

DATE: 10/07/2024

INVITATION TO BID  
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00146147

**JEFFERSON PARISH**

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

VENDOR: 27118 BLANK BID COPY VENDOR

PURCHASING SPECIALIST:  
BBELLOW

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

2 weeks

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

14 days

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

7 days

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: #1 10/9/24 WC.

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

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

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

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 35350

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

FIRM NAME:

Beacon A/C, Heating & Refrigeration, Inc.

SIGNATURE:

(Must be signed here)

Wendy Chatelain

TITLE:

Owner/Secretary-Treasurer

PRINT OR TYPE NAME:

Wendy Chatelain

ADDRESS:

315 E. 3rd Street

CITY, STATE:

Kenner, LA

ZIP:

70062

TELEPHONE:

(504) 467-8698

FAX:

( )

EMAIL ADDRESS:

Wendy@beaconac.com

TOTAL PRICE OF ALL BID ITEMS: \$ 24,640.00

DATE: 10/07/2024

Page: 6

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00146147

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
			FURNISH LABOR, MATERIALS AND EQUIPMENT TO SUPPLY AND INSTALL ONE CU-2 15 TON CONDENSER UNIT FOR JEFFERSON PARISH PUBLIC WORKS		
1	1.00	EA	0001 - CU-2 15 ton condenser unit	\$ 19,600.00	\$ 19,600.00
2	36.00	HR	0002 - Labor  Unit is running at half capacity and not cooling bldg.  Location:  Jefferson Parish Public Works-Rheem Bldg 4901 Jefferson Hwy Jefferson, La. 70121  ***As per Bid Specifications***	\$ 140.00	\$ 5,040.00



# JEFFERSON PARISH

## DEPARTMENT OF PURCHASING

CYNTHIA LEE SHENG  
PARISH PRESIDENT

RENNY SIMNO  
DIRECTOR

October 9, 2024

### ADDENDUM # 1

**Bid Number: 5000146147**

**Bid Opening Date: October 14, 2024 at 11:00 AM**  
**Bid has been Extended Until: October 16, 2024 at 11:00 AM**

**Description of Bid: Furnish Labor, Materials and Equipment to Supply and Install One CU-2  
15 Ton Condenser Unit for Jefferson Parish Public Works**

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This bid has been extended until October 16, 2024.

Please be sure to Acknowledge Addendum #1 on the bid form.

Sincerely,

A handwritten signature in cursive script that reads "Brenda M. Bellow".

---

Brenda Bellow  
Purchasing Specialist, I  
Jefferson Parish Purchasing Department

**Bidders must acknowledge all addenda on the bid form. Bidder acknowledges receipt of this addendum on the bid form by indicating the addendum number listed above. Failure to list each addenda number on the bid form will result in bid rejection.**

**This addendum is a part of the contract documents and modifies the original bidding documents and specifications. The contents of this addendum shall be included in the contract documents. Changes made by this addendum shall take precedence over the documents of earlier date.**

JOSEPH S. YENNI BUILDING - 1221 ELMWOOD PARK BLVD - SUITE 404 - JEFFERSON, LA 70123 - PO BOX 10242 JEFFERSON, LA 70181-0242  
OFFICE 504.364-2678

GENERAL GOVERNMENT BUILDING - 200 DERBIGNY ST - SUITE 4400 - GRETN, LA 70053 - PO BOX 9 - GRETN - LA 70054  
OFFICE 504.364.2678

EMAIL: [PURCHASING@JEFFPARISH.NET](mailto:PURCHASING@JEFFPARISH.NET)

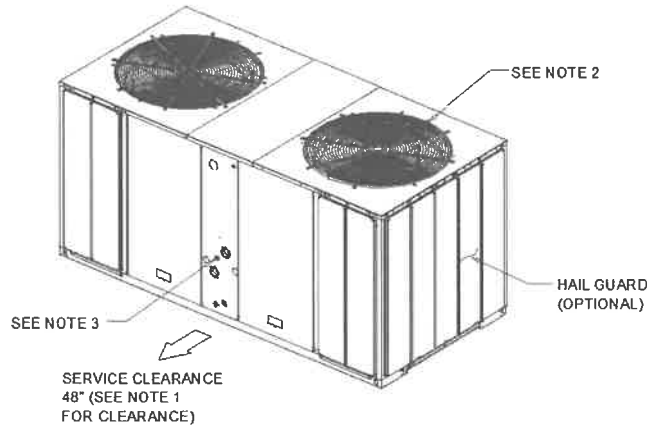
WEBSITE: [WWW.JEFFPARISH.NET](http://WWW.JEFFPARISH.NET)

## 6 - 25 Ton Unitary Split Systems Outdoor

Unit Overview	
Model	TTA18044DAA**BS010000000000000000
Unit Tonnage	15 Tons
Refrigerant	R-410A Refrigerant
Controls	Symbio (Cooling)
Unit Voltage	460/60/3
Refrigeration Circuit / Stage	Dual Compressors / Dual Circuit
Suction Line Connection Size	1.375 in
Liquid Line Connection Size	0.500 in
Unit Function	Cooling
Max. Cond. Operating Weight	705.0 lb

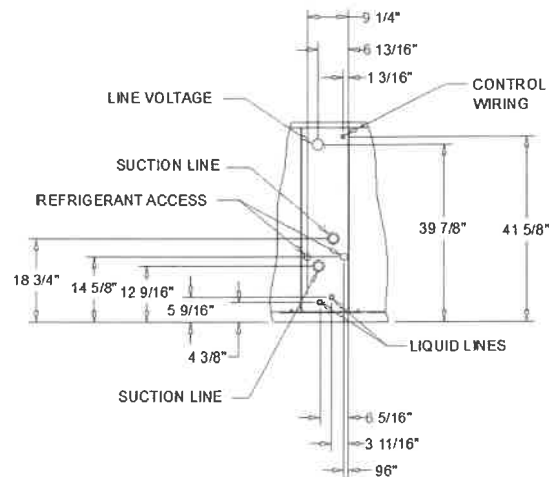
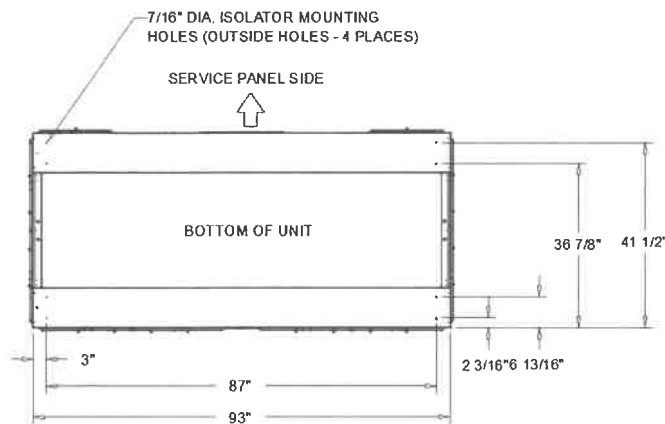
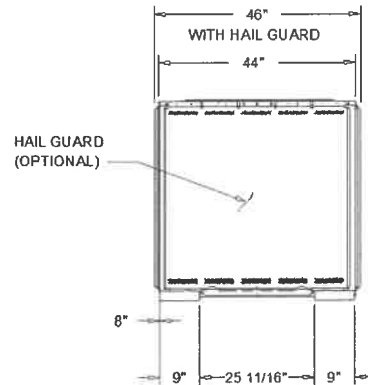
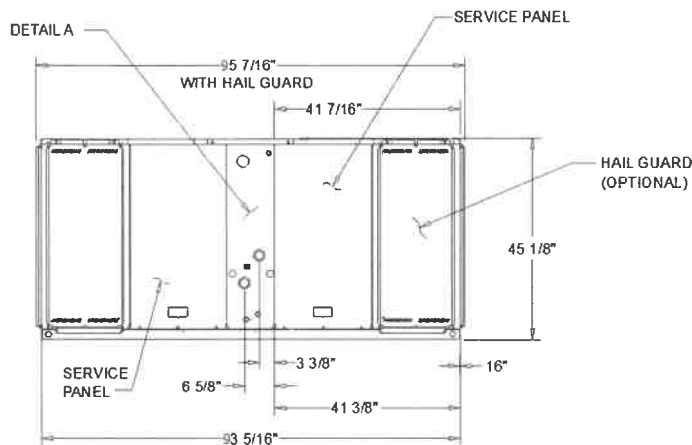


Electrical Information			
MCA	32.00 A	Compressor 2 RLA	12.20 A
MOP	40.00 A	Cond. Motor 1 FLA	2.20 A
Compressor 1 RLA	12.20 A	Cond. Motor 2 FLA	2.20 A



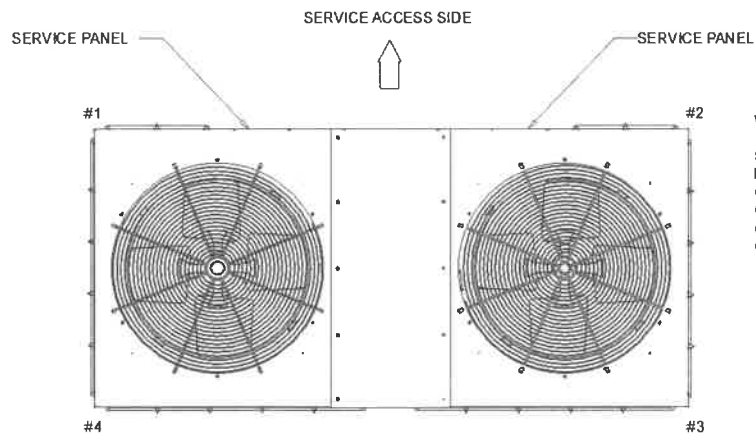
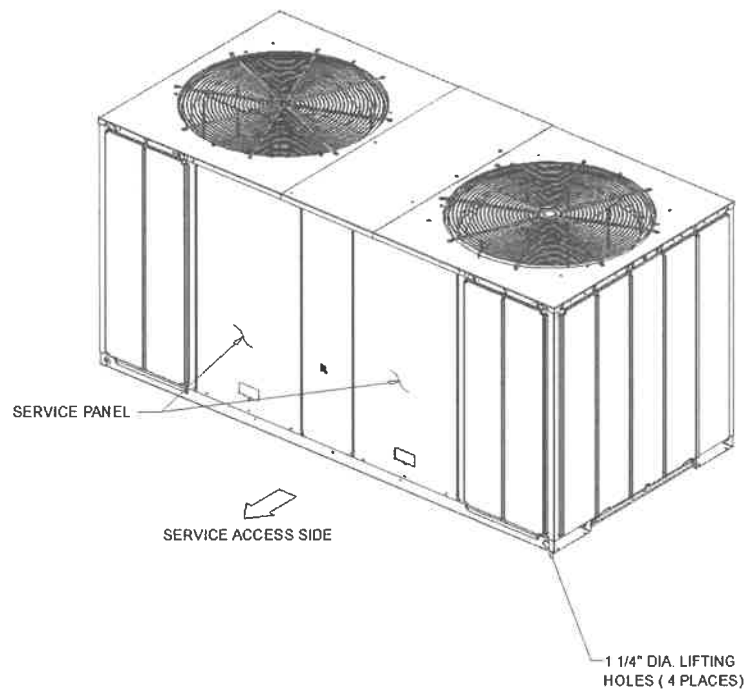
NOTES.

1. MINIMUM CLEARANCE FOR PROPER OPERATION IS 36" FROM WALLS, SHRUBBERY, PRIVACY FENCES ETC. MINIMUM CLEARANCE BETWEEN ADJACENT UNITS IS 72". RECOMMENDED SERVICE CLEARANCE 48"
  2. TOP DISCHARGE AREA SHOULD BE UNRESTRICTED FOR 100" MINIMUM. UNIT SHOULD BE PLACED SO ROOF RUN-OFF WATER DOES NOT POUR DIRECTLY ON UNIT
  3. OUTDOOR AIR TEMPERATURE SENSOR OPENING (DO NOT BLOCK OPENING)
- REFRIGERANT
1. SUCTION CONNECTION (1 3/8" OD) AND LIQUID CONNECTION (1/2" OD)



FRONT DETAIL A  
DIMENSIONAL DETAIL

15 - 20 TON COOLING CONDENSER (DUAL COMPRESSOR)  
DIMENSIONAL DRAWING



#### WEIGHTS AND CORNER WEIGHTS

Shipping:	806.0 lb
Net:	705.0 lb
Corner 1:	194.0 lb
Corner 2:	195.0 lb
Corner 3:	158.0 lb
Corner 4:	158.0 lb

#### WEIGHTS AND LOAD POINT LOCATION FOR CONDENSOR

WEIGHT AND RIGGING

### **General - (TTA)**

- Weatherproofed steel mounting/lifting rails
- Hermetic scroll compressors
- Microchannel condenser coils
- Fans and motors
- Standard operating range 50.0 F-125.0 F (min. 0.0 F with low ambient accessory)
- Nitrogen holding charge
- Certified and rated in accordance with AHRI and DOE standards
- Certified to UL 1995
- Capacities and efficiencies for split systems are rated within the scope of the Air-Conditioning, Heating, & Refrigeration Institute (AHRI) certification program and display the AHRI Standard 340-360 (I-P) mark. This standard applies to units between 65,000 and 250,000 btu/hr.
- Capacities and efficiencies for split system cooling condensers are rated within the scope of the Air-Conditioning, Heating, & Refrigeration Institute (AHRI) certification program and display the AHRI Standard 365 (I-P) mark. This standard applies to cooling units between 135,000 and 250,000 btu/hr.

### **Casing - TTA**

- Zinc coated, heavy gauge, galvanized steel
- Weather resistant baked enamel finish
- Meets ASTM B117, 672-hour salt spray test
- Removable single side maintenance access panels
- Lifting handles in maintenance access panels
- Unit base provisions for forklift and/or crane lifting

### **Refrigeration System - Dual Compressor (TTA0724\*D, TTA0904\*D, TTA1204\*D, TTA1504\*D, TTA1804\*D, TTA2404\*D)**

- Two (2) separate and independent refrigerant circuits
- Each refrigeration circuit equipped with integral subcooling circuit
- Front or rear refrigerant line connections (TTA180\*\*D/240\*\*D)
- Two (2) direct drive hermetic scroll compressor
- Suction gas-cooled motors w/  $\pm 10\%$  voltage utilization range of unit nameplate voltage
- Crankcase Heaters
- Internal temperature and current sensitive motor overloads
- Factory installed liquid line filter driers
- Phase loss/reverse rotation monitor
- No compressor suction and/or discharge valves (reduced vibration/sound)
- External high pressure cutout devices
- External low pressure cutout devices
- Evaporator defrost control
- Loss of charge protection (discharge temperature limits)

### **Condenser Coil (Microchannel) - (TTA)**

- Microchannel coils burst tested by the manufacturer
- Coils shall be leak tested to ensure the pressure integrity
- Factory pressure and leak tested to 660 psig

### **Condenser Fan - (TTA)**

- 26" or 28" propeller fan(s)
- Direct drive
- Statically and dynamically balanced

### **Controls - (TTA)**

- Centralized microprocessor
- Indoor and outdoor temperature sensors drive algorithms, making decisions for all heating, cooling, and ventilation
- Integrated anti-short cycle timer
- Integrated time delay between compressors
- Completely internally wired
- Colored and keyed connectors and colored wires
- Contactor pressure lugs or terminal block
- Unit external mounting location for disconnect device
- Single point power entry
- Front or rear electrical connections (TTA 1804\*C/D, 2404\*C/D, 3004\*C only)

### **Note:**

*The 2-speed or SZVAV units should not be used with any single-speed, single-compressor condensing unit. The result of this selection will cause the SZVAV AHU to act as a CONSTANT VOLUME.*

### **Condenser Motor(s) - (TTA)**

- Permanently lubricated totally enclosed or open construction
- Built-in current and thermal overloads
- Ball or sleeve bearing type

### **Factory installed perforated steel hail guards**

- Condenser coil protection from hail, vandals, etc.
- Perforated, painted galvanized steel

### **Phase Monitor/Reversal Protection**

Phase monitor shall provide 100% protection for motors and compressors against problems caused by phase loss, phase imbalance, and phase reversal. Phase monitors are equipped with an LED that provides an ON or FAULT indicator. Quick-Access Panels

- Remove a few screws for access to the standardized internal components and wiring.

### **Service Valves**

- Liquid line service valve (with gauge port)
- Suction line service valve (with gauge port)



# Condenser and Air Handler Pairings

**Table 3. Model number descriptions**

<b>TWE Air Handler with Symbio</b>
<b>Digit 15 — Controls</b>  <b>1</b> = Constant Volume <b>C</b> = 2 Stage Airflow (Electromechanical Condenser Only) <b>D</b> = 2 Stage Airflow/Single Zone VAV (Symbio Condenser Only)
<b>TWE Air Handler (pre-Symbio)</b>
<b>Digit 15 — Controls</b>  <b>0</b> = Constant Volume <b>A</b> = 2 Stage Airflow (Electromechanical Condenser Only) <b>B</b> = Single Zone VAV (ReliaTel Condenser Only)

**Table 4. Condenser and air handler pairing instructions (See document SS-SVN016A-EN)**

<b>Condenser (model # digit)</b>	<b>Air Handler</b>		<b>Wiring Reference</b>	<b>Instructions</b>
	<b>Type</b>	<b>Supply Fan Type (model # digit)</b>		
Odyssey Electromechanical (Digit 15 = E)	Odyssey Symbio	Constant Volume (Digit 15 = 1)	"Pairing C or 3," p. 10	
		2-Speed Airflow (Digit 15 = C)		
		Single Zone VAV (Digit 15 = D)	"Pairing D," p. 12	Pairing F, D or G require wire harness kit WIR010190 (required) and WIR010185 (optional) to connect Air Handler Relay Board to VFD.
Odyssey ReliaTel (Digit 15 = R)	Odyssey Symbio	Constant Volume (Digit 15 = 1)	"Pairing 4," p. 14	
		2-Speed Airflow (Digit 15 = C)	"Pairing E," p. 16	
		Single Zone VAV (Digit 15 = D)	"Pairing F," p. 16	Pairing F, D or G require wire harness kit WIR010190 (required) and WIR010185 (optional) to connect Air Handler Relay Board to VFD.

## Condenser and Air Handler Pairings

Table 4. Condenser and air handler pairing instructions (continued) (See document SS-SVN016A-EN)

Condenser (model # digit)	Air Handler		Wiring Reference	Instructions
	Type	Supply Fan Type (model # digit)		
Odyssey Symbio (Digit 15 = S)	Odyssey Symbio	Constant Volume (Digit 15 = 1)	"Pairing A," p. 18	Install a shielded, twisted pair cable if the Air Handler has Electric Heat and/or requires Single Zone VAV operation (Trane IMC communication)
		2-Speed Airflow (Digit 15 = C)	"Pairing H," p. 20	Pairing G, H, and 2 will not have heat in defrost. Pairing G, H, and 2; electric heat will not operate if zone sensor installed, only with a thermostat Install a shielded, twisted pair cable if the Air Handler has Electric Heat and/or requires Single Zone VAV operation (Trane IMC communication)
		Single Zone VAV (Digit 15 = D)	"Pairing B," p. 18	Install a shielded, twisted pair cable if the Air Handler has Electric Heat and/or requires Single Zone VAV operation (Trane IMC communication) Install a shielded, twisted pair cable for Symbio Condenser control of the Air Handler supply fan VFD (Modbus communication)
	Odyssey Electromechanical	Constant Volume (Digit 15 = 0)	"Pairing 1 or 2," p. 22	Pairing G, H, and 2 will not have heat in defrost. Pairing G, H, and 2; electric heat will not operate if zone sensor installed, only with a thermostat.
		2-Speed Airflow (Digit 15 = A)		
	Odyssey ReliaTel	Variable Speed, Single Zone VAV (Digit 15 = B)	"Pairing G (preferred)," p. 24	Pairing G, H, and 2 will not have heat in defrost. Pairing G, H, and 2; electric heat will not operate if zone sensor installed, only with a thermostat. Install a shielded, twisted pair cable for Symbio Condenser control of the Air Handler supply fan VFD (Modbus communication)
			"Pairing G (optional)," p. 27	Pairing G, H, and 2; electric heat will not operate if zone sensor installed, only with a thermostat. Pairing F, D or G require wire harness kit WIR010190 (required) and WIR010185 (optional) to connect Air Handler Relay Board to VFD. This pairing requires the replacement of the RTOM module with a Symbio Relay Board (MOD03105) and that the VFD wires 81B, 82B, 93B, 94B and 94D be replaced with wire harness kit WIR010190 (required) and WIR010185 (optional). The Air Handler will operate as a 2-speed fan.
	Generic Air Handler	Constant Volume	"Pairing Y," p. 29	
Two Symbio Condensers (2 condensers to 1 air handler)	Odyssey Electromechanical		"Pairing Z," p. 30	



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/30/2023

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).

<b>PRODUCER</b> Riverlands Insurance Services Inc. 492 West 5th Street  LaPlace LA 70068	<b>CONTACT NAME:</b> Brittney Jacob <b>PHONE (A/C, No, Ext):</b> (985) 652-5505 <b>FAX (A/C, No):</b> (985) 652-4039 <b>E-MAIL ADDRESS:</b> bjacob@rivins.com																					
<b>INSURED</b> Beacon Air Conditioning, Heating & Refrigeration, Inc. 315 E 3rd Street  Kenner LA 70062	<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>Nautilus Insurance Company</td><td>17370</td></tr><tr><td>INSURER B:</td><td>Scottsdale Insurance Company</td><td>41297</td></tr><tr><td>INSURER C:</td><td>LUBA Casualty Insurance Company</td><td>12472</td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Nautilus Insurance Company	17370	INSURER B:	Scottsdale Insurance Company	41297	INSURER C:	LUBA Casualty Insurance Company	12472	INSURER D:			INSURER E:			INSURER F:		
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INSURER D:																						
INSURER E:																						
INSURER F:																						

## COVERAGES

CERTIFICATE NUMBER: 23-24 Master

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 SUBR INSD 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	Y Y	NN1594318	10/29/2023	10/29/2024	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					
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 2,000,000
	OTHER:					PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y Y	CXS4011804	10/29/2023	10/29/2024	COMBINED SINGLE LIMIT (Ea accident) \$
	BODILY INJURY (Per person) \$					
	BODILY INJURY (Per accident) \$					
	PROPERTY DAMAGE (Per accident) \$					
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$ 5,000,000
	DED RETENTION \$					AGGREGATE \$ 5,000,000
C	<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 N	TBA - Quote #028000522449123	10/29/2023	10/29/2024	<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)

Full Certificate Holder - Jefferson Parish, its Districts, Departments and Agencies under the direction of the Parish President and the Parish Council. The certificate holder is Additional Insured on a Primary & Non-Contributory basis in favor of the certificate holder as required by written contract with respects to the General Liability policy. Waiver of Subrogation is provided in favor of the certificate holder as required by written contract with respects to the General Liability & Workers' Compensation policies. The Excess Liability policy goes over the General Liability & Employer's Liability policies and is follow-form.

## CERTIFICATE HOLDER

## CANCELLATION

Jefferson Parish Purchasing Dept. 200 Derbigny St. Suite 4400 Gretna LA 70053	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE <i>Brittney Jacob</i></p>
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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/05/2024

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.


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<b>PRODUCER</b>  Hylton S. Petit, Jr 2705 Florida Ave Kenner, La 70062	<b>CONTACT</b> Hylton S. Petit, Jr <b>NAME:</b> <b>PHONE:</b> 504-461-0171 <b>(A/C No, Ext):</b> 504-461-0171 <b>FAX:</b> 504-461-0289 <b>(A/C, No):</b> 504-461-0289 <b>E-MAIL:</b> hylton.petit.b27x@statefarm.com <b>ADDRESS:</b>
	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> State Farm Mutual Automobile Insurance Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
<b>INSURED</b> Beacon A/C, Heating & Refrigeration, Inc 315 E 3rd St Kenner, La 70062	<b>NAIC #</b> 25178

<b>COVERAGES</b>	<b>CERTIFICATE NUMBER:</b>	<b>REVISION NUMBER:</b>
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	ADD INSD	SUB WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
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A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y	N	370 3672-B09-18	08/09/2024	02/09/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) \$ \$ 1,000,000 \$ 1,000,000 \$ 1,000,000 \$
	<b>UMBRELLA LIAB</b> <b>EXCESS LIAB</b> DED RETENTION \$						EACH OCCURRENCE AGGREGATE \$ \$ \$
	<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	N/A				PER STATUTE E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT \$ \$ \$ \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b> THE JEFFERSON PARISH, ITS DISTRICTS, DEPARTMENTS AND AGENCIES UNDER THE DIRECTION OF THE PARISH PRESIDENT & THE PARISH COUNCIL 200 DERBIGNY ST., GRETN, LA 70053	<b>CANCELLATION</b> 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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## State Licensing Board for Contractors

This is to Certify that:

BEACON AIR CONDITIONING, HEATING AND REFRIGERATION,  
INC.  
315 E. 3rd Street  
Kenner, LA 70062

is duly licensed and entitled to practice the following classifications

MECHANICAL



Expiration Date: July 15, 2026

License No: 35350

Witness our hand and seal of the Board dated,  
Baton Rouge, LA 16th day of July 2023

*Will S. Moyer*

Director

*See Mallett*

Chairman

*Andy Duvall*

Treasurer

This License Is Not Transferrable