

DATE: 9/01/2022
BID NO.: 50-00139834

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 5

JEFFERSON PARISH

PURCHASING DEPARTMENT
P.O. BOX 9
GRETN, LA. 70054-0009
504-364-2678

VENDOR: 27118 BLANK BID COPY VENDOR

BUYER: BBELLOW

As per LSA-RS 47:301 et seq., all governmental bodies are excluded from payment of sales taxes to any Louisiana taxing body. Quotations shall be based on F.O.B. Agency warehouse or jobsite, anywhere within the Parish as designated by the Purchasing Department.

JEFFERSON PARISH reserves the right to cancel all or any part of an order if not shipped promptly. No charges will be allowed for parking or cartage unless specified in quotation. The order must not be filled at a higher price than quoted. JEFFERSON PARISH reserves the right to cancel at any time and for any reason by issuing a THIRTY (30) day written notice to the contractor.

JEFFERSON PARISH is expecting all products to be new and all work to be done in workman-like manner, according to standard practices. Any deviations or alteration from the specifications must be indicated on the bid form for each item and upon request, product data for same must be submitted by the time specified by the Purchasing Department.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES _____

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK _____

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK _____

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form by placing the addendum number as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: 1
NUMBER: _____
NUMBER: _____
NUMBER: _____

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) _____

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: <u>Crosby Tugs, LLC</u>	
SIGNATURE: (Must be signed here)	TITLE: <u>Operator</u>
PRINT OR TYPE NAME: <u>Frederic Collin</u>	
ADDRESS: <u>17751 Highway 3235</u>	
CITY, STATE: <u>Galliano, LA</u>	ZIP: <u>70354</u>
TELEPHONE: <u>(985) 632-7573</u>	FAX: <u>(985) 632-7572</u>
EMAIL ADDRESS: <u>operation@crosbytugs.com</u>	

TOTAL PRICE OF ALL BID ITEMS: \$ 859,500.00

DATE: 9/01/2022

INVITATION TO BID FROM JEFFERSON PARISH - continued

Page: 6

BID NO.: 50-00139834

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	70.00	JOB	<p>FURNISH ALL LABOR, MATERIALS AND EQUIPMENT TO WHEEL WASH BUCK TOWN MARINA FOR JEFFERSON PARISH DEPARTMENT OF ECOSYSTEM AND COASTAL MANAGEMENT</p> <p>0001 Bucktown Marina Wheel Washing</p> <p>Contractor is to provide all necessary equipment, materials, transportation, and labor to prop-wash/wheelwash to disperse accumulations of silt and sediment that has formed in the basin due to wave energy and turbidity from Lake Pontchartrain per the attached specifications.</p>	\$ 850.00	\$ 59,500.00




CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/06/2022

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 be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Chase Dardar, State Farm Insurance 6301 S Claiborne Ave New Orleans, LA 70215 	CONTACT NAME: Tina PHONE (A/C, No, Ext): (504) 861-4529 E-MAIL: ADDRESS: FAX (A/C, No): (504) 861-9870
INSURED Crosby Tugs LLC; Crosby Dredging LLC; Crosby Marine Repairs LLC; Crosby Renewables LC; Sea, O.G. Offshore; Float Freight LLC P.O. Box 279 Golden Meadow, LA 70357	INSURER(S) AFFORDING COVERAGE INSURER A : State Farm Mutual Automobile Insurance Company INSURER B : INSURER C : INSURER D : INSURER E : INSURER F : NAIC # 25178

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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Fleet	Y Y	180 0924-A07-18A-9ZZ	07/07/2022	07/07/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/>					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A <input type="checkbox"/>					WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

- Bid# 50-00139834
 - Jefferson Parish Department of Ecosystem and Coastal Management
 - "the Jefferson Parish, its Districts, Departments and Agencies under the direction of the Parish President and the Parish Council" (as additional insured under the Commercial General Liability And the Comprehensive Automobile Liability policies)
- Additional Insured w/WOS

CERTIFICATE HOLDER

CANCELLATION

Jefferson Parish Department of Ecosystem and Coastal Management
1221 Elmwood Pk Blvd Suite 310
Jefferson, LA 70123

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2010 ACORD CORPORATION. All rights reserved.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/6/2022

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 be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Theriot, Duet and Theriot, Inc. 144 North 1st Street Golden Meadow LA 70357		CONTACT NAME: Danielle Plaisance PHONE (A/C, No, Ext): (985) 475-5126 FAX (A/C, No): (985) 475-7276 E-MAIL ADDRESS: danielle@tdtinsurance.com	
INSURED Crosby Tugs LLC, Crosby Dredging LLC Crosby Marine Repair LLC P. O. Box 279 Golden Meadow LA 70357		INSURER(S) AFFORDING COVERAGE INSURER A: Louisiana Workers Comp Corp INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 22350	

COVERAGES

CERTIFICATE NUMBER: CL2253108471

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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	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	Y	75321-D	6/21/2022	6/21/2023	<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


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

Bid# 50-00139834

Jefferson Parish Department of Ecosystem and Coastal Management

"the Jefferson Parish, its Districts, Departments and Agencies under the direction of the Parish President and the Parish Council" (as additional insured under the Commercial General Liability And the Comprehensive Automobile Liability policies)

CERTIFICATE HOLDER**CANCELLATION**

Jefferson Parish Department of Ecosystem and Coastal Management 1221 Elmwood Pk Blvd Suite 310 Jefferson, LA 70123	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	---

© 1988-2014 ACORD CORPORATION. All rights reserved.

COMMENTS/REMARKS

Waiver of Our Right to Recover From Others Endorsement
Outer Continental Shelf Lands Act Endorsement
Gulf of Mexico Extension Endorsement
Alternate Employer Endorsement
Other States - Incidental Operations Endorsement
Longshore and Harbor Workers Compensation Act
Voluntary Compensation and EL Coverage Endorsement



CROSTUG-01

ABRISSET

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/6/2022

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).

PRODUCER Laris Insurance Agency 810 Crescent Avenue Lockport, LA 70374	CONTACT NAME: Ashley Brisset PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: ashleyb@larisinsurance.com
INSURED Crosby Tugs, LLC, Crosby Marine Transportation LLC P.O. Box 279 Golden Meadow, LA 70357	INSURER(S) AFFORDING COVERAGE INSURER A : Clear Spring Property and Casualty Company INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :
	NAIC # 15563

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
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Marine General Liab GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			CSCRTU2021020918-0919	2/20/2021	2/20/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 CONTRACTORS POL \$ Included
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 25,000			CSCRTU2021020920	2/20/2021	2/20/2023	EACH OCCURRENCE \$ 500,000,000 AGGREGATE \$ 500,000,000 See Addt'l Pol
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N N/A If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Hull & Machinery			CSCRTU2021020918-0919	2/20/2021	2/20/2023	See Attached Sched

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
See Attached Addendum for Additional Coverage Information.

B. Protection & Indemnity: Policy Number: 460023, Carrier: The West of England Ship Owners Mutual Ins. Association, Term: 2/20/2022 - 2/20/2023 Each Occurrence Per Vessel \$1,000,000,000 Limit.

C. Primary Vessel Pollution: Policy Number: V-16957-22, Carriers: State National Ins. Co./Starr Indemnity/Ascot Ins. Co., Term: 8/20/2022 - 2/20/2023, OPA/CERCLA Per Occurrence \$1,000,000 Limit.
SEE ATTACHED ACORD 101

CERTIFICATE HOLDER

CANCELLATION

Jefferson Parish Department of Ecosystem and Coastal Management
1221 Elmwood Pk Blvd Suite 310
Jefferson, LA 70123

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



ADDITIONAL REMARKS SCHEDULE

Page 1 of 4

AGENCY Laris Insurance Agency		NAMED INSURED Crosby Tugs, LLC, Crosby Marine Transportation LLC P.O. Box 279 Golden Meadow, LA 70357	
POLICY NUMBER SEE PAGE 1		EFFECTIVE DATE: SEE PAGE 1	
CARRIER SEE PAGE 1	NAIC CODE SEE P 1		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:

To the extent that the Named Assured is obligated by written contract to name any one person or organization as Additional Assureds and/or waive rights of subrogation in favor thereof, the Underwriters agree that such persons or company shall be considered as Additional Assureds and rights of subrogation are hereby waived but only with respects to the Vessel(s) working for the Additional Assured(s) and/or operations performed by or on behalf of the Named Assured(s).

A. Marine General Liability - \$1,000,000 Per Occ/\$2,000,000 Gen Agg

Clear Spring Property & Casualty

Policy Number: CSCRTU2021020918-0919

February 20, 2021 to February 20, 2023

Includes: Commercial General Liability Coverage Form; Gulf of Mexico Endorsement; In Rem; Pollution Buyback (72 hours discovery/21 days reporting); Subcontractors Liability Endorsement; Stevedore's Liability; Wharfinger's Liability; Shiprepairers Liability; Other Work Endorsement; Boat Brokers Legal Liability; Action Over Indemnity Buyback; Charterer's Legal Liability Endorsement; Contractor's Pollution Liability; Primary & Non-Contributory Endorsement; Blanket Additional Insured - CG 20 10 11 85; Waiver of Transfer of Rights or Recovery Against Others CG 24 04 11 85; Watercraft Exclusion Deleted; OCS; Contractual Liability; Blowout & Cratering Property Damage Endorsement; Explosion, Collapse & Underground Property Damage (XCU); 30 Day Notice of Cancellation

A. & D. Hull & Machinery (See Vessel Schedule) &

Clear Spring Property & Casualty/Lloyds of London

Policy Number: CSCRTU2021020918-0919 & CRTU2021020921-0924

February 20, 2021 to February 20, 2023

B. Protection & Indemnity & Excess Vessel Pollution- \$1,000,000,000 Per Occ Limit

The West of England Ship Owners Mutual Ins. Association

Policy Number: 460023

February 20, 2022 to February 20, 2023

Includes: AIHC; AITF; S.R.&C.C.; SP-23(revised 1/56); Cargo Legal Liability; Pollution Exclusion and Buyback Endt; 30 Day Notice of Cancellation; Blanket Additional Insured & Waiver of Subrogation; Affiliated Companies Clause; Alterations and Repairs; Cross Liabilities; In Rem; Pilotage and Towing; Privilege to Charter; Sistership Clause; Contractual Liability Clause; Blowout and Cratering; Collision & Towers Liability; Leased Equipment Clause; Tankerman's Liability; Primary & Non-Contributory; Deletion of "Other than Owner/Other Insurance" Clause; Extended Adventures and Perils; Maritime Employers Liability; Captain & Crew Coverage; Jones Act; Death on the High Seas; TWM&C; Removal of Wreck; As per the Certificate of Entry issued by The West of England Ship Owners Mutual Insurance Association and in accordance with the Rules, Bye-laws and the Constitution of the Association for the time being in force except to the extent that the said Rules are modified by the Special Terms.

C. Primary Vessel Pollution - \$1,000,000 OPA/CERCLA Per Occurrence Limit

State National Ins. Co./Starr Indemnity/Ascot Ins. Co.

Policy Number: V-16957-22

August 20, 2022 to February 20, 2023

Includes: OPA; CERCLA; Blanket Additional Insured & Waiver of Subrogation; 30 Day Notice of Cancellation

A. & D. Bumbershoot - \$500,000,000 Total Limits

Clear Spring Property & Casualty/Lloyds London

Policy Numbers: CSCRTU2021020920, CRTU2021020921-0924, RN2200556

February 20, 2021 to February 20, 2023



ADDITIONAL REMARKS SCHEDULE

Page 2 of 4

AGENCY Laris Insurance Agency		NAMED INSURED Crosby Tugs, LLC, Crosby Marine Transportation LLC P.O. Box 279 Golden Meadow, LA 70357	
POLICY NUMBER SEE PAGE 1		EFFECTIVE DATE: SEE PAGE 1	
CARRIER SEE PAGE 1	NAIC CODE SEE P 1		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Follows Form including Co-Insured and Waiver of Subrogation as required under written contract as per underlying(s).

Schedule of Underlying Policies:

Marine General Liability

Charterer's Legal Liability

Automobile Liability Policy #180 0924-A07-18A-9ZZ

Employers Liability #75321-D

Protection & Indemnity

Navigation Limits: Navigation Limits: Worldwide subject to AIMU Trade Warranties

Bid# 50-00139834

Jefferson Parish Department of Ecosystem and Coastal Management

The Jefferson Parish, its Districts, Departments and Agencies under the direction of the Parish President and the Parish Council" (as additional insured under the Commercial General Liability policy)

Vessel Schedule - Hull Agreed Value

1. Crosby Duke - \$6,000,000
2. Crosby Crusader - \$5,825,000
3. Crosby Star - \$4,200,000
4. Crosby Quest - \$2,200,000
5. Crosby Trinity - \$2,800,000
6. Crosby Light - \$3,000,000
7. Allison Marie - \$2,200,000
8. Crosby Voyager - \$2,200,000
9. Crosby Sun - \$2,000,000
10. Crosby Faith - \$2,200,000
11. Crosby Charger - \$2,200,000
12. Mr. Crosby - \$2,100,000
13. Susan Marie - \$1,825,000
14. Capt. Kent - \$575,000
15. Crosby Runner - \$575,000
16. Provider - \$550,000
17. Nelda Faye - \$750,000
18. Tatum Ann - \$800,000
19. Aaron Joseph - \$650,000
20. Rodney-Mitchell - \$550,000
21. David L. Curole - \$750,000
22. Tara Elizabeth - \$500,000
23. Crosby Explorer - \$800,000
24. Crosby Rambler - \$775,000
25. Crosby Hustler - \$700,000
26. Crosby Legend - \$700,000
27. Carl Joseph - \$550,000
28. Cedonia Crosby - \$420,000
29. Maggie Rae - \$500,000
30. Dino John - \$500,000
31. Lauren Marie - \$575,000
32. Lindberg Crosby - \$500,000
33. Capt. Crosby - \$550,000



ADDITIONAL REMARKS SCHEDULE

AGENCY Laris Insurance Agency		NAMED INSURED Crosby Tugs, LLC, Crosby Marine Transportation LLC P.O. Box 279 Golden Meadow, LA 70357
POLICY NUMBER SEE PAGE 1		
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

34. 704 (Dock) - Liability Only
35. Vinton Crosby - \$3,500,000
36. Miss Crosby - \$1,600,000
37. Crosby Clipper - \$3,500,000
38. Crosby Eagle - \$3,200,000
39. Crosby Courage - \$5,800,000
40. Crosby Venture - \$5,000,000
41. Crosby Marlin - \$3,200,000
42. Crosby Odyssey - \$7,000,000
43. Crosby Endeavor - \$5,800,000
44. Crosby Viking - \$4,400,000
45. Tara Crosby - \$3,500,000
46. Crosby Moon - \$6,400,000
47. Gayle Crosby - \$2,200,000
48. Crosby Power - \$5,500,000
49. Night Hawk - \$550,000
50. Crosby Mariner - \$1,800,000
51. Crosby Grace - \$1,800,000
52. Tommy Andrew - \$1,200,000
53. Hud Joseph - \$900,000
54. Crosby Enterprise - \$5,000,000
55. Crosby Hope - \$4,400,000
56. Crosby Lady - \$800,000
57. Captain Webster - \$1,350,000
58. Crosby Trojan - \$6,000,000
59. Crosby Carrier - \$1,700,000
60. Crosby Tide - \$1,700,000
61. Crosby General - \$800,000
62. Crosby Admiral - \$4,400,000
63. Crosby Divinity - \$6,800,000
64. Crosby Commodore - \$8,000,000
65. Crosby Leader - \$7,000,000
66. Myles Francis - \$1,100,000
67. Caroline Frances - \$1,600,000
68. Miss Kori - \$800,000
69. Miss Karli - \$800,000
70. Mr. Cole - \$800,000
71. Emma Claire - \$800,000
72. Crosby Progress - \$3,200,000
73. Big Eddie - \$2,465,000
74. Crosby Drydock #1 - \$5,000,000
75. CB-1 - \$45,000
76. B2 2013 Scully Aluminum Boat - \$140,000
77. Crosby Legacy - \$3,500,000
78. B3 2013 Gator Tail - \$39,559
79. B5 2013 Gator Tail No. 1 - \$40,565
80. B6 2013 Gator Tail No. 2 - \$40,565
81. Delta Duck - \$300,000
82. Delta Hawk - \$300,000
83. Jason Joseph - \$1,000,000



ADDITIONAL REMARKS SCHEDULE

Page 4 of 4

AGENCY Laris Insurance Agency		NAMED INSURED Crosby Tugs, LLC, Crosby Marine Transportation LLC P.O. Box 279 Golden Meadow, LA 70357	
POLICY NUMBER SEE PAGE 1		EFFECTIVE DATE: SEE PAGE 1	
CARRIER SEE PAGE 1	NAIC CODE SEE P 1		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

84. Delta Mallard - \$300,000
85. Delta Buck - \$400,000
86. Delta Ruler - \$600,000
87. Delta Clipper - \$800,000
88. Delta Factor - \$3,000,000
89. Delta Faith - \$3,000,000
90. Delta Freedom - \$3,000,000
91. Delta Pacer - \$4,000,000
92. Delta Pride - \$4,500,000
93. Delta Power - \$5,000,000
94. Crosby Lightning - \$1,200,000
95. Crosby Discover - \$3,200,000
96. Capt. John - \$2,000,000
97. Crosby Integrity - \$5,500,000
98. Crosby Victory - \$2,500,000
99. Crosby Reliant - \$9,250,000
100. Crosby Guardian - \$9,250,000
101. Kurt J Crosby - \$14,000,000
102. Crosby 301 - \$3,500,000
103. Beau Andrew - \$272,800
104. B1 2015 Scully Aluminum Boat - \$126,525
105. PAD 1B Spud Barge - \$85,000
106. Capt Anthony - \$3,000,000
107. Paddy Crosby - \$200,000
108. Webb Crosby (Workboat) - \$200,000
109. BB 06 - \$150,000
110. WEB P1 - \$5,350,000
111. Crosby Liberty - \$5,000,000
112. WEB P2 - \$5,350,000
113. Barbara Ann - \$2,790,000
114. Webb Crosby (Towing) - \$2,500,000
115. Crosby Skipper - \$14,000,000
116. 2014 Sterling 220 XS - \$50,000
117. 2014 A414 Scully - \$38,000
118. WEB P4 - \$5,350,000
119. Miss Paddy - \$200,000
120. Sparks - \$400,000.
121. SMI 218 - \$15,000.
122. Hunter - \$450,000.
123. Crosby Challenger - \$2,000,000.
124. Ronnie Jo - \$200,000.
125. FMT2056 - \$6,500,000.
126. FMT2062 - \$6,500,000.
127. Hoyt Christopher - \$1,500,000.
128. Delvin Candies - \$8,500,000.
129. Crossmar 21 - \$7,500,000.
130. Joey John - \$800,000.