



**CENTRALBIDDING**  
FROM CENTRAL AUCTION HOUSE

**5000143802 Three (3) Year Contract for Janitorial Supplies, Provided on  
an as needed basis for All Jefferson Parish Departments (Parish-wide)  
Jefferson Parish Government**

Project documents obtained from [www.CentralBidding.com](http://www.CentralBidding.com)

01-Nov-2023 06:26:32 PM



**Bid Number 50-00143802**

**Three (3) Year Contract for Janitorial Supplies, provided on an as needed basis for All Jefferson Parish Departments (Parish-Wide)**

**Bid Due: November 16, 2023 AT 2:00 PM**

**ATTENTION VENDORS!!!**

**Please review all pages and respond accordingly, complying with all provisions in the technical specifications and Jefferson Parish Instructions for Bidders and General Terms and Conditions. All bids must be received on the Purchasing Department's eProcurement site, [www.jeffparishbids.net](http://www.jeffparishbids.net), by the bid due date and time. Late bids will not be accepted.**

**Jefferson Parish Purchasing Department  
200 Derbigny Street  
General Government Building, Suite 4400  
Gretna, LA 70053  
Purchasing Specialist II, Mark Buttery  
Email: [MButtery@jeffparish.net](mailto:MButtery@jeffparish.net)  
Phone: 504-364-2810**

DATE: 11/1/2023

Page: 6

BID NO.: 50-00143802

**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 \_\_\_\_\_%

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF \_\_\_\_\_.

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

1-15 Days ARO

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

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

FIRM NAME: Unipak Corp.

ADDRESS: PO Box 332

CITY, STATE: West Long Branch, New Jersey ZIP: 07764

TELEPHONE: ( 888)808-5120 FAX: ( 718)677-9371

EMAIL ADDRESS: customercare@unipakcorp.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 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: \_\_\_\_\_

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

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

TOTAL PRICE OF ALL BID ITEMS: \$ \_\_\_\_\_

AUTHORIZED  
SIGNATURE: 

Brian Marcus

Printed Name

TITLE: President

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.: 50-00143802

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			Three (3) Year Contract for Janitorial Supplies, provided on an as needed basis for All Jefferson Parish Departments (Parish-Wide)		
1	1.00	CS	0010 - C-FOLD PAPER TOWELS, WHITE, 12.75" X 9.625"  BRAND: NITTANY PRODUCT NO. NP-102400 CASE: 2400 (10 PACKS OF 240 TOWELS)	\$ _____	\$ _____
2	1.00	CS	0020 - TALL-FOLD DISPENSER NAPKINS, 1-PLY, WHITE, 6" X 13.5",  BRAND: ESSITY PRODUCT NO. D3052B CASE: 10,000	\$ _____	\$ _____
3	1.00	CS	0030 - DINNER NAPKIN, 1/8 FOLD, 2-PLY, 15" X 17", EMBOSSED, WHITE  BRAND: ESSITY PRODUCT NO. NP310 CASE: 3,000	\$ _____	\$ _____
4	1.00	CS	0040 - NON-PERFORATED, HAND ROLL TOWEL, 7.75" X 350' (12 ROLLS/CASE)  BRAND: ESSITY PRODUCT NO. RK350A COLOR: NATURAL PACK: 12/350'	\$ _____	\$ _____
5	1.00	CS	0050 - MULTI-FOLD PAPER TOWELS, 1-PLY, 9.25" X 9.5", 250/PACK, 16 PACK/CASE  BRAND: ESSITY PRODUCT NO. MB540A COLOR: WHITE CASE: 4,000	\$ _____	\$ _____
6	1.00	CS	0060 - PAPER TOWEL, ROLL, 7.875" X 350', 1-PLY, WHITE  BRAND: CASCADE PRO SELECT PRODUCT NO. H230 CASE: 12 ROLLS	\$ _____	\$ _____
7	1.00	CS	0070 - HYDROSPUN PAPER TOWEL WIPERS, NO GLUE/ADHESIVES, 9" X 16.5", WHITE,	\$ _____	\$ _____

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00143802

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			FRAGRANCES OR DYES, HYPOALLERGENIC, 1-GALLON  BRAND: HITECH PRODUCT NO. EJ-100023 CASE: 4		
33	1.00	CS	0330 - BETCO, FOAM ANTIBACTERIAL SOAP, SCENT: FRESH, 1000ML BAGS, COLOR: GOLD  BRAND: BETCO PRODUCT NO. BC-75129 CASE: 6 BAGS	\$	\$
34	1.00	CS	0340 - KUTOL, SANTI-GEL INSTANT HAND SANITIZER, ADVANCED, UNSCENTED, 16 OZ.  PUMP BOTTLE, MEETS OR EXCEEDS FDA HEALTHCARE PERSONNEL HANDWASH REQUIREMENT, KILLS 99.99% OF GERMS ON HANDS, DYE FREE  BRAND: KUTOL PRODUCT NO. KU-5630 CASE: 12 BOTTLES	\$	\$
35	1.00	CS	0350 - KUTOL, HAND SANITIZER REFILL, ORIGINAL FORMULA, ECONOMY SIZE, 64 OZ.  BOTTLE  BRAND: KUTOL PRODUCT NO. KU-5679 CASE: 4 BOTTLES	\$	\$
36	1.00	CS	0360 - HAND SOAP, GO JO, 800 ML REFILL FOR DISPENSERS, FLORAL SCENT  BRAND: GOJO PRODUCT NO. 9128-12 CASE: 12 REFILLS	\$	\$
37	1.00	CS	0370 - HEAVY DUTY HAND CLEANER, CREME TYPE, GOJO, WATERLESS, 4-1/2 LB CAN  BRAND: GOJO PRODUCT NO. GJ-1115-06 CASE: 6 CANS	\$	\$
38	1.00	CS	0380 - GLOVES, NON-STERILE DISPOSAL, LATEX-FREE, POWDER FREE, VINYL, SMALL,	\$ 17.50	\$

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00143802

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			MEDIUM, LARGE, AND X-LARGE, 100/BOX, 10 BOX/CASE		
			TRADEX PACK 10/100 VSM5201 VMD5201 VLG5201 VXL5201 <i>benene vff - avail all sizes</i>		
39	1.00	CS	0390 - GLOVES, DISPOSABLE, FOODSERVICE, CLEAR POLYETHYLENE, POWDER FREE, SMALL,  100/BOX, 10 BOX/CASE	\$ 17.50	\$
			BRAND: INTEPLAST <i>benene</i> PRODUCT NO. IG-GL-SMALL <i>up</i> SIZE: SMALL PACK: 10/100 <i>avail all sizes</i>		
40	1.00	CS	0400 - GLOVES, DISPOSABLE, FOOD SERVICE, CLEAR POLYETHYLENE, POWDER FREE, MEDIUM,  100/BOX, 10 BOX/CASE	\$ 17.50	\$
			BRAND: INTEPLAST <i>benene</i> PRODUCT NO. IG-GL-MEDIUM SIZE: MEDIUM PACK: 10/100		
41	1.00	CS	0410 - GLOVES, DISPOSABLE, FOODSERVICE, CLEAR POLYETHYLENE, POWDER FREE, LARGE,  100/BOX, 10 BOX/CASE	\$ 17.50	\$
			BRAND: INTEPLAST <i>benene</i> PRODUCT NO. IG-GL-LARGE SIZE: LARGE PACK: 10/100		
42	1.00	PR	0420 - GLOVES, TRADEX, INDUSTRIAL, TWO-TONE, DOUBLE-DIPPED NEOPRENE/NATURAL  LATEX-FREE, FLOCK LINED, USDA ACCEPTED, SIZE: 10 - 10-1/2	\$	\$
			BRAND: JOHNSON PRODUCT NO. JW-94510 PACK: PAIR		
43	1.00	BX	0430 - GLOVES, BLUE NITRILE, DISPOSABLE, AMBIDEXTROUS, TEXTURED, X-SMALL, 6 MIL.,  <i>benene</i> <i>Nitrone X</i>	\$ 4.80	\$

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00143802

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
44	1.00	BX	9-1/2" LENGTH, POWDER FREE, 100 GLOVES PER DISPENSER BOX.  BRAND: INTEPLAST PRODUCT NO. IG-NFX5001 PACK: 1 BOX	\$ 480	\$
45	1.00	BX	0440 - GLOVES, BLUE NITRILE, DISPOSABLE, AMBIDEXTROUS, TEXTURED, SMALL, 6 MIL.,  9-1/2" LENGTH, POWDER FREE, 100 GLOVES PER DISPENSER BOX  BRAND: INTEPLAST PRODUCT NO. IG-NF201 PACK: 1 BOX <i>benene Nitro max</i>	\$ 480	\$
46	1.00	PR	0450 - GLOVES, BLUE NITRILE, DISPOSABLE, AMBIDEXTROUS, TEXTURED, X-LARGE, 6 MIL.,  9-1/2" LENGTH, POWDER FREE, 100 GLOVES PER DISPENSER BOX  BRAND: INTEPLAST PRODUCT NO. IG-NF204 PACK: 1 BOX <i>benene Nitro max</i>	\$	\$
47	1.00	BX	0460 - GLOVES, NITRILE PALM WITH SEAMLESS KNIT LINER, SIZE:10, JOHNSON,  NITRI-FLEX PLUS, WILSHIRE PALM DIPPED NITRILE COATED.  BRAND: JOHNSON PRODUCT NO. JW-1683XL PACK: 1 PAIR	\$ 480	\$
48	1.00	CS	0470 - GLOVES, BLUE NITRILE, DISPOSABLE, AMBIDEXTROUS, TEXTURED, LARGE, 6 MIL.,  9-1/2" LENGTH, POWDER FREE, 100 GLOVES PER DISPENSER BOX  BRAND: INTEPLAST PRODUCT NO. IG-NF203 PACK: 1 BOX <i>benene Nitro max</i>	\$	\$
49	1.00	CS	0480 - HI-TECH ONE-STEP GERMICIDAL NEUTRAL CLEANER & DEODORANT, CONCENTRATE  1-GALLON  BRAND: HITECH PRODUCT NO.: EJ-5138 CASE: 4	\$	\$
			0490 - AIR FRESHNER, LEMON CONCENTRATE, 4 - (1)GALLON/CASE	\$	\$

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00143802

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			BRAND: TORK PRODUCT NO. 192192 COLOR: WHITE/BUE PACK: 150		
225	1.00	CS	2250 - WIPES, FOOD SERVICE, 150/CASE	\$	\$
			KIMBERLY CLARK KC 6280 150 TO A CASE		
226	1.00	CS	2260 - DISHWASHING LIQUID, LEMON FRESH, 32 OZ.	\$	\$
			BRAND: HITECH PRODUCT NO. EJ-5898-32 CASE: 12/32 OZ		
227	1.00	CS	2270 - DISHWASHING DETERGENT, LIQUID, LEMON, 38 OUNCE BOTTLE.	\$	\$
			BRAND: LEMON JOY PRODUCT NO. 43606CR CASE: 8/38 OZ		
228	1.00	EA	2280 - DETERGENT, DAWN, GALLON. (USED ON ANIMALS AT ANIMAL SHELTER)	\$	\$
			PART NUMBER: PG-57445		
229	1.00	CS	2290 - BIBS, PLASTIC WITH CRUST CATCHER (500/CASE)	\$	\$
			BRAND: CELLUCAP PRODUCT NO. B800AGR PACK: 500		
230	1.00	CS	2300 - CAN LINERS, 17" X 18", HI-DENSITY 6 MICRONS, 4 TO 7 GALLON, COLOR: NATURAL	\$ 47 -	\$
			BRAND: INTEPLAST PRODUCT NO. EC171806N PACK: 2,000		
231	1.00	CS	2310 - GRABBER, TRASH, UNGER NIFTY NABBER PRO - 36", 10 PER CASE,	\$	\$

UPC #  
171806N

## CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF  
\_\_\_\_\_  
INCORPORATED.

AT THE MEETING OF DIRECTORS OF Unipak Corp.  
INCORPORATED, DULY NOTICED AND HELD ON \_\_\_\_\_,  
A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED. IT  
WAS:

RESOLVED THAT Brian Marcus, BE AND 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 WITH THE PARISH OF JEFFERSON OR ANY OF ITS AGENCIES,  
DEPARTMENTS, EMPLOYEES OR AGENTS, INCLUDING BUT NOT LIMITED TO, THE  
EXECUTION OF ALL BIDS, PAPERS, DOCUMENTS, AFFIDAVITS, BONDS, SURETIES,  
CONTRACTS AND ACTS AND TO RECEIVE ALL PURCHASE ORDERS AND NOTICES  
ISSUED PURSUANT TO THE PROVISIONS OF ANY SUCH BID OR CONTRACT, THIS  
CORPORATION HEREBY RATIFYING, APPROVING, CONFIRMING, AND ACCEPTING  
EACH AND EVERY SUCH ACT PERFORMED BY SAID AGENT AND ATTORNEY-IN-  
FACT.

I HEREBY CERTIFY THE FOREGOING TO BE  
A TRUE AND CORRECT COPY OF AN  
EXCERPT OF THE MINUTES OF THE ABOVE  
DATED MEETING OF THE BOARD OF  
DIRECTORS OF SAID CORPORATION, AND  
THE SAME HAS NOT BEEN REVOKED OR  
RESCINDED.

  
\_\_\_\_\_  
SECRETARY-TREASURER

11/25/23  
\_\_\_\_\_  
DATE

## **Non-Public Works Bid Affidavit Instructions**

- **Affidavit is supplied as a courtesy to Affiants, but it is the responsibility of the affiant to insure the affidavit they submit to Jefferson Parish complies, in both form and content, with federal, state and parish laws.**
- **Affidavit must be signed by an authorized representative of the entity or the affidavit will not be accepted.**
- **Affidavit must be notarized or the affidavit will not be accepted.**
- **Notary must sign name, print name, and include bar/notary number, or the affidavit will not be accepted.**
- **Affiant MUST select either A or B when required or the affidavit will not be accepted.**
- **Affiants who select choice A must include an attachment or the affidavit will not be accepted.**
- **If both choice A and B are selected, the affidavit will not be accepted.**
- **Affidavit marked N/A will not be accepted.**
- **It is the responsibility of the Affiant to submit a new affidavit if any additional campaign contributions are made after the affidavit is executed but prior to the time the council acts on the matter.**

*Instruction sheet may be omitted when submitting the affidavit*

**Non-Public Works Bid**

**AFFIDAVIT**

**STATE OF** New Jersey

**PARISH/COUNTY OF** Monmouth

BEFORE ME, the undersigned authority, personally came and appeared: Brian Marcus

\_\_\_\_\_, (Affiant) who after being by me duly sworn, deposed and said that  
he/she is the fully authorized President of Unipak Corp. (Entity),  
the party who submitted a bid in response to Bid Number 80685860, 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** ✓ 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.

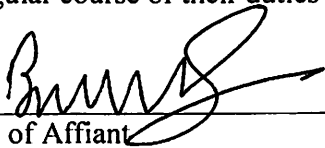
**Choice B** ✓ There are **NO** debts which would require disclosure under Choice A of this section.

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

Brian Marcus  
\_\_\_\_\_  
Printed Name of Affiant

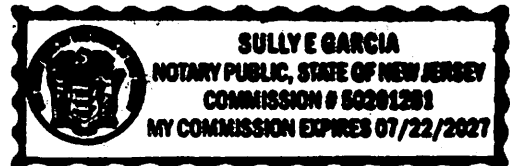
SWORN AND SUBSCRIBED TO BEFORE ME  
ON THE 9 DAY OF November, 2023.

Sully E. Garcia / New Jersey  
\_\_\_\_\_  
Notary Public

Sully E. Garcia  
\_\_\_\_\_  
Printed Name of Notary

#50201281  
\_\_\_\_\_  
Notary/Bar Roll Number

My commission expires 07/22/2027.



## **STANDARD INSURANCE REQUIREMENTS FOR BIDDING PURPOSES**

All required insurance under this bid shall conform to Jefferson Parish Resolution No. 113646 or No. 113647, as applicable. Contractors may not commence any work under any ensuing contract unless and until all required insurance and associated evidentiary requirements thereto have been met, along with any additional specifications contained in the **Invitation to Bid**. Except as where otherwise precluded by law, the Parish Attorney or his designee, with the concurrence of the Director of Risk Management or his designee, may agree on a case-by-case basis, to deviate from Jefferson Parish's standard insurance requirements, as provided in this Section. Vendors requesting deviation therefrom shall submit such requests in writing, along with compelling substantiation, to the Purchasing Department prior to the bid's due date. Any changes to the insurance requirements will be reflected in the bid specifications and addenda. Prior to contract execution and at all times thereafter during the term of such contract, contractors must provide and continuously maintain all coverages as required by the foregoing Resolutions, and the contract documents. Failure to do so shall be grounds for suspension, discontinuation or termination of the contract.

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For bidding purposes, bidders must submit with bid submission a current (valid) insurance certificate evidencing the required coverages. Failure to comply will cause bid to be rejected. The current insurance certificate will be used for proof of insurance at time of evaluation. Thereafter, and prior to contract execution, the low bidder will be required to provide final insurance certificates to the Parish which shall name **the Jefferson Parish, its Districts Departments and Agencies under the direction of the Parish President and the Parish Council** as additional insureds regarding negligence by the contractor for the Commercial General Liability and the Comprehensive Automobile Liability policies. Additionally, said certificates should reflect the name of the Parish Department receiving goods and services and reference the respective Jefferson Parish bid number.

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### **JEFFERSON PARISH REQUIRED STANDARD INSURANCE**

#### **☒ WORKER'S COMPENSATION INSURANCE**

As required by Louisiana State Statute, exception; Employer's Liability, Section B shall be \$1,000,000 per occurrence when Work is to be over water and involves maritime exposures to cover all employees not covered under the State Worker's Compensation Act, otherwise this limit shall be no less than \$500,000 per occurrence.

**Note: If your company is not required by law to carry workmen's compensation insurance, i.e. not a Louisiana company, sole employee of the company, then bidders must request a workmen's compensation insurance declaration affidavit prior to the bid opening date. This insurance declaration affidavit must be fully completed, signed, properly notarized and submitted with the bid. A scanned copy may be submitted with the bid; however, the successful bidder must submit the original affidavit in its original format and without material alteration upon contract execution. Failure to comply will result in the bid submission being**

rejected as non-responsive. The Parish reserves the right to award bid to the next lowest responsive and responsible bidder in this event.

☒ **COMMERCIAL GENERAL LIABILITY**

Shall provide limits not less than the following: \$1,000,000.00 Combined Single Limit per Occurrence for bodily injury and property damage.

☒ **COMPREHENSIVE AUTOMOBILE LIABILITY**

Bodily injury liability \$1,000,000.00 each person; \$1,000,000.00 each occurrence.  
Property Damage Liability \$1,000,000.00 each occurrence.

**Note:** This category may be omitted if bidders do not/will not utilize company vehicles for the project or do not possess company vehicles. Bidder must request an automobile insurance declaration affidavit prior to the bid opening date. This insurance declaration affidavit must be fully completed, signed, properly notarized and submitted with the bid. A scanned copy of the completed, signed and properly notarized affidavit may be submitted with the bid; however, the successful bidder must submit the original affidavit in its original format and without material alteration upon contract execution. Failure to comply will result in the bid submission being rejected as non-responsive. The Parish reserves the right to award bid to the next lowest responsive and responsible bidder in this event.

**DEDUCTIBLES** - The Parish Attorney with concurrence of the Director of Risk Management have waived the deductible section of the Terms and Conditions for all Invitations to Bid, until further notice.

**UMBRELLA LIABILITY COVERAGE**

An umbrella policy or excess may be used to meet minimum requirements.

**FOR CONSTRUCTION AND RENOVATION PROJECTS:**

The following are required if selected below. Such insurance is due upon contract execution.

☐ **OWNER'S PROTECTIVE LIABILITY**

To be for the same limits of liability for bodily injury and property damage liability established for commercial general liability.

☐ **BUILDER'S RISK INSURANCE**

The contractor shall maintain Builder's Risk Insurance at his own expense to insure both the owner (Parish of Jefferson) and contractor as their interest may appear.



UNIPA-1

OP ID: DD

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

11/27/2023

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).

<b>PRODUCER</b> JFA Ins Brkge & Assoc Inc. 25 31 Francis Lewis Blvd. Bayside, NY 11358 Francine Salomon	718-767-4040		<b>CONTACT NAME:</b> Francine Salomon	
			<b>PHONE (A/C, No, Ext):</b> 718-767-4040	<b>FAX (A/C, No):</b> 718-352-7935
			<b>E-MAIL ADDRESS:</b>	
			<b>INSURER(S) AFFORDING COVERAGE</b>	
			<b>INSURER A:</b> Hanover Insurance Company	
			<b>INSURER B:</b>	
			<b>INSURER C:</b>	
			<b>INSURER D:</b>	
			<b>INSURER E:</b>	
			<b>INSURER F:</b>	

<b>INSURED</b> Unipak Corp P.O Box 332 West Long Branch, NJ 07764	NAIC #	
	22292	

**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	ADOL 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"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		RDYA910311	04/26/2023	04/26/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 1,000,000
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			RDYA910311	04/26/2023	04/26/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UHYD575044	05/03/2023	05/03/2024	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
	<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	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

The Certificate Holder is included as additional insured subject to the term and conditions of the policy.

**CERTIFICATE HOLDER****CANCELLATION**

<b>Jefferson Parish</b> <b>Purchasing Department</b> <b>200 Derbigny Street</b> <b>General Government Building</b> <b>Ste 4400, Gretna, LA 70053</b>	<b>JEFFPAR</b>
	<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>
<b>AUTHORIZED REPRESENTATIVE</b> 	




# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/24/2023

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).

<b>PRODUCER</b>  Chris Thomas 60 Maple Ave Red Bank, NJ 07701	<b>CONTACT NAME:</b> Amy Gonzalez <b>PHONE (A/C, No, Ext):</b> 732-933-1299 <b>FAX (A/C, No):</b> 732-933-1277 <b>E-MAIL ADDRESS:</b> Amy@christhomasagency.com																					
<b>INSURED</b> Unipak Corp 88 Cooper Ave W. Long Branch, NJ 07764	<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>State Farm Fire and Casualty Company</td><td>25143</td></tr><tr><td>INSURER B:</td><td></td><td></td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	State Farm Fire and Casualty Company	25143	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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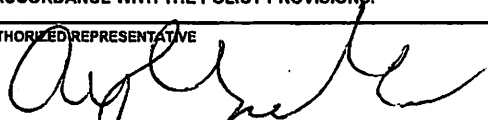
**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

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
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ OTHER:
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ OTHER:
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ OTHER:
A	<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 Y	N/A	Y	90-MQ-D521-0	01/01/2023	01/01/2024 PER STATUTE 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)

**CERTIFICATE HOLDER****CANCELLATION**

Jefferson Parish Purchasing Department 200 Derbigny Street General Government Building, Suite 4400 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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