



# Capability Statement

AHA Mechanical Contractors

HVAC • Restaurant Equipment • Refrigeration • Plumbing •  
Gas Piping • Backflow

2010 Sycamore View Rd

Memphis, TN 38134

*Phone* 901-383-2900

*Fax* 901-383-2927

*Web* [www.ahamechanical.com](http://www.ahamechanical.com)



# Capabilities

## Preventive Maintenance and Inspections of Equipment

- Monthly, quarterly, semi-annual and annual preventive maintenance and inspections
- Change-over Season Preparations
- Rooftop Unit Maintenance
- Split System Maintenance
- Gas Line Inspections
- Refrigeration Maintenance
- Restaurant Equipment Maintenance
- Boiler and Chiller Maintenance

## Facilities Maintenance

- All types of HVAC equipment
- Filter changes
- Package units repair and replacement
- Split System repairs and replacement
- Tenant build outs
- Plumbing repairs and replacement
- Backflow testing, repairs and replacement
- Refrigeration repairs and replacements
- Restaurant Equipment repairs and replacements
- Boiler and Chiller repair and replacement

# Certifications

- Tennessee CMC Full Mechanical License #58802
- Tennessee BC-A/r Residential General Contractor Limited #58802
- Desoto County, MS CMC Full Mechanical License #523
- Tennessee Backflow Test and Evaluation License #7467
- EPA Certified #NAT-94011-1
- **WBENC Certified Women's Business Enterprise #2005119547**
- **Certified Woman-Owned Business Entity WBE #8-17-1712**
- **Certified Disadvantaged Business Entity DBE #8-17-1712**
- **Certified Small Business Enterprise SBE #8-17-1711**
- **Certified Local Small Business LOSB #8-17-11**
- **Certified TN Governor's Office Diverse Supplier #091415-06**
- Federal Government Cage #5YSB1
- Federal Tax ID #20-5803916
- Dun & Bradstreet Number 825846236

# Company Information

Founded in 2006, AHA Mechanical Contractors specializes in commercial and industrial service, maintenance and replacement of HVAC, Refrigeration and plumbing. Our mission is to minimize downtime and maximize comfort and peace of mind. Our programs are designed to keep your equipment running and to provide long term value. We are licensed and insured in the State of Tennessee and Desoto County, Mississippi. In addition, we have an uncompromising dedication to providing safe and healthy working conditions. OSHA and EPA standards are adhered to in our shop and by our work force.

Owner/Sales	Donna Burlon <a href="mailto:donna@ahamechanical.com">donna@ahamechanical.com</a>
Sales/Financial Contact:	Mike Burlon <a href="mailto:mike@ahamechanical.com">mike@ahamechanical.com</a>
Office Manager/ Dispatcher	Tanya Pickle <a href="mailto:service@ahamechanical.com">service@ahamechanical.com</a>
Service Manager	Larry Raymer <a href="mailto:larry@ahamechanical.com">larry@ahamechanical.com</a>
Billing Dept	Scotty Bussey <a href="mailto:billing@ahamechanical.com">billing@ahamechanical.com</a>
Quoting Dept	Brea Boling <a href="mailto:quotes@ahamechanical.com">quotes@ahamechanical.com</a>

# Memberships and Associations



Mid-South Minority Business Council



National Woman Owned Business Certification



Service Channel clients include CVS Caremark, Benihana, Panda Express, Aramark, Ecolab, Sysco, Bloomin' Brands & Verified Diverse Supplier



National Association of Women Business Owners



Memphis Restaurant Association



Women Owned Business

# Rates

**Standard Time**

8a- 5p Monday – Friday

\$85.00 per hour Technician

\$55.00 per hour Helper, if needed

Nights/Weekends

\$105.00 per hour Technician

\$75.00 per hour Helper, if needed

# Scope of Work and Areas Covered

**Scope:** HVAC, Refrigeration, Restaurant Equipment, Gas, Plumbing and Backflow

**Maintenance and Repair:**

Greater Memphis TN Area to include Northern MS and Western AR

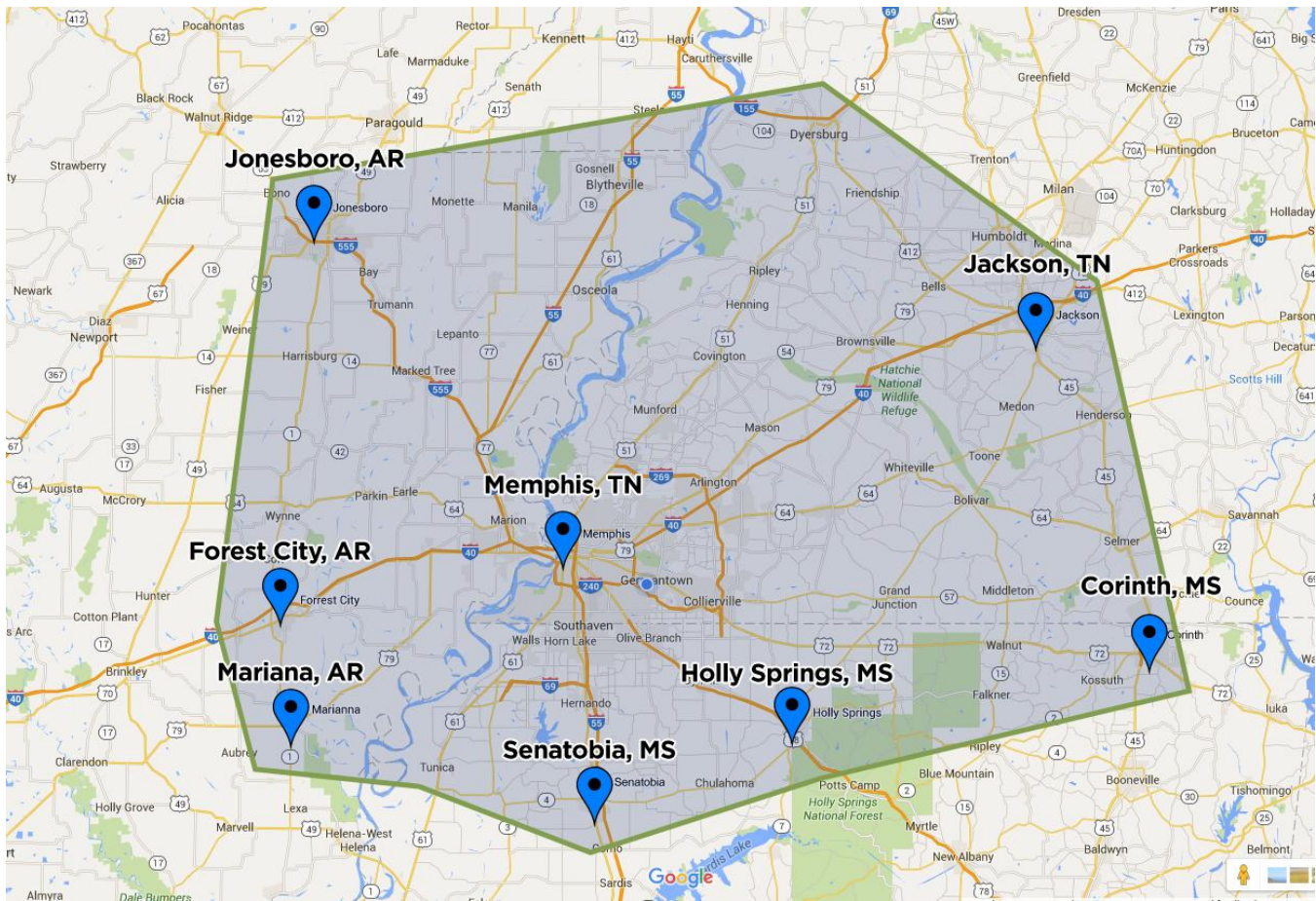
**Maintenance, Repair and Installation:**

Greater Memphis TN Area to include Northern MS

**Licensed Electrical Maintenance, Repair and Installation** in TN only

**Our Coverage Area:**

North: Memphis to Union City, TN Northeast: Memphis to Jackson, TN Northwest: Memphis to Jonesboro, AR	East: Memphis to Corinth, MS West: Memphis to Forest City, AR South: Memphis to Senatobia, MS	Southeast: Memphis to Holly Springs, MS Southwest: Memphis to Mariana, AR
--	---	--





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/18/2015

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).

<b>PRODUCER</b> McDaniel-Whitley, Inc. P.O. Box 382007  Memphis TN 38183-2007		<b>CONTACT NAME:</b> Tammy Quinn <b>PHONE (A/C No, Ext):</b> (901) 881-6464 <b>FAX (A/C, No):</b> (901) 881-6467 <b>E-MAIL ADDRESS:</b> tqquinn@mcwins.com																						
<b>INSURED</b> AHA Mechanical Contractors LLC 40 Windgrove Cv  Piperton TN 38017		<table border="1"> <thead> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A:</td> <td>Union Insurance Company</td> <td>25844</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Union Insurance Company	25844	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
INSURER(S) AFFORDING COVERAGE		NAIC #																						
INSURER A:	Union Insurance Company	25844																						
INSURER B:																								
INSURER C:																								
INSURER D:																								
INSURER E:																								
INSURER F:																								

**COVERAGES**      **CERTIFICATE NUMBER: 15-16 REVISED**      **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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS												
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		CPA427635640	8/20/2015	8/20/2016	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 Employment Practices Liability \$ 100,000												
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		CPA427635640	8/20/2015	8/20/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000												
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		CPA427635640	8/20/2015	8/20/2016	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$												
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	CWA4597820	8/20/2015	8/20/2016	<table border="1"> <thead> <tr> <th>PER STATUTE</th> <th>OTH-ER</th> <th>LIMITS</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>E.L. EACH ACCIDENT \$ 1,000,000</td> </tr> <tr> <td></td> <td></td> <td>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000</td> </tr> <tr> <td></td> <td></td> <td>E.L. DISEASE - POLICY LIMIT \$ 1,000,000</td> </tr> </tbody> </table>	PER STATUTE	OTH-ER	LIMITS			E.L. EACH ACCIDENT \$ 1,000,000			E.L. DISEASE - EA EMPLOYEE \$ 1,000,000			E.L. DISEASE - POLICY LIMIT \$ 1,000,000
PER STATUTE	OTH-ER	LIMITS																
		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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  TO WHOM IT MAY CONCERN	<b>CANCELLATION</b>  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  R Whitley/QUINNT <i>Richard Whitley</i>