## LOUISIANA UNIFORM PUBLIC WORK BID FORM

TO:	New Orleans Regional Transit Authority	BID FOR: Napoleon Facility Renovation and Upgrade
	2817 Canal Street	IFB 2021-031
	New Orleans, LA 70119	, ( <del></del>
	ATTN: Procurement Department (Owner to provide name and address of owner)	
	(Omer to provide fame and dadress of owner)	(Owner to provide name of project and other identifying information)
Docume addenda appliand complet and date (Owner to Bidders Designer	ents, b) has not received, relied on, or based his bid of a, c) has personally inspected and is familiar with the personal facilities as required to perform, in a word tion of the referenced project, all in strict accordance we de: October 22,2021  In provide name of entity preparing bidding documents.)  In must acknowledge all addenda. The Bidder acknowledge assigned to each of the addenda that the Bidder is acknowledge.	
	out not alternates) the sum of:	ing Documents (including any and all unit prices designated "Base inty Thousand Dollars (\$3,870,000)
	RNATES: For any and all work required by the Bated as alternates in the unit price description.	idding Documents for Alternates including any and all unit prices
Alterna	te No. 1 (Owner to provide description of alternate and state whe	ther add or deduct) for the lump sum of:
New asp Figh Alterna	chalt shingle roof to be installed over plywood sheathing the Hundred Seventy Two 7, te No. 2 (Owner to provide description of alternate and state when	ng on 8" insulated metal panels Dollars (\$ 872, 000 )  there add or deduct) for the lump sum of:
New asp	phalt shingle roof to be installed over plywood sheathin	ng on 2x6" T&G wood deck boards Dollars (\$ 659,000 xx)
JIX 1	te No. 3 (Owner to provide description of alternate and state when	Dollars -
	, , , , , , , , , , , , , , , , , , , ,	Dollars (\$
NAME	OF BIDDER: C.D.W. SERVICES LLC	
	ESS OF BIDDER: 3500 N CAUSEWAY BLVD, S	TE 1200 METAIRIE I A 70002
ADDKE	S OF BIDDER: 3300 IN CAGSEVIAT BEVD, 3	TE 1200, INETAINE, LA 70002
LOUISI	IANA CONTRACTOR'S LICENSE NUMBER:	45228
	OF AUTHORIZED SIGNATORY OF BIDDER:	Christopher Walker
	OF AUTHORIZED SIGNATORY OF BIDDER:	Managing Member
	TURE OF AUTHORIZED SIGNATORY OF BID	
DATE:		12/14/2021

- \* The <u>Unit Price Form</u> 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.
- \*\* If someone other than a corporate officer signs for the Bidder/Contractor, a copy of a corporate resolution or other signature authorization shall be required for submission of bid. Failure to include a copy of the appropriate signature authorization, if required, may result in the rejection of the bid unless bidder has complied with La. R.S. 38:2212(A)(1)(c) or RS 38:2212(O).

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: New Orl 2817 Ca New Orl	New Orleans Regional Transit Authority 2817 Canal Street New Orleans, LA 70119	nsit Authority	BID FOR: IFB 2021-031 Napoleon Faci	IFB 2021-031 Napoleon Facility Renovation and Upgrade	
INIT PRICES.	This forms shall be		(Owne	(Owner to provide name of project and other identifying information)	
DESCRIPTION:	This form shall be used f	used for any and all work  Alt.#	required by the Bidding Documents and describe	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:   Base Bid or Alt.#	in figures.
REF. NO.	QUANTITY:	UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times (Init Price)	
Napoleon Facility Renovation and Upgrade	1	LUMP SUM	\$3,870,000. xx	\$ 3,870,000 E	
DESCRIPTION:	☐ Base Bid or ☐ Alt.#	Alt.#			
REF. NO.	QUANTITY:	QUANTITY: UNIT OF MEASURE:	UNIT PRICE	UNIT PRICE EXTENSION (Quantity times Unit Price)	

Wording for "DESCRIPTION" is to be provided by the Owner. All quantities are estimated. The contractor will be paid based upon actual quantities as verified by the Owner



# Bid Bond

CONTRACTOR:

(Name, legal status and address) **CDW Services, LLC** 

3500 N Causeway Blvd, Ste 1208 Metairie, LA 70002 OWNER:

(Name, legal status and address)

**New Orleans Regional Transit Authority** 2817 Canal Street New Orleans, LA 70119 **BOND AMOUNT: 5% of Amount Bid** 

SURETY:

(Name, legal status and principal place of business)

Merchants National Bonding, Inc. P.O. Box 14498 Des Moines, IA 50306

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification,

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

PROJECT:

(Name, location or address, and Project number, if any)

Napoleon Ave Building Facility Building Renovation & Upgrade IFB #2021-031

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this

14th

day of December

CDW Services, LLC (Principal)

Miller Managing Member

Merchants National Bonding, Inc

(Seal)

(Seal)

aKala Carter, Attorney-in-Fact

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that changes will not be obscured.

AIA Document A310™ - 2010, Copyright © 1963, 1970 and 2010 by The American Institute of Architects. All rights reserved, WARNING: This AIA Document is protected by U.S. Copyright Law and International Treaties. Unauthorized reproduction or distribution of this AIA Document (90). any portion of it, may result in severe civil and criminal penalties, and will be prosecuted to the maximum extent possible under the law Purchasers are permitted to reproduce ten (10) copies of this document when completed. To report copyright violations of AIA Contract Documents, e-mail The American Institute of Architects' legal counsel, copyright@aia.org. 061110.



Know All Persons By These Presents, that MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., both being corporations of the State of lowa (herein collectively called the "Companies") do hereby make, constitute and appoint, individually,

Adam Harris; Benjamin P Dycus; Brian L Sewell; Kenneth Albert; LaKala Carter; Melissa Propst; Steven M Baas

their true and lawful Attorney(s)-in-Fact, to sign its name as surety(ies) and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

This Power-of-Attorney is granted and is signed and sealed by facsimile under and by authority of the following By-Laws adopted by the Board of Directors of Merchants Bonding Company (Mutual) on April 23, 2011 and amended August 14, 2015 and adopted by the Board of Directors of Merchants National Bonding, Inc., on October 16, 2015.

"The President, Secretary, Treasurer, or any Assistant Treasurer or any Assistant Secretary or any Vice President shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof.

"The signature of any authorized officer and the seal of the Company may be affixed by facsimile or electronic transmission to any Power of Attorney or Certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligations of the Company, and such signature and seal when so used shall have the same force and effect as though manually fixed.

In connection with obligations in favor of the Florida Department of Transportation only, it is agreed that the power and aut hority hereby given to the Attorney-in-Fact includes any and all consents for the release of retained percentages and/or final estimates on engineering and construction contracts required by the State of Florida Department of Transportation. It is fully understood that consenting to the State of Florida Department of Transportation making payment of the final estimate to the Contractor and/or its assignee, shall not relieve this surety company of any of its obligations under its bond.

In connection with obligations in favor of the Kentucky Department of Highways only, it is agreed that the power and authority hereby given to the Attorney-in-Fact cannot be modified or revoked unless prior written personal notice of such intent has been given to the Commissioner-Department of Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the modification or revocation.

In Witness Whereof, the Companies have caused this instrument to be signed and sealed this 11th day of

February

, 2020

MERCHANTS BONDING COMPANY (MUTUAL) MERCHANTS NATIONAL BONDING, INC.

STATE OF IOWA COUNTY OF DALLAS ss.

On this 11th day of February 2020 , before me appeared Larry Taylor, to me personally known, who being by me duly sworn did say that he is President of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC.; and that the seals affixed to the foregoing instrument are the Corporate Seals of the Companies; and that the said instrument was signed and sealed in behalf of the Companies by authority of their respective Boards of Directors.



#### **POLLY MASON**

Commission Number 750576 My Commission Expires January 07, 2023

(Expiration of notary's commission does not invalidate this instrument)

I, William Warner, Jr., Secretary of MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., do hereby certify that the above and foregoing is a true and correct copy of the POWER-OF-ATTORNEY executed by said Companies, which is still in full force and effect and has not been amended or revoked.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the Companies on this 14th day of Dec.

Willian Secretary

## **BUY AMERICA**

# **CERTIFICATE OF COMPLIANCE WITH SECTION 165(a)**

The bidder or proposer hereby certifies that it will comply with the requirements of section 165(a) of the Surface Transportation Assistance Act of 1982, as amended, and the applicable regulations in 49 CFR part 661.

Date 12/14/2021
Signature
Company Name C.D.W .SERVICES LLC
Title Managing Member
RTA Project No. IFB #2021-031

## CERTIFICATION ON PRIMARY PARTICIPANT REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS

The Primary Participant (Potential Contractor for a major third party contract), certifies to the best of its knowledge and belief, that it and its principles:

- 1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;
- 2. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, State, or local) transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- 3. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (2) of this certification; and
- 4. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

(If the primary participant is unable to certify to any of the statements I this certification, the participants shall attach an explanation to this certification.)

THE PRIMARY PARTICIPANT, (POTENTIAL CONTRACTOR FOR A MAJOR THIRD PARTY CONTRACT, CERTIFIES OR AFFIRMS THAT TRUTHFULNESS AND ACCURACY OF THE CONTENTS OF THE STATEMENTS SUBMITTED ON OR WITH THIS CERTIFICATION AND UNDERSTANDS THAT THE PROVISIONS OF 31 U.S.C. SECTION 3801 ET SEQ ARE APPLICABLE HERETO.

COMPANY C.D.W .SERVICES LLC
ADDRESS 3500 N Causeway Blvd, Ste 1208, Metairie, LA 70002
DATE 40/4/2024
DATE 12/14/2021
Signature of Offeror's Authorized Representative

# NON-COLLUSION AFFIDAVIT

STATE OF LOUISIANA
PARISH OF ORLEANS
Christopher Walker , being first duly sworn, deposes and says that:
(1) He is (Owner) (Partner) (Officer) (Representative) or (Agent), of <u>C.D.W.SERVICES LLC</u> , the Contractor that has submitted the attached bid;
(2) Such Bid is genuine and is not a collusive or sham Bid.
(3) The attached bid is not made in the interest of or on behalf of any undisclosed person, partnership, company association, organization or corporation; that such bid is genuine and not collusive or sham; that said bidder has not, directly or indirectly, induced or solicited any other bidder to put in a false or sham bid, and has not, directly or indirectly colluded, conspired connived or agreed with any bidder or anyone else to put on a sham bid, or refrain from bidding; that said bidder has not in any manner, directly or indirectly, sought by agreement, communication or conference with anyone to fix the bid price of said bidder or any other bidder, or to fix any overhead, profit, or cost element of such bid price or that of any other bidder, or to secure any advantage against RTA or anyone interested in the proposed contract; that all statements contained in such bid are true; that said bidder has not, directly or indirectly, submitted his bid price or any breakdown thereof or the contents thereof, or divulged information or data relative thereto, or paid or agreed to pay, directly or indirectly, any money or other valuable consideration for assistance or aid rendered or to be rendered in procuring or attempting to procure the contract above referred to, to any corporation, partnership, company, association, organization or to any member or agent thereof, or to any other individual; and further that said bidder will not pay or agree to pay directly or indirectly, any money or other valuable consideration to any corporation, partnership, company, association, organization or to any member or agent thereof, or to any individual, for aid or assistance in securing contract above referred to in the event the same is awarded to said bidder.  Signed:
Title: Managing Member
Sworn to me and subscribed in my presence this 13th day of December, A.D., 2021  NOTARY PUBLIC
PATRICIA B. SCHOF  Notary Public, State of Louisiana  Notary ID # 49624  My Comm. Expires

#### CERTIFICATION OF RESTRICTIONS ON LOBBYING

Christopher Walker

<u>I,</u>	Christopher Walker	hereby certify on
	(Name and Title of Offeror Official)	
behalf of	C.D.W .SERVICES LLC	that:
_	(Name of Offeror)	
(1) No	Federal appropriated funds have been paid or we undersigned, to any person for influencing or a employee of any agency, a Member of Congress, as an employee of a Member of Congress in connect contract, the making of any Federal grant, the making of any cooperative agreement, and the extension, or modification of any Federal contract, grant, load	ttempting to influence an officer or n officer or employee of Congress, or tion with the awarding of any Federal king of any Federal loan, the entering on, continuation renewal, amendment
(2) If a	ny funds other than Federal appropriated funds hat person for influencing or attempting to influenced a Member of Congress, an officer or employee Member of Congress in connection with this cooperative agreement, the undersigned shall compute control of the cooperative agreement of the cooperative agreement of the undersigned shall compute the cooperative agreement of the cooperative agreement of the undersigned shall compute the cooperative agreement of the cooperative agreement of the undersigned shall compute the cooperative agreement of the cooperative agre	an officer or employee of any agency, of Congress, or an employee of a Federal contract, grant, loan, or blete and submit standard Form-LLL,
(3) The	undersigned shall require that the language of this documents for all sub-awards at all tiers (incleontracts under grants, loans, and cooperative against certify and disclose accordingly.	uding subcontracts, sub-grants, and
transact or enter fails to	ertification is a material representation of fact upon tion was made or entered into. Submission of this ce ring into this transaction imposed by section 1352, file the required certification shall be subject to a t more than \$100,000 for each such failure.	rtification is a prerequisite for making title 31, U.S. Code. Any person who
Execute	ed this 14TH day December	
Witness	Ses: (Signature of Authorized Official)	
Manag	ing Member	
	(Title of Authorized Official)	
	to and subscribed before me on this day o	December 102!
	y Public In and For Jefferson	Parish/County
State of <u>L</u>	Duisiana	- OTA A
	PATRICIA B. SCHO Notary Public, State of Lou Notary ID # 1764. My Comm. Expires	uisiana UBL\

# **PARTICIPANT INFORMATION FORM**

All offerors are required to submit the information contained on this form. This information is a condition of submitting an offer to the RTA. Offerors must insure that **ALL** sub-contractors, sub-contractors or others at all tiers, which are proposed to be used or used under any agreement issued by RTA have submitted an executed copy of this form. RTA is required to maintain this information by the Federal Transit Administration and it is not subject to waiver.

Firm Name C.D.W .SERVICES LLC
Firm Address 3500 N Causeway Blvd, Ste 1208, Metairie, LA 70002
Telephone Number <u>504.828.2061</u>
Fax Number 504.828.2063
E-Mail Address cdwbids@cdwservices.com
Firm's status as Disadvantaged Business Enterprise (DBE) or Non- DBE DBE
Age of the firm 16 years
Annual gross receipts of the firm \$9.85M
Prime or Sub-Contractor Prime
NAICS code (s) 236220, 236210
I certify to the best of my knowledge that the above information is true and correct:
Signature
Title Managing Member Date 12/14/2021
RTA Project No. IFB #2021-031

FAILURE TO PROVIDE AN EXECUTED COPY OF THIS FORM AS STIPULATED HEREIN MAY PRECLUDE YOUR OFFER FROM CONSIDERATION FOR AWARD.

C.D.SER-01

ABROUSSARD

CORD

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 8/27/2021

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.

Į į	If SUBROGATION IS WAIVED, subject this certificate does not confer rights to	ct to t o the c	ne terms and conditions of ertificate holder in lieu of su	uch endorsement	n policies may s).	y require an endorsemei	nt. As	tatement on
PRODUCER Ellsworth Corporation 3636 S. I-10 Service Road W. Suite 100			CONTACT NAME: PHONE (A/C, No, Ext): (504) 455-4545  FAX (A/C, No, Ext): (504) 888-6645					
							888-6645	
			E-MAIL ADDRESS:					
Me	tairie, LA 70001				NSURER(S) AFFO	RDING COVERAGE		NAIC#
_				INSURER A : Natio	nal Fire Insu	rance Co of Hartford		
≀NS	URED			INSURER B : Allied	World Assu	rance Company Inc.		19489
	C.D.W. Services, LLC			INSURER C :				
	721 Papworth Ave. Suite 101	!		INSURER D :				
	Metairie, LA 70005			INSURER E :				
				INSURER F:				
CC	OVERAGES CER	TIFICA	ATE NUMBER:			REVISION NUMBER:		
Iñ C	THIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH I	EQUIRE PERTA	EMENT, TERM OR CONDITION  IN, THE INSURANCE AFFOR	N OF ANY CONTR DED BY THE POL	ACT OR OTHER	R DOCUMENT WITH RESPI BED HEREIN IS SUBJECT 1	ECT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL SU	JBR POLICY NUMBER	POLICY EFF (MM/DD/YYY	POLICY EXP	LIMIT	rs	
A		IIIVE II		Tanki Sair Car	, unapprinting	EACH OCCURRENCE	\$	1,000,000
	CLAIMS-MADE X OCCUR		6079036423	8/30/2021	8/30/2022	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
						MED EXP (Any one person)	\$	15,000
						PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000
	POLICY X PRO- OTHER:					PRODUCTS - COMP/OP AGG	\$ \$	2,000,000
В	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	ANY AUTO		HSLR18-07170-02	8/30/2021	8/30/2022	BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY X SCHEDULED AUTOS					BODILY INJURY (Per accident)		
	X HIRED ONLY X NON-OWNED					PROPERTY DAMAGE (Per accident)	\$	
	AUTOS CHET					(r di accident)	S	
A	X UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$	4,000,000
	EXCESS LIAB CLAIMS-MADE		6079036454	8/30/2021	8/30/2022	AGGREGATE	s	
	DED RETENTION \$					Aggregate	s	4,000,000
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X PER OTH-	y	
	ANY PROPRIETOR/PARTNER/EXECUTIVE		6079036437	8/30/2021	8/30/2022	E.L. EACH ACCIDENT	\$	1,000,000
	(Mandatory in NH)	N/A				E.L. DISEASE - EA EMPLOYEE		1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT		1,000,000
В	Professional Liabili		03085908	8/30/2021	8/30/2022	E.C. DIOCHOE I OCIOT EINIT		2,000,000
Α	Equipment Floater		6079036423	8/30/2021	8/30/2022	Rented/Leased		200,000
DES Blan	scription of operations / Locations / Vehiclarket Additional insured on General Liabilishers Compensation as required by writte	es (Aco	ORD 101, Additional Remarks Schedu Auto as required by written	le, may be attached if m	ore space is required waiver of Subr	red) rogation on General Liabi	lity, Au	ito, and
	,			p		y ao ioquiioo by miss		
CEI	RTIFICATE HOLDER			CANCELLATION	ľ			
	New Orleans Regional Transi 2817 Canal Street	t Autho	ority	SHOULD ANY OF	THE ABOVE D	ESCRIBED POLICIES BE CA EREOF, NOTICE WILL I Y PROVISIONS.		
	New Orleans, LA 70119			AUTHORIZED REPRES	_			

# **DBE FORM 1 - CONTRACT PARTICIPATION AND DBE COMMITMENT Continuation Page**

#### MUST BE SUBMITTED AT TIME OF SUBMISSION.

A FIRM ROLE (Prime, sub-tier 2, sub-tier 3 manufacturer, suffinier, etc.) PRIME	B  FIRM NAME AND ADDRESS  C.D.W. Services LLC 3500 N Causeway Blvd, Ste 1208 Metairie, LA 70002	C PRINCIPAL CONTACT NAME AND PHONE NUMBER  Christopher Walker	DBE Control  WORKTOBE SUBCONTRACTED/GC /SERVICES TO BE PURCHASED	oods	F %VALUEC WORK/		G DBE,		
FIRM ROLE (Prime, sub-tier 2, sub-tier 3 manufacturer, suffin/ier, etc.)  PRIME	C.D.W. Services LLC 3500 N Causeway Blvd, Ste 1208 Metairie, LA 70002	PRINCIPAL CONTACT NAME AND PHONE NUMBER  Christopher Walker	WORKTOBE SUBCONTRACTED/GO /SERVICESTOBE		%VALUEC	)F'			
(Prime, sub-tier 2, sub-tier 3 manufacturer, suffin/ier, etc.)  PRIME	C.D.W. Services LLC 3500 N Causeway Blvd, Ste 1208 Metairie, LA 70002	AND PHONE NUMBER  Christopher Walker	SUBCONTRACTED/GO /SERVICES TO BE		WORK/	)F'	DBE.		
FX	3500 N Causeway Blvd, Ste 1208 Metairie, LA 70002				PURCHAS	ES	SLDBE or non-DBE		
SUB/TIER 2		504-828-2061	General Conditions, coordinati work, supervision, caulking installation of ladders	ion of	48.43	%	SLDBE/DBE		
Ž.	dam Woolung Pointing 165th and Avenores Crypt Ridge Languiss	Adam Wastery 504.655.5742	Painting		2.24	%	NON		
sub Thr2	lep masonry	501.835 1756	Masonry		21.29	)%	NON		
Ther 2	BARNES ELECTRIC	504835-1756	Electric		8,27	%	NON		
THEY 2	JULTHENTIC DIE	504.421.2647	HVAC		.97	%	DBE NOV		
TRY2	NJM Plumbing	985.649.4144	Plumbing	2	2,06	%	NON		
110	lefferson Sprinkler	504.393.7699	Sprinkler		2.12	%	NON DBG		
TIESZ	Stell	225.454.1258	Seel		4.15	%	DBF		
Swb S Turz S	Southurn Walls	504.822.8063	Glazing		9.54	%	NON		
						%			
TOTAL VA	ALUE OF PARTICIPATION	FROM CONTINUATION							
*SupplierIManu participation tow	ufacturerIPurchaseIDealerw vard DBE goal.	PAGES: orkiscounted at 60%	Enter Total Bid Amount		1ust Equal		otal DBE articipation		
TOTAL VALUE OF PARTICIPATION: \$3,870,000 (DO % 48.43 %									
If Total DBE participation is less than the goal, refer to the Good Faith Efforts section of the instructions and attach a Schedule C and all other necessary documentation. Firms must be DBE certified with an authorized agent of the LA UCP to count participation towards the goal.  The undersigned prime firm will enter into a formal written agreement with the subcontractors / consultants/ vendors identified herein for work and/or goods and services as shown in this schedule, conditioned upon the execution of a contract with the RTA. The undersigned agrees to be contractually bound to maintain the level of DBE participation set forth above. Failure to comply with this									
greement constitutes breach of contract.  Date: 12/14/2021									
rinted Name:_	Christo	pher Walker	Title:	Man	aging Men	nbe	r		

# RTA )) Regional Transit Authority DBE FORM 2 - DBE PARTICIPATION QUESTIONNAIRE

**INSTRUCTIONS:** Unless otherwise instructed by the Bidding Documents, this form must be submitted at time of Submission. This information is to be collected and documented for all federally funded projects as required by the Department of Transportation 49 CFR Part 26. All items requested on the form are required, if an item is not applicable, respondents shall enter *NIA*. Each prime firm participating as a joint venture should complete a separate form and indicate (Item 9) that the response is a joint venture.

I Total Control of the Control of th				
Project name, project number and date of submittal:	2. Official name of firm:	3. Address of office to perform work:		
Napoleon Facility Renovation &	C.D.W. Services LLC	3500 N Causeway Blvd, Ste 1208 Metairie, LA 70002		
Upgrade		IVIELAITIE, LA 70002		
IFB #2021-031	Indicate if prime or subcontractor:	1		
12/14/2021	PRIME			
4 Name of parameters if any		E Ago of Even.		
4. Name of parent company, if any:	Location of headquarters (city):	6. Age of firm;		
N/A	<sup>5.</sup> Metairie, LA	16 years		
7. Name, title, and telephone number of principal contact:	8. Indicate Special Status:			
	Small business	✓ SLDBE certified		
Christopher Walker	✓ Minority-ownedpusiness	✓ LAUCP DBE ceftpd*		
Managing Member	Woman-owned business	☐ SBE certified*		
504-828-2061		must be certified by the Louisiana Unified		
Certification Program (LAUCP) by the date of submittal. Current letter of				
shall be attached.				
9. Is this submittal a joint venture (JV)?	10. Summary of firm's annual reven			
D Yes Ø No	Last Year 2 Y	ears ago 3 Years ago		
	6	66		
If so, has the N worked together before?	Ranges of a	nnual revenues received:		
D Yes O No		<u>idex</u>		
		4 \$2,000,000 to		
		\$500,000-\$1,000,000 5		
	\$5,000,000 to \$6,000,000 3 \$1,000,000 to \$2,000,000	6 \$6,000,000 or greater		
	3 \$1,000,000 to \$2,000,000	o \$0,000,000 of greater		
AFFIRMATIONS:				
I have reviewed the attached DBE Form I Sci	nedule of Contract Participation and DBE	Commitment and confirm that the scope		
and price described was fairly negotiated.	l further affirm that my firm is ready, will	ing, and able to perform the work as		
described and according to the requiren	nents of the bid specifications.			
D I do solemnly declare and affirm under the pe	nalties of perjuny that the contents of this	document are true and correct, and that I am		
authorized on behalf of this firm to make	e this affidavit	document are true and correct, and that rain		
and the state of t				
		10/14/10004		
Signature:		Date: 12/14/2021		
Printed Name: Christopher Walker		<u> </u>		

# PARTICIPANT INFORMATION FORM

All offerors are required to submit the information contained on this form. This information is a condition of submitting an offer to the RTA. Offerors must insure that **ALL** sub-contractors, sub-contractors or others at all tiers, which are proposed to be used or used under any agreement issued by RTA have submitted an executed copy of this form. RTA is required to maintain this information by the Federal Transit Administration and it is not subject to waiver.

Firm Name Adam Wooley Painting ILC
Firm Address 516 Stewart Ave. River Ridse, 1 70123
Telephone Number 504-655-5742
Fax Number NIA
E-Mail Address Wooler Mainting yohoo com
Firm's status as Disadvantaged Business Enterprise (DBE) or Non- DBE Non- DBE
Age of the firm 1/415
Annual gross receipts of the firm 1,750,000,00
Prime or Sub-Contractor Sub-Contractor
NAICS code (s)
I certify to the best of my knowledge that the above information is true and correct:
Signature Udum Wooling
Title Dunce
RTA Project No. 2021 - 031

FAILURE TO PROVIDE AN EXECUTED COPY OF THIS FORM AS STIPULATED HEREIN MAY PRECLUDE YOUR OFFER FROM CONSIDERATION FOR AWARD.

# **RTA** )) Regional Transit Authority DBE FORM 2 - DBE PARTICIPATION QUESTIONNAIRE

INSTRUCTIONS: Unless otherwise instructed by the Bidding Documents, this form must be submitted at time of Submission. This information is to be collected and documented for all Ederally funded projects as required by the Department of Transportation 49 CFR Part 26. All items requested on the form are required, if an item is not applicable, respondents shall enter NIA. Each prime firm participating as a joint venture should complete a separate form and indicate (Item 9) that the response is a joint venture.

of office to perform work:
olcon Ave.
ns, LA 70130
m:
rs
DBE certified
JCP DBE ce <b>fti</b> ed* E certified*
ed by the Louisiana Unified
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ex number:
3 Years ago
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or greater
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-14-21
Dunge

# **RTA** )) Regional Transit Authority DBE FORM 2 - DBE PARTICIPATION QUESTIONNAIRE

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Projectname, project number and date of submittal:	2. Official name of firm:	3. Address of office to perform work:
RTA	WALDO BROTHERS INC	3621 RIDGELAKE DRIVE
NAPOLEON FACILITY		#302
RENOVATION & UPGRADE	Indicate if prime or subcontractor:	METAIRIE LA 70002
IFB#2021-031	Indicate if prime or subcontractor: MATERIAL SUPPLIER ONLY	
4. Name of parent company, if any:	Location of headquarters (city):	6. Age of firm:
	5. METAIRIE	82
7. Name, title, and telephone number of principal contact:	8. Indicate Special Status:	
MARY KAY COWEN	★ Small business	SLDBE certified
PRESIDENT	Minority-owned usiness	LAUCP DBE cefted*
504-834-8456	Woman-owned business	SBE certified*
	*A firm participating as a DBE or SBE must be certified by the Louisiana Unified Certification Program (LAUCP) by the date of submittal. Current letter of certification	
	shall be attached.	ado of bushinasi. Surform lotter of continuation
9. Is this submittal a joint venture (JV)?	10. Summary of firm's annual reven	
D Yes No	Last Year 2 Y	/ears ago 3 Years ago
	/	1
If so, has the N worked together before?		nnual revenues received:
D Yes 🕅 No		ndex
	l less than \$500,000 \$4,000,000 2	4 \$2,000,000 to \$500,000-\$1,000,000 5
	\$5,000,000 to \$6,000,000	Ψογο,οσο-ψ1,οσο,οσο
	3 \$1,000,000 to \$2,000,000	6 \$6,000,000 or greater
AFFIRMATIONS:		
I have reviewed the attached DBE Form I Sc	hedule of Contract Participation and DBE	Commitment and confirm that the scope
and price described was fairly negotiated.	I further affirm that my firm is ready, will	ling, and able to perform the work as
described and according to the requirer	nents of the bid specifications. $-\omega$	ARRANTIES TO BE
) I do solemnly declare and affirm under the pe	nalties of periury that the contents of this	document are true and correct, and that I am
authorized on behalf of this firm to make	e this affidavit.	,
$\neg M \mid I \mid A$		/ /
Signature: // lary Kay Co	wen	Date: 12/13/2021
Printed Name: MARY KAY COLD		PORKIDEUT

## PARTICIPANT INFORMATION FORM

All offerors are required to submit the information contained on this form. This information is a condition of submitting an offer to the RTA. Offerors must insure that **ALL** sub-contractors, sub-contractors or others at all tiers, which are proposed to be used or used under any agreement issued by RTA have submitted an executed copy of this form. RTA is required to maintain this information by the Federal Transit Administration and it is not subject to waiver.

$\mathcal{L}$
Firm Name WALDO BROTHERS INC 3621 RIDGELAKE DR #302
Firm Address METRIRIE LA 70002
Telephone Number <u>504-834-8456</u>
Fax Number <u>504-832-0125</u>
E-Mail Address MARYKAY @ WALDO BROTHERS, COM
Firm's status as Disadvantaged Business Enterprise (DBE) or Non- DBE DBE
Age of the firm $82$
Annual gross receipts of the firm #350, 000 °°
Prime or Sub-Contractor VENDOR/MATERIAL SUPPLIER DNLY
NAICS code (s) 423390, 425120
I certify to the best of my knowledge that the above information is true and correct:
Signature Mary Kay Cower
Title PRESIDENT
Date /2-/3-2021
RTA Project No. 2021-031

FAILURE TO PROVIDE AN EXECUTED COPY OF THIS FORM AS STIPULATED HEREIN MAY PRECLUDE YOUR OFFER FROM CONSIDERATION FOR AWARD.