby certify that the foregoing is a true and correct copy of a resolution adopted by the Board of Directors of Hy-Tech Roofing Services, Inc., held on the 30th day of September 1988.


PAULA P. HAYDEL
SECRETARY/TREASURER

10371 Airline Highway
St. Rose, Louisiana 70087
(504) 464-7467
FAX: 464-6011