

GAB REVIEW REQUEST AND CERTIFICATION

Submitting Department: _____

Type of Procurement: Non-Public Work Bid Public Work Bid (A/E or Non-A/E) SOQ RFP Sole Source

Project Description: _____

Estimated Value of Contract: _____

Or Probable Construction Cost Base Bid: _____

Probable Construction Cost Alternate 1 (add or deduct): _____

Probable Construction Cost Alternate 2 (add or deduct): _____

Probable Construction Cost Alternate 3 (add or deduct): _____

***Insurance Requirement – Public Works Bid Form**

Public Work Bids/Construction/Renovation:
Builder’s Risk Insurance Required: Yes No

Owner’s Protection Liability Insurance Required: Yes No

For guidance on these two insurance requirements, please consult the Office of Risk Management and the Office of the Parish Attorney.

This procurement is funded by Federal Funds/Grant Dollars, including dollars through the State of Louisiana:

Federal Funds/Grant Dollars: Yes No

Non-Federal Funds/Grant Dollars: Yes No

Funding Source: _____
(Example: Restore Act, HUD including Section 3, CDBG, State LDEQ, FEMA, etc.)

***When “yes” is checked for Federal Funds, please ensure the request in AS400 is checked accordingly.**

Sales Tax Exemption – Public Work Bids are subject to Sales Tax Exemption. All Sales Tax-Exempt verbiage and documentation shall be listed in the Resolutions and bid request.

Incumbent Vendor(s)/Firm(s): _____

Incumbent Vendor(s)/Firm(s) E-mail: _____

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This certifies that both the Director of the department and respective CAA have reviewed the proposed procurement action and have made appropriate selections consistent with the laws of the State of Louisiana, Jefferson Parish and practical applications of Jefferson Parish to the best of our ability.

Name of Director: _____

Signature: _____ Date: _____

Name of CAA: _____

Signature: _____ Date: _____