



**DUE DATE:**

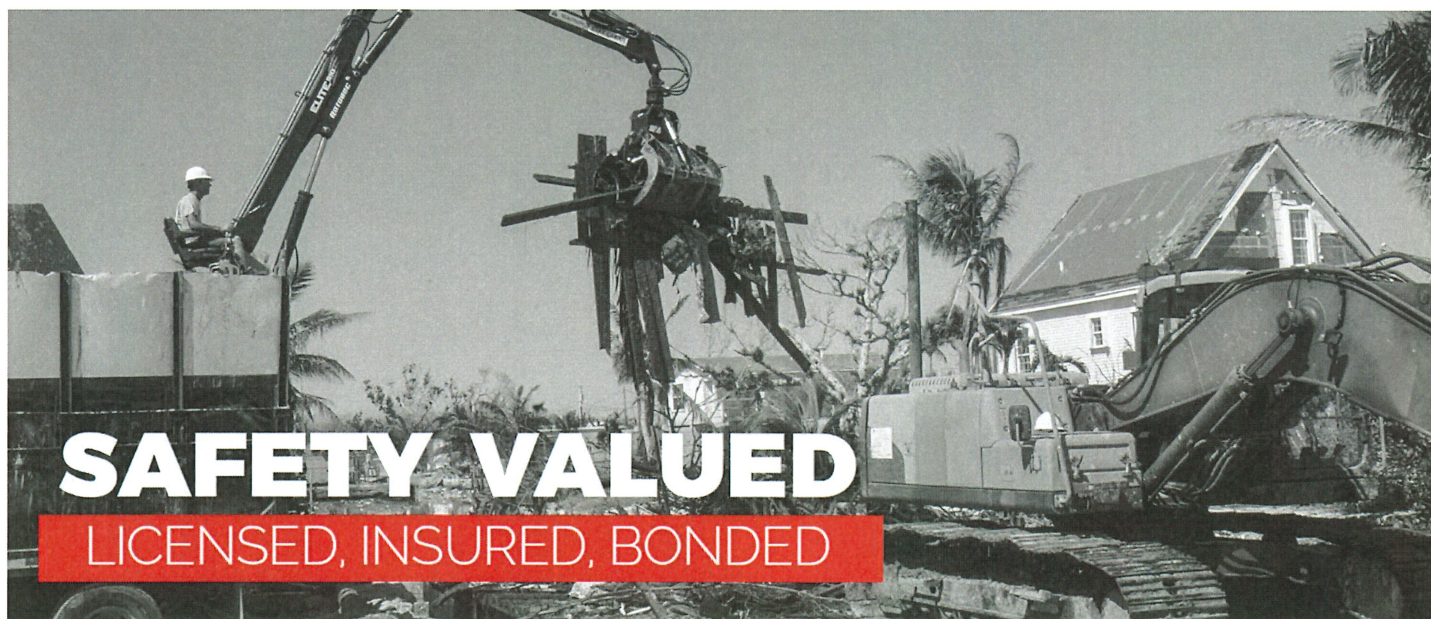
**THURSDAY,**

**APRIL 6, 2023**

**@ 2:00 P.M.**

**BID # 50-001412200 – Three year contract to provide all labor, materials, testing instruments, equipment software & all incidentals for demolition & associated services for General Services**

**JEFFERSON PARISH PURCHASING DEPARTMENT  
200 DERBIGNY STREET  
GENERAL GOVERNMENT BUILDING, SUITE 4400  
GRETNA, LA 70053  
ATTN: DONNA REAMEY**



**LOUISIANA GC LICENSE NO. 70517**

**3512 Godwin Court, Suite A | Mobile, AL 36693 | P: 251.298.8487 | F: 404.506.9849 | <http://kdfllc.com>**

**Point of Contact: Marc Watkins, VP of Operations | 251.753.1864 | [mwatkins@kdf-global.com](mailto:mwatkins@kdf-global.com)**





April 6, 2023

Donna Reamey  
Jefferson Parish Purchasing Dept.  
200 Derbigny Street  
General Government Building, Ste 400  
Gretna, Louisiana 70053

Re: Bid Number 50-00141220

We are pleased to submit the enclosed proposal for demolition and associated services to Jefferson Parish.

KDF Enterprises, LLC is an experienced full-service debris management company capable of providing personnel, equipment, and resources to meet the needs of this project. Based in Alabama, our services include debris removal and segregation, demolition and hazardous material management, debris reduction and site management, and the collection/generation of FEMA-required project documentation, among other services.

#### CORE CAPABILITIES

- |                                    |                                      |                                |
|------------------------------------|--------------------------------------|--------------------------------|
| • Emergency Debris Removal         | • Traffic Control & Signage          | • Hazardous Waste Segregation  |
| • Debris Reduction                 | • Heavy/Light Equipment              | • Environmental Control        |
| • Demolition of Structures         | • Civil Construction & Site Clearing | • Tree Trimming & Removal      |
| • Hazardous Tree Removal           | • Canal Bank Stabilization           | • Emergency Supplies & Support |
| • Marine Debris Removal & Recovery | • Decontamination                    | • Drainage Improvement         |
| • Vehicle & Vessel Removal         | • Hazardous Waste Response & Removal | • USDA Approved Contractor     |
| • Sand & Silt Removal              |                                      | • Landfill Management          |

This proposal provides the information and documentation required for you to be confident that KDF Enterprises, LLC, is not only qualified and able to provide the services outlined in the RFP, but we are the best company to do so. We demonstrate this through our past performance, highly qualified personnel, and proven technical understanding of debris management.

In everything KDF does, we prioritize the customer and the communities we work in. Our goal is to be a chosen partner in debris management, and we strive to be the first call should a problem arise.

This proposal is in all respects fair and in good faith without collusion or fraud. We confirm that we have fully reviewed and understand the contents and agree to be bound by the requirements of this RFP. KDF Enterprises, LLC, agrees to comply with all Federal, State and Local requirements. We are qualified and able to do business in the State of Louisiana and are not restricted in any way by financing, legal or contractual agreements or proceeding.



Bid Number 50-00141220  
Jefferson Parish Government

KDF confirms that it is a validly organized business and is authorized to enter into an agreement with Jefferson Parish. I, Marc Watkins, Vice President of Operations, have the signing authority to bind the principal proponent.

Please contact me at your convenience if you have any additional questions regarding our proposal or qualifications.

Sincerely,



Marc Watkins  
Vice President of Operations  
KDF Enterprises, LLC  
3512 Godwin Court  
Mobile, AL 36693  
251-298-8487  
mwatkins@kdf-global.com



TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
 (Owner to provide name and address of owner)

BID FOR: THREE YEAR CONTRACT TO PROVIDE  
 MATERIALS TESTING INSTRUMENTS E  
 SOFTWARE AND ALL OTHER INCIDENT  
 NECESSARY FOR DEMOLITION & ASSO  
 (Owner to provide name of project and  
 other identifying information)

REVISED AS PER ADDENDUM # 1

The undersigned bidder hereby declares and represents that she/he; a) has carefully examined and understands the Bidding Documents, b) has not received, relied on, or based his bid on any verbal instructions contrary to the Bidding Documents or any addenda, c) has personally inspected and is familiar with the project site, and hereby proposes to provide all labor, materials, tools, appliances and facilities as required to perform, in a workmanlike manner, all work and services for the construction and completion of the referenced project, all in strict accordance with the Bidding Documents prepared by: KDF Enterprises, LLC

and dated: April 6, 2023

(Owner to provide name of entity preparing bidding documents.)

Bidders must acknowledge all addenda. The Bidder acknowledges receipt of the following **ADDENDA**: (Enter the number the Designer has assigned to each of the addenda that the Bidder is acknowledging) Addenda #1 - 03/24/2023

**TOTAL BASE BID:** For all work required by the Bidding Documents (including any and all unit prices designated "Base Bid" \* but not alternates) the sum of:

Eighty-Nine Thousand Four Hundred and Eighty-Nine Dollars and 77/100 Dollars (\$ ) 89,489.77

**ALTERNATES:** For any and all work required by the Bidding Documents for Alternates including any and all unit prices designated as alternates in the unit price description.

**Alternate No. 1** (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$ ) N/A

**Alternate No. 2** (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$ ) N/A

**Alternate No. 3** (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$ ) N/A

**NAME OF BIDDER:** KDF Enterprises, LLC

**ADDRESS OF BIDDER:** 3512 Godwin Court, Suite A, Mobile, AL 36693

**LOUISIANA CONTRACTOR'S LICENSE NUMBER:** KDF: 70517; Powerhouse Elevation & Construction (subcontractor): 65004

**NAME OF AUTHORIZED SIGNATORY OF BIDDER:** Marc Watkins

**TITLE OF AUTHORIZED SIGNATORY OF BIDDER:** Vice President of Operations

**SIGNATURE OF AUTHORIZED SIGNATORY OF BIDDER \*\*:** 

**DATE:** 04/06/2023

**THE FOLLOWING ITEMS ARE TO BE INCLUDED WITH THE SUBMISSION OF THIS LOUISIANA UNIFORM PUBLIC WORK BID FORM:**

\* The Unit Price Form shall be used if the contract includes unit prices. Otherwise it is not required and need not be included with the form. The number of unit prices that may be included is not limited and additional sheets may be included if needed.

\*\* **A CORPORATE RESOLUTION OR WRITTEN EVIDENCE** of the authority of the person signing the bid for the public work as prescribed by LA-R.S. 38:2218 (B)(5).

**BID SECURITY** in the form of a bid bond, certified check or cashier's check as prescribed by LA-R.S. 38:2218.(A) is attached to and made a part of this bid.



LOUISIANA UNIFORM PUBLIC WORK BID FORM  
UNIT PRICE FORM

Bid# 50-00141220

TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
(Owner to provide name and  
address of owner)

**THREE YEAR CONTRACT TO PROVIDE ALL LABOR  
MATERIALS TESTING INSTRUMENTS EQUIPMENT  
SOFTWARE AND ALL OTHER INCIDENTALS  
NECESSARY FOR DEMOLITION & ASSOCIATED**

(Owner to provide name of project  
and other identifying information)  
REVISED AS PER ADDENDUM # 1

**UNIT PRICES:** This form shall be used for any and all work required by the Bidding Documents and described as unit prices.  
Amounts shall be stated in figures and only in figures.

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0010 - DEMOLITION - RAISED PIER CONSTRUCTION, SINGLE STORY OR FIRST		
	<input type="checkbox"/> Alt.#__	FLOOR OF MULTI-STORY CONSTRUCTION		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$6.51	\$6.51

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0020 - DEMOLITION - RAISED PIER CONSTRUCTION, SECOND STORY AND		
	<input type="checkbox"/> Alt.#__	EACH ADDITIONAL STORY		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$4.56	\$4.56

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0030 - DEMOLITION - REINFORCED CONCRETE SLAB-ON-GRANITE CONSTRUCTION, SINGLE		
	<input type="checkbox"/> Alt.#__	STORY OR FIRST FLOOR OF MULTI-STORY CONSTRUCTION, INCLUDING DEMOLITION		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$4.29	\$4.29

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0040 - DEMOLITION - REINFORCED CONCRETE SLAB-ON-GRADE CONSTRUCTION, SECOND		
	<input type="checkbox"/> Alt.#__	STORY AND EACH ADDITIONAL STORY		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$4.64	\$4.64

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0050 - DEMOLITION - REINFORCED CONCRETE SLAB-ON-GRADE ONLY, INCLUDING DEMOLITION		
	<input type="checkbox"/> Alt.#__	AND REMOVAL OF SLAB		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$5.00	\$5.00

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0060 - REMOVAL, HAULING AND DISPOSAL OF EXISTING DEBRIS (DEBRIS NOT GENERATED		
	<input type="checkbox"/> Alt.#__	BY DEMOLITION SERVICES) EXCLUDING TIRES		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	CUYD	\$31.80	\$31.80

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0070 - REMOVAL, HAULING AND DISPOSAL OF ASBESTOS CONTAINING FLOORING MATERIALS		
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$17.86	\$17.86

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0080 - REMOVAL, HAULING AND DISPOSAL OF ASBESTOS CONTAINING SIDING, SHEATHING		
	<input type="checkbox"/> Alt.#__	AND INSULATION MATERIALS		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$20.54	\$20.54

Wording for "DESCRIPTION" is to be provided by the Owner.  
All quantities are estimated. The contractor will be paid based upon actual quantities as verified by the Owner.

LOUISIANA UNIFORM PUBLIC WORK BID FORM  
UNIT PRICE FORM

Bid# 50-00141220

TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
(Owner to provide name and  
address of owner)

**THREE YEAR CONTRACT TO PROVIDE ALL LABOR  
MATERIALS TESTING INSTRUMENTS EQUIPMENT  
SOFTWARE AND ALL OTHER INCIDENTALS  
NECESSARY FOR DEMOLITION & ASSOCIATED**

(Owner to provide name of project  
and other identifying information)  
REVISED AS PER ADDENDUM # 1

**UNIT PRICES:** This form shall be used for any and all work required by the Bidding Documents and described as unit prices.  
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<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0090 - REMOVAL, HAULING AND DISPOSAL OF ASBESTOS CEILING AND WALL TEXTURE		
	<input type="checkbox"/> Alt.#__	MATERIALS		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$17.86	\$17.86

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0100 - MACHINE-PLACED GRANULAR MATERIAL BACKFILL (SUGAR SAND) FOR BACKFILL AND		
	<input type="checkbox"/> Alt.#__	GRADING OF PROPERTY, SWIMMING POOLS, ESCAVATION, ETC., UPON COMPLETION OF		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	CUYD	\$25.00	\$25.00

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0110 - HAND-PLACES GRANULAR MATERIALS BACKFILL (SUGAL SAND) FOR BACKFILL AND		
	<input type="checkbox"/> Alt.#__	GRADING OF PROPERTY, SWIMMING POOLS, EXCAVATION, ETC. UPON COMPLETION OF		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	CUYD	\$37.06	\$37.06

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0120 - REMOVAL, HAULING AND DISPOSAL OF SEPTIC TANK, INCLUDING INLET LINE AND		
	<input type="checkbox"/> Alt.#__	LEACH FIELD LINES		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$4,017.86	\$4,017.86

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0130 - CAPPING OF EXISTING SEWER HOUSE CONNECTION		
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$2,142.86	\$2,142.86

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0140 - REMOVAL, HAULING AND DISPOSAL OF ASBESTOS CONTAINING ROOFING MATERIALS		
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$142.86	\$142.86

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0150 - WITH REGARD TO OCCUPIED MAIN STRUCTURES, THE DISCONNECTION OF WATER		
	<input type="checkbox"/> Alt.#__	SERVICE TO AN ACCESSORY STRUCTURE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$803.57	\$803.57

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0160 - WITH REGARD TO OCCUPIED MAIN STRUCTURES, THE DISCONNECTION OF GAS		
	<input type="checkbox"/> Alt.#__	SERVICE TO AN ACCESSORY STRUCTURE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$982.14	\$982.14

Wording for "DESCRIPTION" is to be provided by the Owner.  
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LOUISIANA UNIFORM PUBLIC WORK BID FORM  
UNIT PRICE FORM

Bid# 50-00141220

TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
(Owner to provide name and  
address of owner)

**THREE YEAR CONTRACT TO PROVIDE ALL LABOR  
MATERIALS TESTING INSTRUMENTS EQUIPMENT  
SOFTWARE AND ALL OTHER INCIDENTALS  
NECESSARY FOR DEMOLITION & ASSOCIATED**

(Owner to provide name of project  
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**UNIT PRICES:** This form shall be used for any and all work required by the Bidding Documents and described as unit prices.  
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<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0170 - WITH REGARD TO OCCUPIED MAIN STRUCTURES, THE DISCONNECTION OF		
	<input type="checkbox"/> Alt.#__	ELECTRICAL SERVICE TO AN ACCESSORY STRUCTURE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$2,839.29	\$2,839.29

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0180 - REMOVAL, HAULING AND DISPOSAL OF WOODEN FENCE, CHAIN LINK FENCE AND		
	<input type="checkbox"/> Alt.#__	ORNAMENTAL IRON FENCE, INCLUDING GATES, FENCE POST AND FOUNDATIONS		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	LF	\$17.86	\$17.86

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0190 - FURNISH ALL NECESSARY PLYWOOD, HARDWARE, TOOLS, LABOR AND INCIDENTALS		
	<input type="checkbox"/> Alt.#__	TO SECURE ABANDONED PROPERTY, IN ACCORDANCE WITH THE REQUIREMENTS OF		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$3,928.57	\$3,928.57

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0200 - FURNISH ALL NECESSARY CHAINS, PADLOCKS, KEYS, HARDWARE, TOOLS, LABOR		
	<input type="checkbox"/> Alt.#__	AND INCIDENTALS TO SECURE OPEN GATES BY MEANS OF PADLOCK WITH SWIMMING POOLS		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$982.14	\$982.14

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0210 - FURNISH ALL EQUIPMENT, PUMPS, HOSES, TOOLS, LABOR AND INCIDENTALS TO		
	<input type="checkbox"/> Alt.#__	DRAIN SWIMMING POOLS		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$2,500.00	\$2,500.00

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0220 - FURNISH ALL EQUIPMENT, TOOLS, LABOR AND INCIDENTALS TO PERFORATE		
	<input type="checkbox"/> Alt.#__	IN-GROUND SWIMMING POOLS, PRIOR TO BACKFILLING, WITH 4 INCH DIAMETER HOLE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$4,285.71	\$4,285.71

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0230 - REMOVAL, HAULING AND DISPOSAL OF ABOVE GROUND POOL AFTER DRAINING		
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	EA	\$5,133.93	\$5,133.93

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0240 - RACM DEMOLITION (THE DEMOLITION OF AN ENTIRE STRUCTURE AS REGULATED		
	<input type="checkbox"/> Alt.#__	ASBESTOS CONTAINING MATERIAL DUE TO IT BEING REGULATED UNDER LAC 33:111.5151		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$57.14	\$57.14

Wording for "DESCRIPTION" is to be provided by the Owner.  
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LOUISIANA UNIFORM PUBLIC WORK BID FORM  
UNIT PRICE FORM

Bid# 50-00141220

TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
(Owner to provide name and  
address of owner)

**THREE YEAR CONTRACT TO PROVIDE ALL LABOR  
MATERIALS TESTING INSTRUMENTS EQUIPMENT  
SOFTWARE AND ALL OTHER INCIDENTALS  
NECESSARY FOR DEMOLITION & ASSOCIATED**

(Owner to provide name of project  
and other identifying information)

REVISED AS PER ADDENDUM # 1

**UNIT PRICES:** This form shall be used for any and all work required by the Bidding Documents and described as unit prices.  
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<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0250 - REPAIR/REPLACE FENCE AND/OR GATES THAT ARE MISSING AND/OR IN		
	<input type="checkbox"/> Alt.#__	DISREPAIR FOR THE PURPOSE OF SECURING SWIMMING POOLS WITH FOUR FOOT CHAIN		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	LF	\$58.04	\$58.04

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0260 - HAND REMOVAL OF MASONRY OR SIMILAR (TYPE) WALL OR FENCE		
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	LF	\$64.29	\$64.29

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0270 - PRICE TO PROPERLY WEATHER TIGHT COMPLETE EXTERIOR WALL COVERING TO MEET		
	<input type="checkbox"/> Alt.#__	MINIMUM STANDARDS (I.E., VINYL SIDING AND EXTERIOR SHEATHING), TO EXISTING		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$16.43	\$16.43

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0280 - HAND REMOVAL OF BUILDING		
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$27.69	\$27.69

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0290 - NON-REGULATED RACM DEMOLITION (THE DEMOLITION OF A STRUCTURE AS NON-		
	<input type="checkbox"/> Alt.#__	REGULATED ASBESTOS CONTAINING MATERIAL) DUE TO IT NOT BEING REGULATED BUT IT IS		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	SQFT	\$64.29	\$64.29

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0300 - FOR EMERGENCY DEMOLITION THE REQUIRED WORK SHALL BE PERFORMED		
	<input type="checkbox"/> Alt.#__	WITHIN FORTY-EIGHT (48) HOURS FROM THE INSURANCE OF THE WORK ORDERED FROM THE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	JOB	\$7,500.00	\$7,500.00

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0310 - FOR THE EMERGENCY CORING, DRAINING AND BACKFILLING OF A POOL		
	<input type="checkbox"/> Alt.#__	THE REQUIRED WORK SHALL BE PERFROMED WITHIN THIRTY-SIX (36) HOURS FROM THE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	JOB	\$7,500.00	\$7,500.00

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0320 - FOR EMERGENCY SECURE THE REQUIRED WORK SHALL BE COMPLETED		
	<input type="checkbox"/> Alt.#__	WITHIN TWENTY-FOUR (24) HOURS FROM THE ISSUANCE OF THE WORK ORDER FROMT THE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	JOB	\$13,035.71	\$13,035.71

Wording for "DESCRIPTION" is to be provided by the Owner.  
All quantities are estimated. The contractor will be paid based upon actual quantities as verified by the Owner.

LOUISIANA UNIFORM PUBLIC WORK BID FORM  
UNIT PRICE FORM

Bid# 50-00141220

TO: JEFFERSON PARISH  
PURCHASING DEPT  
200 DERBIGNY ST. SUITE 4400  
GRETN, LA 70053  
(Owner to provide name and  
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**THREE YEAR CONTRACT TO PROVIDE ALL LABOR  
MATERIALS TESTING INSTRUMENTS EQUIPMENT  
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NECESSARY FOR DEMOLITION & ASSOCIATED**

(Owner to provide name of project  
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REVISED AS PER ADDENDUM # 1

**UNIT PRICES:** This form shall be used for any and all work required by the Bidding Documents and described as unit prices.  
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<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0330 - FOR EXPEDIATED DEMOLITION THE REQUIRED WORK SHALL BE PERFORMED		
	<input type="checkbox"/> Alt.#__	WITHIN FORTY-EIGHT (48) HOURS FROM THE ISSUANCE OF THE WORK ORDER FROM THE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	JOB	\$7,500.00	\$7,500.00

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0340 - FOR THE EXPEDITED CORING, DRAINING AND BACKFILLING OF A POOL		
	<input type="checkbox"/> Alt.#__	THE REQUIRED WORK SHALL BE PERFORMED FOR EXPEDITED CORING, DRAINING, AND WITHIN		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	JOB	\$10,000.00	\$10,000.00

<b>DESCRIPTION:</b>	<input checked="" type="checkbox"/> Base Bid	0350 - FOR EXPEDITED SECURE THE REQUIRED WORK SHALL BE COMPLETED		
	<input type="checkbox"/> Alt.#__	WITHIN TWENTY-FOUR (24) HOURS FROM THE ISSUANCE OF THE WORK ORDER FROM THE		
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1134	1.00	JOB	\$15,714.29	\$15,714.29

<b>DESCRIPTION:</b>	<input type="checkbox"/> Base Bid			
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
N/A	N/A	N/A	N/A	N/A

<b>DESCRIPTION:</b>	<input type="checkbox"/> Base Bid			
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
N/A	N/A	N/A	N/A	N/A

<b>DESCRIPTION:</b>	<input type="checkbox"/> Base Bid			
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
N/A	N/A	N/A	N/A	N/A

<b>DESCRIPTION:</b>	<input type="checkbox"/> Base Bid			
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
N/A	N/A	N/A	N/A	N/A

<b>DESCRIPTION:</b>	<input type="checkbox"/> Base Bid			
	<input type="checkbox"/> Alt.#__			
REF NO.	QUANTITY	UNIT OF MEASURE	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
N/A	N/A	N/A	N/A	N/A

Wording for "DESCRIPTION" is to be provided by the Owner.  
All quantities are estimated. The contractor will be paid based upon actual quantities as verified by the Owner.

\*See attached KDF's corporate resolution.

## **CORPORATE RESOLUTION**

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF

---

INCORPORATED.

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

RESOLVED THAT \_\_\_\_\_, 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**

---

**DATE**



**CONSENT IN LIEU OF  
ORGANIZATIONAL MEETING  
OF THE MEMBERS OF KDF ENTERPRISES, LLC**

The undersigned, being all the members(s) of KDF Enterprises, LLC, a Georgia Limited Liability Company hereby consent to, and by this action approve and adopt the following resolutions:

**FORMATION**

WHEREAS, the original Articles of Incorporation of the Company were filed in the office of the Secretary of State of Georgia on July 1, 2014; therefore, it is

RESOLVED, that a certified copy of said Limited Liability Company Operating Agreement be inserted in the minute book of the Company; and

RESOLVED, that the below acts of the members of the Company are hereby approved, ratified, and adopted as valid and binding acts of the Company.

**OFFICERS**

RESOLVED, that the following persons be, and they hereby are, elected, effective immediately, as officers of the Company to serve until the next annual meeting of directors and until the election and qualification of their successors:

<u>Name</u>	<u>Title</u>
Wayne Kilpatrick	President
Baillie Kilpatrick	Secretary

The above stated officers of the Company retain all rights and responsibilities as detailed in the Limited Liability Company Operating Agreement dated July 1, 2014, and revised January 1, 2016 and further revised January 1, 2017.

RESOLVED, the following persons are hereby authorized and empowered for the express limited purpose of signing documents for the submission of bids, proposals, offers, responses and other related documents to, any federal, state or local government, including any governmental entity, organization, body, agency, department or political subdivision, for the transaction of business by or on behalf of the Company:

Agent Name

Title

Wayne Kilpatrick

President

Marc Watkins

Vice President of Operations

Those listed above are hereby authorized and directed on behalf of the Company to execute and deliver such agreements and instruments, make such filing and give such notices, and take any and all such other actions and to do or cause to be done, such acts as may deem necessary or advisable to accomplish or otherwise implement the purposes of the foregoing resolutions or to cause the Company to perform its obligations.

RESOLVED, the members hereby agree to transition from a member managed LLC to a manager managed LLC and hereby appoint Marc Watkins to act as Manager until such time as the Members choose to appoint a replacement. This appointment is effective immediately.


RESOLVED, that any and all actions heretofore taken by the members and/or officers of the Company resolutions are hereby ratified and confirmed as the acts and deeds of the Company; and

FURTHER RESOLVED, that the officers of the Company be, and each of them hereby is, authorized, directed and empowered to do all such other acts and things and to execute and deliver all such certificates or other documents and to take such other action as they deem necessary or desirable to carry out the purposes and intent, but within the limitations, of the above resolutions.

DATED this 8th day of November 2021.

Members:

Wayne Kilpatrick, President

  
November 8, 2021

State of Mississippi

County of Jackson


SWORN TO AND SUBSCRIBED before me this 8<sup>th</sup> day of November,  
2021.

(Seal)

JAIME N WATSON  
Notary Public, State of Mississippi  
ID NO. 209363, County of Jackson  
My Commission Expires July 5, 2024

  
Notary Public

Baillie Kilpatrick, Secretary

  
November 8, 2021

State of Mississippi

County of Jackson

SWORN TO AND SUBSCRIBED before me this 8<sup>th</sup> day of November,  
2021.

(Seal)

JAIME N WATSON  
Notary Public, State of Mississippi  
ID NO. 209363, County of Jackson  
My Commission Expires July 5, 2024

  
Notary Public





04-05-2023

## Bid Bond in Accordance with Contract Specifications

SLA04052248

KDF Enterprises, LLC

Bond Number

Principal Name

370 Mountain View Road, Springville, AL, 36693, US

Principal Address

Principal Signature

Jefferson Parish

200 Derbigny Street, Gretna, LA, 70053, US

Owner/Obligee Name

Owner/Obligee Address

### Bond Information

04-06-2023

Western Surety Company

328754

Bid Date

Surety

Contractor Vendor ID Number

50-00141220

Contract ID Number

Bid No. 50-00141220 Three Year Contract to Provide All Labor, Materials, Testing Instruments, Equipment Software & all Other Incidentals Necessary for Demolition and Associated Services for Jefferson Parish General Services.

Description of Job

Five Percent of the Amount Bid

5%

Amount of Bid Security

Bid Security Maximum

Bid Security Percentage

Jim E Brashier

Attorney-in-Fact

Cadence Insurance

Bond Entered and Executed By

Primary Agency

Attorney-In-Fact Signature

Know all men by these presents that Western Surety Company, a Corporation duly organized under the laws of the State of SD, 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.



**Public Works Bid**

**AFFIDAVIT**

**STATE OF** Mississippi

**PARISH/COUNTY OF** Jackson

BEFORE ME, the undersigned authority, personally came and appeared: \_\_\_\_\_

Marc Watkins, (Affiant) who after being by me duly sworn, deposed and said that he/she is the fully authorized VP of Operations of KDF Enterprises, LLC (Entity), the party who submitted a bid in response to Bid Number 50-00141220, 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.



Affiant further said:

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

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.

Affiant further said:

Affiant personally has not been convicted of, nor has he/she entered into a plea of guilty or nolo contendere to any of the crimes or equivalent federal crimes listed below. No individual partner, incorporator, director, manager, officer, organizer, or member, who has a minimum of a ten percent ownership in the Bidding Entity, has been convicted of, or has entered a plea of guilty or nolo contendere to any of the crimes or equivalent federal crimes listed below. A conviction of or plea of guilty or nolo contendere to the following state crimes or equivalent federal crimes shall permanently bar any person or the bidding entity from bidding on public projects:

- (a) Public bribery (R.S. 14:118)
- (b) Corrupt influencing (R.S. 14:120)
- (c) Extortion (R.S. 14:66)
- (d) Money laundering (R.S. 14:230)

A conviction of or plea of guilty or nolo contendere to the following state crimes or equivalent federal crimes shall bar any person or the bidding entity from bidding on public projects for a period of five years from the date of conviction or from the date of the entrance of the plea of guilty or nolo contendere:

- (a) Theft (R.S. 14:67)
- (b) Identity Theft (R.S. 14:67, 16)
- (c) Theft of a business record (R.S. 14:67.20)
- (d) False accounting (R.S. 14:70)
- (e) Issuing worthless checks (R.S. 14:71)
- (f) Bank fraud (R.S. 14:71.1)
- (g) Forgery (R.S. 14:72)
- (h) Contractors; misapplication of payments (R.S. 14:202)
- (i) Malfeasance in office (R.S. 14:134)

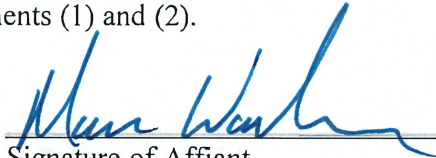
The five-year prohibition provided for in this section shall apply only if the crime was committed during the solicitation or execution of a contract or bid awarded pursuant to these provisions. If evidence is submitted substantiating that a false attestation has been made and the project must be readvertised or the contract cancelled, the awarded entity making the false attestation shall be responsible to the public entity for the costs of rebidding, additional costs due to increased costs of bids and any and all delay costs due to the rebid or cancellation of this project.

*[The remainder of this page is intentionally left blank.]*



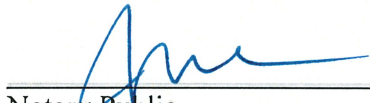
Affiant further said:

- (1) Entity is registered and participates in a status verification system to verify that all employees in the State of Louisiana are legal citizens of the United States or are legal aliens.
- (2) Entity shall continue, during the term of the contract, to utilize a status verification system to verify the legal status of all new employees in the State of Louisiana.
- (3) Entity shall require all subcontractors to submit to the Entity a sworn affidavit verifying compliance with statements (1) and (2).

  
\_\_\_\_\_  
Signature of Affiant

KDF Enterprises, LLC  
\_\_\_\_\_  
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME  
ON THE 6th DAY OF April, 2023 .

  
\_\_\_\_\_  
Notary Public

Jaime Watson  
\_\_\_\_\_  
Printed Name of Notary

209363  
\_\_\_\_\_  
Notary/Bar Roll Number

My commission expires 07/5/2024 .

JAIME N WATSON Notary Public, State of Mississippi ID NO. 209363, County of Jackson My Commission Expires July 5, 2024
---



# **Designation of Construction Contractor as Agent of a Governmental Entity Sales Tax Exemption Certificate**

Jefferson Parish

\_\_\_\_\_, an agency of the United States government, or an agency, board, commission, or instrumentality of the State of Louisiana or its political subdivisions, including parishes, municipalities and school boards, does hereby designate the following contractor as its agent for the purpose of making sales tax exempt purchases on behalf of the governmental body:

Name of Contractor <b>KDF Enterprises, LLC</b>		
Address <b>370 Mountain View Rd</b>		
City <b>Springville</b>	State <b>AL</b>	ZIP <b>35146</b>

This designation of agency shall be effective for purchases of component construction materials, taxable services and leases and rentals of tangible personal property for the following named construction project:

Construction Project	Contract Number <b>50-00141220</b>
----------------------	---------------------------------------

This designation and acceptance of agency is effective for the period

Beginning Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)
-----------------------------	-----------------------

Purchases for the named project during this period by the designated contractor shall be considered as the legal equivalent of purchases directly by the governmental body. Any materials purchased by this agent shall immediately, upon the vendor's delivery to the agent, become the property of this government entity. This government entity, as principal, assumes direct liability to the vendor for the payment of any property, services, leases, or rentals made by this designated agent. This agreement does not void or supersede the obligations of any party created under any construction contract related to this project, including specifically any contractual obligation of the construction contractor to submit payment to the vendors of materials or services for the project.

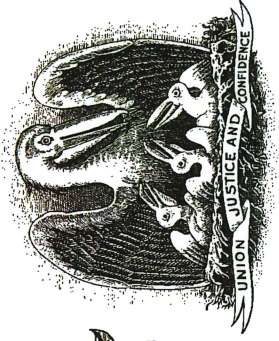
This contractor-agent is not authorized to delegate this purchasing agency to others; separate designations of agency by this governmental entity are required for each contractor or sub-contractor who is to purchase on behalf of this governmental entity. The undersigned hereby certify that this designation is the entirety of the agency designation agreement between them. In order for a purchase for an eligible governmental entity through a designated agent to be eligible for sales tax exemption, the designation of agency must be made, accepted, and disclosed to the vendor before or at the time of the purchase transaction.

Designation of Agency			Acceptance of Agency		
Signature of Authorized Designator		Date (mm/dd/yyyy)	Signature of Contractor or Subcontractor Authorized Acceptor		Date (mm/dd/yyyy)
Name of Authorized Designator			Name of Contractor's or Subcontractor's Acceptor		
Name of Governmental Entity			Name of Contractor		
Address			Address		
City	State	ZIP	City	State	ZIP

This designation of agency form, when properly executed by both the contractor and the governmental entity, shall serve as evidence of the sales tax exempt status that has been conferred onto the contractor. No other exemption certificate form is necessary to claim exemption from sales taxes. The agency agreement evidenced by this sales tax exemption certificate must be implemented at the time of contract execution with the governmental entity. The contract between the governmental entity and his agent must contain provisions to authenticate the conferment of agency.



# State of Louisiana



## State Licensing Board for Contractors

This is to Certify that:

KDF ENTERPRISES LLC  
370 Mountain View Road  
Springville, AL 35146

is duly licensed and entitled to practice the following classifications

BUILDING CONSTRUCTION; HEAVY CONSTRUCTION



Expiration Date: September 16, 2023

License No: 70517

Witness our hand and seal of the Board dated,  
Baton Rouge, LA 17th day of September 2022

Will S. McCoy Director

Lee Madette Chairman

Andy Rameau Treasurer

This License Is Not Transferrable



## Louisiana State Licensing Board for Contractors

### Contractor Information

<b>Business Name</b>	Powerhouse Elevation & Construction, LLC
<b>Mailing Address</b>	303 Ormond Village Dr. Destrehan, LA 70047
<b>Phone Number</b>	(504) 462-0202
<b>Email Address</b>	powerhousemike@yahoo.com
<b>Website</b>	http://null

### Active Licenses

<b>License Number</b>	65004
<b>Type</b>	Commercial License
<b>Status</b>	LICENSED
<b>Effective</b>	04/01/2023
<b>Expiration</b>	03/31/2024
<b>First Issued</b>	03/31/2017
<b>License Number</b>	888054
<b>Type</b>	Residential License
<b>Status</b>	LICENSED
<b>Effective</b>	02/12/2023
<b>Expiration</b>	02/11/2024
<b>First Issued</b>	02/11/2022

### Classifications

Class	Qualifying Party	Parishes
BUILDING CONSTRUCTION	Michael Joseph McClain Jr.	ALL
MECHANICAL	Michael Joseph McClain Jr.	ALL
RESIDENTIAL CONSTRUCTION	Michael Joseph McClain Jr.	ALL
SPECIALTY: RIGGING, HOUSE MOVING, WRECKING AND DISMANTLING	Michael Joseph McClain Jr.	ALL



## Request for Taxpayer Identification Number and Certification

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

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

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

**KDF Enterprises, LLC**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. 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) ► **S**

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

**370 Mountain View Road**

6 City, state, and ZIP code

**Springville, Alabama 35146**

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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

or

Employer identification number

4 7 - 1 2 4 4 2 7 8

### 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 for Part II, later.

Sign  
Here

Signature of  
U.S. person ►

*Cynthia L. Galvin*

Date ►

*4/21/21*

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### 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 1098 (home mortgage interest), 1098-E (student loan interest), 1098-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*, later.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/09/2022

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> McGriff Insurance Services, Inc. 5080 Spectrum Dr., Suite 900E Addison, TX 75001	<b>CONTACT NAME:</b>	
	<b>PHONE (A/C, No, Ext):</b> 469-232-2100	<b>FAX (A/C, No):</b>
<b>INSURED</b> KDF Enterprises, LLC KDF Forestry, Inc. 1101 W. 34th Street, Suite 211 Austin, TX 78705	<b>E-MAIL ADDRESS:</b>	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Starr Indemnity & Liability Company	
	<b>INSURER B:</b> Starr Surplus Lines Insurance Company	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
<b>INSURER F:</b>		
<b>NAIC #</b>		
38318		
13604		

**COVERAGES** **CERTIFICATE NUMBER:**ADN9GMUU **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	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> No Wildfire Excl <input checked="" type="checkbox"/> Contractual Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			1000067216211	11/05/2022	11/05/2023	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 Per Project Agg Capped \$
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" 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 <input checked="" type="checkbox"/> Hired Phys Damage			1000626197220	11/05/2022	11/05/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			1000337496211	11/05/2022	11/05/2023	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 Products & Completed Ops \$ 5,000,000
	<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						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Contractor's Pollution Liability			1000067216211	11/05/2022	11/05/2023	Aggregate-Subject to GL Aggregate Limit \$ 2,000,000 Each Occurrence \$ 1,000,000 \$ \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Contractor's Pollution Liability is Included as an Underlying Coverage on the Excess Liability Policy.

## CERTIFICATE HOLDER

For Information Purposes Only

## 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 *R Michael Breedlove, Jr*



KDDFORE-01

MGAINES

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/8/2022

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> Leo Rodriguez Insurance Agency 27174 Newport Rd Suite 3 and 4 Menifee, CA 92584		<b>CONTACT NAME:</b> Michele Gaines <b>PHONE (A/C, No, Ext):</b> (951) 246-4003 305 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> Michele@LeoRodriguezIns.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Milford Casualty Insurance Company	
		<b>NAIC #</b> 26662	
<b>INSURED</b> KDF Forestry, Inc. dba KDF Enterprise, LLC dba Energy Tech, LLC 370 Mountain View Road Springville, AL 35146		<b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

## 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
	COMMERCIAL GENERAL LIABILITY						
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$
							MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$
	OTHER:						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	DED <input type="checkbox"/> RETENTION \$						\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N		MWC1034473	11/5/2022	11/5/2023	E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A				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)  
Verification of Insurance

## CERTIFICATE HOLDER

## CANCELLATION

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AUTHORIZED REPRESENTATIVE