

**LOUISIANA UNIFORM PUBLIC WORK BID FORM**  
**UNIT PRICE FORM**

TO: Jefferson Parish Purchasing  
200 Derbigny, Suite 4400  
Jefferson Parish General Government Bldg.  
Gretna, La 70053

(Owner to provide name and address of owner)

BID FOR: BRIDGE CITY WATER STORAGE  
TANK EXTERIOR REHABILITATION  
Project Number 2021-033-WR  
Proposal No. 50-00138964

(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: Burk-Kleinpeter, Inc. and dated: 31 August, 2022

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) Addendum No. 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:

nine-hundred fifty-six thousand, two hundred seventy and zero cents Dollars (\$ 956,270.00 )

**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:

Not Used Dollars (\$                      )

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

Not Used Dollars (\$                      )

**NAME OF BIDDER:** Phoenix Fabricators & Erectors LLC

**ADDRESS OF BIDDER:** 182 South County Road 900 East

**LOUISIANA CONTRACTOR'S LICENSE NUMBER:** 23245

**Name OF AUTHORIZED SIGNATORY OF BIDDER:** Dallas Green

**TITLE OF AUTHORIZED SIGNATORY OF BIDDER:** CEO

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

**DATE:** 8/30/22

**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 RS 38:2218.(A) attached to and made a part of this bid.

**Public Works Bid**

**AFFIDAVIT**

**STATE OF** Indiana

**PARISH/COUNTY OF** Hendricks

BEFORE ME, the undersigned authority, personally came and appeared: Dallas Green  
\_\_\_\_\_, (Affiant) who after being by me duly sworn, deposed and said that  
he/she is the fully authorized CEO <sup>Phoenix Fabricators & Erecotrs LLC</sup> of \_\_\_\_\_ (Entity),  
the party who submitted a bid in response to Bid Number 50-00138964, 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).

Dallas Green

Signature of Affiant

Dallas Green

Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 31st DAY OF August, 2022.

Vicki Ann Gossett

Notary Public

Vicki Ann Gossett

Printed Name of Notary

NP0740740

Notary/Bar Roll Number



My commission expires 4/24/2030



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/24/2022

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> Meadowbrook Insurance Agency 26255 American Drive Southfield MI 48034		<b>CONTACT</b> NAME: PHONE (A/C, No, Ext): 877-759-4365 FAX (A/C, No): E-MAIL: ADDRESS:	
License#: PC779010 PHOEAB-01		<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Phoenix Fabricators & Erectors, LLC 182 South County Road 900 East Avon IN 46123		<b>INSURER A:</b> Cincinnati Specialty Underwriters Insur	
		<b>INSURER B:</b> Sirius International Insurance Corporation (publ)	
		<b>INSURER C:</b> Hartford Casualty Insurance Company 29424	
		<b>INSURER D:</b> Redwood Fire and Casualty Insurance	
		<b>INSURER E:</b> Starr Surplus Lines Insurance Co	
		<b>INSURER F:</b> Depositors Insurance Company 42587	

**COVERAGES**

CERTIFICATE NUMBER: 759405457

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 INSD 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 type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		CSU0180889	1/1/2022	1/1/2023	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 \$
F	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		ACBPAPD3100275288	1/1/2022	1/1/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
E	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		1000586788211	1/1/2022	1/1/2023	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	PHWC332362	1/1/2022	1/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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
B C	Professional/Pollution Rental Equipment		CPPL 0001097-2 35 UUM GA4872	1/1/2022 1/1/2022	1/1/2023 1/1/2023	3,000,000 750,000

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

**CERTIFICATE HOLDER****CANCELLATION**

SAMPLE CERTIFICATE

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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AGENCY CUSTOMER ID: \_\_\_\_\_

LOC #: \_\_\_\_\_



## ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

<b>AGENCY</b> Meadowbrook Insurance Agency		<b>NAMED INSURED</b> Phoenix Fabricators & Erectors, LLC 182 South County Road 900 East Avon IN 46123	
<b>POLICY NUMBER</b> 35 UUM GA4872			
<b>CARRIER</b> Hartford Casualty Insurance Company	<b>NAIC CODE</b> 29424	<b>EFFECTIVE DATE:</b> 01/01/2022	

### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

**FORM NUMBER:** 28 **FORM TITLE:** EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

REMARKS:



# EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)

1/24/2022

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

PRODUCER NAME, CONTACT PERSON AND ADDRESS Meadowbrook Insurance Agency 26255 American Drive Southfield, MI 48034		PHONE (A/C, No, Ext): 877-759-4365	COMPANY NAME AND ADDRESS Hartford Casualty Insurance Company Hartford Plaza Hartford, CT 06115		NAIC NO: 29424
FAX (A/C, No):		E-MAIL ADDRESS:	License#: PC779010		
CODE:		SUB CODE:		IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
AGENCY CUSTOMER ID #:		POLICY TYPE		LOAN NUMBER	
NAMED INSURED AND ADDRESS Phoenix Fabricators & Erectors, LLC 182 South County Road 900 East Avon IN 46123		EFFECTIVE DATE 01/01/2022		EXPIRATION DATE 01/01/2023	POLICY NUMBER 35 UUM GA4872
ADDITIONAL NAMED INSURED(S)		CONTINUED UNTIL TERMINATED IF CHECKED		THIS REPLACES PRIOR EVIDENCE DATED:	

**PROPERTY INFORMATION** (ACORD 101 may be attached if more space is required) ☒ BUILDING OR ☒ BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	X	SPECIAL	
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 20,070,103		DED: 5,000				
<input checked="" type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> RENTAL VALUE	X					Actual Loss Sustained; # of months: 12
BLANKET COVERAGE	X					If YES, indicate value(s) reported on property identified above: \$ 20,070,103
TERRORISM COVERAGE		X				Attach Disclosure Notice / DEC
IS THERE A TERRORISM-SPECIFIC EXCLUSION?		X				
IS DOMESTIC TERRORISM EXCLUDED?		X				
LIMITED FUNGUS COVERAGE		X				If YES, LIMIT: DED:
FUNGUS EXCLUSION (If "YES", specify organization's form used)		X				
REPLACEMENT COST	X					
AGREED VALUE		X				
COINSURANCE	X					If YES, 90 %
EQUIPMENT BREAKDOWN (If Applicable)	X					If YES, LIMIT: DED: 5,000
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	X					If YES, LIMIT: 1,000,000 DED: 5,000
- Demolition Costs	X					If YES, LIMIT: 1,000,000 DED: 5,000
- Incr. Cost of Construction	X					If YES, LIMIT: 1,000,000 DED: 5,000
EARTH MOVEMENT (If Applicable)	X					If YES, LIMIT: 1,000,000 DED: 25,000
FLOOD (If Applicable)	X					If YES, LIMIT: 1,000,000 DED: 25,000
WIND / HAIL INCL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Subject to Different Provisions:		X				If YES, LIMIT: DED:
NAMED STORM INCL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Subject to Different Provisions:		X				If YES, LIMIT: DED:
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS		X				

**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.

**ADDITIONAL INTEREST**

CONTRACT OF SALE	LENDER'S LOSS PAYABLE	LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
MORTGAGEE			
NAME AND ADDRESS			AUTHORIZED REPRESENTATIVE
SAMPLE CERTIFICATE			<i>Don N. Shuman</i>

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182 SOUTH COUNTY ROAD 900 EAST • AVON, IN 46123-8973

STATE OF INDIANA       }  
                                     }  
COUNTY OF HENDRICKS   }

RESOLUTION

I, Dallas Green, CEO and President of Phoenix Fabricators and Erectors, LLC., hereby certifies that the following Resolution was adopted on the 30th day of March 2022, meeting of the Board of Directors at which a quorum was present and voted and that said Resolution remains in full force and effect, to wit:

RESOLVED, that the following officers and employees of Phoenix Fabricators and Erectors, LLC., are hereby authorized in the name of this Corporation to sign bids, proposals, execute contracts and bonds in conjunction with the performance of water and sewer construction projects.

Chief Executive Officer / President	Dallas Green
Chief Operating Officer & Executive Vice President	Kurt T. Fuller, P.E.
Vice-President Sales	Jonathan R. Dixon, P.E.
Assistant Secretary	Matthew A. Harris

IN WITNESS WHEREOF, I have hereunto set my hand and seal of this Corporation on this 30th day of March 2022.

A handwritten signature in blue ink that reads "Dallas Green".

Dallas Green, Chief Executive Officer / President