

DATE: 4/12/2021

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00133920

JEFFERSON PARISH

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

VENDOR: MINER LTD

BUYER: DABRAHAM

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

As Needed

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

N/A

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

N/A

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: _____

NUMBER: _____

NUMBER: _____

NUMBER: _____

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 68355

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME:	<u>Miner Ltd</u>
SIGNATURE: (Must be signed here)	<u>[Signature]</u>
PRINT OR TYPE NAME:	<u>Donard J Royer</u>
ADDRESS:	<u>850 Sams Av.</u>
CITY, STATE:	<u>New Orleans, LA</u>
TELEPHONE:	<u>504 734-1155</u>
EMAIL ADDRESS:	<u>droyer@minercorp.com</u>

ZIP: 70123
FAX: 504 733-5246

TOTAL PRICE OF ALL BID ITEMS: \$ 6160.00

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00133920

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	32.00	HR	<p>Three (3) year contract (labor only) to troubleshoot and repair automatic and manual roll-up doors for the Department of General Services</p> <p>0010 - DOORS - OVERHEAD ROLL-UP THREE (3) YEAR LABOR ONLY CONTRACT DEPARTMENT OF GENERAL SERVICES CONTRACT START: 8-29-21</p> <p>PROVIDE A THREE (3) YEAR LABOR ONLY CONTRACT TO FURNISH ALL NECESSARY LABOR, MATERIALS, TRANSPORTATION, SUPERVISION AND EQUIPMENT NECESSARY TO TROUBLESHOOT AND REPAIR VARIOUS MANUFACTURERS AND STYLES OF AUTOMATIC AND MANUAL ROLL-UP DOORS AT VARIOUS PARISH BUILDINGS, FOR THE DEPARTMENT OF GENERAL SERVICES PER THE ATTACHED SPECIFICATIONS.</p> <p>***BELOW IS THE FIRST ITEM TO BE BID***</p> <p>TECHNICIAN NORMAL HOURLY RATE 7:00 AM TO 5:00 PM MONDAY THRU FRIDAY</p>	130.00	4160. ⁰⁰
2	1.00	HR	<p>0020 - HELPER NORMAL HOURLY RATE 7:00 AM TO 5:00 PM MONDAY THRU FRIDAY</p>	125.00	125. ⁰⁰
3	1.00	HR	<p>0030 - TECHNICIAN BEFORE/AFTER HOURS WEEKDAY RATE 5:00 PM TO 12:00 AM MONDAY THRU THURSDAY & 12:00 AM TO 7:00 AM TUESDAY THRU FRIDAY</p>	250. ⁰⁰	250. ⁰⁰
4	1.00	HR	<p>0040 - HELPER BEFORE/AFTER HOURS WEEKDAY RATE 5:00 PM TO 12:00 AM MONDAY THRU THURSDAY & 12:00 AM TO 7:00 AM TUESDAY THRU FRIDAY</p>	225.00	225. ⁰⁰
5	1.00	HR	<p>0050 - TECHNICIAN AFTER HOURS WEEKEND RATE FRIDAY 5:00 PM TO 12:00 AM SATURDAY AND SUNDAY ALL DAY AND MONDAY 12:00 AM TO 7:00 AM</p>	325.00	325. ⁰⁰

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00133920

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
6	1.00	HR	AUTHORIZATION REQUIRED 0060 - HELPER AFTER HOURS WEEKEND RATE FRIDAY 5:00 PM TO 12:00 AM SATURDAY AND SUNDAY ALL DAY AND MONDAY 12:00 AM TO 7:00 AM	325 ⁰⁰	325 ⁰⁰
7	1.00	HR	AUTHORIZATION REQUIRED 0070 - TECHNICIAN HOLIDAY RATE 12:00 AM TO 11:59 PM	375 ⁰⁰	375 ⁰⁰
8	1.00	HR	0080 - HELPER HOLIDAY RATE 12:00 AM TO 11:59 PM	375 ⁰⁰	375 ⁰⁰



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/28/2021

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 Hylant - Toledo 811 Madison Avenue Toledo OH 43604	CONTACT NAME Courtney Cox PHONE (A/C, No, Ext): 419-724-8725 FAX (A/C, No): 419-255-7557 E-MAIL Address: OnPointCertificates@Hylant.com
INSURED Concentric, LLC dba Southern States Storage & Handling c/o OnPoint Group, LLC 3235 Levis Commons Blvd. Perrysburg OH 43551	INSURER(S) AFFORDING COVERAGE INSURER A: Travelers Prop Cas Co of Amer INSURER B: Charter Oak Fire Insurance Co INSURER C: Allied World Assurance Co Inc (US) INSURER D: Phoenix Insurance Company INSURER E: INSURER F:
ONPOGRO-01	NAIC # 25674 25615 19489 25623

COVERAGES

CERTIFICATE NUMBER: 1946920689

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	ADDITIONAL SUBROGATION	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	X COMMERCIAL GENERAL LIABILITY X CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR X XCU Coverage X Contractual Liab GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y Y6302J330306COF21	3/14/2021	3/14/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 \$
D	X AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY X	Y	Y Y8102J330306PHX21	3/14/2021	3/14/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	X UMBRELLA LIAB X EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$ 0	Y	CUP0N8622902114	3/14/2021	3/14/2022	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
A	X WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y	Y UB0K6392772114G	3/14/2021	3/14/2022	X PER STATUTE 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 Each Condition Limit Aggregate Limit \$2,000,000 \$2,000,000
C	Pollution Liability		0311-7536	3/14/2021	3/14/2022	

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

Commercial general liability and automobile policies include a blanket additional insured on a primary and non-contributory basis where required by contract. Umbrella coverage includes additional insureds if provided in the underlying coverage. Umbrella policy is follow form. A separate \$10,000,000 General Aggregate Limit applies on a Per Project basis when required by written contract. 30 days notice of cancellation applies to designated entities. Waiver of subrogation applies per the general liability, automobile and workers compensation policies when required by written contract. Entities listed below are included as additional insured when required by written contract.

BID NUMBER # 50-00133920

See Attached...

CERTIFICATE HOLDER

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.

JEFFERSON PARISH PURCHASING DEPARTMENT
200 DERBIGNY ST
STE. 4400
GRETNA LA 70053

AUTHORIZED REPRESENTATIVE

M. J. St.



ADDITIONAL REMARKS SCHEDULE

AGENCY Hylant - Toledo		NAMED INSURED Concentric, LLC dba Southern States Storage & Handling c/o OnPoint Group, LLC 3235 Levis Commons Blvd. Perrysburg OH 43551
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

JEFFERSON PARISH PURCHASING DEPARTMENT

JEFFERSON PARISH, IT'S DISTRICTS DEPARTMENTS AND AGENCIES UNDER THE DIRECTION OF THE PARISH PRESIDENT AND THE PARISH COUNCIL AS ADDITIONAL INSURED