

**LOUISIANA UNIFORM PUBLIC WORK BID FORM**

**TO:** Jefferson Parish Purchasing

200 Derbigny Street, Suite 4400

Gretna, La. 70053

**BID FOR:** Johnny Jacobs Playground

Splash Pad

Bid # 50-00142374

*(Owner to provide name and address of owner)*

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

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: Manning Architects and dated: 4/28/2023

*(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) 1

**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:

One Million Four Hundred Fifty-Five Thousand Dollars Dollars (\$ 1,455,000.00)

**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 (\$           )

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

N/A Dollars (\$           )

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

N/A Dollars (\$           )

**NAME OF BIDDER:** TEH Enterprise, LLC

**ADDRESS OF BIDDER:** 757 Central Ave.

Jefferson, LA 70121

**LOUISIANA CONTRACTOR'S LICENSE NUMBER:** 56590

**NAME OF AUTHORIZED SIGNATORY OF BIDDER:** Todd Heidingsfelder

**TITLE OF AUTHORIZED SIGNATORY OF BIDDER:** Owner/President

**SIGNATURE OF AUTHORIZED SIGNATORY OF BIDDER \*\*:** [Signature]

**DATE:** 06/27/2023

**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. 38:2212(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) attached to and made a part of this bid.

**Public Works Bid**

**AFFIDAVIT**

**STATE OF** LOUISIANA

**PARISH/COUNTY OF** JEFFERSON

BEFORE ME, the undersigned authority, personally came and appeared: Todd  
Heidingsfelder, (Affiant) who after being by me duly sworn, deposed and said that  
he/she is the fully authorized Owner/President of TEH Enterprise, LLC (Entity),  
the party who submitted a bid in response to Bid Number 50-00142374 to the Parish of  
Jefferson.

Affiant further said:

Campaign Contribution Disclosures

**(Choose A or B, if option A is indicated please include the required  
attachment):**

**Choice A** \_\_\_\_\_ Attached hereto is a list of all campaign contributions, including  
the date and amount of each contribution, made to current or  
former elected officials of the Parish of Jefferson by Entity,  
Affiant, and/or officers, directors and owners, including  
employees, owning 25% or more of the Entity during the two-year  
period immediately preceding the date of this affidavit or the  
current term of the elected official, whichever is greater. Further,  
Entity, Affiant, and/or Entity Owners have not made any  
contributions to or in support of current or former members of the  
Jefferson Parish Council or the Jefferson Parish President through  
or in the name of another person or legal entity, either directly or  
indirectly.

**Choice B** X there are **NO** campaign contributions made which would require  
disclosure under Choice A of this section.

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

Affiant further said:

That Affiant has employed no person, corporation, firm, association, or other organization, either directly or indirectly, to secure the public contract under which he received payment, other than persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project or in securing the public contract were in the regular course of their duties for Affiant; and

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:

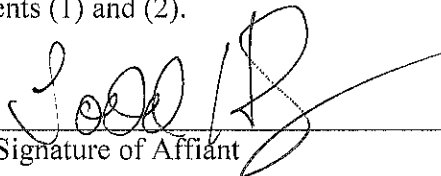
- (a) Theft (R.S. 14:67)
- (b) Identity Theft (R.S. 14:67, 16)
- (c) Theft of a business record (R.S. 14:67.20)
- (d) False accounting (R.S. 14:70)
- (e) Issuing worthless checks (R.S. 14:71)
- (f) Bank fraud (R.S. 14:71.1)
- (g) Forgery (R.S. 14:72)
- (h) Contractors; misapplication of payments (R.S.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

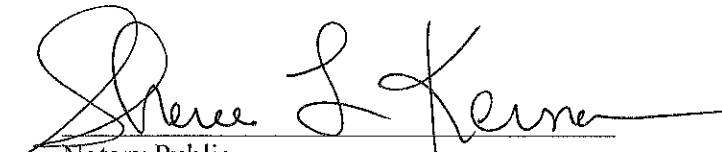
- (1) Entity is registered and participates in a status verification system to verify that all employees in the State of Louisiana are legal citizens of the United States or are legal aliens.
- (2) Entity shall continue, during the term of the contract, to utilize a status verification system to verify 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

Todd Heidingsfelder  
\_\_\_\_\_  
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 27<sup>th</sup> DAY OF June, 2023

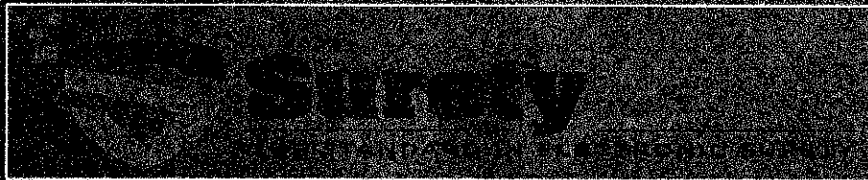
  
\_\_\_\_\_  
Notary Public

Sheree L Kerner  
\_\_\_\_\_  
Printed Name of Notary

144791  
\_\_\_\_\_  
Notary/Bar Roll Number

My commission expires with life

Sheree L. Kerner  
Notary Public  
State of Louisiana, Parish of Jefferson  
Notary #144791  
My Commission Expires with Life



## Bid Bond in Accordance with Contract Specifications

SLA06234763

TEH Enterprise LLC

Bond Number

Principal Name

757 Central Ave, Jefferson, LA, 70121, US

Principal Address



Principal Signature

Jefferson Parish

200 Derbigny Street, Gretna, LA, 70053, US

Owner/Obligee Name

Owner/Obligee Address

### Bond Information

06-27-2023

Hartford Accident and Indemnity Company

308103

Bid Date

Surety

Contractor Vendor ID Number

50-00142374

Contract ID Number

Bid No. 50-00142374 Construction of Johnny Jacobs Playground Splash Pad for Jefferson Parish Parks and Recreation.

Description of Job

Five Percent

5%

Amount of Bid Security

Bid Security Maximum

Bid Security Percentage

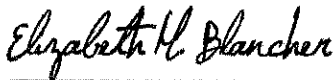
Elizabeth M Blancher

Attorney-in-Fact

Marsh McLennan Agency, LLC

Bond Entered and Executed By

Primary Agency



Attorney-In-Fact Signature

Know all men by these presents that Hartford Accident and Indemnity Company, a Corporation duly organized under the laws of the State of CT, 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.





## CORPORATE RESOLUTION

Excerpt from minutes of meeting of the Board of Directors of TEH ENTERPRISE, LLC

At the meeting of the Directors of TEH ENTERPRISE, LLC duly noticed and held on 6/26/2023, a quorum being there present, on motion duly made and seconded, it was: Resolved that Todd Heidingsfelder, 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 negotiation, bidding, concerns and transactions with The City Of New Orleans 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.

Teresa M. Miller

Secretary-Treasurer

Date: 06/26/2023



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/26/2023

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> Eustis Insurance & Benefits, a Marsh & McLennan Agency LLC Company 110 Veterans Memorial Blvd. Ste 200 Metairie LA 70005	<b>CONTACT NAME:</b> Denise Dauth	
	<b>PHONE (A/C, No, Ext):</b> 504-430-9179	<b>FAX (A/C, No):</b> 504-565-5219
<b>INSURED</b> TEH Enterprise, LLC 757 Central Ave. Jefferson LA 70121-1302	<b>E-MAIL ADDRESS:</b> denise.dauth@marshmma.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Travelers Indemnity Company	
	<b>INSURER B:</b> Travelers Indemnity Company of CT	
	<b>INSURER C:</b> Travelers Property Casualty Co of Amer	
	<b>INSURER D:</b> Louisiana Workers' Compensation Corp.	
<b>INSURER E:</b> The Travelers Indemnity Company of Amer		
<b>INSURER F:</b>		

**COVERAGES****CERTIFICATE NUMBER:** 1846618446**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 SUBR INSP WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		DTC09T367349IND22	11/19/2022	11/19/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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 \$
B	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY		BA9T3681622226G	11/19/2022	11/19/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$		CUP9T3689612226	11/19/2022	11/19/2023	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
D	<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"/> Y <input checked="" type="checkbox"/> N	176502A	3/2/2023	3/2/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.I. EACH ACCIDENT \$ 1,000,000 E.I. DISEASE - EA EMPLOYEE \$ 1,000,000 E.I. DISEASE - POLICY LIMIT \$ 1,000,000
E	Contractors Equipment Floater		QT6601L169139TIL22	11/15/2022	11/15/2023	Leased/Rented Equip 250,000

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

General Liability:  
Additional Insured form #CG D2 46 edition 04/19 applies to the General Liability policy when there is a written contract between the named insured and the certificate holder that requires such status.  
Waiver of subrogation form #GC D3 16 edition 02/19 applies to the General Liability policy when there is a written contract between the named insured and the certificate holder that requires such status.  
Primary & Non-Contributory form #CG T1 00 edition 02/19 applies to the General Liability policy when there is a written contract between the named insured and the certificate holder that requires such status.  
Notice of Cancellation form #IL T4 05 edition 05/19 applies to the General Liability policy.  
See Attached...

**CERTIFICATE HOLDER****CANCELLATION**

Jefferson Parish, its Districts Departments & Agencies  
under the direction of the Parish President and the  
Parish Counsel 200 Derbigny St  
Gretna LA 70053  
USA

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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# **ADDITIONAL REMARKS SCHEDULE**

Page 1 of 1

AGENCY Eustis Insurance & Benefits,		NAMED INSURED TEH Enterprise, LLC 757 Central Ave. Jefferson LA 70121-1302	
POLICY NUMBER			
CARRIER	NAIC CODE	EFFECTIVE DATE:	

## **ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**

**FORM NUMBER:** 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

### **Auto Liability:**

Additional Insured form #CA T4 99 edition 02/16 applies to the Automobile Liability policy when there is a written contract between the named insured and the certificate holder that requires such status.

Waiver of subrogation form #CA 00 01 edition 10/13 applies to the Automobile Liability policy when there is a written contract between the named insured and the certificate holder that requires such status.

Primary & Non-Contributory form #CA T4 99 edition 02/16 applies to the Automobile Liability policy when there is a written contract between the named insured and the certificate holder that requires such status.

Notice of Cancellation form #IL T4 05 edition 05/19 applies to the Automobile Liability policy.

### **Workers' Compensation:**

Waiver of subrogation form #WC 00 03 13 applies to the Workers Compensation policy when there is a written contract between the named insured and the certificate holder that requires such status.

### **Umbrella:**

Notice of Cancellation form #IL T4 05 edition 05/19 applies to the Umbrella policy.

The General Liability, Automobile Liability, and Umbrella policies includes a blanket notice of cancellation to the certificate holder endorsement, providing for 30 days' advance written notice if the policy is canceled by the company, or 10 days' written notice before the policy is canceled for nonpayment of premium. Notice is sent to certificate holders with mailing addresses on file with the agent or the company. The endorsement does not provide for notice of cancellation to the certificate holder if the named insured requests cancellation.

RE:5000142374 Construction of Johnny Jacobs Playground Splash Pad for Jefferson Parish Parks and Recreation.