

**ENGINEERING DESIGN OF
MISCELLANEOUS WATER IMPROVEMENTS PROJECTS CONTRACT #3
CONTRACT NO. 2022-00000381
E21001.820022, RFS# 22 - 704
SUPPLEMENTAL AGREEMENT NO. 2**

THE STATE OF LOUISIANA)

KNOW ALL MEN BY THESE PRESENTS:

CADDO PARISH)

THIS SUPPLEMENTAL AGREEMENT made and executed in three (03) copies this ____ day of _____, 2024, by and between the City of Shreveport, hereinafter referred to as "City" and Aillet, Fenner, Jolly, & McClelland, Inc. hereinafter referred to as the "Engineer".

WITNESSETH THAT;

WHEREAS, the City and the Engineer entered into a Contract on October 11, 2022, to provide all the necessary materials, labor, equipment, and to carry out and complete in good form, firm, and substantial manner Engineering Design of Miscellaneous Water Improvement Projects Contract #3, E21001.820022 per RFS# 22 - 704, and;

WHEREAS, the City desires to amend the Contract under the conditions of this Supplemental Agreement for a fee that is acceptable to the City;

NOW THEREFORE, it is hereby agreed between the parties hereto that the Contract of October 11, 2022, be further modified as follows:

SCOPES OF SERVICES

The scope of services amended under this Supplemental Agreement are for Design Services outlined in Contract.

COMPENSATION

The City shall pay and the Engineer agrees to accept, as full compensation for the services to be performed under this Supplemental Agreement, an additional fee not to exceed Five Hundred Thousand Dollars and No Cents (\$500,000.00), paid at the prices and rates as per Contract.

The total amount under this Contract is thereby increased from an amount of \$350,000.00 to an amount of \$850,000.00.

ORIGINAL CONTRACT

All requirements of the aforesaid Contract of October 11, 2022, except as specifically modified by this Supplemental Agreement, shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have caused this Supplemental Agreement to be executed by their respective officers duly authorized as of the day and year first above written.

WITNESSES:

CITY OF SHREVEPORT

BY: _____

Tom Arceneaux, Mayor

Aillet, Fenner, Jolly, & McClelland, Inc.

BY: Mark W. Snow

Mark W. Snow, Principal

Yvonne Rocherbaum
Susan Conillion


City of Shreveport

UTILIZATION/CONTRACT TRACKING-FSC FORM 2

This multipurpose form is used to list all types of subs and changes to their status for Fair Share and Contract Tracking Reporting. (Revised 1/20/2021)

1. IFB/RFP/RFS/RFO # (Circle 1) RES 22-704 2. Project Name Miscellaneous Water Improvement Projects
Aillet, Fenner, Jolly
 3. Prime Contractor & McClelland, Inc. 4. Bid Amount of Total Project (\$) 850,000.00
 5. Prime Contractor's Federal Tax ID # 72-0537501 Change Order? Yes or No C/O # _____

List all Subcontractors (copy as needed)	Status – Circle all that apply	Type of work to be performed	Subcontracted Amount \$ + or (–)
Federal I.D. # <u>45-2545775</u> Company <u>Dave Rambaran Geosciences, LLC</u> Name <u>Dave Rambaran</u> Address <u>PO Box 8812, Shreveport, LA 71148</u> Phone # <u>318-780-8292</u> Fax # <u>N/A</u> E-Mail <u>daverambaran@drgeosciences.com</u> State Class/License # <u>0005065 Engineering Firm</u>	(FSC) (DBE)	Geotechnical Services	To be determined as task orders are issued
Federal I.D. # <u>27-1962582</u> Company <u>Owen Engineering, LLC</u> Name <u>Mark E. Owen</u> Address <u>900 Market St, Ste 201, Shreveport, LA 71101</u> Phone # <u>318-828-1126</u> Fax # <u>N/A</u> E-Mail <u>mark@owenengineeringllc.com</u> State Class/License # <u>4546 Engineering Firm</u>	(FSC) DBE	Hydraulic Analysis, Data Collection, Design Assistance	To be determined as task orders are issued
Federal I.D. # <u>72-1125959</u> Company <u>Hall Builders, Inc.</u> Name <u>Rickey R. Hall</u> Address <u>1185 Hawn Ave, Shreveport, LA 71107</u> Phone # <u>318-222-4610</u> Fax # <u>318-424-2430</u> E-Mail <u>rickeyhall@hallbuildersinc.com</u> State Class/License # <u>23092 Municipal & Public Works Cons</u>	(FSC) (DBE)	Construction Observation Assistance	Hourly NTE \$26,000

Prime Contractor's Signature  Date: 01/06/2025 Phone: 318-425-7452
 Project Mgr. Signature: _____ Date: _____ Fair Share Office Approval: _____ Date: _____

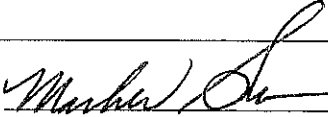
City of Shreveport

UTILIZATION/CONTRACT TRACKING-FSC FORM 2

This multipurpose form is used to list all types of subs and changes to their status for Fair Share and Contract Tracking Reporting. (Revised 1/20/2021)

1. IFB/RFP/RFS/RFQ # (Circle 1) RFS-704 2. Project Name Miscellaneous Water Improvement Projects
 3. Prime Contractor Aillet, Fenner, Jolly & McClelland, Inc. 4. Bid Amount of Total Project (\$) 850,000.00
 5. Prime Contractor's Federal Tax ID # 72-0537501 Change Order? Yes or No C/O # _____

List all Subcontractors (copy as needed)	Status – Circle all that apply	Type of work to be performed	Subcontracted Amount \$ + or (–)
Federal I.D. # <u>27-4329444</u> Company <u>ABCD GIS Mapping, LLC</u> Name <u>Xingwen Chen</u> Address <u>400 Travis St, Ste 910, Shreveport, LA 71101</u> Phone # <u>318-518-8054</u> Fax # <u>N/A</u> E-Mail <u>xingwenchen@gmail.com</u> State Class/License # _____	FSC, DBE	GIS Mapping Assistance	TBD
Federal I.D. # <u>85-1251967</u> Company <u>Dunham Engineering, LLC</u> Name <u>Jeff Leubner</u> Address <u>6102 Imperial Loop Dr., College Station, TX 77845</u> Phone # <u>979-676-0270</u> Fax # _____ E-Mail <u>jeff.leubner@hmttank.com</u> State Class/License # _____	FSC, DBE		\$256,590.93
Federal I.D. # _____ Company _____ Name _____ Address _____ Phone # _____ Fax # _____ E-Mail _____ State Class/License # _____	FSC, DBE		

Prime Contractor's Signature  Date: 01/06/2025 Phone: 318-425-7452
 Project Mgr. Signature: _____ Date: _____ Fair Share Office Approval: _____ Date: _____



Bid # _____ PROJECT# 22-704 FSC FORM 4

Fair Share / Disadvantaged Business Enterprise Compliance Management

**LETTER OF INTENT TO PERFORM AS A PRIME CONTRACTOR AND
UTILIZE A SUBCONTRACTOR/SUBCONSULTANT**

[NOTE: Pursuant to the City of Shreveport's Fair Share Program for Equal Business Opportunity, established by Ordinance No. 105, 1999, 7-27-99, DBE firms participating in the Program must have current certification status prior to award of a contract where they are counted towards subcontracting participation. If the City of Shreveport determines that a firm is not an eligible DBE firm, that firm is advised to immediately submit a completed certification application to the State of Louisiana, Department of Transportation and Development, LAUCP Section, P.O. Box 94245, Baton Rouge, LA 70804-9245 for consideration on subsequent projects.

1. Name of Project Miscellaneous Water Improvement Projects
2. Name of offeror/prime contractor Aillet, Fenner, Jolly & McClelland, Inc.
3. The undersigned is prepared to perform the following described work and/or supply the material listed in connection with the above project (where applicable specify "supply", "install" or "perform particular services"):
TO BE DETERMINED

_____ at the price of \$ TBD
Dave Rambaran Geosciences, LLC
(Name of DBE/FSC Firm) (Date) 11/12/24
Dave Rambaran
Circle one (Owner/Authorized Agent of DBE/FSC firm) Type or Print Name (Signature of Owner or Authorized Agent of DBE /FSC Firm)
318-780-8292
(Phone Number) (Fax Number)

AFFIDAVIT OF PRIME CONTRACTOR

I HEREBY DECLARE AND AFFIRM that I, Mark W. Snow am the duly authorized representative of
(Circle one-Owner/Authorized Agent)
Aillet, Fenner, Jolly & McClelland, Inc.
Name of Prime Contractor and that I have personally reviewed the material and

facts set forth in this Letter of Intent to Perform. To the best of my knowledge, information, and belief, the facts in this form are true, and no material facts have been omitted.

Pursuant to the City of Shreveport Ordinance, No. 105, 1999, 7-27-99, Sec. 2-414, Intentional failure by a contractor or service provider to include these designated businesses could constitute breach of contract and result in remedial action. Further, any person [entity] who makes a false or fraudulent statement in connection with participation of a DBE or FSC in any City of Shreveport contract may be referred for debarment procedures from subsequent contracts with the City of Shreveport.

I do solemnly swear or affirm that the signatures contained herein and the information provided by the Prime Contractor are true and correct, and that I am authorized on behalf of the Prime Contractor to make this affidavit.

Mark W. Snow
Circle One (Owner/ Authorized Agent) Type or Print Name (Name of Prime Contractor company/firm -Print or Type)
Mark W. Snow November 12, 2024
(Signature of Owner or Authorized Agent) (Date)
318-425-7452 318-425-4622
(Phone Number) (Fax Number) (Revised 8-30-07)



Bid # _____ PROJECT# 22-704 FSC FORM 4

Fair Share / Disadvantaged Business Enterprise Compliance Management

LETTER OF INTENT TO PERFORM AS A PRIME CONTRACTOR AND UTILIZE A SUBCONTRACTOR/SUBCONSULTANT

[NOTE: Pursuant to the City of Shreveport's Fair Share Program for Equal Business Opportunity, established by Ordinance No. 105, 1999, 7-27-99, DBE firms participating in the Program must have current certification status prior to award of a contract where they are counted towards subcontracting participation. If the City of Shreveport determines that a firm is not an eligible DBE firm, that firm is advised to immediately submit a completed certification application to the State of Louisiana, Department of Transportation and Development, LAUCP Section, P.O. Box 94245, Baton Rouge, LA 70804-9245 for consideration on subsequent projects.

1. Name of Project Miscellaneous Water Improvement Projects
2. Name of offeror/prime contractor Aillet, Fenner, Jolly & McClelland, Inc.
3. The undersigned is prepared to perform the following described work and/or supply the material listed in connection with the above project (where applicable specify "supply", "install" or "perform particular services"):
TO BE DETERMINED

at the price of \$ TBD

Owen Engineering, LLC

(Name of DBE/FSC Firm)

Mark E. Owen

Circle one (Owner/Authorized Agent of DBE/FSC firm) Type or Print Name

(Date)

NOV. 7, 2024

(Signature of Owner/Authorized Agent of DBE/FSC Firm)

318-828-1126

(Phone Number)

N/A

(Fax Number)

AFFIDAVIT OF PRIME CONTRACTOR

I HEREBY DECLARE AND AFFIRM that I, Mark W. Snow am the duly authorized representative of
(Circle one-Owner/Authorized Agent)

Aillet, Fenner, Jolly & McClelland, Inc.

Name of Prime Contractor

and that I have personally reviewed the material and

facts set forth in this Letter of Intent to Perform. To the best of my knowledge, information, and belief, the facts in this form are true, and no material facts have been omitted.

Pursuant to the City of Shreveport Ordinance, No. 105, 1999, 7-27-99, Sec. 2-414, Intentional failure by a contractor or service provider to include these designated businesses could constitute breach of contract and result in remedial action. Further, any person [entity] who makes a false or fraudulent statement in connection with participation of a DBE or FSC in any City of Shreveport contract may be referred for debarment procedures from subsequent contracts with the City of Shreveport.

I do solemnly swear or affirm that the signatures contained herein and the information provided by the Prime Contractor are true and correct, and that I am authorized on behalf of the Prime Contractor to make this affidavit.

Mark W. Snow

Circle One (Owner/Authorized Agent) Type or Print Name

Aillet, Fenner, Jolly & McClelland, Inc.

(Name of Prime Contractor company/firm -Print or Type)

(Signature of Owner or Authorized Agent)

(Date)

November 7, 2024

318-425-7452

318-425-4622

(Phone Number)

(Fax Number)

(Revised 8-30-07)



Bid # _____ PROJECT# 22-704 FSC FORM 4

Fair Share / Disadvantaged Business Enterprise Compliance Management

**LETTER OF INTENT TO PERFORM AS A PRIME CONTRACTOR AND
UTILIZE A SUBCONTRACTOR/SUBCONSULTANT**

[NOTE: Pursuant to the City of Shreveport's Fair Share Program for Equal Business Opportunity, established by Ordinance No. 105, 1999, 7-27-99, DBE firms participating in the Program must have current certification status prior to award of a contract where they are counted towards subcontracting participation. If the City of Shreveport determines that a firm is not an eligible DBE firm, that firm is advised to immediately submit a completed certification application to the State of Louisiana, Department of Transportation and Development, LAUCP Section, P.O. Box 94245, Baton Rouge, LA 70804-9245 for consideration on subsequent projects.

1. Name of Project Miscellaneous Water Improvement Projects
2. Name of offeror/prime contractor Aillet, Fenner, Jolly & McClelland, Inc.
3. The undersigned is prepared to perform the following described work and/or supply the material listed in connection with the above project (where applicable specify "supply", "install" or "perform particular services"):

HOURLY NTE \$26,000.00 at the price of \$ 26,000.00 (HNTE)

Hall Builders, Inc.

(Name of DBE/FSC Firm)

(Date)

Rickey R. Hall

Circle one (Owner/Authorized Agent of DBE/FSC firm) Type or Print Name

(Signature of Owner or Authorized Agent of DBE/FSC Firm)

318-222-4610

(Phone Number)

318-424-2430

(Fax Number)

AFFIDAVIT OF PRIME CONTRACTOR

I HEREBY DECLARE AND AFFIRM that I, Mark W. Snow am the duly authorized representative of
(Circle one-Owner/Authorized Agent)

Aillet, Fenner, Jolly & McClelland, Inc.

Name of Prime Contractor

and that I have personally reviewed the material and

facts set forth in this Letter of Intent to Perform. To the best of my knowledge, information, and belief, the facts in this form are true, and no material facts have been omitted.

Pursuant to the City of Shreveport Ordinance, No. 105, 1999, 7-27-99, Sec. 2-414, intentional failure by a contractor or service provider to include these designated businesses could constitute breach of contract and result in remedial action. Further, any person [entity] who makes a false or fraudulent statement in connection with participation of a DBE or FSC in any City of Shreveport contract may be referred for debarment procedures from subsequent contracts with the City of Shreveport.

I do solemnly swear or affirm that the signatures contained herein and the information provided by the Prime Contractor are true and correct, and that I am authorized on behalf of the Prime Contractor to make this affidavit.

Mark W. Snow

Circle One (Owner/ Authorized Agent) Type or Print Name

Aillet, Fenner, Jolly & McClelland, Inc.

(Name of Prime Contractor company/firm -Print or Type)

(Signature of Owner or Authorized Agent)

(Date)

318-425-7452

318-425-4622

(Phone Number)

(Fax Number)

(Revised 8-30-07)



Bid # _____ PROJECT# 22-704 FSC FORM 4

Fair Share / Disadvantaged Business Enterprise Compliance Management

LETTER OF INTENT TO PERFORM AS A PRIME CONTRACTOR AND UTILIZE A SUBCONTRACTOR/SUBCONSULTANT

[NOTE: Pursuant to the City of Shreveport's Fair Share Program for Equal Business Opportunity, established by Ordinance No. 105, 1999, 7-27-99, DBE firms participating in the Program must have current certification status prior to award of a contract where they are counted towards subcontracting participation. If the City of Shreveport determines that a firm is not an eligible DBE firm, that firm is advised to immediately submit a completed certification application to the State of Louisiana, Department of Transportation and Development, LAUCP Section, P.O. Box 94245, Baton Rouge, LA 70804-9245 for consideration on subsequent projects.

1. Name of Project Miscellaneous Water Improvement Projects
2. Name of offeror/prime contractor Aillet, Fenner, Jolly & McClelland, Inc.
3. The undersigned is prepared to perform the following described work and/or supply the material listed in connection with the above project (where applicable specify "supply", "install" or "perform particular services"):
TO BE DETERMINED

		at the price of \$ <u>TBD</u>
<u>ABCD GIS Mapping, LLC</u>		<u>11/7/2024</u>
(Name of DBE/FSC Firm)		(Date)
<u>Xingwen Chen</u>		<u>[Signature]</u>
Circle one (Owner/Authorized Agent of DBE/FSC firm) Type or Print Name		(Signature of Owner or Authorized Agent of DBE /FSC Firm)
<u>318-518-8054</u>		
(Phone Number)		(Fax Number)

AFFIDAVIT OF PRIME CONTRACTOR

I HEREBY DECLARE AND AFFIRM that I, Mark W. Snow am the duly authorized representative of
(Circle one-Owner/Authorized Agent)

Aillet, Fenner, Jolly & McClelland, Inc. and that I have personally reviewed the material and
Name of Prime Contractor

facts set forth in this Letter of Intent to Perform. To the best of my knowledge, information, and belief, the facts in this form are true, and no material facts have been omitted.

Pursuant to the City of Shreveport Ordinance, No. 105, 1999, 7-27-99, Sec. 2-414, Intentional failure by a contractor or service provider to include these designated businesses could constitute breach of contract and result in remedial action. Further, any person [entity] who makes a false or fraudulent statement in connection with participation of a DBE or FSC in any City of Shreveport contract may be referred for debarment procedures from subsequent contracts with the City of Shreveport.

I do solemnly swear or affirm that the signatures contained herein and the information provided by the Prime Contractor are true and correct, and that I am authorized on behalf of the Prime Contractor to make this affidavit.

Mark W. Snow
Circle One (Owner/ Authorized Agent) Type or Print Name
[Signature]
(Signature of Owner or Authorized Agent)
318-425-7452
(Phone Number)

Aillet, Fenner, Jolly & McClelland, Inc.
(Name of Prime Contractor company/firm -Print or Type)
November 7, 2024
(Date)
318-425-4622
(Fax Number) (Revised 8-30-07)



Bid # _____ PROJECT# 22-704 FSC FORM 4

Fair Share / Disadvantaged Business Enterprise Compliance Management

**LETTER OF INTENT TO PERFORM AS A PRIME CONTRACTOR AND
UTILIZE A SUBCONTRACTOR/SUBCONSULTANT**

[NOTE: Pursuant to the City of Shreveport's Fair Share Program for Equal Business Opportunity, established by Ordinance No. 105, 1999, 7-27-99, DBE firms participating in the Program must have current certification status prior to award of a contract where they are counted towards subcontracting participation. If the City of Shreveport determines that a firm is not an eligible DBE firm, that firm is advised to immediately submit a completed certification application to the State of Louisiana, Department of Transportation and Development, LAUCP Section, P.O. Box 94245, Baton Rouge, LA 70804-9245 for consideration on subsequent projects.

1. Name of Project Miscellaneous Water Improvement Projects
2. Name of offeror/prime contractor Aillet, Fenner, Jolly & McClelland, Inc.
3. The undersigned is prepared to perform the following described work and/or supply the material listed in connection with the above project (where applicable specify "supply", "install" or "perform particular services"):
Construction / Quality Assurance Inspections for multiple tanks, including Linwood EST, Pines Road & 70th GWTs (2)
and Caddo-Bossier Port EST at the price of \$ 256,590.93
Dunham Engineering, LLC 12-4-24
(Name of DBE/FSC Firm) (Date)
Carol Scott Carol Scott
Circle one (Owner/Authorized Agent of DBE/FSC firm) Type or Print Name (Signature of Owner or Authorized Agent of DBE/FSC Firm)
979-676-0270
(Phone Number) (Fax Number)

AFFIDAVIT OF PRIME CONTRACTOR

I HEREBY DECLARE AND AFFIRM that I, Mark W. Snow am the duly authorized representative of
(Circle one-Owner/Authorized Agent)
Aillet, Fenner, Jolly & McClelland, Inc. and that I have personally reviewed the material and
Name of Prime Contractor

facts set forth in this Letter of Intent to Perform. To the best of my knowledge, information, and belief, the facts in this form are true, and no material facts have been omitted.

Pursuant to the City of Shreveport Ordinance, No. 105, 1999, 7-27-99, Sec. 2-414, Intentional failure by a contractor or service provider to include these designated businesses could constitute breach of contract and result in remedial action. Further, any person [entity] who makes a false or fraudulent statement in connection with participation of a DBE or FSC in any City of Shreveport contract may be referred for debarment procedures from subsequent contracts with the City of Shreveport.

I do solemnly swear or affirm that the signatures contained herein and the information provided by the Prime Contractor are true and correct, and that I am authorized on behalf of the Prime Contractor to make this affidavit.

Mark W. Snow
Circle One (Owner/ Authorized Agent) Type or Print Name
Mark W. Snow
(Signature of Owner or Authorized Agent)
318-425-7452
(Phone Number)

Aillet, Fenner, Jolly & McClelland, Inc.
(Name of Prime Contractor company/firm -Print or Type)
12-11-24
(Date)
318-425-4622
(Fax Number) (Revised 8-30-07)

City of Shreveport

IFB/RFQ/RFP/RFS # 22-704 PROJECT Miscellaneous water Improvements

CONTRACT VERIFICATION-DBE/FSC FORM 6

To be used for Architecture/Engineering, Construction & Service Contracts. This document must be furnished within five (5) working days after the City executed contract is picked up by the prime contractor. **The Notice to Proceed will not be issued until this form is received by the Project Manager for the City.** Project Manager sends copy to the Fair Share Office and Purchasing Division.

Is there a possibility other subs will be reported at a later date? Yes/No (circle one). Revised 6-2-10.

By signing this document, the contractor hereby certifies, understands, and affirms that he/she has signed a contract (includes signed proposal, signed purchase order, or written contract) with the following subcontractors:

LIST ALL SUBCONTRACTORS WITH SIGNED CONTRACTS	*ALREADY LISTED ON FORM 2 (YES OR NO)	REPLACES THIS SUB THAT WAS LISTED ON FORM 2	SIGNED CONTRACT AMOUNT \$
Dave Rambaran Geosciences, LLC	Yes		To be determined if needed
Owen Engineering, LLC	Yes		To be determined if needed
Hall Builders, Inc.	Yes		Hourly NTE \$26,000.00
ABCD GIS Mapping, LLC	Yes		To be determined if needed
Dunham Engineering, LLC	Yes		\$256,590.93


*If answer is "no" list sub they replaced in the next column and attached a revised Form 2.

The City reserves the right to require the contractor to produce or provide copies of any/all contracts listed. Pursuant to the City of Shreveport Ordinance, No. 105, 1999, 7-27-99, Sec. 2-414, Intentional failure by a contractor or service provider to include these designated businesses could constitute breach of contract and result in remedial action. Further, any person [entity] who makes a false or fraudulent statement in connection with participation of a **DBE** or **FSC** in any City of Shreveport contract may be referred for debarment procedures from subsequent contracts with the City of Shreveport.

I do solemnly swear or affirm that the signatures contained herein and the information provided by the Prime Contractor are true and correct, and that I am authorized on behalf of the Prime Contractor to make this affidavit.

Mark W. Snow

Circle One (Owner/ Authorized Agent) Type or Print Name


(Signature of Owner or Authorized Agent)

318-425-7452

(Phone Number)

mwsnow@afjmc.com

(E-Mail Address)

Aillet, Fenner, Jolly & McClelland, Inc.

(Name of Prime Contractor company/firm -Print or Type)

3003 Knight St., Suite 120, Shreveport, LA 71105

(Physical Address)

January 6, 2025

(Date)

318-425-4622

(Fax Number)

City of Shreveport

FELONY CONVICTION/E-VERIFY AFFIDAVIT

This document must be furnished by the **lowest responsive bidder** in a separate envelope, or by fax, or e-mail not later than then 10 days after the bid opening. Failure to submit at the specified time may result in the bid being declared as non-responsive. **Do not submit in your bid document.**

By signing this document in accordance with La. R.S. 38:2227, the appearer, as a bidder on the above project, does hereby attest that:

- 1.0 No sole proprietor or individual partner, incorporator, director, manager, officer, organizer, or member who has a minimum of a ten percent (10%) ownership in the bidding entity named below has been convicted of, or has entered a plea of guilty or nolo contendere to any of the following state crimes or equivalent federal crimes:
 - 1.1 Public bribery (R.S. 14:118)
 - 1.2 Extortion (R.S. 14:66)
 - 1.3 Corrupt influencing (R.S. 14:120)
 - 1.4 Money laundering (R.S. 14:23)
- 2.0 Within the past five years from the project bid date, no sole proprietor or individual partner, incorporator, director, manager, officer, organizer, or member who has a minimum of a ten percent (10%) ownership in the bidding entity named below has been convicted of, or has entered a plea of guilty or nolo contendere to any of the following state crimes or equivalent federal crimes, during the solicitation or execution of a contract or bid awarded pursuant to the provisions of Chapter 10 of Title 38 of the Louisiana Revised Statutes:
 - 2.1 Theft (R.S. 14:67)
 - 2.2 Identity Theft (R.S. 14:67.16)
 - 2.3 Theft of a business record (R.S.14:67.20)
 - 2.4 False accounting (R.S. 14:70)
 - 2.5 Issuing worthless checks (R.S. 14:71)
 - 2.6 Bank fraud (R.S. 14:71.1)
 - 2.7 Forgery (R.S. 14:72)
 - 2.8 Contractors; misapplication of payments (R.S. 14:202)
 - 2.9 Malfeasance in office (R.S. 14:134)
- 3.0 By signing this document in accordance with La. R.S. 38:2212.10, the appearer, as a bidder on the above project, does hereby attest that:
 - 3.1 The private employer is registered and participates in a status verification system (E-Verify) to verify that all employees in the state of Louisiana are legal citizens of the United States or are legal aliens.
 - 3.2 The private employer shall continue, during the term of the contract, to utilize a status verification system to verify the legal status of all new employees in the state of Louisiana.
 - 3.3 The private employer shall require all subcontractors to submit to the employer a sworn affidavit verifying compliance with Paragraphs (3.1) and (3.2) of this Subsection.

If evidence is submitted substantiating that a false attestation has been made and the project must be readvertised or the contract cancelled, the awarded entity making the false attestation shall be responsible to the public entity for the cost of rebidding, additional costs due to increased cost of bids and any and all delay costs due to the rebid or cancellation of the contract.

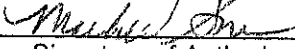
And, executes this document as:

Company Name: Aillet, Fenner, Jolly & McClelland, Inc.

Address: 3003 Knight St., Suite 120, Shreveport, LA 71105

Phone Number: 318-425-7452

FAX Number: 318-425-4622

By:  Principal November 5, 2024

Signature of Authorized Owner or Representative

Title

Date

Print Name: Mark W. Snow

E-Mail Address: mwsnow@afjmc.com

Fax to: 318-673-5408

OR E-Mail to: renee.anderson@shreveportla.gov

(10-23-15)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/19/2024

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).

PRODUCER Querbes & Nelson 214 Mliam Street Shreveport LA 71101	CONTACT NAME: Briana Morris PHONE (A/C, No, Ext): (318) 221-5241 E-MAIL ADDRESS: Briana.Morris@MarshMMA.com FAX (A/C, No): (318) 429-0599																					
INSURED Aillet, Fenner, Jolly & McClelland 3003 Knight St Ste 120 Shreveport LA 71105	<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>Twin City Fire Insurance Company</td><td>29459</td></tr><tr><td>INSURER B:</td><td>Hartford Accident and Indemnity Company</td><td>22357</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:	Twin City Fire Insurance Company	29459	INSURER B:	Hartford Accident and Indemnity Company	22357	INSURER C:	LUBA Casualty Insurance Company	12472	INSURER D:			INSURER E:			INSURER F:		
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COVERAGES

CERTIFICATE NUMBER: 24-25 Master - Updated

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS														
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		43SBABK9605	11/01/2024	11/01/2025	<table><tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr><tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$ 1,000,000</td></tr><tr><td>MED EXP (Any one person)</td><td>\$ 10,000</td></tr><tr><td>PERSONAL & ADV INJURY</td><td>\$ 1,000,000</td></tr><tr><td>GENERAL AGGREGATE</td><td>\$ 2,000,000</td></tr><tr><td>PRODUCTS - COMP/OP AGG</td><td>\$ 2,000,000</td></tr><tr><td>UUM</td><td>\$</td></tr></table>	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000	MED EXP (Any one person)	\$ 10,000	PERSONAL & ADV INJURY	\$ 1,000,000	GENERAL AGGREGATE	\$ 2,000,000	PRODUCTS - COMP/OP AGG	\$ 2,000,000	UUM	\$
EACH OCCURRENCE	\$ 1,000,000																				
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UUM	\$																				
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y		43UECHH4441	11/01/2024	11/01/2025	<table><tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$ 1,000,000</td></tr><tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr><tr><td>Uninsured motorist BI</td><td>\$ 1,000,000</td></tr></table>	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$	Uninsured motorist BI	\$ 1,000,000				
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PROPERTY DAMAGE (Per accident)	\$																				
Uninsured motorist BI	\$ 1,000,000																				
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	Y		43SBABK9605	11/01/2024	11/01/2025	<table><tr><td>EACH OCCURRENCE</td><td>\$ 4,000,000</td></tr><tr><td>AGGREGATE</td><td>\$ 4,000,000</td></tr><tr><td></td><td>\$</td></tr></table>	EACH OCCURRENCE	\$ 4,000,000	AGGREGATE	\$ 4,000,000		\$								
EACH OCCURRENCE	\$ 4,000,000																				
AGGREGATE	\$ 4,000,000																				
	\$																				
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	028000012607125	01/01/2025	01/01/2026	<table><tr><td><input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER</td><td></td></tr><tr><td>E.L. EACH ACCIDENT</td><td>\$ 1,000,000</td></tr><tr><td>E.L. DISEASE - EA EMPLOYEE</td><td>\$ 1,000,000</td></tr><tr><td>E.L. DISEASE - POLICY LIMIT</td><td>\$ 1,000,000</td></tr></table>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER		E.L. EACH ACCIDENT	\$ 1,000,000	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000	E.L. DISEASE - POLICY LIMIT	\$ 1,000,000						
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E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000																				
E.L. DISEASE - POLICY LIMIT	\$ 1,000,000																				
A	Data Breach - Bus Inc & Ex. Exp.			43SBABK9605	11/01/2024	11/01/2025	Limits \$10,000.00														

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

The certificate holder is an additional insured on the General Liability, Business Automobile & Excess policies as required by written contract subject to policy terms, conditions & exclusions. The General Liability, Business Automobile, Workers Compensation & Excess policies contain waiver of subrogation in favor of the certificate holder as required by written contract subject to policy terms, conditions & exclusions.

CERTIFICATE HOLDER

CANCELLATION

City of Shreveport 505 Travis St Shreveport LA 71101	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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AFFIDAVIT

ATTESTING THAT ENTITY OR PERSON
DOES NOT OWN ADJUDICATED OR LIEN PROPERTY AND
DOES NOT OWE OUTSTANDING DEBT TO CITY

* * This affidavit is submitted to document compliance with Shreveport City Code 26-211. * *

BEFORE ME, the undersigned Notary Public duly qualified and commissioned, came and appeared

Mark W. Snow

authorized representative of:

Aillet, Fenner, Jolly & McClelland, Inc.

with a Federal Tax Identification Number (EIN) of:

72-0537501

and with a current email address of:

mwsnow@afjmc.com

who does hereby state as follows, to-wit:

- 1 Business Entity or Person does not own any property which is adjudicated to the City of Shreveport, Louisiana or which has demolition liens, grass cutting liens, or any other Property Standards liens on it. For purposes of this subsection, the term "own" shall mean to be the last record owner of the property prior to a tax sale or adjudication.
- 2 Business Entity or Person does not own more than twenty-five percent (25%) of a legal entity that owns any property which is adjudicated to the City or which has demolition liens, grass cutting liens, or any other Property Standards liens on it.
- 3 Business Entity or Person has paid all taxes, licenses, fees, fines and other charges which are outstanding and due to the City. E.g. false alarm fees, property standard fines, over-due water bills.
- 4 Business Entity or Person will provide written notification to the City's Purchasing Agent no later than the next work day after any of the above statements becomes invalid.
- 5 Upon request of the Purchasing Agent the City reserves the right to require a newly dated issued Affidavit.

BY: Mark W. Snow

Printed Name: Mark W. Snow

Title: Principal

SWORN TO AND SUBSCRIBED BEFORE ME, this 24th day of March, 2022.

Veronica B. Racherbaumer
Notary Public

41838

Notary Identification Number or LA Bar Roll Number

Mail original affidavit via U.S. mail to:

OR

Deliver via other carrier or hand-delivery to:

Purchasing Division

P.O. Box 31109 | Shreveport, LA 71130

Purchasing Division

505 Travis St., Suite 610 | Shreveport, LA 71101

Affidavit must be on file in the Purchasing Office before a contract, purchase order or check is issued.

