

Bidder Information Form

Instructions: Complete the form below. Please provide legible, accurate, and complete contact information. PLEASE PRINT.

Bid Number & Name: (IFB 19-021/JW), Ford Fields Concession Stand

Bidder's Company/Business Name: M&S Barnett Construction DBA Mike Barnett Construction

Bidder's TAX ID Number: 26-439-2034

Contact Person: Russell Bourgeois Title: Commercial Construction Mgr.

Phone Number (with area code): 409-727-5673 ^{cell} -(409) 748-0054

Alternate Phone Number if available (with area code): 409-748-0054

Fax Number (with area code): 409-727-2905

Email Address: russell.bourgeois@yahoo.com

Mailing Address (Please provide a physical address for bid bond return, if applicable):

1701 Port Neches Ave.
Address
Port Neches, TX 77651
City, State, Zip Code

OFFER AND ACCEPTANCE FORM

OFFER TO CONTRACT

To Jefferson County:

We hereby offer and agree to furnish the materials or service in compliance with all terms, conditions, specifications, and amendments in the Invitation for Bid and any written exceptions in the offer. We understand that the items in this Invitation for Bid, including, but not limited to, all required certificates are fully incorporated herein as a material and necessary part of the contract.

The undersigned hereby states, under penalty of perjury, that all information provided is true, accurate, and complete, and states that he/she has the authority to submit this bid, which will result in a binding contract if accepted by Jefferson County.

We acknowledge receipt of the following amendment(s): _____.

I certify, under penalty of perjury, that I have the legal authorization to bind the firm hereunder:

M & S Barnett LTD, DBA Mike Barnett Const

Company Name

1701 Port Neches Ave.

Address

Port Neches, TX 77651

City

State

Zip

For clarification of this offer, contact:

Russell Bourgeois

Name

(409) 748-0054 (409) 727-2905

Phone

Fax

[Signature]

Signature of Person Authorized to Sign

russell.bourgeois@yahoo.com

E-mail

Lance Barnett

Printed Name

G.M. / Partner

Title

Bidder Shall Return Completed Form with Offer.

Acceptance of Offer

The Offer is hereby accepted for Jefferson County Invitation for Bid (IFB 19-021/JW), Ford Fields Concession Stand.

The Contractor is now bound to sell the materials or services listed by the attached contract and based upon the Invitation for Bid, including all terms, conditions, specifications, amendments, etc., and the Contractor's Offer as accepted by Jefferson County.

This contract shall henceforth be referred to as Contract No. 19-021/JW, Ford Fields Concession Stand. The Contractor has not been authorized to commence any billable work or to provide any material or service under this contract until Contractor receives a purchase order and/or a notice to proceed from the Jefferson County Purchasing Agent.

Countersigned:

Jeff R. Branick
County Judge

Date

Attest:

Carolyn L. Guidry
County Clerk

Bidder Shall Return Completed Form with Offer.

Bid Form

X ATTN: DONALD
ADD \$24,000⁰⁰ TO BASE BID
(Twenty-Four Thousand AND ZERO/100)

Bidder proposes to furnish all labor, material and equipment, and to perform all work necessary to construct the **Ford Fields Concession Stand** including Mechanical, Plumbing and Electrical Work, in accordance with drawings and specifications prepared by The LaBiche Architectural Group, Inc., for the following sum:

389 820

Materials Bid Amount: \$ 389,820 .00

Materials Bid Amount Written in Words:

THREE HUNDRED EIGHTY-NINE THOUSAND EIGHT HUNDRED TWENTY DOLLARS AND ZERO/100

Labor Bid Amount: \$ 259,880 .00

Labor Bid Amount Written in Words:

TWO HUNDRED FIFTY-NINE THOUSAND EIGHT HUNDRED EIGHTY DOLLARS AND ZERO/100

Total Base Bid Amount: \$ 649,700.00

Total Base Bid Amount Written in Words:

SIX HUNDRED FORTY-NINE THOUSAND SEVEN HUNDRED DOLLARS AND ZERO/100

Bidder has examined the site of the Work and the nature and kind of work to be performed and has informed themselves of all local conditions and other things that might affect the cost or difficulty of performing the Work, and Bidder represents and warrants that they have experience in the use of materials and methods of performance specified, and that they can and will do the Work and construct the improvements with the specified materials as contemplated and indicated by the Drawings and Specifications.

Upon receipt of notice of acceptance of our bid, Bidder agrees to execute the Contract within 10 (ten) days after such notice, deliver Performance and Payment Bonds for the faithful performance of the Work, to begin work on or before the date of commencement of the Work established in the Notice to Proceed, and to complete the Work in 210 calendar days.

Bidder hereby agrees to commence work under this contract on or before a date to be specified in a written "Notice to Proceed" of the Owner and to fully complete the project on or before the date of completion shown on the "Notice to Proceed". Bidder further agrees to pay as liquidated damages, the sum of \$300.00 for each consecutive calendar day thereafter.

Acknowledgment of Addenda (if any):

Addendum 1	<input checked="" type="checkbox"/>	Date Received	<u>04/08/2019</u>
Addendum 2	<input checked="" type="checkbox"/>	Date Received	<u>04/18/2019</u>
Addendum 3	<input checked="" type="checkbox"/>	Date Received	<u>04/22/2019</u>
Addendum 4	<input checked="" type="checkbox"/>	Date Received	<u>04/30/2019</u>

Bidder Shall Return Completed Form with Offer.

Vendor References

Please list at least three (3) companies or governmental agencies (preferably a municipality) where the same or similar products and/or services as contained in this specification package were recently provided.

THIS FORM MUST BE RETURNED WITH YOUR BID.

REFERENCE ONE

Government/Company Name: Ritter Lumber
Address: ²⁰⁰⁴ Hwy 365 / P.O. Box 1765 Nederland, TX 77627
Contact Person and Title: Sharon Hartford
Phone: 409-727-0231 Fax: 409-722-1339
Email Address: sharon@ritterlumber.net Contract Period: N/A
Scope of Work: N/A

REFERENCE TWO

Government/Company Name: Beacon (RSG) Roofing Supply Co.
Address: 210 Gulf St. Beaumont, TX
Contact Person and Title: Eddie West
Phone: 409-866-0954 Fax: 409-866-1019 (or) 813-3089
Email Address: ewest@rsgroofing.com Contract Period: N/A
Scope of Work: N/A

REFERENCE THREE

Government/Company Name: MBCT
Address: 14031 W. Hardy Rd. Houston, TX 77060
Contact Person and Title: Gary Todd
Phone: 281-445-8555 Fax: 337-234-6664
Email Address: dwschrick@mbct.com Contract Period: N/A
Scope of Work: N/A

Bidder Shall Return Completed Form with Offer.

MIKE BARNETT CONSTRUCTION

COMMERCIAL / INDUSTRIAL / RESIDENTIAL

1701 PORT NECHES AVE, Port Neches TX 77657

Contractor Qualifications

We are providing you with the following information as a statement of our qualifications and to our present/ past accomplishments.

We are providing you with the following invoice summary for your review.

1. Recent Projects:

1. American Legion Hall Reroof 2 ply modified bitumen.
 - Owner: American Legion Post #7
 - Amount- \$138,523.82
2. Plaze Q Reroof 2 ply modified bitumen.
 - Owner: Valerie Dinh
 - Amount - \$153,400.00
3. KCS Reroof Port Arthur Terminal Reroof 2 ply modified bitumen.
 - Owner: KCS Railway
 - Amount -\$88,000.00
4. KCS Reroof Beaumont Terminal Reroof 2 ply modified bitumen.
 - Owner: KCS Railway
 - Amount - \$160,000.00
5. Port Neches Post Office Reroof 2 ply modified bitumen.
 - Owner: City of Port Neches
 - Amount - \$90,000.00
6. Thomas Edison Middle School Reroof 2 ply modified bitumen.
 - Owner: PAISD
 - Amount - \$275,000.00

2. Other Projects:

1. Project-United Methodist Temple Sanctuary Build out -- Restoration Owner:
 - First United Methodist / No Architect
 - Amount - \$85,000.00
 - Percentage of Completion -- 98% Completion -March 2019
2. Our Lady of Guadalupe Catholic church -
 - Owner: The Catholic Diocese of Beaumont-C/o Bishop Guillory / No Architect
 - Amount- \$365,850.00
 - Percentage of Completion -- 95%
 - Completion March of 2019

3. Ridgewood Baptist Church
 - Owner: Ridgewood Baptist Church / No Architect
 - Amount- \$330,000.00
 - Percentage of Completion – 95%
 - Completion March of 2019
4. American Legion Hall
 - Owner: American Legion Post #7 / No Architect
 - Amount- \$407,000.00
 - Percentage of Completion – 100%
 - Completion Jan 2019
5. United Methodist Temple Day Care and Church Build out – Restoration
 - Owner: First United Methodist / No Architect
 - Amount- 1.1 Million
 - 30% in House work
 - Completion: Dec 2017
6. Dr. Risinger Office Renovation -
 - Owner: Dr. Ron Risinger / Architect: LaBiche Architect –Dohn Labiche
 - Amount: Over 550K
 - Completion – Jan 2018
7. St. Mary's Catholic School
 - Owner: Diocese of Beaumont – Bishop Guillory / Architect: None
 - Amount - 365,000.00
 - Completion – Nov 2017
8. Dr. David Prioux
 - Owner: Dr. David Prioux / Architect: MBC – Design Build
 - Amount - \$251,000.00
 - Completion – Dec 2018
9. St Charles Boromero office
 - Owner: Diocese of Beaumont – Bishop Guillory
 - Architect: LaBiche Architect –Dohn Labiche
 - Amount - \$ 110 k
 - Completion – May 2017
10. St Catherine's Catholic Church
 - Owner: Diocese of Beaumont – Bishop Guillory / Architect: None
 - Amount – Over \$100,000.00
 - Completion – Oct 2018

11. Sacred Heart Catholic Church

- Owner: Diocese of Beaumont – Bishop Guillory / Architect: None
- Amount – 85,000.00
- Completion – July 2018

12. KCS Railway –New Metal Bldg Maintenance Shop & Office Bldg.
Corpus Christi, TX

- Owner: Kansas City Railroad
- Amount – \$180,000.00
- Completion – March 2018

13. KCS Railway –New Metal Building Addition to Mechanic Shop
Port Arthur, TX

- Owner: Kansas City Railroad
- Amount -\$105,600.00
- Completion –January 2018

I. Principal Officers and Administration Resume's

- Mrs. Sonya Barnett - President
- Mr. Lance Barnett has over 26 years of construction experience in both commercial and industrial construction. Including roofing, general construction and metal structure.
- Mr. Russell Bourgeois – Over 30 years in the industry.
- Commercial and residential restoration and new construction.
- Fire and water restoration
- Design build
- Construction supervision / PM

II. Trade References:

- Roofing Supply Group
- Ritter Lumber Company
- L & W Supply
- MBCI

III. Banking Institution:

- Community Bank
- Officer: Wendell Meaux

We appreciate your interest in our company and we hope you will allow us the opportunity to bid on your project.

Sincerely,

Russell Bourgeois

Commercial Construction Mgr.

Email: rbourgeoismbc@gmail.com

Cell: 409-740-0054

MIKE BARNETT CONSTRUCTION

COMMERCIAL / INDUSTRIAL / RESIDENTIAL

1701 PORT NECHES AVE, Port Neches TX 77657

Contractor Qualifications

We are providing you with the following information as a statement of our qualifications and to our present/ past accomplishments.

We are providing you with the following invoice summary for your review.

I. Recent Projects:

1. Project-United Methodist Temple Sanctuary Build out – Restoration
 - Owner: First United Methodist / No Architect
 - Amount- \$815,000.00
 - Percentage of Completion – 98% Completion-March 2019
2. Our Lady of Guadalupe Catholic church -
 - Owner: The Catholic Diocese of Beaumont-C/o Bishop Guillory / No Architect
 - Amount- \$365,850.00
 - Percentage of Completion – 95%
 - Completion March of 2019
3. Ridgewood Baptist Church
 - Owner: Ridgewood Baptist Church / No Architect
 - Amount- \$330,000.00
 - Percentage of Completion – 95%
 - Completion March of 2019
4. American Legion Hall
 - Owner: American Legion Post #7 / No Architect
 - Amount- \$407,000.00
 - Percentage of Completion – 100%
 - Completion Jan 2019

II. Past Five Years Projects:

1. Project- United Methodist Temple Day Care and Church Build out – Restoration
 - Owner: First United Methodist / No Architect
 - Amount-over 400K
 - 30% in House work
 - Completion: Dec 2017

2. Dr. Risinger Office Renovation
 - Owner: Dr. Ron Risinger / Architect: LaBiche Architect –Dohn Labiche
 - Amount: Over 550K
 - Completion – Jan 2018
3. St. Mary's Catholic School
 - Owner: Diocese of Beaumont – Bishop Guillory / Architect: None
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 - Completion – Nov 2017
 -
4. Dr. David Prioux
 - Owner: Dr. David Prioux / Architect: MBC – Design Build
 - Amount - \$251,000.00
 - Completion – Dec 2018
5. St Charles Boromero office
 - Owner: Diocese of Beaumont – Bishop Guillory
 - Architect: LaBiche Architect –Dohn Labiche
 - Amount - \$ 110 k
 - Completion – May 2017
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 - Owner: Diocese of Beaumont – Bishop Guillory / Architect: None
 - Amount – Over 100,000.00
 - Completion – Oct 2018
7. Sacred Heart Catholic Church
 - Owner: Diocese of Beaumont – Bishop Guillory / Architect: None
 - Amount – 85,000.00
 - Completion – July 2018

III. Principal Officers and Administration Resume's

- Mr. Lance Barnett has over 26 years of construction experience in both commercial and industrial construction. Including roofing, general construction and metal structure.
- Mr. Russell Bourgeois – Over 30 years in the industry.
- Commercial and residential restoration and new construction.
- Fire and water restoration
- Design build
- Construction supervision / Pm

We appreciate your interest in our company and we hope you will allow us the opportunity to bid on your project.

Sincerely

Russell Bourgeois Commercial Construction Mgr.
Email: rbourgeoismbc@gmail.com
Cell: 409-740-0054

Signature Page

As permitted under Article 4413 (32c) V.A.C.S., other governmental entities may wish to participate under the same terms and conditions contained in this contract (i.e., piggyback). In the event any other entity participates, all purchase orders will be issued directly from and shipped directly to the entity requiring supplies/services. Jefferson County shall not be held responsible for any orders placed, deliveries made or payment for supplies/services ordered by another entity. Each entity reserves the right to determine their participation in this contract.

Would bidder be willing to allow other governmental entities to piggyback off this contract, if awarded, under the same terms and conditions? Yes ☒ No ☐

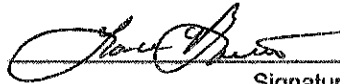
This bid shall remain in effect for ninety (90) days from bid opening and shall be exclusive of federal excise and state and local sales tax (exempt).

The undersigned agrees, if this bid is accepted, to furnish any and all items upon which prices are offered, at the price and upon the terms and conditions contained in the Invitation for Bid, Conditions of Bidding, Terms of Contract, and Specifications and all other items made a part of the accepted contract.

The undersigned affirms that they are duly authorized to execute the contract, that this company, corporation, firm, partnership or individual has not prepared this bid in collusion with any other bidder, and that the contents of this bid as to prices, terms or conditions of said bid have not been communicated by the undersigned nor by any employee or agent to any other bidder or to any other person(s) engaged in this type of business prior to the official opening of this bid. And further, that neither the bidder nor their employees nor agents have been for the past six (6) months directly nor indirectly concerned in any pool or agreement or combination to control the price of goods or services on, nor to influence any person to bid or not to bid thereon.

MIKE BARNETT CONSTRUCTION

Bidder (Entity Name)



Signature

1701 PORT NECHES AVENUE

Street & Mailing Address

LANCE BARNETT

Print Name

PORT NECHES, TX 77651

City, State & Zip

05/07/2019

Date Signed

(409) 727-5613

Telephone Number

(409) 727-2905

Fax Number

lanceusa11@gmail.com

E-mail Address

Bidder Shall Return Completed Form with Offer.

Conflict of Interest Questionnaire

CONFLICT OF INTEREST QUESTIONNAIRE For vendor doing business with local governmental entity		FORM CIQ
<p>This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.</p> <p>This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).</p> <p>By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.</p> <p>A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.</p>	<div style="border: 1px solid black; padding: 2px; text-align: center;">OFFICE USE ONLY</div> <div style="border: 1px solid black; height: 100px; margin-top: 5px;"> Date Received </div>	
<div style="border: 1px solid black; padding: 5px;"> 1 Name of vendor who has a business relationship with local governmental entity. <div style="text-align: center; font-size: 1.5em;">MA</div> </div>		
<div style="border: 1px solid black; padding: 5px;"> 2 <input type="checkbox"/> Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.) </div>		
<div style="border: 1px solid black; padding: 5px;"> 3 Name of local government officer about whom the information in this section is being disclosed. <div style="text-align: center; border-bottom: 1px solid black; margin: 10px 0;"> Name of Officer </div> <p>This section (Item 3 including subparts A, B, C, & D) must be completed for each officer with whom the vendor has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.</p> <p>A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the vendor?</p> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <p>B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?</p> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <p>C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more?</p> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <p>D. Describe each employment or business and family relationship with the local government officer named in this section.</p> </div>		
<div style="border: 1px solid black; padding: 10px;"> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 45%;"> <div style="text-align: center; margin-bottom: 10px;"> </div> <div style="border-top: 1px solid black; font-size: 0.8em;"> Signature of vendor doing business with the governmental entity </div> </div> <div style="width: 45%; text-align: center;"> <div style="margin-bottom: 10px;"> <div style="text-align: center; font-size: 1.2em;">05/07/2019</div> </div> <div style="border-top: 1px solid black; font-size: 0.8em;"> Date </div> </div> </div> </div>		

Adopted 8/7/2015

Bidder Shall Return Completed Form with Offer.

Local Government Officer Conflicts Disclosure Statement - OFFICE USE ONLY

LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT		FORM CIS
<p>This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.</p> <p>This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.</p>		OFFICE USE ONLY <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
1	Name of Local Government Officer <div style="text-align: center; font-size: 2em;">N/A</div>	
2	Office Held 	
3	Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code 	
4	Description of the nature and extent of employment or other business relationship with vendor named in item 3 	
5	List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B). <div style="margin-bottom: 10px;"> Date Gift Accepted _____ Description of Gift _____ </div> <div style="margin-bottom: 10px;"> Date Gift Accepted _____ Description of Gift _____ </div> <div style="margin-bottom: 10px;"> Date Gift Accepted _____ Description of Gift _____ </div> <p style="text-align: center;">(attach additional forms as necessary)</p>	
6	AFFIDAVIT <p>I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.</p> <div style="text-align: right; margin-top: 20px;"> _____ Signature of Local Government Officer </div> <p style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20____, to certify which, witness my hand and seal of office.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>_____ Signature of officer administering oath</div> <div>_____ Printed name of officer administering oath</div> <div>_____ Title of officer administering oath</div> </div>	

Adopted 8/7/2015

Good Faith Effort (GFE) Determination Checklist

This information must be submitted with your bid.

Bidder intends to utilize subcontractors/sub-consultants in the fulfillment of this contract (if awarded).
☐ Yes ☐ No

Instructions: In order to determine if a "Good Faith Effort" was made in soliciting HUBs for subcontracting opportunities, the following checklist and supporting documentation shall be completed by the Prime Contractor/Consultant, and returned with the Prime Contractor/ Consultant's bid. This list contains the **minimum** efforts that should be put forth by the Prime Contractor/Consultant when attempting to achieve or exceed the goals of HUB Subcontractor participation. The Prime Contractor/Consultant may extend his/her efforts in soliciting HUB Subcontractor participation beyond what is listed below.

Did the Prime Contractor/Consultant . . .

- ☒ Yes ☐ No 1. To the extent practical, and consistent with standard and prudent industry standards, divide the contract work into the smallest feasible portions, to allow for maximum HUB Subcontractor participation?
- ☒ Yes ☐ No 2. **Notify** in writing a reasonable number of HUBs, allowing sufficient time for effective participation of the planned work to be subcontracted?
- ☒ Yes ☐ No 3. **Provide** HUBs that were genuinely interested in bidding on a subcontractor, adequate information regarding the project (i.e., plans, specifications, scope of work, bonding and insurance requirements, and a point of contact within the Prime Contractor/Consultant's organization)?
- ☒ Yes ☐ No 4. **Negotiate** in good faith with interested HUBs, and not reject bids from HUBs that qualify as lowest and responsive bidders?
- ☐ Yes ☒ No 5. **Document** reasons HUBs were rejected? Was a written rejection notice, including the reason for rejection, provided to the rejected HUBs? *PROVIDED UPON AWARD.*
- ☐ Yes ☐ No 6. If Prime Contractor/Consultant has zero (0) HUB participation, **please explain the reasons why.**

If "No" was selected, please explain and include any pertinent documentation with your bid.

If necessary, please use a separate sheet to answer the above questions.

LANCE BARNETT

Printed Name of Authorized Representative

[Signature]

Signature

GM / PARTNER

Title

05/07/2019

Date

Bidder Shall Return Completed Form with Offer.

Notice of Intent (NOI) to Subcontract with Historically Underutilized Business (HUB)

This information must be submitted with your bid.

Bidder intends to utilize subcontractors/sub-consultants in the fulfillment of this contract (if awarded).

☒ Yes ☐ No

Instructions for Prime Contractor/Consultant: Bidder shall submit this form with the bid; however, the information below may be submitted after contract award, but prior to beginning performance on the contract. Please submit one form for each HUB Subcontractor/Sub-consultant with proper signatures, per the terms and conditions of your contract.

Contractor Name: _____ HUB: ☐ Yes ☐ No

Address: _____
Street City State Zip

Phone (with area code): _____ Fax (with area code): _____

Project Title & No.: _____

Prime Contract Amount: \$ _____

HUB Subcontractor Name: _____

HUB Status (Gender & Ethnicity): _____

Certifying Agency: ☐ Tx. Bldg & Procurement Comm. ☐ Jefferson County ☐ Tx Unified Certification Prog.

Address: _____
Street City State Zip

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Printed Name of Contractor Representative Signature of Representative Date

Printed Name of HUB Signature of Representative Date

NOTE: NOTHING ON THIS NOTICE OF INTENT FORM IS INTENDED TO CONFER ANY RIGHTS, EXPRESSED OR IMPLIED, TO ANY THIRD PARTIES.

Pre-Approval for Subcontractor Substitutions must be obtained from the Jefferson County Purchasing Agent's Representative. The "HUB Subcontractor/Sub-consultant Change Form" must be completed and faxed to 409-835-8456.

Bidder Shall Return Completed Form with Offer.

Historically Underutilized Business (HUB) Subcontracting Participation Declaration Form

PAGE 1 OF 4

This information must be submitted with your bid.

Bidder intends to utilize subcontractors/sub-consultants in the fulfillment of this contract (if awarded).

☒ Yes ☐ No

Prime Contractor: MIKE BARNETT CONSTRUCTION HUB: ☐ Yes ☒ No

HUB Status (Gender & Ethnicity): _____

Address: 1701 PORT NECHES AVE. PORT NECHES, TX 77651
Street City State Zip

Phone (with area code): 409-727-5673 Fax (with area code): 409-727-2905

Project Title & No.: FORD FIELDS CONCESSION STAND IFB/RFP No.: 15036

Total Contract: \$ _____ Total HUB Subcontract(s): \$ _____

Construction HUB Goals: 12.8% MBE:: _____ % 12.6% WBE: _____ %

Sub-goals: 1.7 African-American, 9.7% Hispanic, 0.7% Native American, 0.8% Asian American.
Use these goals as a guide to diversify.

FOR HUB OFFICE USE ONLY:

Verification date HUB Program Office reviewed and verified HUB Sub information Date: _____ Initials: _____

PART I. HUB SUBCONTRACTOR DISCLOSURE

HUB Subcontractor Name: _____

HUB Status (Gender & Ethnicity): _____

Certifying Agency: ☐ Texas Bldg & Procurement Comm. ☐ Texas Unified Certification Prog.

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Bidder Shall Return Completed Form with Offer.

Historically Underutilized Business (HUB) Subcontracting Participation Declaration Form

PAGE 2 OF 4

HUB SUBCONTRACTOR DISCLOSURE

PART I: Continuation Sheet

(Duplicate as Needed)

HUB Subcontractor Name: _____

HUB Status (Gender & Ethnicity): _____

Certifying Agency: ☐ Tx. Bldg & Procurement Comm. ☐ Jefferson County ☐ Tx Unified Certification Prog.

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

HUB Subcontractor Name: _____

HUB Status (Gender & Ethnicity): _____

Certifying Agency: ☐ Tx. Bldg & Procurement Comm. ☐ Jefferson County ☐ Tx Unified Certification Prog.

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

All HUB Subcontractor Participation may be verified with the
HUB Subcontractor(s) listed on Part I.

Bidder Shall Return Completed Form with Offer.

Historically Underutilized Business (HUB) Subcontracting Participation Declaration Form

PAGE 3 OF 4

PART II: STATEMENT OF NON-COMPLIANCE FOR NOT MEETING HUB SUBCONTRACTING GOALS

Please complete Good Faith Effort (GFE) Checklist and attach any supporting documentation.

Our firm was unable to meet the HUB goals for this project for the following reasons:

- ☐ All subcontractors to be utilized are "Non-HUBs." (Complete Part III)
- ☐ HUBs were solicited but did not respond.
- ☐ HUBs solicited were not competitive.
- ☐ HUBs were unavailable for the following trade(s):
- ☐ Other: _____

Was the Jefferson County HUB Office contacted for assistance in locating HUBs? ☐ Yes ☐ No

PART III: DISCLOSURE OF OTHER "NON-HUB" SUBCONTRACTS

The bidder shall use this area to provide a listing of all "Non-HUB" Subcontractors, including suppliers, that will perform under this project. A list of those "Non-HUB" Subcontractors the bidder selects, after bid submission, shall be provided to the Purchasing Office not later than five (5) calendar days after being notified that bidder is the apparent low bidder. A list of those "Non-HUB" Subcontractors that are selected after contract award must be provided **immediately** after their selection.

Subcontractor Name: _____

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Subcontractor Name: _____

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Bidder Shall Return Completed Form with Offer.

Historically Underutilized Business (HUB) Subcontracting Participation Declaration Form

PAGE 4 OF 4

Subcontractor Name: _____

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

Subcontractor Name: _____

Address: _____
Street City State Zip

Contact person: _____ Title: _____

Phone (with area code): _____ Fax (with area code): _____

Proposed Subcontract Amount: \$ _____ Percentage of Prime Contract: _____ %

Description of Subcontract Work to be Performed: _____

I hereby certify that I have read the *HUB Program Instructions and Information*, truthfully completed all applicable parts of this form, and **attached any necessary support documentation as required**. I fully understand that intentionally falsifying information on this document may result in my not receiving a contract award or termination of any resulting contract.

Name (print or type): _____

Title: _____

Signature: _____

Date: _____

E-mail address: _____

Contact person that will be in charge of invoicing for this project:

Name (print or type): _____

Title: _____

Date: _____

E-mail address: _____

Bidder Shall Return Completed Form with Offer.

Residence Certification/Tax Form

Pursuant to Texas Government Code §2252.001 *et seq.*, as amended, Jefferson County requests Resident Certification. §2252.001 *et seq.* of the Government Code provides some restrictions on the awarding of governmental contracts; pertinent provisions of §2252.001 are stated below:

- (3) "Nonresident bidder" refers to a person who is not a resident.
- (4) "Resident bidder" refers to a person whose principal place of business is in this state, including a contractor whose ultimate parent company or majority owner has its principal place of business in this state.

I certify that MIKE BARNETT CONSTRUCTION [company name] is a Resident Bidder of Texas as defined in Government Code §2252.001.

I certify that _____ [company name] is a Nonresident Bidder as defined in Government Code §2252.001 and our principal place of business is _____ (city and state).

Taxpayer Identification Number (T.I.N.):	12643920346
Company Name submitting bid/proposal:	M & S BARNETT LTD. - DBA MIKE BARNETT CONSTRUCTION
Mailing address:	P.O. Box 245, Port Neches, TX 77651
If you are an individual, list the names and addresses of any partnership of which you are a general partner:	

Property: List all taxable property owned by you or above partnerships in Jefferson County.

Jefferson County Tax Acct. No.*	Property address or location**

* This is the property amount identification number assigned by the Jefferson County Appraisal District.

** For real property, specify the property address or legal description. For business property, specify the address where the property is located. For example, office equipment will normally be at your office, but inventory may be stored as a warehouse or other location.

Bidder Shall Return Completed Form with Offer.

FORD FIELDS CONCESSION STAND
BEAUMONT, TEXAS

BID BOND

KNOW ALL MEN BY THESE PRESENTS, that we the undersigned,

M&S Barnett, Ltd dba Mike Barnett Construction 1701 Port Neches Avenue, Port Neches, TX 77651
as PRINCIPAL, AND

Merchants National Bonding, Inc.

2100 Fleur Drive, Des Moines, IA 50321-1158

as SURETY are held and firmly bound unto Commissioners' Court of Jefferson County hereinafter
called the "Owner," in the penal sum of Five percent of attached bid and alternates

Dollars, (\$ 5%-----),

lawful money of the United States, for the payment of which sum well and truly to be made, we bind
ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by
these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH, that Whereas the Principal has submitted the
Accompanying Bid, dated May 7, 2019, for FORD FIELDS CONCESSION
STAND, BEAUMONT, TEXAS.

NOW, THEREFORE, if the Principal shall not withdraw said Bid within the period specified therein after the
opening of the same, or, if no period be specified, within thirty (30) days after the said opening, and shall
within the period specified therefore, or if no period be specified, within ten (10) days after the prescribed
forms are presented to him for signature, enter into a written Contract with the Owner in accordance with the
Bid as accepted, and give bond with good and sufficient surety or sureties, as may be required, for the
faithful performance and proper fulfillment of such contract; or in the event of the withdrawal of said Bid
within the period specified, or the failure to enter into such Contract and give such bond within the time
specified, if the Principal shall pay the Owner the difference between the amount specified in said Bid and
the amount for which the Owner may procure the required work or supplies or both, if the latter be in excess
of the former, then the above obligation shall be void and of no effect, otherwise to remain in full force and
virtue.

IN WITNESS THEREOF, the above-bounded parties have executed this instrument under their several
seals this 7th day of May, 2019, the name and corporate seal of each corporate party
being hereto affixed and these present signed by its undersigned representative, pursuant to authority of its
governing body.

(SEAL)

(SEAL)

Attest:

By: _____

FORD FIELDS CONCESSION STAND
BEAUMONT, TEXAS

M&S Barnett, Ltd dba Mike Barnett Construction

By: _____

Affix
Corporate
Seal

Sonya Barnett, President

Attest:

Merchants National Bonding, Inc.

By: _____

Affix
Corporate
Seal

Samoa P. Meche, 1734287 Attorney in Fact

Countersigned

by _____

Jennifer Winters, 1371704

*Attorney-in-Fact, State of Texas

CERTIFICATE AS TO CORPORATE PRINCIPAL

I, Lance Barnett, certify that I am the _____

Vice-President/Secretary, Secretary of the Corporation named as

Principal in the within bond; that Sonya Barnett
who signed the said bond on behalf of the Principal was then President of
said corporation; that I know his signature, and his signature thereto is genuine; and that said bond was
duly signed, sealed, and attested to for and in behalf of said corporation by authority of this governing body.

Lance Barnett (Corporate Seal)

Title Vice-President/Secretary

* Power-of-attorney for person signing for surety company must be
attached to bond.

MERCHANTS
BONDING COMPANY™
POWER OF ATTORNEY

Know All Persons By These Presents, that MERCHANTS BONDING COMPANY (MUTUAL) and MERCHANTS NATIONAL BONDING, INC., both being corporations of the State of Iowa (herein collectively called the "Companies") do hereby make, constitute and appoint, individually, Catherine Sue Moss; David P Daniel; J Cory Williams; Nancy M Bernard; R.E. Pool; Samoa P Meche

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.

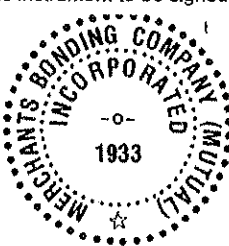
"The President, Secretary, Treasurer, or any Assistant Treasurer or any Assistant Secretary or any Vice President shall have power and authority to appoint Attorneys-in-Fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, 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 authority 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 26th day of April, 2017.



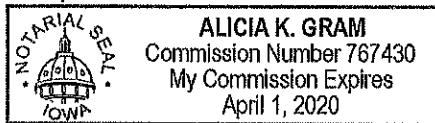
MERCHANTS BONDING COMPANY (MUTUAL)
MERCHANTS NATIONAL BONDING, INC.

By

Larry Taylor
President

STATE OF IOWA
COUNTY OF DALLAS ss.

On this this 26th day of April, 2017, 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.



Alicia K. Gram
Notary Public

(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 7th day of May, 2019.



William Warner Jr.
Secretary

4/09/2019



FEDERAL SERVICE DESK

ATTN: SAM.GOV REGISTRATION PROCESSING
460 INDUSTRIAL BLVD
LONDON, KY 40741-7285
UNITED STATES OF AMERICA

SUBJECT: Information Required to Activate SAM Entity Registration

Purpose of Letter

The purpose of this letter is to formally appoint an Entity Administrator for the named Entity and to attest to the accuracy of the information contained in the entity registration.

Designation of Entity Administrator

I, [Insert Name and Title of Signatory], the below signed individual, hereby confirm that the appointed Entity Administrator is an authorized officer, agent, or representative of the Entity. This letter authorizes the appointed Entity Administrator to manage the Entity's registration record, its associated users, and their roles to the Entity, in the System for Award Management (SAM).

Entity Covered by this Letter

DUNS® Number: 94-482-4978
Legal Business Name: Mike Barnett Construction
Physical Address: 1701 Port Neches Avenue

Entity Administrator Contact Information

Full Name: LANCE LADIN BARNETT
Phone Number: 409-727-5673
Email Address: lanceusa11@gmail.com

**The Entity Administrator must have an individual user account in SAM associated with the email address listed.*

Account Administration Preference (ONLY CHOOSE ONE)

You must choose ONE of the two following statements by checking the applicable box. Remember, there is no cost to register in SAM -- it is free. However, if you choose to have a third-party agent administer your SAM registration, with or without an associated fee, you must check the Third-Party Agent Designation box below.

☒ **Self-Administration Confirmation**

For the purpose of registering with the United States Government through the online System for Award Management (SAM), I do not authorize any third party to act on

behalf of the Entity listed above. I have checked the Self-Administration Confirmation box to indicate that the designated Entity Administrator is not a third-party agent.

☐ Third-Party Agent Designation

For the purpose of registering with the United States Government through the online System for Award Management (SAM), I do hereby authorize [insert full name, phone number, address, and email address of the Third-Party Agent] (Designated Third-Party Agent) to act on behalf of the Entity listed above. This authorization permits the Designated Third-Party Agent to conduct all normal, common business functions within SAM while binding the signatory to all actions conducted and representations made as a result of authorization granted herein. I have checked the Third-Party Agent Designation box and completed the above information to indicate that the designated Entity Administrator is a third-party agent.

Attestation

I, the below-signed, attest to the following:

- All information contained in this letter is complete and accurate.
- The designated Entity Administrator listed above has an individual SAM User Account created with the email address provided in this letter.
- The banking information provided for Electronic Funds Transfer on the Financial Information Page in the SAM.gov registration for the Entity above is correct and accurate.

Respectfully,

[Insert Full Name of Signatory] *LANCE LORIN BARNETT*
[Insert Title of Signatory, e.g. Director of Contracting, Managing Partner, Vice President for Research, etc.] *GENERAL MANAGER / PARTNER*
[Insert Email of Signatory] *lanceusa11@gmail.com*
[Insert Entity Legal Business Name] *MIKE BARNETT CONSTRUCTION*
[Insert Entity Physical Address] *1701 PORT NECHES AVENUE
PORT NECHES, TX 77651*

TO BE COMPLETED BY NOTARY
(in accordance with State notary requirements)

State of Texas

County of Jefferson

This instrument was acknowledged before me this 9 day of April (month),
2019 (year), by ~~Alexandria Block~~ ^{AB} LANCE BARNETT (name of
officer or agent, title or officer or agent) of MIKE BARNETT CONSTRUCTION
(name of entity).

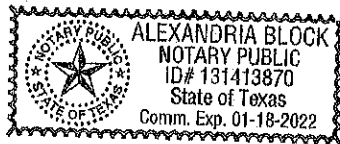
 Personally Known

 X Produced Identification

Type of ID and Number on ID Drivers License 06770184

(Seal)

Alexandria Block
Signature of Notary



Alexandria Block
Name of Notary
(Typed, Stamped or Printed)

Notary Public, State of Texas



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/28/2019

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 Arthur J. Gallagher Risk Management Services, Inc. 1490 Market Street Suite 3 Lake Charles LA 70601	CONTACT NAME: Candace Domingue	
	PHONE (A/C, No, Ext): 337-475-7442	FAX (A/C, No): 337-474-4418
INSURED M&S Barnett, Ltd. dba Mike Barnett Construction 1701 Port Neches Ave Port Neches TX 77651	E-MAIL ADDRESS: Candace.Domingue@ajg.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: United Fire & Casualty Company	
	INSURER B: AGCS Marine Insurance Company	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		
NAIC #		

COVERAGES

CERTIFICATE NUMBER: 135345042

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 type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	60401822	3/31/2019	3/31/2020	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	60401822	3/31/2019	3/31/2020	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	60401822	3/31/2019	3/31/2020	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000 \$
	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/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Rented/Leased Equipment			SML93075622	3/31/2019	3/31/2020	\$150,000

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

Certificate Holder is included as Additional Insured on the General Liability policy as per endorsement #CG7208, edition 07/17, and on the Auto Liability policy as per endorsement #CA7109, edition 01/17. Waiver of Subrogation applies to certificate holder as respects the General Liability and Auto Liability policies, pursuant to and subject to the policy's terms, definitions, terms and exclusions. The Umbrella policy is follow form over the underlying General Liability, Auto Liability and Employers Liability policies. The insurance provided in the General Liability policy is primary and not contributory per form CG2001, edition 04/13 and on the Auto policy per form CA7334, edition 09/15 and on the Umbrella policy per form IL7105, edition 10/14.

CERTIFICATE HOLDER**CANCELLATION**

Master Certificate
1701 Port Neches Ave
Port Neches TX 77651
USA

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

© 1988-2015 ACORD CORPORATION. All rights reserved.

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/21/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER J. S. Edwards & Sherlock Insurance Agency, LLP P. O. 22237 Beaumont, TX 77720	CONTACT NAME: Ginny Johnson	
	PHONE (A/C, No, Ext): 409 832-7736	FAX (A/C, No): 409-833-1721
E-MAIL ADDRESS: glnny@edwardsandsherlock.com		
INSURED R.P. Employer Solutions of Texas, Inc. 3280 Eastex Freeway Beaumont, TX 77703	INSURER(S) AFFORDING COVERAGE	
	INSURER A : Texas Mutual Ins. Co. (133)	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
INSURER F :		NAIC # 22945

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY						EACH OCCURRENCE \$
	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/>						MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
							GENERAL AGGREGATE \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	ANY AUTO						BODILY INJURY (Per person) \$
	ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED <input type="checkbox"/> RETENTION \$						\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			0001141166	01/20/2019	01/20/2020	X WC STATUTORY LIMITS \$1,000,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> Y	N/A				E.L. EACH ACCIDENT \$1,000,000
							E.L. DISEASE - EA EMPLOYEE \$1,000,000
							E.L. DISEASE - POLICY LIMIT \$1,000,000

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

REF: M & S Barnett Construction, LTD dba Mike Barnett Construction

CERTIFICATE HOLDER

CANCELLATION

SAMPLE
Certificate

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Craig Sherlock

© 1988-2010 ACORD CORPORATION. All rights reserved.

MIKE BARNETT CONSTRUCTION
P.O. BOX 245
1701 PORT NECHES AVE.
PORT NECHES, TX 77651

RECEIVED 10:58 AM MAY 07 2019

JEFFERSON COUNTY PURCHASING DEPT.
1149 PEARL ST. 1ST FLOOR
BEAUMONT, T 77701
SEALED BID
ATTN: PURCHASING AGENT

FORD FIELDS
CONCESSION STAND
5115 IH-10 SOUTH, BEAUMONT, TX

PROJECT #15036
Bid due date: 05/07/19

* We acknowledge Addendums
1, 2, 3 & 4

Sealed Bid