

SEALED BID ENCLOSED

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

BID: Bid No. 50-00143195
Lafreniere Park Healthtrak Reconstruction
3000 Downs Blvd., Metairie, LA 70003
Project No. 2022-016-RB
Department of Capital Projects

BID DUE: Tuesday, September 26, 2023 until 2:00 PM



FROM: BARRIERE CONSTRUCTION CO., L.L.C.
Construction Group
308 Woodland Drive
LaPlace, LA 70068
Office: 504-581-7283 Fax: 504-569-3100

LOUISIANA CONTRACTOR LICENSE NO.: 6276

LOUISIANA UNIFORM PUBLIC WORK BID FORM

TO: Jefferson Parish
Purchasing Department
200 Derbigny Street, Suite 4400
Gretna, Louisiana 70053

(Owner to provide name and address of owner)

BID FOR: Lafreniere Park Healthtrak Reconstruction
Jefferson Parish, LA
Project No. 2022-016-RB
JP Bid No. 50-00143195

(Owner to provide name of project and other identifying information)

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: T. Baker Smith, LLC and dated:

July 2023.

(Owner to provide name of entity preparing bidding documents.)

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) Addenda 1 (09/12/2023), Addenda 2 (09/14/2023),
Addenda 3 (09/21/2023)

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:

Four million, Six Hundred Seventy One Thousand
Nine Hundred Fifteen Dollars and Zero Cents Dollars (\$ 4,671,915.00)

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 (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$)

Alternate No. 2 (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$)

Alternate No. 3 (Owner to provide description of alternate and state whether add or deduct) for the lump sum of:

N/A Dollars (\$)

NAME OF BIDDER: Barriere Construction Co., L.L.C.

ADDRESS OF BIDDER: 308 Woodland Drive, LaPlace, LA 70068 Office: 504-581-7283 Fax: 504-569-3100

LOUISIANA CONTRACTOR'S LICENSE NUMBER: 6276

NAME OF AUTHORIZED SIGNATORY OF BIDDER: Matthew Woods

TITLE OF AUTHORIZED SIGNATORY OF BIDDER: Vice President - Construction Operations

SIGNATURE OF AUTHORIZED SIGNATORY OF BIDDER **: 

State of Incorporation: Louisiana

DATE: 09/26/2023

THE FOLLOWING ITEMS ARE TO BE INCLUDED WITH THE SUBMISSION OF THIS LOUISIANA UNIFORM PUBLIC WORK BID FORM:

* 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.

** **A CORPORATE RESOLUTION OR WRITTEN EVIDENCE** of the authority of the person signing the bid for the public work as prescribed by LA R.S. 38:2212(B)(5).

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
Purchasing Department
200 Derbigny Street, Suite 4400
Gretna, Louisiana 70053

(Owner to provide name and address of owner)

BID FOR: Lafreniere Park Healthtrak Reconstruction
Jefferson Parish, LA
Project No. 2022-016-RB
JP Bid No. 50-00143195

(Owner to provide name of project and other identifying information)

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:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - REMOVAL OF STRUCTURES AND OBSTRUCTIONS			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
202-01-00100	1	Lump Sum	25,000.00	25,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - REMOVAL & DISPOSAL OF ASPHALT PAVEMENT (FULL DEPTH) (VARIABLE THICKNESS) (INCLUDING RUBBER OVERLAY)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
202-02-02020	10,015	Square Yard	40.00	400,600.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - REMOVAL & DISPOSAL OF CONCRETE SIDEWALKS (VARIABLE THICKNESS)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
202-02-06100	140	Square Yard	49.00	6,860.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - REMOVAL & DISPOSAL OF INCIDENTAL CONCRETE PAVING (VARIABLE THICKNESS)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
202-02-06102	80	Square Yard	39.00	3,120.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - REMOVAL OF CONCRETE CURBS (ALL TYPES)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
202-02-06140	135	Linear Foot	30.00	4,050.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - EXCAVATION AND EMBANKMENT			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
203-05-00100	1	Lump Sum	138,000.00	138,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - TEMPORARY EROSION CONTROL			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
204-01-00100	1	Lump Sum	25,000.00	25,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - CLASS II BASE COURSE (610 LIMESTONE) (NET SECTION)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
302-01-00300	2,715	Cubic Yard	270.00	733,050.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - ASPHALT CONCRETE WEARING COURSE (LEVEL A)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
502-01-00100 (A)	840	Ton	572.00	480,480.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - ASPHALT CONCRETE BINDER COURSE (LEVEL A)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
502-01-00100 (B)	840	Ton	850.00	714,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - CONCRETE WALK (5" THICK)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
706-01-00200	135	Square Yard	200.00	27,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - INCIDENTAL CONCRETE PAVING (5" THICK) (MISCELLANEOUS SLABS)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
706-03-00200	100	Square Yard	250.00	25,000.00

Wording for "DESCRIPTION" is to be provided by the Owner

All quantities are estimated. The contractor will be paid upon actual quantities as verified by Owner.

LOUISIANA UNIFORM PUBLIC WORK BID FORM

UNIT PRICE FORM

TO: Jefferson Parish
Purchasing Department
200 Derbigny Street, Suite 4400
Gretna, Louisiana 70053

(Owner to provide name and address of owner)

BID FOR: Lafreniere Park Healthtrak Reconstruction
Jefferson Parish, LA
Project No. 2022-016-RB
JP Bid No. 50-00143195

(Owner to provide name of project and other identifying information)

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:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - DETECTABLE WARNING SURFACE			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
706-04-00200	8	Each	220.00	1,760.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - INTEGRAL CONCRETE CURB (ALL TYPES)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
707-01-00100	135	Linear Foot	90.00	12,150.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - CONCRETE CURBING (8" WIDE, 5" THICK)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
707-02-00100	21,085	Linear Foot	43.00	906,655.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - SLAB SODDING (MATCH EXISTING)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
714-01-00100	5,885	Square Yard	18.00	105,930.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - ARBORIST AND TREE PROTECTION SERVICES			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
719-04-00100	1	Lump Sum	150,000.00	150,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - TREE PROTECTION FENCING			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
719-04-00200	20,000	Linear Foot	10.00	200,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - ROOT PRUNING			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
719-04-00300	20	Each	5,000.00	100,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - GRANULAR MATERIAL (VEHICULAR MEASUREMENT)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
723-02-00100	500	Cubic Yard	210.00	105,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - MOBILIZATION			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
727-01-00100	1	Lump Sum	425,000.00	425,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - CONSTRUCTION LAYOUT			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
740-01-00100	1	Lump Sum	45,000.00	45,000.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - TRASH RECEPTACLE			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
NS-1-01	11	Each	3,300.00	36,300.00

DESCRIPTION:	<input checked="" type="checkbox"/> Base Bid or <input type="checkbox"/> Alt.# ____ - SAW CUTTING (FULL DEPTH)			
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)
NS-2-01	140	Linear Foot	14.00	1,960.00

Wording for "DESCRIPTION" is to be provided by the Owner

All quantities are estimated. The contractor will be paid upon actual quantities as verified by Owner.

**ACTION IN LIEU OF MEETING OF THE DIRECTORS OF
BARRIERE CONSTRUCTION CO., L.L.C.**

The undersigned, being all of the members of the Board of Directors of Barriere Construction Co., L.L.C., a Louisiana Limited Liability Company (the “*Company*”), do hereby, pursuant to applicable Louisiana statute, give this written consent (a) to the dispensation of an annual meeting of the Board of Directors of the Company, and (b) to the taking of the following actions, such actions to have the same force and effect had a meeting been duly called and held:

I. ELECTION OF OFFICERS

RESOLVED, that effective January 1, 2023, elections of officers are terminated, and the following persons be and hereby are elected to serve as officers of the Company in the capacities set forth opposite their respective names until the earlier of (a) any such officer submits a resignation letter (b) any such officer’s employment with the Company is terminated or (c) such time as any such officer’s successor is appointed by the Board of Directors:

Jason Latiolais	President / CEO
Heath Wahden	Executive Vice President / Secretary
Matthew Woods	Vice President - Construction Operations
Kevin Ervin	Vice President - Asphalt Plants and Materials
Justin White	Vice President - Asphalt Operations
Berry Tucker	Vice President - Equipment and Facilities
Joseph Kennedy	Asphalt Plants and Materials Group Manager
Michael Ryan	Construction Group Manager – Heavy Civil
Jerome Bettinelli	Construction Group Manager – Industrial
Jeffrey Romig	Baton Rouge Asphalt Group Manager
Justin Taylor	North Shore Asphalt Group Manager
Zachary Jourdan	South Shore Asphalt Group Manager

FURTHER RESOLVED, that the appropriate officers of the Company above and following below be and each of them hereby is authorized to execute and deliver such agreements, contracts, documents, certificates and other instruments, under the seal of the Company if required, for the purpose of conducting the Company’s business, including without limitation selling and purchasing products and to take such other action, as they may deem necessary, advisable, convenient or appropriate to carry out and fully perform duties incident to the office or offices so appointed, and such other duties as may be prescribed by the Board of Directors from time to time.

David C. Lewis	Assistant Secretary
David M. Toolan	Assistant Secretary
Michael F. Deaton	Assistant Secretary

II. REMOVALS

FURTHER RESOLVED, that any current officers of the Company not elected in the foregoing resolution are hereby removed.

III. MISCELLANEOUS

FURTHER RESOLVED, that all actions previously taken by any officer of the Company appointed hereunder in his/her capacity as such officer be, and each of them hereby is, adopted, ratified, confirmed and approved in all respects as the authorized acts and deeds of the Company;

FURTHER RESOLVED, that this resolution can be executed in multiple counterparts and that each counterpart taken together shall constitute a complete and duly executed original hereof, and that a facsimile or other copy of this resolution shall be legal and binding the same as an executed original hereof; and

FURTHER RESOLVED, that each undersigned agrees that electronic signatures, whether digital or encrypted, of the Board of Directors are intended to authenticate this consent and to have the same force and effect as manual signatures. As used in the previous sentence, the term "electronic signatures" means any electronic sound, symbol or process attached to or logically associated with this consent and executed and adopted by a member of the Board of Directors with the intent to sign such

DocuSigned by:

John Rothering

59BE90AE2FBA4D0...

John Rothering

DocuSigned by:

John Keating

60B00A7A9D804EA...

John J. Keating

Public Works Bid

AFFIDAVIT

STATE OF Louisiana

PARISH/COUNTY OF St. John the Baptist

BEFORE ME, the undersigned authority, personally came and appeared: _____

Matthew Woods, (Affiant) who after being by me duly sworn, deposed and said that
Vice President - Barriere Construction
he/she is the fully authorized Construction Operations of Co., L.L.C. (Entity),
the party who submitted a bid in response to Bid Number 50-00143195, 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 X 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 _____ there are **NO** campaign contributions made which would require disclosure under Choice A of this section.

Affiant further said:

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

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.

Affiant further said:

Affiant personally has not been convicted of, nor has he/she entered into a plea of guilty or nolo contendere to any of the crimes or equivalent federal crimes listed below. No individual partner, incorporator, director, manager, officer, organizer, or member, who has a minimum of a ten percent ownership in the Bidding Entity, has been convicted of, or has entered a plea of guilty or nolo contendere to any of the crimes or equivalent federal crimes listed below. A conviction of or plea of guilty or nolo contendere to the following state crimes or equivalent federal crimes shall permanently bar any person or the bidding entity from bidding on public projects:

- (a) Public bribery (R.S. 14:118)
- (b) Corrupt influencing (R.S. 14:120)
- (c) Extortion (R.S. 14:66)
- (d) Money laundering (R.S. 14:230)

A conviction of or plea of guilty or nolo contendere to the following state crimes or equivalent federal crimes shall bar any person or the bidding entity from bidding on public projects for a period of five years from the date of conviction or from the date of the entrance of the plea of guilty or nolo contendere:

- (a) Theft (R.S. 14:67)
- (b) Identity Theft (R.S. 14:67, 16)
- (c) Theft of a business record (R.S. 14:67.20)
- (d) False accounting (R.S. 14:70)
- (e) Issuing worthless checks (R.S. 14:71)
- (f) Bank fraud (R.S. 14:71.1)
- (g) Forgery (R.S. 14:72)
- (h) Contractors; misapplication of payments (R.S. 14:202)
- (i) Malfeasance in office (R.S. 14:134)

The five-year prohibition provided for in this section shall apply only if the crime was committed during the solicitation or execution of a contract or bid awarded pursuant to these provisions. If evidence is submitted substantiating that a false attestation has been made and the project must be readvertised or the contract cancelled, the awarded entity making the false attestation shall be responsible to the public entity for the costs of rebidding, additional costs due to increased costs of bids and any and all delay costs due to the rebid or cancellation of this project.

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

Affiant further said:

- (1) Entity is registered and participates in a status verification system to verify that all employees in the State of Louisiana are legal citizens of the United States or are legal aliens.
- (2) Entity shall continue, during the term of the contract, to utilize a status verification system to verify the legal status of all new employees in the State of Louisiana.
- (3) Entity shall require all subcontractors to submit to the Entity a sworn affidavit verifying compliance with statements (1) and (2).



Signature of Affiant

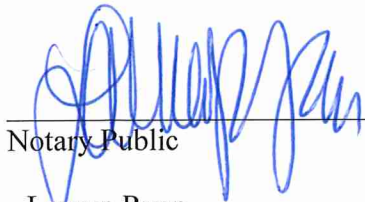
Matthew Woods

V.P. - Construction Operations

Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 20th DAY OF September, 2023.



Notary Public

Lauren Ryan

Printed Name of Notary

Bar Roll No. 35349

Notary/Bar Roll Number



My commission expires issued for life.

Contributions made by Barriere Construction Co., L.L.C.

N/A		
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Contributions made personally by Bertrand A. Wilson

Committee to Elect Chris Cox	10/20/2020	\$1,000.00
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AFFIDAVIT OF USE OF STATUS VERIFICATION SYSTEM

PURSUANT TO La. R.S. 38:2212.10C, a private employer shall not bid on or otherwise contract with a public entity for the physical performance of services within the state of Louisiana unless the private employer verifies in a sworn affidavit that the private employer is registered with, participates in, and utilizes the status verification system required by La. R.S. 38:2212.10B(2), known as the "E-Verify" program, in accordance with federal rules and regulations pertaining to E-Verify.

Name of Private Employer: Barriere Construction Co., L.L.C.

Name of Authorized Agent: Matthew Woods, V.P. - Construction Operations

Mailing Address: 308 Woodland Drive, LaPlace, Louisiana 70068

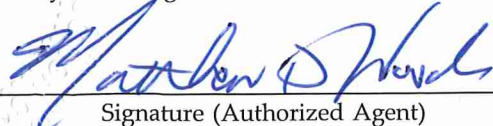
ATTESTATION

I hereby attest that Barriere Construction Co., L.L.C. :
(name of private employer)

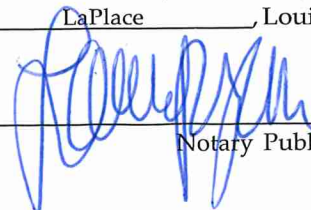
1. Is registered with and participates in the status verification system to verify that all new employees in the state of Louisiana are legal citizens of the United States or are legal aliens.
2. Will continue, during the term of the contract, to utilize the status verification system to verify the legal status of all new employees in the state of Louisiana.
3. Will require all subcontractors to submit an affidavit verifying that the subcontractor is registered with, participates in, and utilizes the status verification system to verify the legal status of all new employees in the State of Louisiana.

CERTIFICATE OF ACCURACY:

I hereby certify the that the information herein is true and correct to the best of my knowledge, information, and belief.


Signature (Authorized Agent)
Matthew Woods, V.P. - Construction Operations

Sworn To And Subscribed, before me, this 20th day of September
20 23, in LaPlace, Louisiana.


Notary Public

Lauren Ryan
Bar Roll No. 35349
Issued for life



NON-COLLUSION DECLARATION

A sworn statement shall be submitted in the form of an affidavit as indicated below, executed, and sworn to by the bidder before persons authorized by laws of the State to administer oaths.

Affidavit

State Project Number: n/a

Name of Project: Jefferson Parish - Bid No. 50-00143195, Lafreniere Park Healthtrak Reconstruction, 3000 Downs Blvd., Metairie, LA 70003, Project No. 2022-016-RB, Department of Capital Projects

Parish: Jefferson

Barriere Construction Co., L.L.C.

(an individual)
(a partnership)
(a corporation)

certify that:

(1) That affiant 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

(2) 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.

Signed 

(an individual)
(a partnership)
(a corporation)

By Matthew Woods

Title Vice President - Construction Operations

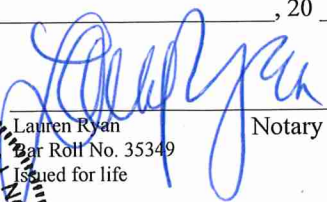
Parish or county St. John the Baptist

State of Louisiana

Subscribed and sworn to before me this 20th day of September, 20 23.

My commission expires the _____ day of _____ issued for life, 20 ____.




Lauren Ryan
Bar Roll No. 35349
Issued for life

Notary Public

Spaff 6 September 2001



State Licensing Board for Contractors

This is to Certify that:

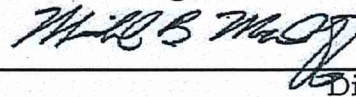
BARRIERE CONSTRUCTION CO., L.L.C.
308 Woodland Drive
La Place, LA 70068

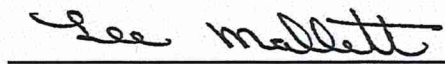
is duly licensed and entitled to practice the following classifications


BUILDING CONSTRUCTION; HEAVY CONSTRUCTION; HIGHWAY, STREET AND BRIDGE CONSTRUCTION;
MUNICIPAL AND PUBLIC WORKS CONSTRUCTION; SPECIALTY: RIGGING, HOUSE MOVING, WRECKING
AND DISMANTLING



Witness our hand and seal of the Board dated,
Baton Rouge, LA 28th day of March 2021


Director


Chairman


Treasurer

Expiration Date: March 27, 2024

License No: 6276

This License Is Not Transferrable

Request for Taxpayer Identification Number and Certification

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

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. BARRIERE CONSTRUCTION CO., L.L.C.		
2 Business name/disregarded entity name, if different from above		
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► S Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ►	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
5 Address (number, street, and apt. or suite no.) See instructions. 308 Woodland Drive	Requester's name and address (optional)	
6 City, state, and ZIP code LaPlace, LA 70068		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-				-		
or									
Employer identification number									
6	1	-	0	6	2	4	0	4	7

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 for Part II, later.

Sign Here	Signature of U.S. person ► 	Date ► 09/26/2023
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/18/2023

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 Liberty Mutual Insurance Co. National Insurance East 500 N 3rd St, Suite 300 Wausau, WI 54403 www.LibertyMutual.com	CONTACT NAME: Valerie Reece	
	PHONE (A/C, No, Ext): 513-867-3822 FAX (A/C, No):	
	E-MAIL ADDRESS: Oldcastle.certs@LibertyMutual.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Liberty Mutual Fire Insurance Company	23035
	INSURER B: Liberty Insurance Corporation	42404
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 76355142 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"/> Primary/Non-Contributory <input checked="" type="checkbox"/> Separation of Insured GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TB2-C81-004095-113 XCU Coverage Included	9/1/2023	9/1/2024	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$50,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	AS2-C81-004095-123 AS2-C81-054502-523 Physical Damage only: Comprehensive Ded \$10,000 Collision Ded \$10,000	9/1/2023	9/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 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 <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> N/A	WA7-C8D-004095-023 All except OH, ND, WA, WY WC7-C81-004095-013 WI, MN	9/1/2023	9/1/2024	<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)

RE: Project: Bid No. 50-00143195 Lafreniere Park Healthtrak Reconstruction - Department of Capital Projects - Project No. 2022-016-RB.
Jefferson Parish, its Districts, Departments and Agencies under the direction of the Parish President and the Parish Council are listed as additional insured with regards to the general liability and automobile liability policies, on a primary and non-contributory basis, where required by written contract. Waiver of subrogation is included in favor of the additional insured, where required by written contract, and where applicable by law.

CERTIFICATE HOLDER

CANCELLATION

Jefferson Parish
Purchasing Department
200 Derbigny Street, 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

Valerie Reece

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