

DATE: 5/27/2015

Page: 5

BID NO.: 50-00113367

BID FORM
Non Public Works

All Public Work Projects are required to use the Louisiana Uniform Public Work Bid Form

All prices must be held firm unless an escalation provision is requested in this bid. Jefferson Parish will allow one escalation during the term of the contract, which may not exceed the U.S. Bureau of Labor Statistics National Index for all Urban Consumers, unadjusted 12 month figure. The most recently published figure issued at the time an adjustment is requested will be used. A request must be made in writing by the vendor, and the escalation will only be applied to purchases made after the request is made.

Are you requesting an escalation provision?

YES X NO _____

MAXIMUM ESCALATION PERCENTAGE REQUESTED 2 %

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF 1 year from contract date

For the purposes of comparison of bids when an escalation provision is requested, Jefferson Parish will apply the maximum escalation percentage quoted by the bidder to the period to which it is applied in the bid. The initial price and the escalation will be used to calculate the total bid price. It will be assumed, for comparison of prices only, that an equal amount of material or labor is purchased each month throughout the entire contract.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

next day

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

THIS SECTION MUST BE COMPLETED BY BIDDER:

FIRM NAME: Wesco Gas & Welding Supply, Inc.

ADDRESS: 1132 MacArthur Ave.

CITY, STATE: Harvey, LA 70058-2529 ZIP: _____

TELEPHONE: (504) 368-7908 FAX: (504) 368-5181

EMAIL ADDRESS: Sales@wescoweld.com

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: _____

TOTAL PRICE OF ALL BID ITEMS: \$ _____

AUTHORIZED SIGNATURE: [Signature]

Amanda Craig
Printed Name

TITLE: Sales Administrative Assistant

SIGNING INDICATES YOU HAVE READ AND COMPLY WITH THE INSTRUCTIONS AND CONDITIONS.

NOTE: All bids should be returned with the BID NUMBER and BID OPENING DATE indicated on the outside of the envelope submitted to the Purchasing Department.

DATE: 5/27/2015

INVITATION TO BID FROM JEFFERSON PARISH - continued

Page 6

BID NO.: 50-00113367

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			TWO (2) YEAR CONTRACT FOR THE SUPPLY OF HIGH PURITY GASES FOR THE JEFFERSON PARISH DEPARTMENT OF PUBLIC WORKS-WATER DEPARTMENT		
1	110.00	EA	0010 NITROGEN GAS, EQUAL IN PURITY TO MATHESON PREPURIFIED GRADE (99.998 PER- CENT MIN.) SIZE 1L CYLINDER, 304 CU. FT. (REFILL)	30.00	\$3300.00
2	5.00	EA	0020 HYDROGEN GAS, EQUAL IN PURITY TO MATHESON ULTRA HIGH PURITY GRADE (99.999 PERCENT MIN.) SIZE 1L CYLINDER, 284 CU. FT. (REFILL)	75.00	\$375.00
3	80.00	EA	0030 HELIUM GAS, EQUAL IN PURITY TO MATHESON ULTRA HIGH PURITY GRADE (99.999 PERCENT MIN.) SIZE 1L CYLINDER, 291 CU. FT. (REFILL)	275.00	\$22,000.00
4	5.00	EA	0040 ACETYLENE GAS, ATOMIC ABSORPTION GRADE (99.6 PERCENT MIN.) SIZE 1B CYLINDER, 286 CU. FT. (REFILL)	\$98.00	\$490.00
5	100.00	EA	0050 ARGON GAS, HIGH PURITY GRADE (99.995 PERCENT MIN.) SIZE 1L CYLINDER, 336 CU. FT. (REFILL)	\$75.00	\$7500.00
6	5.00	EA	0060 OXYGEN GAS, ZERO GRADE, SIZE 1L CYLINDER, 337 CU. FT. (REFILL)	\$195.00	\$975.00
7	60.00	CYL	0070 ARGON, LIQUID, ICP GRADE (99.998 PERCENT MIN. PURITY) SIZE NO. 440 (160 LITERS MINIMUM) CU. FT. (REFILL) NOTE: DELIVERY ON ITEM 0070 MUST BE FREQUENT ENOUGH TO ENSURE A CONTINUOUS SUPPLY)	\$220.00	\$17,600.00
8	24.00	MO	0080 MONTHLY DEMURRAGE FOR VENDOR OWNED 160 LITER LIQUID ARGON CYLINDER	see Attached Rates	
9	20.00	ONLY	0090 HYDRO-STATIC TESTING OF PARISH OWNED CYLINDERS	\$15.00	\$300.00
10	1.00	ONLY	0100 REVALVING OF PARISH OWNED CYLINDERS	\$25.50	\$25.50

DATE: 5/27/2015

INVITATION TO BID FROM JEFFERSON PARISH - continued

Page 7

BID NO.: 50-00113367

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
11	20.00	ONLY	0110 CYLINDER PAINTING AND STENCILING OF PARISH OWNED CYLINDERS	\$34.25	\$685.00
12	10.00	ONLY	0120 UNIT COST OF NEW CYLINDERS SOLD OUTRIGHT TO JEFFERSON PARISH	see Attached Rates	
13	10.00	EA	0130 95 PERCENT ARGON GAS, HIGH PURITY GRADE (99.995 PERCENT MIN), 5 PERCENT HYDROGEN (99.999 PERCENT MIN. PURITY) MIXTURE SIZE 1L CYLINDER, 304 CU. FT. (REFILL)	\$95.00	\$950.00
14	24.00	MO	0140 MONTHLY DEMURRAGE FOR 304 CU. FT. MIXTURE OF 95 PERCENT ARGON, 5 PERCENT HYDROGEN VENDOR OWNED CYLINDER (NEW) NOTE: THE TYPICAL TURNAROUND TIME FOR CYLINDER REFILLS IN ITEMS 0010-0060 IS TO BE TWO (2) WEEKS. TURNAROUND TIMES GREATER THAN TWO (2) WEEKS WILL NOT BE ACCEPTABLE	see Attached Rates	

Price Quote for Line #s 8 & 14



WESCO GAS & WELDING SUPPLY, INC.

SALES • SERVICE • ENGINEERING

A Willing, Experienced, Successful, Competitive Organization



American Welding Society
Sustaining Company Member

WESCO Gas & Welding Supply Inc. Demurrage, Hazmat Pricing, Misc. Cylinder Charges, Fuel Surcharge & Labor Rates Sept. 1, 2014

Daily Cylinder Demurrage	.28 per day	Rent \$5.40
Daily Cylinder Demurrage - Spec Gas	.38 per day	\$11.40
Daily Cylinder Demurrage - 435P & 435HPG	.38 per day	\$11.40
Daily Cylinder Demurrage - LG's	2.55 per day	\$76.50
Daily Cylinder Demurrage - P-Banks (Normal Demurrage plus \$1.00 per day) Max of \$99.00	12-P Bank 4.60 per day 10-P Bank 4.00 per day 8-P Bank 3.50 per day 6-P Bank 3.00 per day	\$99.00
Pallets	1.50 per day	\$45.00
Hazmat Charge (cylinder balance at end of the month)	1.60	
Yearly Cylinder Demurrage	82.00 per cyl.	
Yearly Demurrage on Propane & HPG	82.00 per cyl.	
Yearly Demurrage on Spec Gas	90.00 per cyl.	
Cylinder Deposit	275.00 per cylinder	
Delivery Fuel Surcharge/Normal Pick Up and Deliveries	20.00 per order	
Delivery for Oxygen Bulk Tank	30.00 per delivery	
Sales Support	43.50 per hour	
Shop Labor	75.00 per hour 107.50 RUSH	
Torch Labor	46.50 per hour 67.50 RUSH	
Service Call Labor Emergency/After Hours	92.00 per hour 150.00 per hour	
Cutting Table Labor Emergency/After Hours (4 hour minimum)	135.00 per hour 185.00 per hour	

Branch Locations:

ALABAMA • FLORIDA • LOUISIANA • MISSISSIPPI

P.O. Box 10546 • PRICHARD, AL 36610 • 251-457-8681 • WWW.WESCOWELD.COM

Cylinder Size	Cylinder Cost
330	\$350.00
244	\$285.00
150	\$250.00
80	\$150.00
60 CUFT AC	\$175.00
BAC AC	\$132.00
CAC	\$80.00
40 CUFT	\$100.00
20 CUFT	\$65.00

This is the Cost for line item # 12.

Non-Public Works Bid

AFFIDAVIT

STATE OF AlabamaPARISH/COUNTY OF MobileBEFORE ME, the undersigned authority, personally came and appeared: Amanda

Craig, (Affiant) who after being by me duly sworn, deposed and said that
he/she is the fully authorized Signer of Wesco Gas & Welding Supply, Inc.
the party who submitted a bid in response to Bid Number 50-00113367 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.

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.

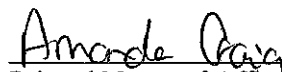
Affiant further said:

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

[The remainder of this page is intentionally left blank.]

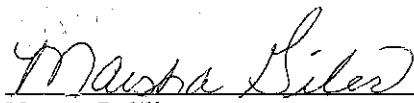
That no part of the contract price received by Affiant was paid or will be paid to any person, corporation, firm, association, or other organization for soliciting the contract, other than the payment of their normal compensation to persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project were in the regular course of their duties for Affiant.

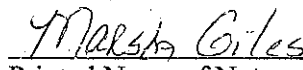

Signature of Affiant


Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 10th DAY OF June, 2015.


Notary Public


Printed Name of Notary

Notary/Bar Roll Number

My commission expires 08/09/2016.

CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF
Wesco Gas & Welding Supply
INCORPORATED.

AT THE MEETING OF DIRECTORS OF Wesco Gas & Welding Supply
INCORPORATED, DULY NOTICED AND HELD ON 6-9-2015,
A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED. IT
WAS:

RESOLVED THAT Amanda Craig, BE AND IS HEREBY
APPOINTED, CONSTITUTED AND DESIGNATED AS AGENT AND ATTORNEY-IN-
FACT OF THE CORPORATION WITH FULL POWER AND AUTHORITY TO ACT ON
BEHALF OF THIS CORPORATION IN ALL NEGOTIATIONS, BIDDING, CONCERNS
AND TRANSACTIONS WITH THE PARISH OF JEFFERSON OR ANY OF ITS AGENCIES,
DEPARTMENTS, EMPLOYEES OR AGENTS, INCLUDING BUT NOT LIMITED TO, THE
EXECUTION OF ALL BIDS, PAPERS, DOCUMENTS, AFFIDAVITS, BONDS, SURETIES,
CONTRACTS AND ACTS AND TO RECEIVE ALL PURCHASE ORDERS AND NOTICES
ISSUED PURSUANT TO THE PROVISIONS OF ANY SUCH BID OR CONTRACT, THIS
CORPORATION HEREBY RATIFYING, APPROVING, CONFIRMING, AND ACCEPTING
EACH AND EVERY SUCH ACT PERFORMED BY SAID AGENT AND ATTORNEY-IN-
FACT.

I HEREBY CERTIFY THE FOREGOING TO BE
A TRUE AND CORRECT COPY OF AN
EXCERPT OF THE MINUTES OF THE ABOVE
DATED MEETING OF THE BOARD OF
DIRECTORS OF SAID CORPORATION, AND
THE SAME HAS NOT BEEN REVOKED OR
RESCINDED.

Ving McCall
SECRETARY-TREASURER

6-10-15
DATE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/02/2015

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 Willis of Alabama, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	CONTACT NAME:		
	PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378 E-MAIL ADDRESS: certificates@willis.com		
INSURED WESCO Gas & Welding Supply, Inc. P O Box 10546 Prichard, AL 36610	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Indemnity Insurance Company of North America		43575
	INSURER B: ACE American Insurance Company		22667
	INSURER C: Bridgefield Employers Insurance Company		10701
	INSURER D:		
	INSURER E:		
INSURER F:			

COVERAGES

CERTIFICATE NUMBER: W945078

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			D35839847	01/01/2015	01/01/2016	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$ 2,000,000
<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							PRODUCTS - COMP/OP AGG \$ 2,000,000
OTHER:							\$
B	AUTOMOBILE LIABILITY			H08186170	01/01/2015	01/01/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	<input type="checkbox"/> DED	<input type="checkbox"/> RETENTION \$					\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			0830-53272	01/01/2015	01/01/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input type="checkbox"/> N	N/A				E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 500,000
							E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: Bid #50-00113367 - Two (2) year contract for the supply of high purity gases for the Jefferson Parish Department of Public Works - Water Department.

CERTIFICATE HOLDER

CANCELLATION

The Parish of Jefferson, its Districts, Departments and Agencies under the direction of the Parish President and the Parish Council
200 Derbigny Street
General Government Building, Suite 4400
Gretna, LA 70053

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

John S. Parker

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