

**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 \_\_\_\_\_ NO X

MAXIMUM ESCALATION PERCENTAGE REQUESTED 0 %

INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF 4/23/24.

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

7 Days

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

8656

**THIS SECTION MUST BE COMPLETED BY BIDDER:**

FIRM NAME: Grand Isle Shipyard, LLC

ADDRESS: 18838 Highway 3235

CITY, STATE: Galliano, LA

ZIP: 70354

TELEPHONE: ( 985 ) 475-5238

FAX: ( 985 ) 475-7014

EMAIL ADDRESS: proposals@gisy.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 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: Addendum No.1

NUMBER: \_\_\_\_\_

NUMBER: \_\_\_\_\_

NUMBER: \_\_\_\_\_

TOTAL PRICE OF ALL BID ITEMS: \$ 200,343.00

AUTHORIZED

SIGNATURE: 

Brad Pregeant

Printed Name

TITLE: Vice President

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.

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00143906

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	ONLY	Two (2) Year Switchgear Maintenance Contract for the Jefferson Parish Water Department  0010 - MAJOR PREVENTATIVE MAINTENANCE PROGRAM ON EXISTING ELECTRICAL  SWITCHGEAR SYSTEMS AT EAST JEFFERSON WATERWORKS, TO BE APPLIED ONLY AT EAST JEFFERSON WATERWORKS, (AS PER SPECIFICATIONS AND THE RELATED SINGLE LINE DIAGRAM).  *** MANDATORY PRE-BID & SITE VISIT ***	\$ 51,187.50	\$ 51,187.50
2	1.00	ONLY	0020 - MAJOR PREVENTATIVE MAINTENANCE PROGRAM ON EXISTING ELECTRICAL SYSTEMS  AT WEST JEFFERSON WATERWORKS, TO BE APPLIED ONLY AT WEST JEFFERSON WATERWORKS, (AS PER SPECIFICATIONS AND THE RELATED SINGLE LINE DIAGRAM).	\$ 51,187.50	\$ 51,187.50
3	8.00	ONLY	0030 - INSPECTION OF GROUNDING SYSTEM AT ELEVATED WATER STORAGE TANKS.  EASTBANK 3 WESTBANK 5	\$ 4,875.00	\$ 39,000.00
4	2.00	ONLY	0035 - INSPECTION OF GROUNDING SYSTEM AT ELEVATED WATER STORAGE TANKS.  (FOR GRAND ISLE ONLY)  GRAND ISLE 2	\$ 7,312.50	\$ 14,625.00
5	30.00	EA	0040 - RELATED MANHOLE WORK AND INSPECTIONS AS DESCRIBED IN  SUB-PARAGRAPHS NOS. 4.7.8 & 4.7.9	\$ 975.00	\$ 29,250.00
6	40.00	HR	0050 - COST PER ONE (1) MAN-HOUR FOR ENGINEERING SERVICES  (ALL ASSOCIATED COSTS SHALL BE INCLUDED IN THE UNIT PRICE BID)	\$ 157.95	\$ 6,318.00
7	40.00	HR	0060 - COST PER ONE (1) MAN-HOUR FOR TECHNICIAN SERVICES  (ALL ASSOCIATED COSTS SHALL BE INCLUDED IN THE UNIT PRICE BID)	\$ 121.88	\$ 4,875.00
8	40.00	HR	0070 - COST PER ONE (1) MAN-HOUR FOR ELECTRICIAN SERVICES	\$ 97.50	\$ 3,900.00

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00143906

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
9	1.00	ONLY	<p>(ALL ASSOCIATED COSTS SHALL BE INCLUDED IN THE UNIT PRICE BID)</p> <p>9999 - PARTS AND MATERIALS</p> <p>THIS IS A NON-BIDABLE ITEM. THIS ITEM IS FOR PARTS NEEDED TO COMPLETE A REPAIR UP TO \$5,000.00 PER JOB, WITH THE APPROVAL FROM THE REQUESTING DEPARTMENT.</p> <p>INVOICES SHALL BE SUBMITTED AT COST ONLY (WITH NO MARKUP)</p>	\$ N/A	\$



01-10-2024

## Bid Bond in Accordance with Contract Specifications

SLA01105203

Grand Isle Shipyard, LLC

Bond Number

Principal Name

18838 Highway 3235, Galliano, LA, 70354, US

Principal Address

Principal Signature

Jefferson Parish

200 Derbigny Street, Gretna, LA, 70053, US

Owner/Obligee Name

Owner/Obligee Address

### Bond Information

01-11-2024

Pennsylvania Insurance Company

326462

Bid Date

Surety

Contractor Vendor ID Number

50-00143906

Contract ID Number

Bid Number 50-00143906 - Two (2) Year Switchgear Maintenance Contract for the Jefferson Parish Water Department.

Description of Job

Five Percent of Amount Bid

5%

Amount of Bid Security

Bid Security Maximum

Bid Security Percentage

Stephen T. Kazmer

Attorney-in-Fact

HUB International Midwest

Bond Entered and Executed By

Primary Agency

*Stephen T. Kazmer*

Attorney-In-Fact Signature

Know all men by these presents that Pennsylvania Insurance Company, a Corporation duly organized under the laws of the State of NM, are held and firmly bound unto the above owner/obligee by the transmission. The surety agrees to waive the statute of Fraud defense and further agrees that the owner/obligee is a third party beneficiary of the waiver for the purposes of enforcing this bid bond.





**POWER OF ATTORNEY NO. SUR2000\_0823**

KNOW ALL MEN BY THESE PRESENTS: That the California Insurance Company, duly organized and existing under the laws of the State of California and having its principal office in the County of San Mateo, California, and Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company, corporations duly organized and existing under the laws of the State of New Mexico and having their principal office in the County of Santa Fe, New Mexico does hereby nominate, constitute and appoint:

Stephen T. Kazmer

Its true and lawful agent and attorney-in-fact, to make, execute, seal and deliver for and on its behalf as surety, and its act and deed any and all bonds, contracts, agreements of indemnity and other undertakings in suretyship (NOT INCLUDING bonds without a fixed penalty or financial guarantee) provided, however, that the penal sum of any one such instrument executed hereunder shall not exceed the sum of:

"Unlimited"

This Power of Attorney is granted and is signed and sealed under and by the authority of the following Resolution adopted by the Board of Directors of **California Insurance Company, Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company**.

"RESOLVED, That the President, Senior Vice President, Vice President, Assisted Vice President, Secretary, Treasurer and each of them hereby is authorized to execute powers of attorney, and such authority can be executed by use of facsimile signature, which may be attested or acknowledged by any officer or attorney of the Company, qualifying the attorney or attorneys named in given power of attorney, to execute in behalf of, and acknowledge as the act and deed of the **California Insurance Company, Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company**, all bond undertakings and contracts of suretyship, and to affix the corporate seal thereto."

IN WITNESS WHEREOF, **California Insurance Company, Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company**, has caused its official seal to be hereunto affixed and these presents to be signed by its duly authorized officer the 16th day of August 2023.

California Insurance Company, Continental Indemnity Company,  
Illinois Insurance Company, Pennsylvania Insurance Company

By Jeffrey A. Silver Jeffrey A. Silver, Secretary

STATE OF NEBRASKA  
COUNTY OF DOUGLAS SS:

On this 16th day of August A.D. 2023, before me a Notary Public of the State of Nebraska, in and for the County of Douglas, duly commissioned and qualified, came THE ABOVE OFFICER OF THE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposed and said that he is the officer of the said Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and the said Corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said corporation, and that Resolution adopted by the Board of Directors of said Company, referred to in the preceding instrument is now in force.

IN TESTIMONY WHEREOF, I have hereunto set my hand, and affixed my Official Seal at the County of Douglas, the day and year first above written.



Linda S. Davis  
(Notary Public)

I, the undersigned Officer of the **California Insurance Company**, a California Corporation of Foster City, California, **Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company**, New Mexico Corporations of Santa Fe, New Mexico, do hereby certify that the original POWER OF ATTORNEY of which the foregoing is full, true and correct copy is still in full force and effect and has not been revoked.

IN WITNESS WHEREOF, I have hereunto set my hand, and affixed the Seal of said Company, on the 10 day of 01, 20

Jeffrey A. Silver  
Jeffrey A. Silver, Secretary



**MAJORITY CONSENT  
OF THE MANAGERS  
OF  
GRAND ISLE SHIPYARD, L.L.C.**

The undersigned, being a majority of the Managers entitled to vote at meetings of the Board of Managers of Grand Isle Shipyard, L.L.C., a Manager Managed Louisiana limited liability company, by this instrument in lieu of a meeting of the Managers of Grand Isle Shipyard, L.L.C., hereby consent to the adoption of the following resolution and hereby waive any notices required by law with respect thereto:

**RESOLUTION GISY-2021-04  
AUTHORIZE MARK A. PREGEANT, II  
ANDREW BRUZZDZINSKI, BRAD PREGEANT AND  
DANIEL ST. GERMAINE TO SIGN BUSINESS DOCUMENTS  
ON BEHALF OF GRAND ISLE SHIPYARD, L.L.C.**

**BE IT RESOLVED** that that Mark A. Pregeant, II, Andrew Bruzzdzinski, Brad Pregeant, and Daniel St. Germaine are hereby recognized as authorized agents of Grand Isle Shipyard, L.L.C. giving them authority to execute any and all service contracts or agreements of any kind necessary to conduct business on behalf of the company including, but not limited to, bids, contracts, services agreements, master service agreements, charter agreements and insurance documents.

**BE IT FURTHER RESOLVED** that they are hereby authorized and directed to execute in the name of and on behalf of the company any and all documents necessary or proper to carry into effect this Resolution.”


Any copy, facsimile or other reliable reproduction of this may be substituted or used in lieu of the original writing for any and all purposes for which the original writing could be used, provided that such copy, facsimile or other reproduction is a complete reproduction of the entire original writing.


(Signature Page Follows)

**SUBSCRIBED AND SWORN** before me this 1<sup>st</sup> day of July, 2021.

  
Mark A. Pregeant, II - Manager

  
Brad Pregeant - Manager

  
Daniel St. Germaine - Manager

  
**KIRBY P. BLANCHARD, JR.**  
**NOTARY PUBLIC**  
**NOTARIAL NUMBER 84847**  
**COMMISSION EXPIRES UPON MY DEATH**

**Non-Public Works Bid**

**AFFIDAVIT**

**STATE OF LOUISIANA**

**PARISH/COUNTY OF LAFOURCHE**

BEFORE ME, the undersigned authority, personally came and appeared: \_\_\_\_\_

Brad Pregeant, (Affiant) who after being by me duly sworn, deposed and said that he/she is the fully authorized Vice President of Grand Isle Shipyard, LLC (Entity), the party who submitted a bid in response to Bid Number \_\_\_\_\_, 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

\_\_\_\_\_  
Brad Pregeant  
\_\_\_\_\_  
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE 10<sup>th</sup> DAY OF January, 2024.

  
\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed Name of Notary

\_\_\_\_\_  
Notary/Bar Roll Number

My commission expires \_\_\_\_\_.

KIRBY P. BLANCHARD, JR.  
Notary Public  
No. 84847  
State of Louisiana  
Commission is for Life



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/3/2024

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 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).

<b>PRODUCER</b> Dwight Andrus Insurance 500 Dover Blvd. Ste. 110 Lafayette LA 70503	<b>CONTACT NAME:</b> <b>PHONE (A/C, No. Ext):</b> 337-981-7300 <b>E-MAIL ADDRESS:</b> customerservice@andrus.com <b>FAX (A/C, No):</b> 337-984-2166
<b>INSURED</b> GIS Holdings, LLC P.O. Box 820 Galliano LA 70354	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> The Gray Insurance Company <b>INSURER B:</b> Underwriters at Lloyds <b>INSURER C:</b> Lloyds Beazley <b>INSURER D:</b> Endurance Worldwide Insurance <b>INSURER E:</b> <b>INSURER F:</b>

**COVERAGES****CERTIFICATE NUMBER:** 420166404**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"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	XSGL100187	12/1/2023	12/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <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	Y	Y	XSAL100204	12/1/2023	12/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
D	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$			NGO3478A23	12/1/2023	12/1/2024	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	XSWC100182	12/1/2023	12/1/2024	<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
C B B	Contractors Pollution Professional Liability - Primary Excess Liability (5x5)	Y Y Y	Y Y Y	W364F8230101 B0146LDUSA2305061 NGO3479A23	12/15/2023 12/1/2023 12/1/2023	12/1/2025 12/1/2024 12/1/2024	Contractors Pollution Professional Limit See Attached See Attached 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
ACTUAL POLICY FORMS & ENDORSEMENTS ARE AVAILABLE UPON REQUEST FOR REVIEW

See Attached...

**CERTIFICATE HOLDER****CANCELLATION**

Master Certificate

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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# ADDITIONAL REMARKS SCHEDULE

AGENCY Dwight Andrus Insurance		NAMED INSURED GIS Holdings, LLC P.O. Box 820 Galliano LA 70354	
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

ADDENDUM TO CERTIFICATE OF INSURANCE: Any information contained in this Addendum is general and descriptive only. The Certificate of Insurance and this Addendum may not contain descriptions of any or all operations, locations, vehicles or exclusions. Please see policy forms and endorsements for specific coverages and exclusions.

Named Insured includes the following:

GIS Holdings, LLC (First Named Insured) 72-0393251  
 Grand Isle Shipyard, LLC 72-0393251  
 GIS Electrical and Instrumentation, LLC 27-1228434  
 GIS Engineering, LLC 81-0966624  
 GIS, LLC 36-4746250  
 Global Inspections, LLC 46-0534612  
 Blanchard Industrial, LLC 81-3735672  
 Mack Steel & Supply, LLC 20-8729745  
 GW Integrated Solutions, LLC 81-4250664  
 NuWave Group, LLC 84-1775508  
 Sun Industries, LLC 72-1094335  
 Sun Security and Monitoring, LLC 45-3734872  
 Chustz Surveying, LLC 72-1297537  
 Clean Waste, LLC  
 Grand Isle Energy Services, Inc. (Phillippine company)  
 GIS Oilfield Contractors S de R.L. de C.V. (Mexican company)  
 GIS Energia E. Construc o Eireli (Brazilian company)

General Liability Policy #XSGL100187

- Blanket Additional Insured (GIC 03 02 65 04 20) when required by written contract
- Blanket Waiver of Subrogation (CG 24 04 12 19) when required by written contract
- Primary and Noncontributory - Other Insurance Condition (CG 20 01 12 19) when required by written contract
- Broad Form Property Damage Liability including Explosion, Collapse and Underground (XCU)
- Premises/Operations Products/Completed Operations
- Blanket Contractual Liability
- Sudden and Accidental Pollution Liability Occurrence Form
- Personal Injury
- In Rem GIC 00 30 04/98
- Severability of Interests Provision
- "Action Over" Claims
- Independent Contractors Coverage for work sublet
- General Liability includes Marine Liability with a limit of \$1,000,000 for:
- Protection & Indemnity for vessel liability
- Removal of wreck/debris on scheduled vessels. There is no language limiting liability "as owner of vessel"
- There are no phrases purporting to limit the underwriter's liability to the value of the vessel
- Non-Owned Vessel Coverage - GIC 03 02 34 05 10
- Designated Construction Project(s) General Aggregate Limit CG 24 03 05 09
- Blowout & Cratering
- Underground Resources And Equipment Coverage CG 22 62 05 09
- Coverage Territory Extension-Gulf of Mexico Form# GIC 03 02 45 11/16
- 30 Day Cancellation to Holder (Endt. Form # GIC 00 18 06 12) as required by written contract
- Charterer's Legal Liability Endst. GIC 03 02 60 01 18
- Inclusion of Marine Liabilities - Limit 1M Per Occurrence GIC 00 72 11 17

Auto Liability Policy #XSAL100204

- Additional Insured - Designated Person or Organization GIC 00 29 04/98
- Waiver Of Transfer Of Rights Of Recovery Against Others To Us (Waiver Of Subrogation) CA 04 44 10 13
- Primary And Noncontributory - Other Insurance Condition CA 04 49 11 16
- Auto Includes Form MCS-90 Ed. 6/3/21
- Certificate Holder 30 Days Written Notice of Cancellation Endorsement GIC 00 18 06 12

Workers Compensation Policy#XSWC100182

- Certificate Holder 30 Days Written Notice of Cancellation GIC 00 18 06 12
- Alternate Employer Endorsement WC 00 03 01 A 02 89
- Waiver of Our Right to Recover from Others Endorsement WC 00 03 13 04 84
- Voluntary Compensation And Employers Liability Coverage Endorsement WC 00 03 11 A 08 91
- U.S. Longshoremen's and Harbor Workers Compensation Act Coverage
- Outer Continental Shelf Land Act
- Jones Act (including Transportation, Wages, Maintenance, and Cure)
- Death on the High Seas Act & General Maritime Law
- Maritime Employers Liability Limit: \$1,000,000
- Other States Endorsement
- "In Rem" Endorsement





# **ADDITIONAL REMARKS SCHEDULE**

Page 2 of 2

<b>AGENCY</b> Dwight Andrus Insurance		<b>NAMED INSURED</b> GIS Holdings, LLC P.O. Box 820 Galliano LA 70354	
<b>POLICY NUMBER</b>		<b>EFFECTIVE DATE:</b>	
<b>CARRIER</b>	<b>NAIC CODE</b>		

## **ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**  
**FORM NUMBER:** 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

•Gulf of Mexico Territorial Extension

Professional Primary Liability Policy #B0146LDUSA2305061  
Each Claim Limit: \$5,000,000  
Aggregate: \$5,000,000  
Retention: \$150,000

•Claims Made  
•Waiver of Subrogation where required by written contract

Professional Excess Liability Policy #0312-6127  
Policy Date: 12/1/2023 - 12/1/2024  
Carrier: Allied World Surplus Lines Ins. Co.  
Each Claim Limit: \$5,000,000  
Aggregate: \$5,000,000  
Claims Made

Contractors Pollution Liability Policy #W364F8230101  
Policy Dates: 12/15/2023 – 12/1/2025  
Carrier: Lloyd's Beazley  
Each CPL Condition: \$11,000,000  
Aggregate: \$11,000,000  
Deductible: \$100,000  
•Blanket Additional Insured - written contract or agreement E15755012023

Site Pollution Policy #W364F7230101  
Policy Dates: 12/15/2023 – 12/1/2025  
Carrier: Lloyd's Beazley  
Each Pollution Condition: \$5,000,000  
Aggregate: \$10,000,000  
Deductible: \$100,000  
•Additional Insured E12463 012019 ed.

Excess Liability – 1st Layer – Policy #NGO3478A23  
Policy Period: 12/1/2023 to 12/1/2024  
Limits: \$5,000,000 Occ/Agg Excess of \$1,000,000 Schedule of Underlying which includes General Liability, Auto Liability, P&I including Charters, Employers Liability, Maritime Employers Liability, Riggers Liability  
Carrier: Endurance Worldwide Insurance  
Policy is Follow Form

Excess Liability – 2nd Layer – Policy #NGO3479A23  
Policy Period: 12/1/2023 to 12/1/2024  
Limits: \$5,000,000 Occ/Agg Excess of \$5,000,000 Schedule of Underlying which includes General Liability, Auto Liability, P&I including Charters, Employers Liability, Maritime Employers Liability, Riggers Liability  
Carrier: Underwriters at Lloyd's  
Policy is Follow Form

Excess Liability – 3rd Layer – Policy # CXS12427.123  
Policy Period: 12/1/2023 to 12/1/2024  
Limits: \$15,000,000 Occ/Agg Excess of \$10,000,000 Schedule of Underlying which includes General Liability, Auto Liability, P&I including Charters, Employers Liability, Maritime Employers Liability, Riggers Liability  
Carrier: U.S. Specialty Insurance Company  
Policy is Follow Form