

# LOUISIANA UNIFORM PUBLIC WORK BID FORM

**TO:** Jefferson Parish  
Attn.: Purchasing Department  
200 Derbigny St., Suite 4400  
Gretna, LA 70053

**BID FOR:** W. Esplanade Beautification Project  
District 5  
JPPW Project No. 2015-006-RB  
50-112611

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: Linfield, Hunter & Junius, Inc. and dated: December 22, 2014.

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#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:

Two Hundred Seventy Thousand, Eight Hundred, Ninety ;<sup>00</sup>/<sub>100</sub> Dollars (\$ 270,890.00)

**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** for the lump sum of:

N/A Dollars (\$ N/A)

**Alternate No. 2** for the lump sum of:

N/A Dollars (\$ N/A)

**Alternate No. 3** for lump sum of:

N/A Dollars (\$ N/A)

**NAME OF BIDDER:** APC Construction, LLC

**ADDRESS OF BIDDER:** 1215 Prytania Street ste 405  
New Orleans, LA 70130

**LOUISIANA CONTRACTOR'S LICENSE NUMBER:** 51053

**NAME OF AUTHORIZED SIGNATORY OF BIDDER:** Keith Porta

**TITLE OF AUTHORIZED SIGNATORY OF BIDDER:** Managing Member

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

**DATE:** APRIL 23, 2015

\* 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.

\*\* If someone other than a corporate officer signs for the Bidder/Contractor, a copy of a corporate resolution or other signature authorization shall be required for submission of bid. Failure to include a copy of the appropriate signature authorization, if required, may result in the rejection of the bid unless bidder has complied with La. R.S. 38:2212(A)(1)(c) or RS 38:2212(O).

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

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

**TO:** Jefferson Parish  
Attn.: Purchasing Department  
200 Derbigny St., Suite 4400  
Gretna, LA 70053

**BID FOR:** W. Esplanade Beautification Project  
District 5  
JPPW Project No. 2015-006-RB  
50-112611

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.

DESCRIPTION:	◆ Base Bid or □ Alt.# MOBILIZATION			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
1	1	LUMP SUM	20,335	20,335

DESCRIPTION:	◆ Base Bid or □ Alt.# TEMPORARY SIGNS AND BARRICADES			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
2	1	LUMP SUM	6,056	6,056

DESCRIPTION:	◆ Base Bid or □ Alt.# CLEARING AND GRUBBING			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
3	1	LUMP SUM	9,500	9,500

DESCRIPTION:	◆ Base Bid or □ Alt.# 4" BORE			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
4	150	LINEAR FOOT	78	11,700

DESCRIPTION:	◆ Base Bid or □ Alt.# 2" BORE			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
5	40	LINEAR FOOT	72	2,880

DESCRIPTION:	◆ Base Bid or □ Alt.# IRRIGATION ZONE			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
6	18	EACH	2,350	42,300

DESCRIPTION:	◆ Base Bid or □ Alt.# BATTURE SAND BERM MATERIAL			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
7	600	CUBIC YARD	43	25,800

DESCRIPTION:	◆ Base Bid or □ Alt.# 419 BERMUDA SOD			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
8	9,100	SQUARE YARD	6	54,600

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



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**UNIT PRICE FORM**

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**BID FOR:** W. Esplanade Beautification Project  
District 5  
JPPW Project No. 2015-006-RB  
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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. Amounts shall be stated in figures and only in figures.

DESCRIPTION:	◆ Base Bid or <input type="checkbox"/> Alt.# SABAL PALM			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> )
9	9	EACH	335	3,015

DESCRIPTION:	◆ Base Bid or <input type="checkbox"/> Alt.# TUSKEGEE CRAPE MYRTLE			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> )
10	67	EACH	622	41,674

DESCRIPTION:	◆ Base Bid or <input type="checkbox"/> Alt.# LITTLE GEM MAGNOLIA			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> )
11	10	EACH	310	3,100

DESCRIPTION:	◆ Base Bid or <input type="checkbox"/> Alt.# BALED PINE STRAW MULCH			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> )
12	1	LUMP SUM	2,450	2,450

DESCRIPTION:	◆ Base Bid or <input type="checkbox"/> Alt.# LANDSCAPE WALL			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> )
13	180	LINEAR FOOT	190	34,200

DESCRIPTION:	◆ Base Bid or <input type="checkbox"/> Alt.# WALL COLUMN			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> )
14	8	EACH	500	4,000

DESCRIPTION:	◆ Base Bid or <input type="checkbox"/> Alt.# 3,000 PSI CONCRETE SIGN/SCULPTURE FOOTER			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> )
15	8	CUBIC YARD	1160	9,280

DESCRIPTION:	◆ Base Bid or <input type="checkbox"/> Alt.# NOT USED			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION ( <i>Quantity times Unit Price</i> )
16				

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

BID BOND

KNOW ALL MEN BY THESE PRESENTS that we, the undersigned,

APC Construction, LLC, 1215 Prytania Street, Suite 405, New Orleans, LA 70130 as PRINCIPAL and

Aegis Security Insurance Company, 2407 Park Drive, Suite 200, Harrisburg, PA 17110

as SURETY, are held and firmly bound unto the Parish of Jefferson, hereinafter called the "OWNER", in the penal sum of:

Five Percent of the Total Bid Price (Base Bid and Any Alternates)

DOLLARS (\$ 5% ) lawful money of the United States, for the payment of which sum well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the Principal has submitted the accompanying Bid dated April 23, 2015, for

WEST ESPLANADE BEAUTIFICATION PROJECT

DISTRICT 5

PUBLIC WORKS PROJECT NO. 2015-006-RB

(Beverly Garden Drive to Orpheum Avenue), Bid Proposal No. 50-00112611

NOW, THEREFORE, if the Principal shall not withdraw said Bid within the period specified therein after the opening of the same or, if no period be specified, within forty-five (45) days after the said opening, and shall within the period specified therefor or, if no period be specified, within twelve (12) days after the prescribed forms are presented to him for signature, enter into a written Contract with the Parish in accordance with the Bid as accepted, and give bond with good and sufficient surety or sureties, as may be required, for the faithful performance and proper fulfillment of such Contract; or in the event of the withdrawal of said Bid within the period specified, or the failure to enter into such Contract and give such bond within the time specified, if the Principal shall pay the Parish the difference between the amount specified in said Bid and the amount for which the Parish may procure the required work or supplies, or both, if the latter be in excess of the former, then the above obligation shall be void and of no effect, otherwise, to remain in full force and virtue.

IN WITNESS WHEREOF, the above bounded parties have executed this instrument under their several seals this 23rd day of April, 2015, the name and corporate seal of each corporate party being hereto affixed and these presents signed by its undersigned representative, pursuant to authority of its governing body.

BID BOND (CONTINUED)

In presence of:

\_\_\_\_\_  
(Individual Principal)

\_\_\_\_\_  
(Business Address, including Zip Code)

\_\_\_\_\_  
(Partnership)

\_\_\_\_\_  
(SEAL)

\_\_\_\_\_  
(Business Address, including Zip Code)

ATTEST:

BY: 

\_\_\_\_\_  
APC Construction, LLC  
(Corporate Principal)

\_\_\_\_\_  
1215 Prytania Street, Suite 405, New Orleans, LA 70130

\_\_\_\_\_  
(Business Address, including Zip Code)

BY: 

\_\_\_\_\_  
AFFIX CORPORATE SEAL  
Keith Porta, President

ATTEST:

  
Kimberly G. Rively, Witness

\_\_\_\_\_  
Aegis Security Insurance Company  
(Corporate Surety)

\_\_\_\_\_  
2407 Park Drive, Suite 200, Harrisburg, PA 17110

\_\_\_\_\_  
(Business Address, including Zip Code)

BY: 

\_\_\_\_\_  
AFFIX CORPORATE SEAL  
Scott Mahorsky, Attorney-In-Fact

Countersigned:

BY:   
Attorney-in-Fact\* Christine A. Hartung

State of Pennsylvania

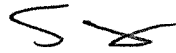
## CONSENT OF SURETY

KNOW ALL MEN BY THESE PRESENTS, that for and in consideration of the sum of \$1.00, lawful money of the United States of America, the receipt whereof is hereby acknowledged, paid the undersigned corporation, and for other valuable consideration, the Aegis Security Insurance Company organized and existing under the laws of the State of PA and licensed to do business in the State of LA certifies and agrees, that if contract for West Esplanade Beautification Project District 5, Public Works Project No. 2015-006-RB, (Beverly Garden Drive to Orpheum Avenue), Bid Proposal No. 50-00112611 for Parish of Jefferson is awarded to APC Construction, LLC

the undersigned Corporation will execute the bond or bonds as required of the contract documents and will become Surety in the full amount set forth in the contract documents for the faithful performance of all obligations of the Contractor.

Signed and sealed this 23rd day of April, 2015.

Aegis Security Insurance Company



\_\_\_\_\_  
Scott Mahorsky  
Attorney-in-Fact,



State of



Louisiana

**James J. Donelon**

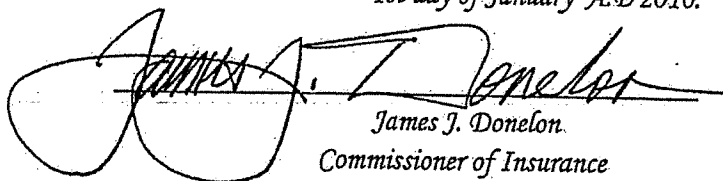
COMMISSIONER OF INSURANCE

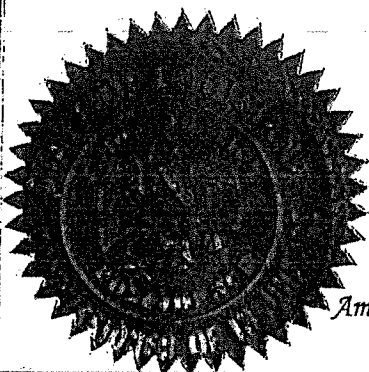
**CERTIFICATE OF AUTHORITY**

Whereas, the AEGIS SECURITY INSURANCE COMPANY located at Pennsylvania has applied for a certificate of authority and made the filings required of such Insurer. Therefore, I, James J Donelon, the undersigned Commissioner of Insurance, do hereby certify that the said AEGIS SECURITY INSURANCE COMPANY is authorized to transact its appropriate business of Burglary and forgery; Fidelity; Fire and allied lines; Health and accident; Home Owners; Liability; Marine and transportation; Miscellaneous; Steam Boiler and Sprinkler Leakage; Surety; Vehicle Insurance in this State, in accordance with the laws thereof. This certificate shall remain in effect until cancelled, suspended, revoked or the renewal thereof refused.

In Testimony Whereof, I hereunto subscribe my name,  
and affix the seal of my office at Baton Rouge this

1st day of January A.D 2010.

  
James J. Donelon  
Commissioner of Insurance



Amended: Original certificate effective date June 27, 1985

**AEGIS SECURITY INSURANCE COMPANY  
POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS, THAT AEGIS SECURITY INSURANCE COMPANY does hereby make, constitute and appoint: **Scott Mahorsky**

**Surety Bond Number:** Bid Bond  
**Principal:** APC Construction, LLC  
**Obligee:** Parish of Jefferson

its true and lawful Attorney-in-Fact, to make, execute and deliver on its behalf surety bonds, undertaking and other instruments of similar nature as follows: **\$2.5 MILLION**

This Power of Attorney is granted and sealed under and by the authority of the following Resolution adopted by the Board of Directors of the Company on the 4th day of February 1993.

**"Resolved,** That the President, any Vice President, the Secretary and any Assistant Secretary appointed for that purpose by the officer in charge of surety operations shall each have authority to appoint individuals as Attorney-in-Fact or under other appropriate titles with authority to execute on behalf of the Company, fidelity and surety bonds and other documents of similar character issued by the Company in the course of its business. On any instrument making or evidencing such an appointment, the signatures may be affixed by facsimile. On any instrument conferring such authority or on any bond or undertaking of the Company, the seal or facsimile thereof may be imposed or fixed or in any other manner reproduced; provided, however, that the seal shall not be necessary to the validity of any such instrument or undertaking."

**"Resolved,** That the signature of each of the following officers; President, Vice President, any Assistant Vice President, any Secretary or Assistant Secretary and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any Certificate relating thereto, appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for the purpose only of executing and attesting bonds and undertaking and other writings upon the Company and any such power required and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or undertaking to which it is attached.

IN WITNESS WHEREOF, AEGIS SECURITY INSURANCE COMPANY has caused its official seal to be hereunto affixed, and these presents to be signed by its President this 19th day of July 2010.

AEGIS SECURITY INSURANCE COMPANY

BY:

*Darleen J. Fritz*  
DARLEEN J. FRITZ  
President



Commonwealth of Pennsylvania     }  
  } s.s.: Harrisburg  
County of Dauphin                         }

On this 19th day of July 2010 before me personally came Darleen J. Fritz to me known, who being by me duly sworn, did depose and say that she is President of AEGIS SECURITY INSURANCE COMPANY, the corporation described herein and which executed the above instrument; that she knows the seal of the said corporation, that the seal affixed to the said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation and that she signed her name thereto by like order.

*Rebecca Liddick*

REBECCA LIDDICK  
Notary Public

My Commission Expires July 25, 2017



I, the undersigned, Assistant Secretary of AEGIS SECURITY INSURANCE COMPANY, a Pennsylvania corporation, DO HEREBY CERTIFY that the foregoing and attached Power of Attorney remains in full force and has not been revoked: and furthermore that the Resolution of the Board of Directors, set forth in the said Power of Attorney, is now in force.

Signed and sealed at the City of Harrisburg, in the Commonwealth of Pennsylvania, dated this 23rd day of April, 2015

*Deborah A. Good*  
DEBORAH A. GOOD  
Secretary





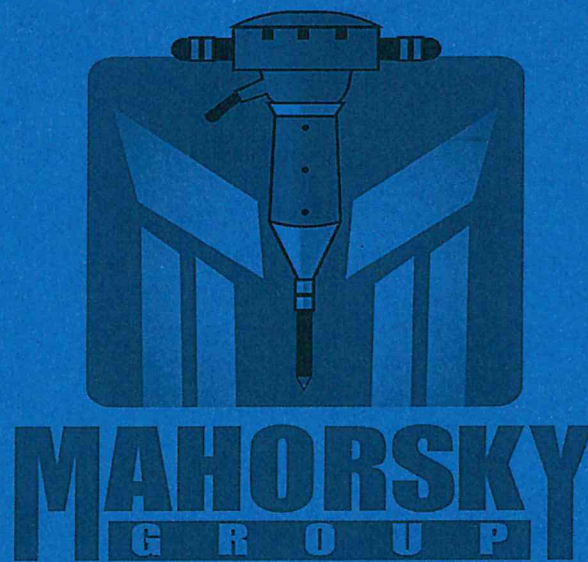
**AEGIS SECURITY INSURANCE COMPANY**  
**STATUTORY STATEMENTS OF ADMITTED ASSETS, LIABILITIES AND CAPITAL AND SURPLUS**  
**DECEMBER 31, 2013 AND 2012**

**ADMITTED ASSETS**

	<u>2013</u>	<u>2012</u>
Bonds, at statement value	\$ 16,702,092	\$ 18,250,907
Stocks:		
Preferred: At fair value	165,360	323,850
At cost	499,768	1,399,251
Common, fair value	13,405,134	15,103,043
Subsidiary, equity basis	<u>14,924,245</u>	<u>14,061,736</u>
	28,994,507	30,887,880
Mortgage loans on real estate	366,447	1,418,571
Real estate, cost less accumulated depreciation:		
Occupied by Company	2,284,797	2,350,672
Held-for-sale	209,000	1,961,900
Cash and short-term investments	33,187,669	18,931,867
Other invested assets	<u>2,072,454</u>	<u>1,880,980</u>
	<u>67,114,874</u>	<u>57,431,870</u>
Total cash and invested assets	<u>83,816,966</u>	<u>75,682,777</u>
Accrued investment income	233,990	261,911
Premiums in course of collection:		
Affiliate:		
American Sentinel Insurance Company	1,393,001	1,069,048
Mobile-Rec., Inc.	510,610	845,335
Other	7,554,973	6,006,571
Reinsurance recoverable on paid losses	1,485,991	1,875,741
Contract surety – funds administration	1,130,348	1,095,773
Federal income tax receivable	0	600,663
Prepaid Insurance Expense	54,120	
Net admitted tax asset	<u>1,679,200</u>	<u>1,687,958</u>
	<u>14,042,234</u>	<u>13,443,000</u>
	<u>\$ 97,859,200</u>	<u>\$ 89,125,777</u>

**LIABILITIES AND CAPITAL AND SURPLUS**

	<u>2013</u>	<u>2012</u>
Losses	\$ 13,870,615	\$ 14,868,146
Loss adjustment expenses	2,932,293	1,561,765
Reinsurance payable on paid loss and loss adjustment expenses:		
Affiliate, American Sentinel Insurance Company	935,564	599,438
Other		
Commissions payable	408,592	382,180
Accounts payable and accrued expenses	540,676	459,916
Accrued:		
Taxes, licenses and fees	394,999	427,955
Federal income taxes	262,694	
Unearned premiums	20,036,359	17,592,319
Advance premiums	240,207	207,091
Ceded reinsurance premiums payable	2,811,785	2,270,185
Amounts withheld for account of others	3,790,081	4,995,330
Payable to affiliate, American Sentinel Insurance Company	<u>150,300</u>	<u>1,243,400</u>
Total liabilities	<u>46,374,165</u>	<u>44,607,725</u>
Capital and surplus:		
Common stock, par value \$1.40 per share; 5,000,000 shares authorized; 3,000,000 shares issued and outstanding	4,200,000	4,200,000
Aggregate write-in, special surplus funds		
Paid-in surplus	5,266,827	5,266,827
Unassigned surplus	<u>42,018,208</u>	<u>35,051,225</u>
Total capital and surplus	<u>51,485,035</u>	<u>44,518,052</u>
	<u>\$ 97,859,200</u>	<u>\$ 89,125,777</u>



**Main Office:**  
**2100 Quaker Pointe Drive**  
**Quakertown, PA 18951**  
**Phone: (215) 536-0253 • Fax: (215) 536-0257**

**Branch Offices:**

**Pennsylvania**  
Pittsburgh

**New York**  
Williamsville

**Virginia**  
Norfolk

**South Carolina**  
Charleston



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
08/04/2014

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).

<b>PRODUCER</b> McGriff, Seibels & Williams of Louisiana 3850 North Causeway Blvd. - Suite 1970 Metairie, LA 70002	<b>CONTACT NAME:</b> Katrina Darcey <b>PHONE (A/C, No, Ext):</b> <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> kdarcey@mcgriff.com
<b>INSURED</b> APC Construction, LLC 1215 Prylania Street Suite 405 New Orleans, LA 70130	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Navigators Ins. Company <b>INSURER B:</b> Granite State Insurance Company <b>INSURER C:</b> Lloyds Underwriters <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
	<b>NAIC #</b> 23809

## COVERAGES

CERTIFICATE NUMBER: JT6LS82B

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
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. <input type="checkbox"/> LOC	X X	HO14LIA95668701	07/06/2014	07/06/2015	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 - COM/PO/ AGG \$ 2,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	X X	HO14LIA95668701	07/06/2014	07/06/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$		HO14LIA95668702	08/01/2014	07/06/2015	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y N/A X	WC051754805	08/16/2014	08/16/2015	<input checked="" type="checkbox"/> WC STATU- TORY LIMITS <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
C	<b>Maritime Employers Liability</b>	X X	TMU-405995	08/07/2014	08/07/2015	CSL \$ 1,000,000

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

Certificate Holder is included as an Additional Insured (except for the Worker's Compensation policy) and provided with a Waiver of Subrogation to the extent required by written contract subject to policy terms, conditions, and exclusions with regards to policies certified on this certificate.

With regards to Veterans Blvd. CPZ Beautification Project Phase IX, JPPW Project No. 2014-009-RB, 50-109951

## CERTIFICATE HOLDER

Jefferson Parish Purchasing Department  
200 Derbigny Street  
Suite 4400  
Gretna, LA 70053

## 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

**Tom Schedler**  
**Secretary of State**

**State of  
Louisiana  
Secretary of  
State**



**COMMERCIAL DIVISION**  
**225.925.4704**

Fax Numbers  
225.932.5317 (Admin. Services)  
225.932.5314 (Corporations)  
225.932.5318 (UCC)

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<b>Name</b>	<b>Type</b>	<b>City</b>	<b>Status</b>
APC CONSTRUCTION, LLC	Limited Liability Company	NEW ORLEANS	Active

**Business:** APC CONSTRUCTION, LLC

**Charter Number:** 36308049K

**Registration Date:** 11/9/2006

**Domicile Address**

1215 PRYTANIA STREET  
SUITE 405  
NEW ORLEANS, LA 70130

**Mailing Address**

1215 PRYTANIA STREET  
SUITE 405  
NEW ORLEANS, LA 70130

**Status**

**Status:** **Active**

**Annual Report Status:** **In Good Standing**

**File Date:** 11/9/2006

**Last Report Filed:** 10/16/2014

**Type:** Limited Liability Company

**Registered Agent(s)**

<b>Agent:</b>	KEITH PORTA
<b>Address 1:</b>	1215 PRYTANIA STREET
<b>Address 2:</b>	SUITE 405
<b>City, State, Zip:</b>	NEW ORLEANS, LA 70130
<b>Appointment Date:</b>	11/9/2006

**Officer(s)**

**Additional Officers: No**

<b>Officer:</b>	KEITH PORTA
<b>Title:</b>	Manager
<b>Address 1:</b>	1215 PRYTANIA STREET
<b>Address 2:</b>	SUITE 405
<b>City, State, Zip:</b>	NEW ORLEANS, LA 70130



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**Amendments on File (8)**

<b>Description</b>	<b>Date</b>
Appointing, Change, or Resign of Officer	12/22/2008
Domestic LLC Agent/Domicile Change	8/31/2009
Domestic LLC Agent/Domicile Change	1/19/2010
Domestic LLC Agent/Domicile Change	1/21/2010
Appointing, Change, or Resign of Officer	1/25/2010
Domestic LLC Agent/Domicile Change	1/24/2012
Domestic LLC Agent/Domicile Change	7/13/2012
Domestic LLC Agent/Domicile Change	9/14/2012

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**Request for Taxpayer  
Identification Number and Certification**

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

Name (as shown on your income tax return)  
**APC Construction, LLC**

Business name/disregarded entity name, if different from above  
**APC Construction, LLC**

Check appropriate box for federal tax classification:  
☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate  
☒ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) **S**  
☐ Other (see instructions) ▶

Exemptions (see instructions):  
Exempt payee code (if any) \_\_\_\_\_  
Exemption from FATCA reporting code (if any) \_\_\_\_\_

Address (number, street, and apt. or suite no.)  
**1215 Prytania Street, Ste. 405**  
City, state, and ZIP code  
**New Orleans, LA 70130**

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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

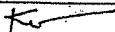
Social security number								

Employer identification number								
3	2	-	0	1	8	6	3	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 on page 3.

Sign Here Signature of U.S. person ▶ 

Date ▶ **4/28/14**

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted. Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.


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## Interactive TIN Session:Interactive Results

This screen provides you with the results of your TIN Match request. The 'Match Indicator' displays a code next to the TIN and name combination. Use the codes below to interpret your results:

- 0 = TIN and Name combination matches IRS records.
- 1 = TIN was missing or TIN not 9-digit numeric.
- 2 = TIN entered is not currently issued.
- 3 = TIN and Name combination does not match IRS records.
- 4 = Invalid TIN Matching request.
- 5 = Duplicate TIN Matching request.
- 6 = TIN and Name combination matches IRS SSN records.
- 7 = TIN and Name combination matches IRS EIN records.
- 8 = TIN and Name combination matches IRS SSN and EIN records.

**Important:** Before leaving this screen, you may want to do a Print Screen of the results. Once you exit this screen, the interactive results will no longer be available for viewing.

Using the TIN Matching system allows you to verify the accuracy of taxpayer TIN and name information prior to submitting information to IRS. Internal Revenue Code 6724 provides any penalties under Section 6721 may be waived if the filer shows the failure to file a correct TIN on an information return was due to reasonable cause and not willful neglect. Filers may prove due diligence and receive a waiver from proposed penalties if they prove the TIN and name combination they submitted matched IRS records. Providing a copy of the Print Screen of your Interactive Results will be considered proof of due diligence.

ID	TIN Type	TIN	Name	Result Code
1	Unknown	203927612	RV CAMS INC	7
2	Unknown	232082171	ATLANTIC TACTICAL INC	7
3	Unknown	320186386	APC CONSTRUCTION LLC	7
4	Unknown	953936623	BENTLEY SYSTEMS INC	7
5	Unknown	208591699	BETTER PUMPS & SOLUTIONS LLC	7
6	Unknown	453615978	MINUTILLO FAMILY HOLDINGS LLC	7
7	Unknown	720741965	GOVERNOR SPECIALISTS INC	7
8	Unknown	810604078	EASY WAY SAFETY SERVICES INC	7
9	Unknown	721215914	PRESTIGE CUSTOMS & AUTOSOUND INC	7
10	Unknown	261187694	THE KUPCAKE FACTORY LLC	7

You may do either of the following:

- Select *Another Tin Matching Request* to check more TIN and Name combinations.
- Select *Done* to return to the TIN Matching home page.

[ANOTHER TIN MATCHING REQUEST](#)
[DONE](#)

[IRS Privacy Policy](#) | [Privacy Notice](#)  
tin-match-rup-webapp (version R-14.1.1)

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[ABOUT LSLBC](#) [CONTACT LSLBC](#)**Related Links:**[Online Search Main Page](#)**Licensing Board's Online Database****Search Results - Contractor Detail**

**Business Name:** APC CONSTRUCTION, LLC ✓  
**Mailing Address:** P.O. Box 55280  
 Metairie, LA 70055  
**Phone Number:** (504) 275-9588  
**Fax Number:** (504) 324-0777  
**Email Address:** [info@apcconstruction.com](mailto:info@apcconstruction.com)  
**Website:** [www.apcconstruction.com](http://www.apcconstruction.com)

**Active Licenses**

<u>Lic#</u>	<u>Type</u>	<u>Status</u>	<u>Effective</u>	<u>Expiration</u>	<u>First Issued</u>
51053	✓ Commercial License Certificate	LICENSED	10/28/2014	02/19/2016	02/19/2009
880270	Residential License Certificate	LICENSED	01/16/2013	01/15/2016	01/15/2009

**Classifications:**

**Class**  
 BUILDING CONSTRUCTION ✓  
 HIGHWAY, STREET AND BRIDGE CONSTRUCTION  
 HEAVY CONSTRUCTION  
 MUNICIPAL AND PUBLIC WORKS CONSTRUCTION  
 SPECIALTY: COASTAL RESTORATION & HABITAT ENHANCEMENT  
 ELECTRICAL WORK (STATEWIDE)  
 MECHANICAL WORK (STATEWIDE)  
 RESIDENTIAL BUILDING CONTRACTOR

**Qual Party** **Valid Parishes**  
 Keith Oneil Porta ALL  
 Keith Oneil Porta ALL  
 Keith Oneil Porta ALL  
 Keith Oneil Porta ALL  
 Keith Oneil Porta ALL  
 Keith Oneil Porta ALL  
 Keith Oneil Porta ALL  
 Keith Oneil Porta ALL

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