

DATE: 4/27/2018

INVITATION TO BID
THIS IS NOT AN ORDER

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BID NO.: 50-00122968

JEFFERSON PARISH

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

VENDOR: 27118 BLANK BID COPY VENDOR

BUYER: MCamardelle

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	<u>06-25-18</u>
INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK	<u>30 days</u>
INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK	<u>30 days</u>

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 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) _____

*** ALL BIDDERS MUST COMPLETE SECTION BELOW ***	
FIRM NAME: <u>Nolan Power Group LLC</u>	
SIGNATURE: <u>[Signature]</u> (Must be signed here)	TITLE: <u>Technical Sales</u>
PRINT OR TYPE NAME: <u>Sue Diecidue</u>	
ADDRESS: <u>21448 Marion lane</u>	
CITY, STATE: <u>Mandeville, LA</u>	ZIP: <u>70471</u>
TELEPHONE: <u>989 801-5073</u>	FAX: <u>989 801-5001</u>
EMAIL ADDRESS: <u>Sue.Diecidue@nolanpower.com</u>	

TOTAL PRICE OF ALL BID ITEMS: \$ 12,508.00

INVITATION TO BID FROM JEFFERSON PARISH -- continued

BID NO.: 50-00122968

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			FURNISH ALL LABOR, MATERIAL, AND EQUIPMENT NECESSARY TO REMOVE AND REPLACE BATTERIES AT VARIOUS PUMP STATIONS		
1	4.00	EA	0010 -3CC-9M ENERSYS POWERSAFE 6V 200AH FLOODED BATTERIES (REPLACEMENTS FOR FAILED CELLS #1,4,6,10 AT HERO P/S)	\$ 857.00	\$ 2,571.00
2	1.00	EA	0020 -LABOR TO REMOVE AND DISPOSE OF SPENT BATTERIES AND INSTALL 4 JARS OF ENERSYS 3CC-9M BATTERIES AT HER P/S *JOB LOCATION: HERO PUMP STATION 4644 PETERS ROAD HARVEY LA 70058	\$ 1,878.00	\$ 1,878.00
3	2.00	EA	0030 -3DJ-110 C & D 6V 110AH @.8HR RATE TO 1.75VPC FLOODED BATTERIES (REPLACEMENT OF FAILED CELLS #48,51 AT WESTMINSTER P/S)	\$ 1,001.00	\$ 2,002.00
4	1.00	EA	0040 -LABOR TO REMOVE AND DISPOSE OF SPENT BATTERIES AND INSTALL 2 JARS OF C & D 3DJ-110 BATTERIES AT WESTMINSTER P/S *JOB LOCATION: WESTMINSTER PUMP STATION 2050 WATLING DRIVE MARRERO LA 70072	\$ 1,878.00	\$ 1,878.00
5	3.00	EA	0050 -3CC-7M ENERSYS POWERSAFE 6V 150AH FLOODED BATTERIES (REPLACEMENT OF FAILED CELLS #6,43,54)	\$ 767.00	\$ 2,301.00
6	1.00	EA	0060 -LABOR TO REMOVE AND DISPOSE OF SPENT BATTERIES AND INSTALL 3 JARS OF ENERSYS 3CC-7M BATTERIES AT AMES P/S *JOB LOCATION AMES PUMP STATION 5100 ROCHESTER DRIVE MARRERO LA 70072 TO VIEW SITES, CONTACT JAMAL SINGLETON AT 504-349-5037/504-453-9395 CELL	\$ 1,878.00	\$ 1,878.00



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/28/2017

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 Gillis, Ellis & Baker, Inc. 1615 Poydras Street Suite 700 New Orleans LA 70112-1298		CONTACT NAME: Elizabeth McAulay PHONE: (504) 581-3334 (A/C No. Ext): E-MAIL: lmcaulay@gillis.com ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC #		FAX: (504) 587-0766 (A/C No.):
INSURED Nolan Power Group, LLC 21448 Marion Lane Mandeville LA 70471		INSURER A: American Casualty Co of Reading PA 20427C INSURER B: Transportation Ins Co 20494 INSURER C: Continental Insurance Company 35289C INSURER D: Valley Forge Ins Co 20508 INSURER E: American Longshore Mutual Assn INSURER F:		

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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			6050449119	10/1/2017	10/1/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea. occurrence) \$ 100,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Employee Benefits \$ 1,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" 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			6043264414	10/1/2017	10/1/2018	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"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			6050449122	10/1/2017	10/1/2018	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	N/A	6043264431	10/1/2017	10/1/2018	<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
E	USL&H			AIMA0049205	10/1/2017	10/1/2018	E.L. Disease-Each Accident 1,000,000 E.L. Dis Eas Emp/Pol Limit 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Certificate Holder is listed as an additional insured (excluding WC) and provided with a waiver of subrogation when required by written contract. Contractual liability included on the General Liability. General Liability & Automobile Liability policies are on a Primary Non-Contributory basis, as required by written contract with the insured.

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.

AUTHORIZED REPRESENTATIVE

W Anderson Baker III



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Central Bidding Time: Mon May 14, 2018 10:16:37 AM GMT-6

Location: **Mandeville > Louisiana > USA**

Name: **Will Dwyer**

Email: **will.dwyer@nolanpower.com**

Address: **21448 Marion Lane**

Zip code: **70471**

Contact number: **9858015071**

Official Company/Business Name: **Nolan Power Group, LLC**

Is your company/organization registered as a Disadvantaged Business Enterprise (DBE)?: **No**

Is your company owned by a female?: **No**

Is your company owned by a minority?: **No**

Contractor's License Number/Certificate of Responsibility Requirement Number:: **28825**

NIGP Codes: (Commodity code categories) **99255 - Miscellaneous Testing and Calibration Services**

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Central Bidding Time: Mon May 14, 2018 10:16:49 AM GMT-6

Place a Bid for 5000122968 - FURNISH ALL LABOR, MATERIAL, AND EQUIPMENT NECESSARY TO REMOVE AND REPLACE BATTERIES AT VARIOUS PUMP STATIONS

Please enter your best bid proposal for this project

Louisiana Contractor ID#

Enter all information required on the outside of the sealed envelope in the box below

<input type="text"/>	<input type="text"/>

Bid Bond #

Jefferson Parish Vendor #:

Upload Attachment(s)

While this site accepts various file types, sizes and quantities, the preferred method for delivering all of the appropriate and required bid documents is one single scanned PDF file. Vendors submitting bids with multiple uploaded images/photos of bid responses are solely responsible for clarity. If uploaded images/documents are not legible, the bidder's submission will be rejected. Please note all requirements in this bid package for electronic bid submission.

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