

DATE: 11/07/2024

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00146606

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

VENDOR: 27118 BLANK BID COPY VENDOR

PURCHASING SPECIALIST:
SDUMAS

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

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

1 week
2 weeks
2 weeks

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: _____

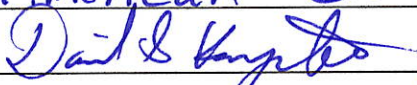
NUMBER: _____

NUMBER: _____

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

#60735

***** ALL BIDDERS MUST COMPLETE SECTION BELOW *****

| | | | |
|-------------------------------------|---|--------|-------|
| FIRM NAME: | All-American Construction Mgmt | | |
| SIGNATURE: (Must be signed here) |  | TITLE: | Owner |
| PRINT OR TYPE NAME: | Daniel Kempton | | |
| ADDRESS: | 472 Fairfield Ave | | |
| CITY, STATE: | Gretna LA | ZIP: | 70056 |
| TELEPHONE: | (504) 650-0718 | FAX: | () |
| EMAIL ADDRESS: | daniel.kempton.spt@yahoo.com | | |

TOTAL PRICE OF ALL BID ITEMS: \$ 15,495⁰⁰

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00146606

SEALED BID

| ITEM NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES | UNIT PRICE QUOTED | TOTALS |
|----------------|----------|-----|---|-------------------------|-------------------------|
| 1 | 1.00 | JOB | <p>LABOR, MATERIALS, AND EQUIPMENT NECESSARY TO RESTRIPE PARKING LOT AT BONNABEL BOAT LAUNCH FOR JEFFERSON PARISH RECREATION DEPARTMENT</p> <p>0001-BONNABEL BOAT LAUNCH PARKING LOT RESTRIPING. LABOR, MATERIALS & EQUIPMENT TO RESTIPE PARKING LOT</p> <p>****SEE ATTACHED SPECS****</p> <p>*****NOTE*****</p> <p>IF A SITE VISIT IS NEEDED PLEASE CONTACT BRENT GRIFFIN AT 504-349-5000 OR 504-419-4415 OR VIA EMAIL AT BRENT.GRIFFIN@JEFFPARISH.GOV *****</p> <p>SITE LOCATION: BONNABEL BOAT LAUNCH 1600 BONNABEL BLVD. METAIRIE, LA 70005</p> | \$ 15,495 ⁰⁰ | \$ 15,495 ⁰⁰ |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/06/2024

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 Bowles & Associates, Inc. 2804 Belle Chasse Hwy Gretna, LA 70053 | CONTACT NAME: | | |
| | PHONE (A/C, No, Ext): 504-362-0922 | FAX (A/C, No): 504-362-8722 | |
| INSURED All American Construction Management LLC 472 FAIRFIELD AVE GRETNA, LA 70056 | INSURER(S) AFFORDING COVERAGE | | NAIC # |
| | INSURER A: Western world | | |
| | INSURER B: Evanston | | |
| | INSURER C: Stonetrust | | |
| | INSURER D: PROGRESSIVE | | |
| | INSURER E: | | |
| 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 INSR | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|---|--|--|---------------|-------------------------|--------------------------------|---|
| A | GENERAL LIABILITY | | | 3AA834375 | 10/14/24 | 10/14/25 | EACH OCCURRENCE \$ 1,000,000 |
| | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY | | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 | | | | |
| | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | | MED EXP (Any one person) \$ 5,000 | | | | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | PERSONAL & ADV INJURY \$ 1,000,000 | | | | |
| | <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | | | | GENERAL AGGREGATE \$ 2,000,000 | |
| D | AUTOMOBILE LIABILITY | | | 989398520 | 11/14/24 | 05/14/25 | PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| | <input type="checkbox"/> ANY AUTO | | POLLUTION \$ 1,000,000 | | | | |
| | <input type="checkbox"/> ALL OWNED AUTOS | <input checked="" type="checkbox"/> SCHEDULED AUTOS | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 | | | | |
| | <input checked="" type="checkbox"/> HIRED AUTOS | <input type="checkbox"/> NON-OWNED AUTOS | BODILY INJURY (Per person) \$ | | | | |
| B | UMBRELLA LIAB | <input checked="" type="checkbox"/> OCCUR | | EZXS3176266 | 10/14/24 | 10/14/25 | BODILY INJURY (Per accident) \$ |
| | <input checked="" type="checkbox"/> EXCESS LIAB | <input type="checkbox"/> CLAIMS-MADE | PROPERTY DAMAGE (Per accident) \$ | | | | |
| | DED RETENTION \$ | | MED PAY \$ 5,000 | | | | |
| | | | EACH OCCURRENCE \$ 2,000,000 | | | | |
| C | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N | N/A | WCV0034178 | 02/22/24 | 02/22/25 | AGGREGATE \$ 2,000,000 |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | | | | | | |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | |
| | | | | | | | WC STATUTORY LIMITS <input checked="" type="checkbox"/> OTH-ER <input type="checkbox"/> |
| | | | | | | | 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 (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER**CANCELLATION**All American Construction Management LLC
472 FAIRFIELD AVE
GRETNA, LA 70056

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

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