



## REGULAR CITY COUNCIL MEETING

August 06, 2019 at 5:30 PM

Council Meeting Room, 101 North State Street, Abbeville,  
Louisiana 70510

### AGENDA

**NOTICE POSTED:** August 5, 2019 at 4:00 P.M.

#### REGULAR ORDER OF BUSINESS

Call to Order by Mayor  
Roll Call by Kathy Faulk  
Prayer  
Pledge

#### PERSONNEL

1. To present two new hires for the Police Department - Chief Bill Spearman.

#### PRESENTATIONS

1. Representative Ryan Bourriaque to report on recent legislative session.
2. Mr. Gerald Gaspard - American Legion Presentations.

#### MINUTES AND APPROVAL OF BILLS

1. To approve the minutes from the regular City Council meetings held on July 2, 2019 and July 16, 2019 and the special City Council meeting held on July 11, 2019.
2. Ratify bills paid in the month of July 2019.

#### PUBLIC COMMENTS

(To allow comments on any of the following items prior to action.)

#### NEW BUSINESS

1. Ms. Avery Franques to request permission to place a free library in Godchaux Park as part of her Girl Scout Gold Award project.
2. To ratify payment of the invoice from Solpowerlines, LLC in the amount of \$18,980.00 to replace the triple circuit pole at the By-Pass Substation damaged as a result of Hurricane Barry.
3. To ratify payment to Solpowerlines, LLC for the distribution pole change out/replace in the amount of \$38,605.44.
4. To adopt a resolution to authorize the Mayor to execute an agreement with LEPA and its member cities to provide emergency assistance.
5. To adopt a resolution authorizing the Mayor to sign and submit an application for the 2019-2020 Louisiana Government Assistance Program and the Community Water Enrichment Fund Program.
6. To approve the final payment estimate for the Sassy Suds Sewer System Extension.
7. To approve contract change order number 3 for the FY 2018-2019 LCDBG Sewer System Improvement Project.
8. To approve the recommendations of the hearing officer for hearings held on July 31, 2019 for the list provided by the Tax Department.
9. To approve the special event permit for Abbeville General Hospital to hold the Making Each Day Count-Suicide Prevention & Mental Health Awareness on September 7, 2019 in Magdalen Square from 9:00 AM to 12:00 PM.
10. To request to surplus Lieutenant David Hardy's firearm to allow him to purchase it.
11. To award the contract to change the roof on Fire Station #3 (Maude Avenue)-Chief Jude Mire.
12. To surplus vehicles from the Abbeville Police Department.

#### OLD BUSINESS

1. None.

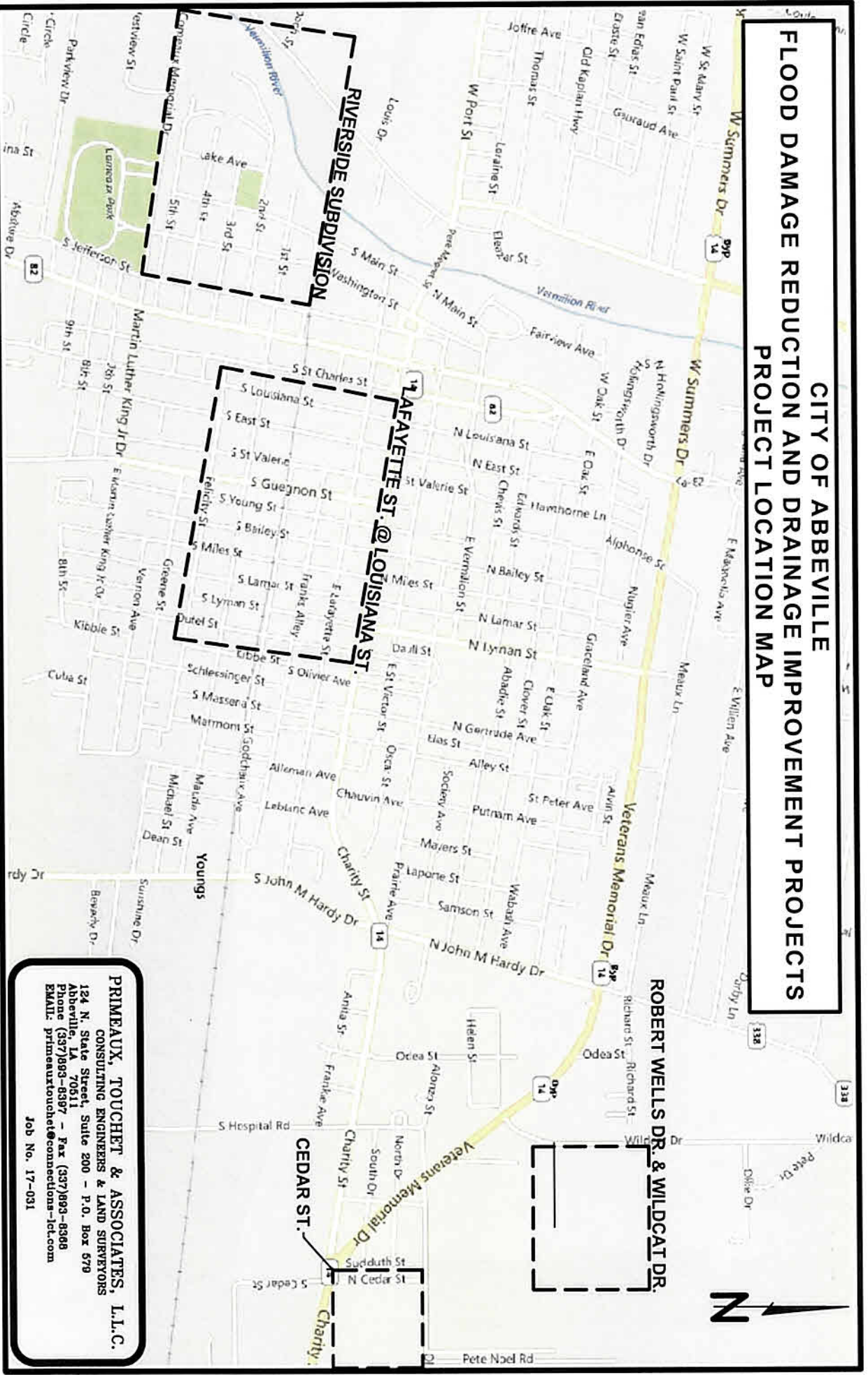
**TOPICS FOR DISCUSSION OR REVIEW**

1. Engineers
2. Attorney
3. Public Works Director
4. Mayor
5. Police Chief
6. Fire Chief
7. Council Members

**EXECUTIVE SESSION****ADJOURN**

In accordance with the Americans with Disabilities Act, if you need special assistance, please contact Mayor Mark Piazza's office at 337-893-8550, describing the assistance that is necessary.

# CITY OF ABBEVILLE FLOOD DAMAGE REDUCTION AND DRAINAGE IMPROVEMENT PROJECTS PROJECT LOCATION MAP



**PRIMEAUX, TOUCHET & ASSOCIATES, L.L.C.**  
 CONSULTING ENGINEERS & LAND SURVEYORS  
 124 N. State Street, Suite 200 - P.O. Box 679  
 Abbeville, LA 70511  
 Phone (337)893-6397 - Fax (337)893-6366  
 EMAIL: primeauxtouchet@connections-llc.com  
 Job No. 17-031

# RIVERSIDE SUBDIVISION

PROJECT AREA



- Notes:
- ① Increase outfall capacity at 2<sup>nd</sup> Street crossing into Hunter Canal.
  - ② Correct drainage conflicts within interior drainage system.
  - ③ Clean Hunter Canal as needed.

**PRIMEAUX, TOUCHET & ASSOCIATES, L.L.C.**  
 CONSULTING ENGINEERS & LAND SURVEYORS  
 124 N. State Street, Suite 200 - P.O. Box 579  
 Abbeville, LA 70511  
 Phone (337)883-8387 - Fax (337)883-8388  
 EMAIL: primeauxtouchet@connections-llc.com  
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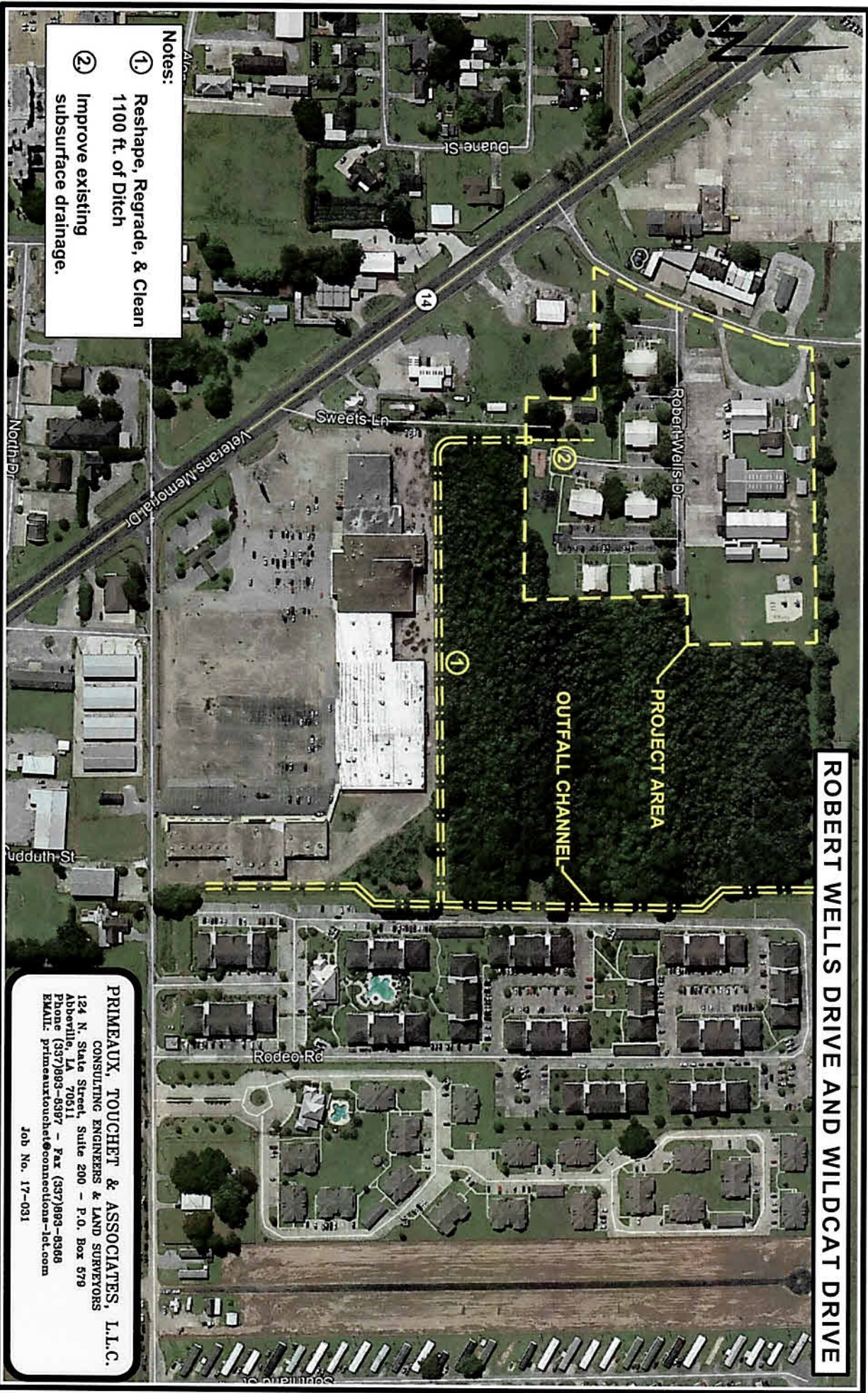
**EAST LAFAYETTE AND SOUTH LOUISIANA INTERSECTION**

**PROJECT AREA**

**Proposed Sub-Surface Drainage**

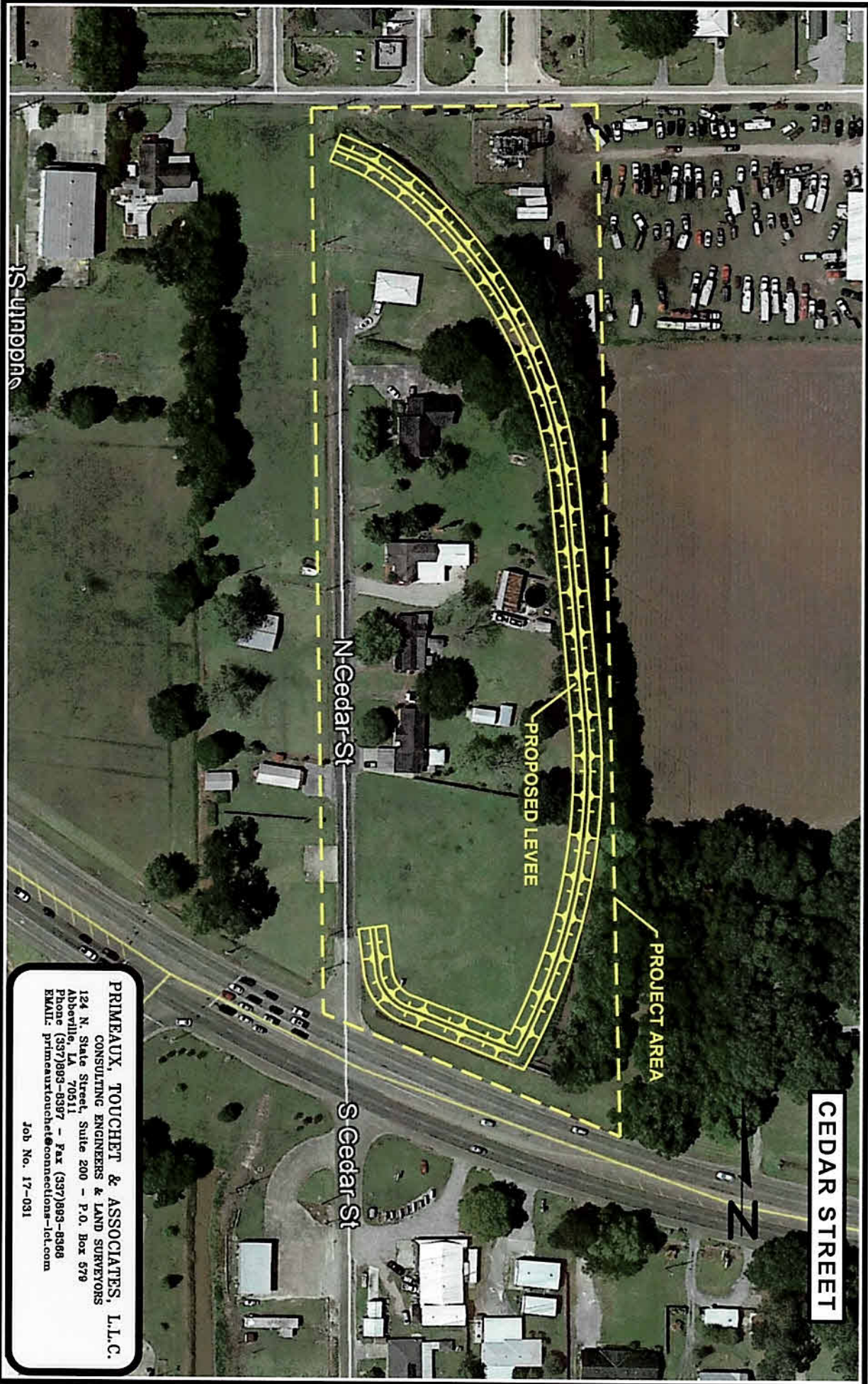
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 124 N. State Street, Suite 200 - P.O. Box 579  
 Abbeville, LA 70511  
 Phone (337)993-8387 - Fax (337)993-8388  
 EMAIL: primeauxtouchet@connections-ict.com  
 Job No. 17-031

**ROBERT WELLS DRIVE AND WILDCAT DRIVE**

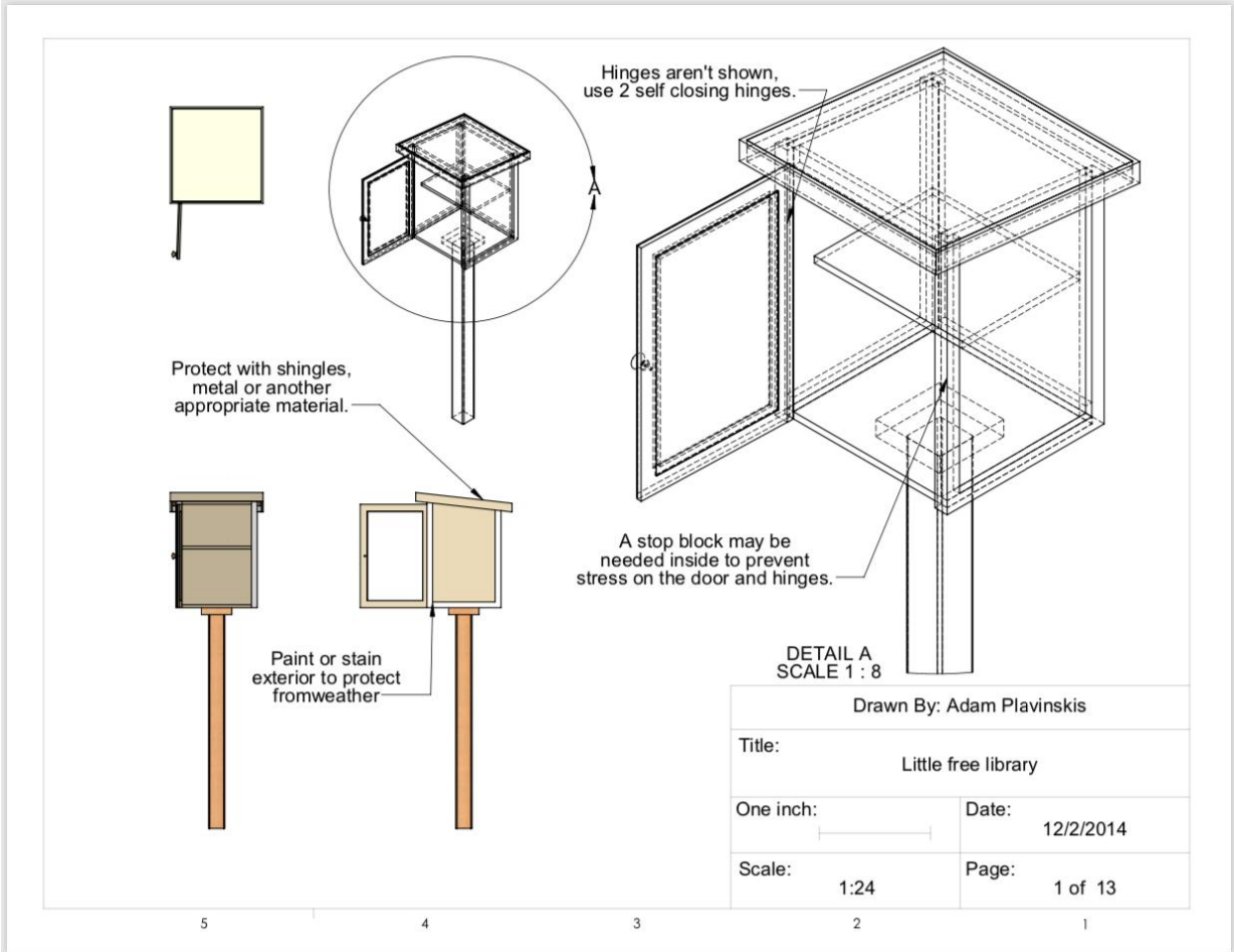


- Notes:
- ① Reshape, Regrade, & Clean 1100 ft. of Ditch
  - ② Improve existing subsurface drainage.

**PRIMEAUX, TOUCHET & ASSOCIATES, L.L.C.**  
CONSULTING ENGINEERS & LAND SURVEYORS  
124 N. State Street, Suite 200 - P.O. Box 579  
Abbeville, LA 70511  
Phone (337)983-8387 - Fax (337)983-8388  
EMAIL: primeauxtouchet@connection-lc.com  
Job No. 17-031



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124 N. State Street, Suite 200 - P.O. Box 579  
Abbeville, LA 70511  
Phone (337)893-8397 - Fax (337)893-8308  
EMAIL: primeauxtouchet@connections-llc.com  
Job No. 17-031







SOLPOWERLINES, LLC

P.O. Box 1123  
 1301 Wall Street  
 Lecompte, LA 71346

# Invoice

Date: 7/24/2019  
 Invoice #: 2019328

Bill To  
 City of Abbeville  
 Stewart Head  
 P. O. Box 1170  
 Abbeville, LA 70510

Phone #  
 3187760556

Email  
 maureen@solpowerlines.com

P.O. No.		Project		Rep		
Description		Quantity	U/M	U/M	Rate	Amount
Replaced Triple Circuit Pole Total price for labor and equipment for the triple circuit pole change out and completed by SolPowerlines. This includes travel and per diem		1	LSum	802-02	18,980.00	18,980.00
We sincerely appreciate your business, if you have any questions concerning this invoice please do not hesitate to call 305-216-9988.					<b>Total</b>	\$18,980.00



SOLPOWERLINES, LLC

P.O. Box 1123  
1301 Wall Street  
Lecompte, LA 71346

# Estimate

Date	Estimate #
7/29/2019	2019004

Name / Address
City of Abbeville Stewart Head P. O. Box 1170 Abbeville, LA 70510

*Mayor,  
Cost to do pole change out,  
Thanks.  
Cary*

				Project
Description	Qty	Rate	U/M	Total
Distribution Pole change out/replace- This is a quote to provide labor and equipment according to our conversation today for the double circuit pole change outs for total lump sum price including hotel and per diem. If at anytime we complete the above mentioned pole change outs discussed and agreed, we are willing to continue additional pole change outs for no extra cost for the duration of two weeks, time permitting for the same total amount stated.	1	38,605.44	LSum	38,605.44
<b>Total</b>				\$38,605.44

Phone #
3187760556

**RESOLUTION NO.: R-19-\_\_**

**BE IT KNOWN AND REMEMBERED**, that pursuant to a public notice, a regularly scheduled meeting of the City Council of the City of Abbeville was held on the 6th day of August, 2019, commencing at 5:30 o'clock p.m. at City Hall, Abbeville, Louisiana, where the following resolution was moved, duly seconded, passed and adopted, to-wit:

**WHERE AS**, as a member of the Louisiana Energy and Power Authority ("LEPA"), the City of Abbeville is afforded the opportunity to enter into an agreement between, and among, LEPA and its member cities to provide emergency assistance;

**WHERE AS**, the City Council does hereby determine that it is in the best interest of the City of Abbeville, its businesses and residents, for the City to participate in said agreement.

**NOW, BE IT RESOLVED** that the City Council of the City of Abbeville, acting as the governing authority of said city does hereby authorize Mayor Mark F. Piazza to execute the above described agreement on behalf of the City of Abbeville and to do and perform all acts necessary in the premises.

**APPROVED AND ADOPTED** on this 6th day of August, 2019.

\_\_\_\_\_  
Hon. Mark F. Piazza, Mayor

\_\_\_\_\_  
Mr. Francis Touchet, Jr.  
Mayor Pro-Tem/Councilman District B

\_\_\_\_\_  
Mr. Francis J. Plaisance  
Councilman at Large

\_\_\_\_\_  
Mr. Brady Broussard, Jr.  
Councilman District C

\_\_\_\_\_  
Ms. Roslyn R. White  
Councilwoman District A

\_\_\_\_\_  
Ms. Terry Y. Broussard  
Councilwoman District D

**C E R T I F I C A T E**

I, Kathleen S. Faulk, the duly qualified and appointed Clerk of the City of Abbeville, State of Louisiana, do hereby certify that the above and foregoing resolution was duly approved at the regular meeting of the Mayor and City Council of the City of Abbeville held on August 6, 2019.

THUS DONE AND SIGNED in Abbeville, Louisiana on this \_\_\_\_\_ day of August, 2019.

\_\_\_\_\_  
Kathleen S. Faulk, City Secretary/Treasurer

**AGREEMENT FOR EMERGENCY ASSISTANCE**  
**BY AND BETWEEN THE LEPA MEMBER CITIES**

This Agreement for Emergency Assistance By and Between the LEPA Member Cities (“Agreement”) is made on the month, date and year set forth on the respective signature pages by and among the Cities who declared:

WHEREAS, the Member Cities of the Louisiana Energy and Power Authority (“LEPA”) are authorized under the laws of the State of Louisiana to enter into certain agreements with each other to provide aid and assistance in restoring essential services in the event of natural disasters or other emergencies; and

WHEREAS, this Agreement will allow a Member City of LEPA to request Emergency Assistance directly or indirectly through the Regional Coordinator (“LEPA”) for mutual aid in the time of system emergencies; and

WHEREAS, the request for Emergency Assistance may include provisions for furnishing personnel, equipment, apparatus, supplies and/or materials; and

WHEREAS, the Assisting Utility is willing to provide personnel, equipment, apparatus, supplies and/or materials to a Requesting Utility under the terms and provisions of this Agreement, hereinafter provided; and

WHEREAS, LEPA is willing to assist in the coordination of the needs of a Requesting Utility and the services of an Assisting Utility for restoration efforts through the mechanism of this Agreement.

NOW, THEREFORE, in consideration of the mutual benefits to the parties, IT IS AGREED:

**Definitions**

- 1) Emergency Assistance – all acts of the Assisting Utility conducted for, or on behalf of, the Requesting Utility, including, but not limited to, travel to and from the site of emergency, and all activities conducted from the time employees of Assisting Utility begin travel to the site of the emergency until travel from site of the

emergency to the headquarters of the Assisting Utility is complete and the Assisting Utility no longer incurs expenses.

- 2) Assisting Utility – An electric utility which provides Emergency Assistance to a Requesting utility. Employees of the Assisting Utility shall continue to be employees of the Assisting Utility at all times during Emergency Assistance and shall not be deemed employees of the Requesting Utility for any purpose.
- 3) City – A Member Municipality of LEPA that is signatory to this Agreement.
- 4) Expenses – the cost of wages under the existing wage agreements, transportation, lodging, meals, materials, and all out-of-pocket charges incurred by the Assisting Utility as a result of providing Emergency Assistance to the Requesting Utility.
- 5) Regional Coordinator – The Louisiana Energy and Power Authority.
- 6) Requesting Utility – Any City which requests Emergency Assistance.

**SECTION 1. REQUESTS FOR EMERGENCY ASSISTANCE**

Any signatory to this Agreement may contact any other signatory or the Regional Coordinator in order to request Emergency Assistance. It is expressly understood by the parties hereto that the Regional Coordinator’s involvement is strictly limited to facilitating coordination efforts by the answering of telephones and providing information on potential Assisting Utilities, if any, and the Regional Coordinator has no financial obligations to either the Requesting Utility or the Assisting Utility. The Regional Coordinator has no obligation to ensure that Emergency Assistance is provided or to provide Emergency Assistance itself.

Once a request is made, it is in the sole discretion of the management of the utility to which the request is made, to decide whether it will become an Assisting Utility. Once a utility assumes the responsibilities of an Assisting Utility, it shall be obligated to provide Emergency Assistance in accordance with this Agreement, except that the Assisting Utility shall have the ability to instruct its employees to return to its headquarters whenever management of Assisting Utility deems it to be necessary or desirable.

**SECTION 2. OBLIGATIONS OF REQUESTING UTILITY**

The Requesting Utility shall have a duly authorized employee request Emergency Assistance and ensure the Requesting Utility shall employ professional operating procedures. The Requesting Utility must provide the Assisting Utility, or the Regional Coordinator with the following information:

- 1) The name, title and telephone number of the representative of Requesting Utility who will direct the employees of Assisting Utility;
- 2) Its best estimate of the type and amount of equipment needed, the number of employees requested, and the length of the emergency;
- 3) Accurate directions to the location where the Assisting Utility employees will report for assignment;
- 4) A description of the electrical operational plan and other useful information including maps of distribution circuits, system voltage, number of substations, switching configuration, and general operation procedures.

The Requesting Utility must also provide employees of the Assisting Utility with the following:

- a. An individual to work with each crew of Assisting Utility who is familiar with Requesting Utility's electrical system, local roads and who has direct access to Requesting Utility's communication system;
- b. Location of stockroom and general office;
- c. Operating procedures for emergency conditions;
- d. Hot meals whenever possible, but in any event, three meals a day at reasonable intervals;
- e. Suitable lodging;
- f. Fuel and oil expenses;
- g. Costs of repairing vehicles and equipment which amounts to less than \$100.00;
- h. Reasonable personal expenses, including laundry and telephone;
- i. Release of all employees of Assisting Utility once Emergency Assistance is no longer necessary or desirable; and

- j. Reimbursement of Expenses incurred by Assisting Utility, within thirty days after receipt of an invoice.

**SECTION 3. OBLIGATIONS OF ASSISTING UTILITY**

The Assisting Utility must perform the following:

- a. Provide competent employees capable of implementing professional operating procedures to safely complete the work required by the Requesting Utility;
- b. Maintain all time sheets and work records for all employees providing Emergency Assistance; and
- c. Submit invoices for Expenses to Requesting Utility within ninety days after Emergency Assistance has been terminated.

**SECTION 4. COMPENSATION FOR EMERGENCY ASSISTANCE**

A Requesting Utility receiving Emergency Assistance from an Assisting Utility pursuant to this Agreement shall compensate Assisting Utility as follows:

- a. **Manpower.** A Requesting Utility shall pay the Assisting Utility for the use of all employees supplying Emergency Assistance under this Agreement an amount equal to the sum of the following:
  - i. For the first eight (8) hours per day, an amount equal to one and one-half times actual wages or salary, plus benefits paid to such employees by the Assisting Utility; and
  - ii. For each hour worked after the first (8) eight hours per day or for each hour worked on a weekend or holiday, an amount equal to two times actual wages or salary, plus benefits paid to such employee by the Assisting Utility that they are actively involved in providing Emergency Assistance pursuant to the Agreement, or other pay rates as may be mutually agreed to by a Requesting Utility and Assisting Utility; and
  - iii. All out-of-pocket costs and expenses of the Assisting Utility in furnishing said manpower, including without limitation, transportation expenses for travel to and from the Requesting Utility's location.



Further, a Requesting Utility receiving Emergency Assistance under this Agreement in the form of manpower shall, if necessary, at its sole cost and expense, house and feed the employees of the Assisting Utility who are actively involved in providing Emergency Assistance pursuant to this Agreement.

b. **Equipment and Apparatus.** A Requesting Utility shall pay Assisting Utility for the use of all equipment and apparatus furnished by the Assisting Utility in the provision of Emergency Assistance pursuant to this Agreement at a rate or rates mutually agreed upon by the Requesting Utility and Assisting Utility negotiating in good faith; provided, however, that such rate shall not exceed the prevailing FEMA Schedule of Equipment Rates for similar equipment and apparatus.

c. **Materials and Supplies.** A Requesting Utility shall pay Assisting Utility the replacement cost for all supplies and materials provided by the Assisting Utility in rendering Emergency Assistance pursuant to this Agreement.

**SECTION 5: TERM**

The term of this Agreement shall commence upon the execution and shall continue until terminated by either party at any time by giving thirty (30) days prior written notice to the other party of its desire to so terminate this Agreement. Termination of this Agreement shall not affect a City's reimbursement obligations under Sections 3 and 4 hereof, or any other accrued liability or obligation hereunder, including, without limitation, the obligation of a Requesting Utility to pay amounts due to an Assisting Utility hereunder.

*[Signatures on following pages]*

|

THIS DONE AND SIGNED at \_\_\_\_\_, Louisiana this  
\_\_\_\_\_ day of \_\_\_\_\_, 2019.

**LOUISIANA ENERGY AND POWER AUTHORITY**

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

THIS DONE AND SIGNED at \_\_\_\_\_, Louisiana this  
\_\_\_\_ day of \_\_\_\_\_, 2019.

**LAFAYETTE CITY-PARISH CONSOLIDATED GOVERNMENT  
D/B/A LAFAYETTE UTILITIES SYSTEM**

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

THIS DONE AND SIGNED at \_\_\_\_\_, Louisiana this  
\_\_\_\_\_ day of \_\_\_\_\_, 2019.

**[OTHER LEPA PARTICIPANTS]**

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

## Summary of Agreement for Emergency Assistance By and Between The LEPA Member Cities

To assist certain Cities in obtaining payment for contributions toward the restoration effort of Cities in need, the following is a summary of the key provisions of this Agreement for Emergency Assistance By and Between the LEPA Member Cities.

Parties The Agreement for Emergency Assistance, when executed by a Requesting Utility and Assisting Utility, will govern when the Requesting Utility agrees to receive assistance from the responding party as contacted by LEPA.

Term A City may terminate its participation in the Agreement by giving LEPA 30-days prior written notice. However, termination does not end indemnification of LEPA and Assisting Utility, nor does it relieve the Requesting Utility of any accrued liability.

Emergency Assistance An emergency is a natural disaster, or other event affecting the Requesting Utility's electric system. Assistance to be provided upon the request of the City includes manpower, equipment, apparatus, supplies, and material from the Assisting Utility's electric department. However:

- the Assisting Utility is not required to imperil its own system or services
- the Assisting Utility is the sole and absolute judge of its ability or capacity to assist
- the Assisting Utility may decline to assist, under any circumstances
- the Assisting Utility and its individual employees/agents may not be held civilly or criminally liable for declining to assist

Compensation A Requesting Utility will compensate an Assisting Utility for:

- *Manpower* – at the rate of:
  - i) 1<sup>st</sup> 8 weekday hours (1½ x wages/salary) + benefits
  - ii) All other weekday hours above 8 hours (2 x wages/salary) + benefits  
All holiday/weekend hours (2 x wages/salary) + benefits

OR

Other pay rates as mutually agreed to by the Requesting Utility and the Assisting Utility

- iii) Out of pocket expenses – including, but not limited to, transportation and travel costs.

Further, if necessary, the Requesting Utility shall feed and house personnel who are actively involved in providing emergency assistance.

- *Equipment* – the Requesting Utility will reimburse for use of equipment and apparatus at a mutually agreed upon rate, not to significantly exceed prevailing rental rates.
- *Materials and Supplies* – the Requesting Utility will pay the cost to replace supplies and materials provided.

Indemnification The Requesting Utility will indemnify the Assisting Utility from all liabilities arising directly or indirectly from the provision of emergency assistance, including acts and omissions (negligent or otherwise), except those resulting solely from willful acts or omissions.

Participation in Agreement for Emergency Assistance LEPA, as the Regional Coordinator, will assist in coordinating activities between Cities, but is not responsible for providing emergency services, and is to be fully indemnified under all circumstances. LEPA will provide updated lists of Cities that have executed or terminated this Agreement.

The following resolution was offered by \_\_\_\_\_, seconded by \_\_\_\_\_ and duly resolved:

RESOLUTION NO. \_\_\_\_\_

**A RESOLUTION REQUESTING FINANCIAL ASSISTANCE FROM THE STATE OF LOUISIANA UNDER THE FISCAL YEAR 2019-2020 LOCAL GOVERNMENT ASSISTANCE PROGRAM AND COMMUNITY WATER ENRICHMENT FUND PROGRAM**

**WHEREAS**, the Louisiana Legislature has appropriated funding for the Fiscal Year 2019-2020 Local Government Assistance Program (LGAP) and Community Water Enrichment Fund (CWEF) Program; and

**WHEREAS**, the Local Government Assistance Program offers grants to eligible municipalities and parishes for a wide range of projects to improve public health, public safety, living conditions and for economic development purposes; and

**WHEREAS**, the Community Water Enrichment Fund Program offers grants to eligible municipalities and parishes for rehabilitation, improvements and new construction projects for community potable water systems; and

**WHEREAS**, it is deemed necessary and proper to submit applications to the Louisiana Office of Community Development under the Fiscal Year 2019-2020 Local Government Assistance Program and also the Fiscal Year 2019-2020 Community Water Enrichment Fund Program.

**NOW THEREFORE BE IT RESOLVED** by the City Council of the City of Abbeville that Mayor Mark Piazza is hereby authorized to sign and submit an application to the State of Louisiana, Office of Community Development under the Fiscal Year 2019-2020 Local Government Assistance Program and also execute any and all documents should this grant be funded; and

**BE IT FURTHER RESOLVED** that the Mayor is hereby authorized to sign and submit an application to the State of Louisiana, Office of Community Development under the Fiscal Year 2019-2020 Community Water Enrichment Fund Program and also execute any and all documents should this grant be funded.

**THEREUPON**, the above resolution was declared adopted.

\*\*\*\*\*

CERTIFICATE

I, Kathleen S. Faulk, Secretary/Treasurer of the City of Abbeville, do hereby certify that the above is a true and exact copy of a resolution adopted by the City Council of the City of Abbeville on August 6, 2019 at which time a quorum was present and voting.

\_\_\_\_\_  
KATHLEEN S. FAULK  
SECRETARY/TREASURER  
CITY OF ABBEVILLE

MARK PIAZZA  
Mayor

KATHLEEN S. FAULK  
Secretary - Treasurer

• CITY OF •  
**ABBEVILLE**  
**SINCE 1850**



July 31, 2019

To: Mayor and City Council  
From: Donna Baudoin  
Director of Revenue, Regulatory Codes & Permits  
Subject: **Agenda Items for August 6, 2019 City Council Meeting**

Dear Mayor and City Council:

Attached please find copies of the decisions rendered at the hearing that was held on July 31, 2019, along with pictures of the properties.

The following properties will be placed on the Agenda for the August 6, 2019 City Council meeting for you to consider and possibly adopt the recommendations of the Hearing Officer.

Location	Property Owner	Violations	Time Given
1105 Charity St	Brian Gage Sr.	Tarp on roof	74 Days
721 Parkview Dr	Damon Schexnaider	Multiple junk items on property	5 Days
1910 E. End St.	Marjorie Toups	Tall Grass/overgrown brush	5 Days
506 Thomas St	Sharon Hoover Etals	Multiple junk items on property	5 Days
<b>Lacey Mallet (Occupant)</b>			
705 S. State St	April Lynn Broussard	Tall Grass/Junk items on property	5 Days
207 S. Gertrude St.	Maudry Sonnier Levy	Tall Grass/Demolition	5 Days
<b>c/o Delores W. Adams</b>			
1715 E. Lafayette St.	Justin Paul & Danequia Anderson	Tall Grass/Demolition or Secure	5 Days

Respectfully,  
*Donna Baudoin*  
Donna Baudoin  
Director of Revenue,  
Regulatory Codes & Permits

cc: Kathy Faulk, Secretary-Treasurer  
Ike Funderburk, City Attorney  
Clay Menard, Public Works Director

**COUNCILMEN:**  
**FRANCIS J. PLAISANCE**  
Councilman at Large

**ROSLYN R. WHITE**  
District A

**FRANCIS TOUCHET, JR.**  
District B

**BRADY BROUSSARD, JR.**  
District C

**TERRY Y. BROUSSARD**  
District D

City of Abbeville  
101 N. State Street  
P.O. Box 1170  
Abbeville, LA 70511-1170  
(337) 893-8550  
Fax: (337) 898-4298

**DECISION RENDERED AT HEARING**

Complaint No: #001

Date of Hearing: 7-31-19

Offending Party Present at Hearing: Brian Gage

Address of Violator: 1105 Chasity ST.

Violation of Ordinance #: Sec. R 905

Decision rendered at hearing: Gave until October 19<sup>th</sup>, 2019 to  
repair roof.

Date to Comply: 10-19-19

Signature of Violator: 

Mailing Address: 138 Rue Des Cannes  
Maurice L.

Phone Number: (387) 8523-7556

Date: 7-31-19

**A Certificate of Compliance will be issued once the above violations are corrected. If not complied with by the above date, the City may undertake the remedial action and file suit for recovery of the cost of the undertaking.**





1105 Charity

**DECISION RENDERED AT HEARING**

Complaint No: # 002

Date of Hearing: 7-31-19

Offending Party Present at Hearing: Damon Schneider

Address of Violator: 721 Parkview DR.

Violation of Ordinance #: Sec. 9-16

Decision rendered at hearing: Leave 7 days to remove junk  
from property.

Date to Comply: 8-13-19

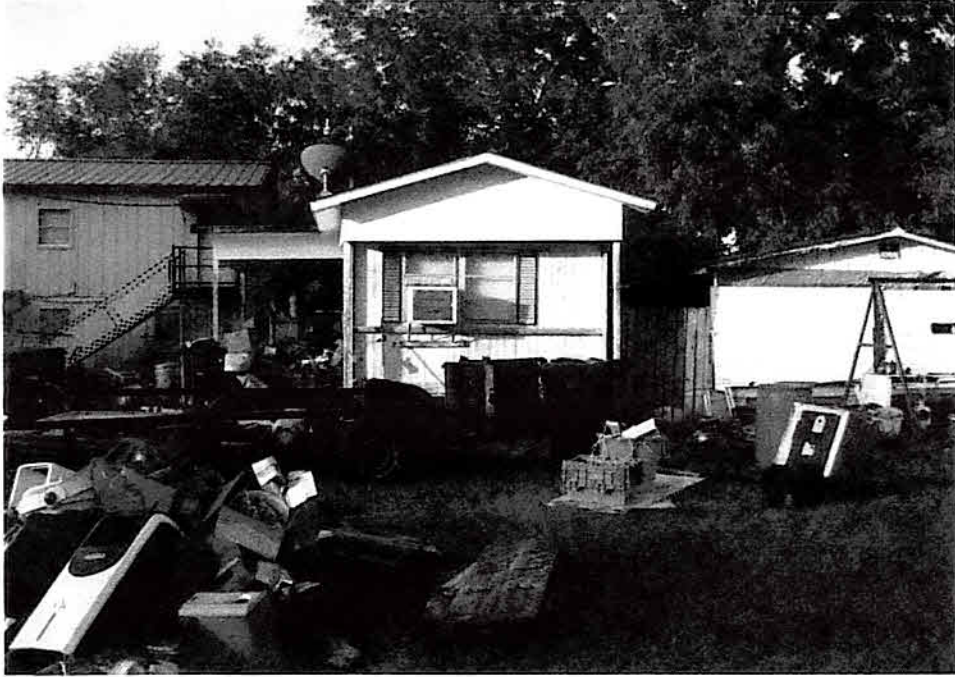
Signature of Violator: Damon Schneider

Mailing Address: 721 Parkview

Phone Number: 337-224-2954

Date: 7-31-19

**A Certificate of Compliance will be issued once the above violations are corrected.  
If not complied with by the above date, the City may undertake the remedial action  
and file suit for recovery of the cost of the undertaking.**



721 Parkview

**DECISION RENDERED AT HEARING**

Complaint No: #003  
Date of Hearing: 7-31-19  
Offending Party Present at Hearing: no one appeared.  
Address of Violator: 1910 E. End St.  
Violation of Ordinance #: Sec. 8-6  
Decision rendered at hearing: Gave 5 days to clear  
property of tall grass &  
Overgrown brush  
  
Date to Comply: 8-12-19

Signature of Violator: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Date: 7-31-19

**A Certificate of Compliance will be issued once the above violations are corrected. If not complied with by the above date, the City may undertake the remedial action and file suit for recovery of the cost of the undertaking.**



1910 E. End St.

**DECISION RENDERED AT HEARING**

Complaint No: #004

Date of Hearing: 7-31-19

Offending Party Present at Hearing: Sharon Hoover

Address of Violator: 506 Thomas St.

Violation of Ordinance #: Sec. 9-11e

Decision rendered at hearing: Gave 5 days to clear property of junk.

Date to Comply: 8-12-19

Signature of Violator: Sharon Hoover

Mailing Address: 513 Thomas St  
Abbeville LA 70500

Phone Number: 337 652-2004

Date: 7-31-19

**A Certificate of Compliance will be issued once the above violations are corrected. If not complied with by the above date, the City may undertake the remedial action and file suit for recovery of the cost of the undertaking.**



506 Thomas St.



**DECISION RENDERED AT HEARING**

Complaint No: # 005

Date of Hearing: 7-31-19

Offending Party Present at Hearing: no one appeared

Address of Violator: 705 S. State St.

Violation of Ordinance #: Sec. 8-161, 9-116

Decision rendered at hearing: Gave 7 days to clear property of tall grass & junk items

Date to Comply: 8-13-19

Signature of Violator: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date: 7-31-19

**A Certificate of Compliance will be issued once the above violations are corrected. If not complied with by the above date, the City may undertake the remedial action and file suit for recovery of the cost of the undertaking.**



**DECISION RENDERED AT HEARING**

Complaint No: #006

Date of Hearing: 7-31-19

Offending Party Present at Hearing: Delores Adams

Address of Violator: 207 S. Gertrude ST.

Violation of Ordinance #: Sec. 5-71, 8-61

Decision rendered at hearing: Gave 5 days to apply for  
Demolition permit to tear down  
structure.

Date to Comply: 8-12-19

Signature of Violator: *Delores Adams*

Mailing Address: 700 S. Bailey St.

Phone Number: 337-400-9099

Date: 7-31-19

**A Certificate of Compliance will be issued once the above violations are corrected.  
If not complied with by the above date, the City may undertake the remedial action  
and file suit for recovery of the cost of the undertaking.**



207 S. Gertrude



**DECISION RENDERED AT HEARING**

Complaint No: # 007

Date of Hearing: 7-31-19

Offending Party Present at Hearing: Daniqua Anderson

Address of Violator: 1715 E. Lafayette St.

Violation of Ordinance #: 5-71, 8-61

Decision rendered at hearing: Gave 5 days to secure house &  
Keep grass cut

Date to Comply: 8-12-19

Signature of Violator: 

Mailing Address: 305 S. East St

Phone Number: 337 335-3308

Date: 7-31-19

**A Certificate of Compliance will be issued once the above violations are corrected. If not complied with by the above date, the City may undertake the remedial action and file suit for recovery of the cost of the undertaking.**



1715 E. Lafayette

MARK PIAZZA  
Mayor

KATHLEEN S. FAULK  
Secretary - Treasurer

• CITY OF •  
**ABBEVILLE**  
**SINCE 1850**



July 31, 2019

To: Mayor and City Council  
From: Donna Baudoin  
Subject: Special Event Permit Application

Dear Mayor and Council:

Attached please find a Special Event Permit Application for:

**Event Title:** Making Each Day Count-Suicide Prevention & Mental Health Awareness  
**Organization:** Abbeville General Hospital  
**Contact Person:** Alanah Leger  
**Location of Event:** Magdalen Square  
**Date of Event:** September 7<sup>th</sup>, 2019  
**Times of Event:** 9:00 a.m. to 12:00 p. m.  
**Description of Event:** Free community event to raise awareness about Mental health & suicide prevention

This application will be placed on the agenda for the August 6, 2019 City Council Meeting.

Sincerely,

Donna Baudoin  
Director of Revenue,  
Regulatory Codes & Permits

cc: Kathy Faulk, Secretary-Treasurer  
Ike Funderburk, City Attorney

**COUNCILMEN:**  
**FRANCIS J. PLAISANCE**  
Councilman at Large

**ROSLYN R. WHITE**  
District A

**FRANCIS TOUCHET, JR.**  
District B

**BRADY BROUSSARD, JR.**  
District C

**TERRY Y. BROUSSARD**  
District D

City of Abbeville  
101 N. State Street  
P.O. Box 1170  
Abbeville, LA 70511-1170  
(337) 893-8550  
Fax: (337) 898-4298

CITY OF ABBEVILLE  
SPECIAL EVENT PERMIT APPLICATION

MAIL TO: CITY OF ABBEVILLE - LICENSE DEPT.  
101 NORTH STATE ST.  
ABBEVILLE LA 70510

Please PRINT or TYPE all information on this form. You must complete an application for each business location. For assistance call 337-898-4213 or visit the office at the above address.

EVENT TITLE: Making Each Day Count: Suicide Prevention & Mental Health Awareness

LOCATION OF EVENT: Magdalen Square  
(Attach a site location map defining physical boundaries)

DESCRIPTION OF EVENT: suicide and mental health awareness  
1 mile walk, community education tables, butterfly release,  
children's arts & crafts

- EVENT CATEGORY:
- Cultural Event
  - Concert/Performance
  - Civic Event
  - Historical Event
  - Farmer/Outdoor Market
  - Business Promotion
  - Festival/Fair
  - Museum Special Event
  - Religious Event
  - suicide Art-Walk
  - Outdoor Dance
  - Non-Profit Event/School

Event Beginning Date: <u>9-7-19</u>	Time Event Begins: <u>9:00</u>
Event End Date: <u>9-7-19</u>	Time Event Ends: <u>12:00</u>
Anticipated Attendance: _____ Total	_____ Per Day

Applicant Information:

Organization: Abbeville General Hospital

Individual In Charge of Group: Alanah Leger LCSW

Mailing Address: 118 North Hospital Dr.

City, State, Zip Code: Abbeville, LA 70510

E-mail: alanahleger30@gmail.com

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: 337-351-1862

- Type of Organization:
- Individual
  - Corporation
  - Non-Profit
  - Partnership
  - Governmental
  - Other hospital

Do you intend to serve Alcoholic Beverages at this event? no

Describe Nature of Business/Items to Sell: free community event  
to raise awareness about mental health &  
suicide prevention

Request for Public Services: The cost to applicant shall be in addition to the fee charged for the Issuance of the Special Event Permit. A deposit for said services is \$ \_\_\_\_\_ for clean-up and \$ \_\_\_\_\_ for utilities.

Sign Here: Alanah Leger Date: 7-29-19

<b>FOR OFFICE USE ONLY</b>	
Approved _____	Denied _____ Pending _____
Paid: _____	Cash _____ Check # _____
Deposits: \$ _____	Clean-up \$ _____ Utilities _____
Issued by: _____	Date Issued: _____

**INSURANCE AND HOLD HARMLESS CLAUSE:**

The applicant is required to maintain a minimum of two million dollar liability insurance coverage during the entire time that the event is conducted and/or permitted. The City of Abbeville shall be listed as "Additional Insured" on the Certificate of Insurance. The special events sponsor hereby agrees to indemnify and hold harmless the City of Abbeville, Louisiana, its agents, public official, officers, employees and authorized volunteers, from and against any and all legal actions, claims, damages, losses, expenses arising out of the permitted event/activity or any activity associated with the conduct of the sponsor's operation of the event, including but not limited to claims for personal or bodily injury, disease or death, or injury to or destruction of property, excluding claims caused by the willful commission or omission by employees of the City of Abbeville, Louisiana acting within the scope of their employment. Further, the event sponsor agrees to indemnify the City of Abbeville, Louisiana and any of its agents, public officers, officials or employees and authorized volunteers for any attorneys fees and court costs incurred or to be incurred in defending and actions brought against them as a result of the sponsor's use of public property or operation of the event as set forth in the application for special permit.

**LIABILITY WAIVER:**

The event sponsor agrees for itself and/or its employees, agents, or volunteers associated of to be associated with the activity for which the permit is being sought, to waive and relinquish all claims that may result in any manner against the City of Abbeville, Louisiana, its agents, public officers, officials, or employees and authorized volunteers from said sponsored event or activity, except for acts caused by the willful and wanton misconduct by employees of the City of Abbeville, Louisiana acting within the scope of their employment.

**AUTHORIZED SIGNATURES:**

I hereby attest that I am authorized to bind the sponsor and/or its employees, agents, or volunteers associated or to be associated with the activity for which the permit is being sought, to the terms of this agreement. I have read and understand all regulations and requirements outlined herein. I/we hereby agree to meet all requirements for documentation, certification, licensing, financial responsibility and all other aspects of staging a Special Event on public streets, property, or facilities in the historic district of the City of Abbeville. I/we understand that our lack of meeting all requirements outlined herein may result in the denial or cancellation of the proposed Special Event. Permit applied for and all terms and stipulations agreed to by:

<u>Alanah Leger</u>	<u>Alanah Leger</u>
Name (please print)	Signature
<u>Jew</u>	<u>7-29-19</u>
Signatory Title (if applicable)	Date



July 15, 2019

Mayor Piazza and City Councilmen  
City of Abbeville  
P. O. Box 1170  
Abbeville, LA 70511-1170

Dear Mayor Piazza and City Councilmen:

I am writing to request the \$200.00 special event permit fee and requirement for additional insured be waived for the Suicide Prevention and Mental Health Awareness program tentatively scheduled for Saturday, September 7, 2019 9:00 a.m. to 12:00 p.m. in Magdalen Square.

September is suicide prevention month and we, just like most communities, have far too many deaths by suicide and many people who do not know how or where to get help if they identify the need in time. This event will be free to the community and plans include a guest speaker, complementary lunch, memorial walk, educational content on identifying and responding to suicide risk and vendor booths for local agencies who provide mental health services to talk with members of the community about available services.

I appreciate your consideration and can be contacted at 337-351-1862 with any concerns.

Sincerely,

A handwritten signature in blue ink that reads "Alanah Leger, LCSW". The signature is written in a cursive style.

Alanah Leger, LCSW



### 2019 Suicide Prevention & Mental Health Awareness Walk Path



**Walking Path:**

Magdalen Square

S Washington St

3<sup>rd</sup> Street

Lake Avenue

2<sup>nd</sup> Street

S Main Street

E Lafayette Street

S Washington St to Magdalen Square

CERTIFICATE OF INCUMBANCY

STATE OF LOUISIANA

PARISH OF Vermilion

BEFORE ME, the undersigned notary public, being duly qualified in and for the above referred to parish and state, personally came and appeared Alarah Leger, who after being sworn by me did depose and state that he/she is the president/managing member of <sup>MAKING EACH DAY COUNT:</sup> suicide prevention & mental health awareness event, that Alarah Leger is the secretary thereof, and that the following named individuals are shareholders/members thereof.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

AND NOW BEFORE ME, personally came and appeared Alarah Leger, the secretary of the said event, who after being sworn by me did depose and state that Alarah Leger is the president/managing member thereof.

THUS DONE AND SIGNED on this 30 day of July, 2019, in the presence of the undersigned notary public and witness after a reading of the whole.

WITNESSES

Batiste

Alarah Leger  
PRESIDENT/MANAGING MEMBER

Alaux

Alarah Leger  
SECRETARY

Jan Caja  
NOTARY PUBLIC  
N.P. NO: \_\_\_\_\_



JAN CAJA  
NOTARY PUBLIC #057592  
VERMILION PARISH, LOUISIANA  
MY COMMISSION EXPIRES AT DEATH

# Louisiana Hospital Association

## Malpractice and General Liability Trust

4646 Sherwood Common Blvd., Baton Rouge, LA 70816

### Verification of Coverage

#### SCHEDULE OF UMBRELLA COVERAGE

**A-1 First Named Participant:**

Vermillion Parish Hospital Service District No. 2  
 Abbeville General Hospital  
 118 North Hospital Drive  
 P.O. Box 580  
 Abbeville, LA 70511-0580

**A-3 Certificate Number:** HPL-0010-2018

**A-4 Coverage Period:**

November 1, 2018 to November 1, 2019 12:01 AM  
 Standard time at the address of the named participant stated herein.

**A-2 Additional Named Protected Person(s):**

Abbeville General Hospital Volunteer Services; Abbeville General Hospital Clinic (RHC) - Family Medicine Services ; Abbeville General Hospital Clinic (RHC) - Pediatric & Specialty Services; The Behavioral Medicine Center at Abbeville General Hospital; AGH Women's Health of Vermilion (RHC) ; Maurice Community Care Clinic (RHC); AGH Offsite Diagnostic Imaging; Erath-Delcambre Community Care Clinic; AGH Outreach Center

Item	Coverage Type	Coverage Information	Loss Limit
B-1	Healthcare Claims Made Professional Liability Umbrella Coverage	Louisiana Hospital Association Malpractice and General Liability Trust  Retroactive Date: 11/1/1999	Specific Loss Limit: \$4,500,000 per Medical Incident subject to scheduled Certificate of Underlying Coverage Items C-1 and C-2. Aggregate Loss Limit: \$4,500,000
B-2	Commercial General Liability Occurrence Based Umbrella Coverage  Excess of Bodily Injury, Property Damage, Personal Injury and Employee Benefits Liability as shown under Item C-3.	Louisiana Hospital Association Malpractice and General Liability Trust	Specific Loss Limit: \$4,500,000 per Occurrence subject to scheduled Certificate of Underlying Coverage Item C-3. Aggregate Loss Limit is \$4,500,000 less any coverage provided under Item B-3 hereof.
B-3	Excess Follow Form Liability Umbrella Coverage  Excess of \$1,000,000 Underlying Auto Liability.  Excess of \$1,000,000 Underlying Employer's Liability.	Louisiana Hospital Association Malpractice and General Liability Trust	Specific Loss Limit: \$4,500,000 per Claim, as scheduled Certificate of Underlying Coverage as scheduled with the Trust. Aggregate Loss Limit is \$4,500,000 less any coverage provided under Item B-2 hereof.

# Louisiana Hospital Association

## Malpractice and General Liability Trust

4646 Sherwood Common Blvd., Baton Rouge, LA 70816

### Verification of Coverage

#### SCHEDULE OF UNDERLYING COVERAGE

Item	Coverage Type	Coverage Information	Loss Limit
C-1	Healthcare Professional Liability Occurrence Coverage	Louisiana Hospital Association Malpractice and General Liability Trust	\$100,000 per Medical Incident Annual General Aggregate: \$2,000,000
C-2	Louisiana Patients' Compensation Fund In Excess of Coverage Under Item C-1 Occurrence Coverage	Louisiana Patients' Compensation Fund Subject to Paid PCF Surcharge.	\$400,000 per Medical Incident
C-3	General Liability Coverage Occurrence Coverage	Louisiana Hospital Association Malpractice and General Liability Trust  Bodily Injury Property Damage Personal Injury Employee Benefits Liability  Medical Expense  Pollution, Wrongful Termination  Fire Damage Damage to Property Rented less than 7 days Patients' Property	\$500,000 Per Occurrence \$500,000 Per Occurrence \$500,000 Per Occurrence \$500,000 Per Occurrence  \$1,000 each person  \$250,000 Per Occurrence \$250,000 Annual Aggregate  \$100,000 per fire \$100,000 Per Occurrence \$100,000 Annual Aggregate  Per Claim Deductible: \$500 \$5,000 Each Patient \$25,000 Annual Aggregate  \$2,000,000 Annual General Aggregate except where lower annual limits are shown above.
C-4	Other Coverages:	As scheduled with Louisiana Hospital Association Malpractice and General Liability Trust	As per underlying coverage

Vermillion Parish Hospital Service District No. 2 Abbeville General Hospital

November 1, 2018 - November 1, 2019

HPL-0010-2018

This Certificate is issued to: **City of Abbeville**  
**101 North State Street**  
**Abbeville, LA 70510**

This document is furnished for information only. It does not provide or convey any coverage. Unless specified hereon its issuance does not make the person or organization to whom it is issued an additional protected person or entity under the Louisiana Hospital Association Malpractice and General Liability Trust Fund. It neither affirmatively nor negatively amends, extends or alters the coverage afforded by the coverage agreement between the participant and the Louisiana Hospital Association Malpractice and General Liability Trust Fund. Amendment, extension or change to such contract can only be effected by endorsement issued by the Louisiana Hospital Association Malpractice and General Liability Trust Fund and attached thereto.

Should any above described policy be canceled, the Louisiana Hospital Association Malpractice and General Liability Trust Fund will make all reasonable effort to give notice to the holder of this document, at the address shown herein, but failure to give such notice shall impose no obligation of any kind upon the Louisiana Hospital Association Malpractice and General Liability Trust Fund.

# Louisiana Hospital Association

*Malpractice and General Liability Trust*

4646 Sherwood Common Blvd.  
Baton Rouge, LA 70816

Telephone (225) 272-4480  
(800) 542-4754

## GENERAL CHANGE ENDORSEMENT

In consideration of payment of \$0.00 it is hereby understood and agreed that coverage is amended as follows:

**THIS ENDORSEMENT CHANGES YOUR COVERAGE. PLEASE READ IT CAREFULLY.**

City of Abbeville is named as additional named protected person pursuant to its Agreement with Abbeville General Hospital with respect to the use of City's property for Outreach Community event to be held on September 7, 2019. Coverage provided to City of Abbeville will be limited to \$2,000,000 / \$2,000,000 as required by contract and will not be broader than that which is required by contract or agreement. The coverage afforded to such additional named protected persons only applies to the extent permitted by law.

Nothing herein contained shall be held to vary, alter, waive, or extend any of the terms, conditions, agreements, or limitations of this agreement other than as stated above.

Effective: September 7, 2019                      Expiration: September 8, 2019  
Attached to and forming part of Certificate Number HPL-0010-2018-E15 issued to:

Vermillion Parish Hospital Service District No. 2  
Abbeville General Hospital



---

Authorized Representative: Carla M. Juneau, VP & CFO HSLI

# DUCOTE ROOFING & CONSTRUCTION

ducotesh@gmail.com - www.ducoterootingandconstruction.com

**MAKE PAYABLE TO:**

**SHANNON C. DUCOTE**

10806 Oak Grove Pvt Road  
Maurice, La - 70555  
337- 212- 1484

Date:

07	16	2019
----	----	------

Invoice / Bill to:

Fire Station # 3
800 Maude Ave
Abbeville la 70510

Job Description	<b>Complete Roof Replacement</b>

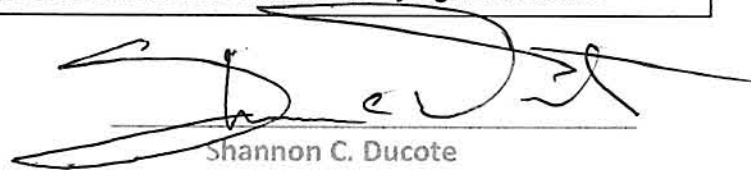
Job Scope	
Removal of all the old roofing from the building.	
Install premium synthetic underlayment / felt.	
Install ice and water shield membrane in all valleys.	
Clean prep and reuse all copper flashings and vent systems.	
Install 130 mph rated Architectural Roofing Atlas Pinnacle Pristine Heather	
Replace any rotten or damaged decking as needed.	
Atlas full roof system with High Profile raised ridge capping.	
Materials – Labor - Disposal - Complete clean up	\$8,874.20

**Important notice: Please notify all occupants that they are not advised to stand under the roof's perimeters while we are working. In addition, please do not park any vehicles, boats, trailers, etc near the perimeters. We do everything we can to ensure tools and property do not incur damage or injury and your attention to these matters are vital. In compliance with OSHA law the workers must maintain his/her work area free from debris and any uninsured persons.**

**By signing below, owner hereby accepts and agrees to Contractor's proposal as set forth in this job Scope Agreement and agrees to perform all the owner covenants and obligations. Payments for services rendered will be due upon completion of the agreements as it is stated here. In the event of a failure to pay, the owner is aware of the interest per day that will accrue.**

**Contractor and Owner agree by the execution of this agreement to the warranty of 15 years labor and the Standard Product Warranty as general conditions.**

Customer



Shannon C. Ducote

Thank you for your business

AGREEMENT

SOUTHSIDE ROOFING
Parent Company:
Lafayette Home Improvements, LLC
8130 Ambassador Caffery
Broussard, LA 70518
337-856-ROOF / 337-856-7663



JOB # \_\_\_\_\_

Date: 6-26-19

Salesmen: Joe Fournet

Owner: Jude Mire (Fire station)
Phone: Charlie- 898-4277
Cell #: 258-1248
Fax #:
Address: 800 Maude Ave Abbeville
Street City State Zip
Email: Charlie.gur@outyotabbeville.net

Southside Roofing (a Lafayette Home Improvement, LLC Company) hereby proposes to furnish to Customer ("Owner") all materials or labor necessary to repair or replace Owner's project according to the following specifications and provisions. Please verify all work is listed prior to signing.

'A'. Specifications and Project Description: Five (5) Year Labor Warranty on Full roof replacement: Hidden Damage Extra

- Remove/Replace New Construction Repair only Labor only
3 Tab Architectural Metal Flat Other
Wind Speed: 70-MPH 80-MPH 110-MPH 130-MPH
Color: Heather Style: Mch
Southside Roofing to Furnish All Materials and Labor as specified
Valley Metal 90 LF' No Water Shield 90 LF'
Drip Edge: 4.5" 250 Color Match
Vents: Ridge Vents LF
Power Vents Low Profile
Wind Turbine 2 Solar Vents
Number of Squares 34 Pitch 8/12 Story 1
Felt: Synthetic used, unless specified differently
Lead Jacks: 1 1/2 2 3 4
Heat Pipes: 6 8 \* Furnace vents not changed
Capping Hip / Ridge 300 LF Starter Strip 250
Southside Roofing will dispose of all debris
Plywood / Woodwork - separate charge \$50 per sheet / \$1.00 SF
Roll Yard with Magnetic Roller (Mowed yard is preferred)
Attic inspection for proper pipe connection upon completion
Picture of jobsite - Before and after pictures for file

Flashings conditions: Chimney, wall to roof, valleys etc: Describe problems (if any) Match

Leaks: Describe problem areas: Hidden damage extra Pictures of damage

\* Notes: Property owner is responsible to Southside Roofing to make "full disclosure" of any leaks in home (current or previous to the job). Gas Vents should only be changed by a Licensed Plumber. Southside Roofing is not responsible for other licensed trade-work, such as: Electrical / Sheet-Metal etc. unless specified below.

Dumpster issue Landscape notes Gutters on home Delivery issues Skylights

Special Instructions:

'B'. Payment Terms: No money is due up front but payment is expected when due. Southside Roofing proposes to perform the above-referenced work subject to the approval of a member or manager of Southside Roofing for the Total Sum of \$ 9200.00, with a Down Payment constituting one-half (1/2) of the Total Sum. The Down Payment of \$ 4600.00 is due when materials are delivered to the property. The Remaining Balance of \$ 4600.00 is due upon substantial completion of the job. All checks by Owner and/or Owner's insurer shall be payable to Southside Roofing. Owner agrees to immediately pay Southside Roofing any balance due when the above-referenced work is deemed substantially complete by Southside Roofing.

'C'. Warranty: Warranties are considered rescinded and revoked should the Total Sum not be paid in full when deemed substantially complete by Southside Roofing. Southside Roofing must be paid as agreed when the material is delivered and when the work performed is deemed complete by Southside Roofing. Labor Warranty covers Roof-Replacements only, Not Repairs. Labor Warranty does not cover damage to roofs caused by "Acts of God." (see manufacturer warranty), hail storms, or similar events produced by natural forces. Components of a roof that are not changed are not covered under warranty. Southside Roofing strongly suggest Owner to change all necessary accessories on the roof such as; vent's that are not gas related, sky-lights, drip-edge, flashing etc., which ensures a new and complete roof system. Labor Warranty does not cover damage to the roof or interior of home due to foundation settlement, distortion or cracking of roof-deck for any reason. Other issues such as; leaks caused by chimney flashing, skylights or other accessories, that are not replaced during the original installation of the roof system, renders the "Labor Warranty" null and void unless item is specified to be change in this Agreement. Prior warped decking is not considered a workmanship issue. If there appears to be any problems with the roof replacement completed by Southside Roofing, Owner shall first contact Southside Roofing for assistance before undertaking any additional repairs or construction themselves or a Third-Party. Labor Warranty shall be null and void if a third party performs any work on the area described in this Agreement once the work is deemed complete, if not approved by Southside Roofing prior to work commencing.

'D'. There shall be no oral agreements or understandings between the parties to this Agreement. The written terms, specifications, and provisions of this Agreement constitute the entire agreement between the parties and supersede and replace any and all prior negotiations, understandings, representations, or agreements, either written or oral. Southside Roofing proposes to perform the above-referenced work subject to the approval of a member or manager of Southside Roofing.

'E'. Additional Charges: Southside Roofing will work with Owner when unknown issues arise (woodwork, flashing etc.) and we expect the same from Customer - normally a "Time and Material" charge is fair. Replacement of deteriorating decking, sky-lights, fascia boards, flashing, etc., unless included in Agreement or otherwise stated in writing has a charge / cost. Owner is notified and is responsible for any additional costs (both labor and materials) once notified by Southside Roofing. Full disclosure is important - each party must communicate regarding any issue that may arise.

'F'. Cancellation: Southside Roofing retains the right to cancel this Agreement at any time without any liability whatsoever to Owner if it is determined by Southside Roofing that there is more product needed or additional damage to Owner's property / project than originally revealed by Owner, Salesman and/or discovered by Southside Roofing upon its preliminary inspection, unless the parties are able to reach mutually agreeable terms and conditions with regard to same. Once this Agreement is signed by both Owner and a Southside Roofing Manager, and the material is ordered, Owner is responsible for a "Cancellation Fee" (if canceled) of this Agreement and will be assessed a Cancellation Fee equal to fifteen percent (15%) of the Total Sum of the material charge (material must be returned to supplier).

'G'. Expiration: This proposal (price quoted) expires in 30-days from the date presented to Owner. Material cost fluctuates throughout the year, if for any reason Owner needs additional time we ask that you call the office to verify the quoted price is still available.

'H'. Notice to Owner: As per the Louisiana Private Works Act (La. R.S. 9:4801), Southside Roofing, as a Contractor, maintains the right to secure a privilege (Lien) on the immovable property of the Owner for the price of any work done by Southside Roofing on the property of the Owner, should Owner fail to pay Southside Roofing. Owner hereby acknowledges receipt of the Notice of Lien Rights disclosure form as required by La. R.S. 9:4852 (See form in folder for details).

'I'. Legal Fees: If Southside Roofing is required to make legal demand and/or institute legal proceedings to enforce its rights under this Agreement to collect the balance then Southside Roofing shall be entitled to recoup all reasonable attorney's fees and costs incurred in connection therewith.

All major credit cards accepted. A convenience fee of 4% will be added to the total charged.

SOUTHSIDE ROOFING AGREED AND ACCEPTED: SOUTHSIDE ROOFING
Sales Representative Owner's Signature - Date Mgr. Approval & Date

AGREEMENT #: \_\_\_\_\_

DATE: 8/1/19



204 Toledo Dr.  
Lafayette, LA 70506



Lafayette-Roofing.com

O: 337-237-7663 F: 337-233-1041

Owner Abbeville Fire Department Phone \_\_\_\_\_ Cell 258-1248 Fax \_\_\_\_\_

Address 800 Maude Ave Abbeville LA 70510 firechief@cityofabbeville.net  
Street City State Zip Email

Lafayette Roofing & General Contractors, LLC ("Lafayette Roofing") hereby proposes to furnish to Customer ("Owner") all materials and/or labor necessary to repair or replace Owner's project detailed by the following specifications and provisions. Please verify all work is detailed properly on Agreement prior to acceptance of work.

**\*A\*. Specifications and Project Description: Five (5) Year Labor Warranty on Full Roof Replacement Only**

- New Construction  Remove/Replace  Repair only  Labor only
  - 3 Tab  Architectural  Metal  Flat  Carpentry  Other \_\_\_\_\_
  - Shingle System:  25-Year  Limited-Lifetime  Lifetime
  - Wind Speed:  70-MPH  110-MPH  130-MPH
  - \*Product Color \_\_\_\_\_ Style Atlas Pinnacle
  - Lafayette Roofing to Furnish All Materials and Labor
  - Plywood Cost - Separate charge \$75 per sheet / \$200 per sq
  - Attic inspection to ensure proper pipe connection at completion
  - Roll Yard with Magnet / Clean Debris (Mowed yard is necessary)
  - Gutters Cleaned after project is complete for positive water flow
  - Picture of jobsite - Before and After for file
  - Lafayette Roofing will dispose of all debris on site
- Structural Notes: Split level Hip roof \*Pitch 8 / 12 Story 1+2
- Roof Underlayment:  Synthetic 3 Rolls
- Valley Metal 100' LF\*  Ice Water Shield 3 Rolls
- Drip Edge:  4.5"  6" 310' Color \_\_\_\_\_
- Capping 290' LF\*  Starter Shingles 4 bdl LF\*
- Vents:  Ridge Vents \_\_\_\_\_ LF\*  Cut Open Ridge of Roof
- Power Vents \_\_\_\_\_  Low Profile Vent \_\_\_\_\_  Wind Turbine 3 Color \_\_\_\_\_
- Lead Jacks: 1 1/2" 2" 3" 4"  Bullet Boot  Nola Code
- Heat Pipes:  6"  8" \* Gas vents not changed
- Omega Flashing  Roof to Wall Flashing 10ft total LF\*
- Felt removal to decking / if Homeowner request
- Adder \$ \_\_\_\_\_
- Sat TV to be relocated by others

Leaks: No Describe problem areas: \_\_\_\_\_  Pictures of damage

\* Notes: Property owner is responsible to Lafayette Roofing to make "full disclosure" of any leaks in home (current leaks or previous to our visit). Gas Vents can only be changed by a Licensed Plumber. Lafayette Roofing is not responsible for any other necessary licensed trade-work such as: Electrical / Sheet-Metal etc. unless specified below. \*Labor Only Agreement: Customer supplies all materials. If Lafayette Roofing & General Contractors incurs ANY material cost, customer/named party agrees to reimburse all expenses.

- Plywood/Centermatch \_\_\_\_\_ size.  Qty Included \_\_\_\_\_
- Decking / Attic issues: Not inspected- Keep existing copper exhaust vents on roof + Antennae of fascia.

Details of Project: Remove/Replace full roof system with all plumbing pipe covers + attic ventilation upgrade (add 1 more turbine on main).  
Install roof to wall flashing in fascia transitions + install ice & water shield in valleys/base of all pipes/below roof to wall base flashings.

- 130 MPH Architectural Shingle Package \$ 10,317.00 -Atlas
- 110 MPH Architectural Shingle Package \$ 10,443 - OC Oakr.
- 70 MPH 3 Tab Package \$ \_\_\_\_\_
- Repair Package \$ \_\_\_\_\_
- Flat Roof Package \$ \_\_\_\_\_
- Metal Package \$ \_\_\_\_\_

CARPENTRY  Adder of \$ N/A

Soffit \_\_\_\_\_ ' Type \_\_\_\_\_ Size \_\_\_\_\_

Fascia \_\_\_\_\_ ' Type \_\_\_\_\_ Size \_\_\_\_\_

PAINTING  Adder of \$ N/A

\*Owner to Provide Paint  Painting NOT included

CHIMNEY REBUILD  Height \_\_\_\_\_,  Length \_\_\_\_\_,  Width \_\_\_\_\_

SIDING TYPE  Hardie  Stucco  Brick  Vinyl

FLASHING  Color \_\_\_\_\_,  CRICKET  CAP  Style \_\_\_\_\_,  Color \_\_\_\_\_

\* I \_\_\_\_\_ choose NOT to accept the flashings to be replaced.

Adder of \$ N/A

SKYLIGHTS  Adder of \$ N/A  Size \_\_\_\_\_ Qty \_\_\_\_\_ \* I \_\_\_\_\_ choose NOT to accept the skylights to be replaced.

GUTTERS \_\_\_\_\_ LF' Color \_\_\_\_\_  K-Style  1/2 Round Type:  3 x 4  Round Downspouts \_\_\_\_\_

Adder of \$ N/A

PATIOS  Insulated  Uninsulated Color \_\_\_\_\_ Size \_\_\_\_\_ Post QTY \_\_\_\_\_ Gutters  Yes  No Fan Beam \_\_\_\_\_

Adder of \$ N/A  Attached to Home  Freestanding

INSURANCE  Claim # \_\_\_\_\_  Adjuster \_\_\_\_\_  Company \_\_\_\_\_



# TERMS & CONDITIONS

**'B'. Warranty:** Warranties are considered rescinded and revoked should the Total Sum not be paid in full when deemed substantially complete by Lafayette Roofing. Lafayette Roofing must be paid as agreed when the material is delivered and when the work performed is deemed complete by Lafayette Roofing. Labor Warranty covers Roof-Replacements only, not repairs. Labor Warranty does not cover damage to roofs caused by "Acts of God," strong winds of seventy miles per hour or more on 3-Tab shingles or Architectural Shingles manufacturer specifications (see manufacturer warranty), hail storms, or similar events produced by natural forces. Components of a roof that are not changed are not covered under any warranty, and damage caused by same is not covered. Lafayette Roofing strongly suggests Owner change all necessary accessories, on the roof such as: vent's that are not gas related, sky-lights, drip-edge, flashing etc., which ensures a new and complete roof system. Labor Warranty does not cover damage to the roof or interior of home due to foundation settlement, distortion or cracking of roof-deck for any reason. Other issues such as: leaks caused by chimney flashing, skylights or other accessories, that are not replaced during the original installation of the roof system, renders the "Labor Warranty" null and void unless item is specified to be changed in this Agreement. Prior warped decking is NOT considered a workmanship issue.

If there appears to be any problems with the roof replacement completed by Lafayette Roofing, Owner shall first contact Lafayette Roofing for assistance before undertaking any additional repairs or construction themselves. Labor Warranty shall be null and void if a third party performs work on the area described in this Agreement once the work is deemed complete, or, unless otherwise agreed to in writing by Lafayette Roofing's management.

**'C'. Notice to Owner:** As per the Louisiana Private Works Act (La. R.S. 9:4801), Lafayette Roofing, as a Contractor, maintains the right to secure a privilege (Lien) on the immovable property of the Owner for the price of any work done by Lafayette Roofing on the property of the Owner, should Owner fail to pay Lafayette Roofing.

**'D'. Payment Terms:** No money is due upfront but payment is expected when due. Lafayette Roofing proposes to perform the above-referenced work subject to the approval of a member or manager of Lafayette Roofing for the Total Sum of \$ 10,317.00, with a Down Payment constituting one-half (½) of the Total Sum. The Down Payment of \$ 5,159 is due prior to materials being purchased. The Remaining Balance of \$ 5,158 is due upon substantial completion of the job. All checks by Owner and/or Owner's insurer shall be payable to Lafayette Roofing. Owner agrees to immediately pay Lafayette Roofing any balance due when the above-referenced work is deemed substantially complete by Lafayette Roofing.

**'E'. Expiration:** This proposal (price quoted) expires in 30-days from the date on Agreement presented to Owner. Material costs fluctuate throughout the year: if for any reason Owner needs additional time we ask that you call the office to verify the quoted price is still available.

**'F'. Cancellation:** Lafayette Roofing retains the right to cancel this Agreement at any time without any liability whatsoever to Owner if it is determined by Lafayette Roofing that there is more product needed or additional damage to Owner's property / project than originally revealed by Owner, Salesman and/or discovered by Lafayette Roofing upon its preliminary inspection, unless the parties are able to reach mutually agreeable terms and conditions with regard to same. Once this Agreement is signed by both Owner and a Lafayette Roofing Manager, and the material is ordered, Owner is responsible for a "Cancellation Fee" of this Agreement and will be assessed a Cancellation Fee equal to thirty percent (30%) of the total sum of the contract. Email confirmation is legally binding and will be upheld with regard to the same. Owner must send a certified letter of cancellation terminating a contract prior to ordering material.

**'G'. Additional Charges:** Lafayette Roofing will work with Owner when unknown issues arise (woodwork, flashing etc.) normally a "Time and Material" charge is fair. Replacement of deteriorating decking, sky-lights, fascia boards, roof jacks, vents, flashing, etc., unless otherwise stated in writing in this Agreement may be needed to complete the job properly, but not included in the original estimate - Owner will be notified and responsible for any additional costs (both labor and materials) if needed.

**'H'.** There shall be no oral agreements or understandings between the parties to this Agreement. The written terms, specifications, and provisions of this Agreement constitute the entire agreement between the parties and supersede and replace any and all prior negotiations, understandings, representations, or agreements, either written or oral. Lafayette Roofing proposes to perform the above-referenced work subject to the approval of a member or manager of Lafayette Roofing.

**'I'. Disclaimer of Liability:** Lafayette Roofing will not be held liable for unforeseen damages to (HVAC, Electrical, and Plumbing) lines ran to the decking or in direct contact with decking. Lafayette Roofing will not be held liable for unforeseen Interior damages such as ceiling tiles, cracks in sheetrock and / or sagging ceilings.

**'J'. Legal Fees:** If Lafayette Roofing & General Contractors LLC. is required to make legal demand and/or institute legal proceedings to enforce its rights under this Agreement to collect the balance then Lafayette Roofing shall be entitled to recoup all reasonable attorney's fees and costs incurred in connection therewith.

I agree and understand all Terms and Conditions listed in detail above

LAFAYETTE ROOFING

*B. Sanchez*

Sales Representative

AGREED AND ACCEPTED

Owner's Signature - Date

LAFAYETTE ROOFING

Mgr. Approval & Date

If this invoice is not paid upon completion of job, purchaser agrees to pay all attorney's fees, with minimum of \$25, if referred to an attorney. Plus a service charge of 1.5% per month (18% annual rate) will be added to amounts not paid within the terms of sale.

**Kathy Faulk**

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**From:** Heather Fontenot <Heather.Fontenot@apdnet.org>  
**Sent:** Monday, August 05, 2019 2:16 PM  
**To:** Kathy Faulk  
**Subject:** Surplus Units

Good Afternoon Kathy, here is a list of the Units we are wanting to Surplus:

2006 Ford Crown Victoria – Unit #478 – VIN# 2FAFP71W16X122559  
2009 Ford Crown Victoria – Unit #556 – VIN# 2FAHP71V19X119651  
2008 Dodge Durango – Unit #564 – VIN# 1D8HD38N68F126723  
2009 Dodge Durango – Unit #565 – VIN# 1D8HD38P89F706283

Thank You and Have A Great Day!

*Heather H Fontenot*

Secretary to Chief William C Spearman  
Abbeville Police Department  
(337) 898-4238

