



STATE OF NEW HAMPSHIRE DEPARTMENT of RESOURCES and ECONOMIC DEVELOPMENT DIVISION of PARKS and RECREATION

172 Pembroke Road P.O. Box 1856 Concord, New Hampshire 03302-1856 PHONE: (603) 271-3556 FAX: (603) 271-3553 E-MAIL: nhparks@dred.state.nh.us WEB: www.nhstateparks.org

April 11, 2013

Her Excellency, Governor Margaret Wood Hassan and the Honorable Executive Council State House Concord, New Hampshire 03301



REQUESTED ACTION

Pursuant to RSA 21-I:80, (b), authorize the Department of Resources and Economic Development, Division of Parks and Recreation to enter into a second **SOLE SOURCE** contract amendment with The Student Conservation Association, Inc. (VC #173352), Charlestown, NH, by increasing the contract amount by \$107,864 from \$97,060 to \$204,924 to provide additional services for various state park projects and by extending the completion date to October 30, 2013 from the original completion date of June 30, 2013. The original contract was approved by the Governor and Executive Council on May 9, 2012, Item #69B and an amendment was approved by the Governor and Executive Council on November 14, 2012, Item #81. 100% Capital Funds

Funding is available in account titled, <u>11-253:1:XII-B State Park Repairs</u>, as follows:

03-35-35-351530-09900000-034-500162

Capital Projects

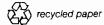
FY 2013 \$7.864 **FY 2014** \$100,000

EXPLANATION

The Student Conservation Association - NH Conservation Corps (SCA-NH) is a residential national service program based at Bear Brook State Park. This program is a collaboration between the SCA-NH, the Division of Parks and Recreation (Division), the Corporation for National Service, and other municipal, federal and non-profit partners. The goal of this service is to deliver high quality conservation service and a rewarding learning experience for interns.

In May 2012, the Governor and Executive Council approved the original contract with SCA-NH to provide members (all between the ages of 18-25) to be recruited to work throughout the State enhancing public recreation areas as assigned by the Division. In November 2012, the contract amount was amended to correct an error made during the initial development of project costs; the prior year's rates were used. This new amendment extends the current program to include additional services to be performed throughout the spring, summer and fall.

The services in connection with this amendment are for the SCA-NH to continue to work on the Department's deferred maintenance projects paid for with bond funds. The Department has had great success in using the services of the SCA-NH to execute a significant amount of our work product.



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Consequently, we request that this amendment to the contract be awarded on a sole source basis. The Department will be submitting another contract with the SCA-NH for interpretive and other educational services provided throughout the Park System.

The Attorney General's Office has reviewed and approved this amendment as to form, substance and execution.

Respectfully submitted,

Concurred,

Philip A. Bryce Director

Commissioner

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AMENDMENT OF CONTRACT

The Department of Resources and Economic Development and The Student Conservation Association, Inc. (SCA-NH), hereby mutually agrees to a second amendment of the contract to provide services for various park projects. The original contract was approved by the Governor and Executive Council on May 9, 2012, Item #69B, and an amendment was approved by the Governor and Executive Council on November 14, 2012, Item #81.

- 1. Amend the contract completion date to October 30, 2013 from the original contract completion date of June 30, 2013;
- 2. Amend Exhibit A of the contract to include "The SCA-NH shall supply an additional six person crew for 18 weeks of service under a new conservation work program to be performed in the spring, summer and fall of 2013";
- 3. Amend Exhibit B of the contract as follows:

Spring Hitch 2012	=	\$ 9,706
Hitch II	=	19,412
Hitch III	=	19,412
Hitch IV X 2	=	38,824
Spring Hitch 2013	=	9,706
Spring, Summer and Fall Conservation Work Program	=	107,864

Total contract not to exceed: increase contract total by \$107,864 from \$97,060 to \$204,924

- 4. All other terms and conditions of this contract shall remain the same in full force and effect as originally set forth; and
- 5. This amendment is subject to approval by the Governor and Executive Council.

IN WITNESS WHEREOF, the parties hereto have set their hands as of the day and year written.

J. Rose, Commissioner

Dept. of Resources and Economic Development

Date

Seaman, CFO

The Student Conservation Association, Inc.

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Date

Approved as to form, substance and execution:

Attorney General

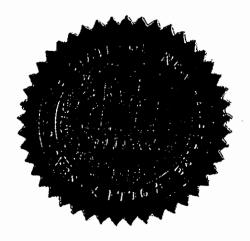
Date

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State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that THE STUDENT CONSERVATION ASSOCIATION, INC., a(n) New York nonprofit corporation, registered to do business in New Hampshire on April 25, 1996. I further certify that it is in good standing as far as this office is concerned, having paid the fees required by law.

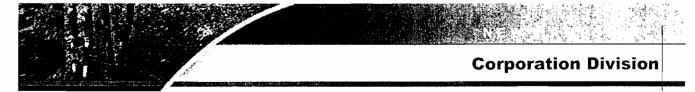


In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 17th day of April, A.D. 2012

William M. Gardner Secretary of State

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Business Entity Page 1 of 2



Search By Business Name By Business ID By Registered Agent Annual Report File Online

Filed Documents Date: 4/8/2013

(Annual Report History, View Images, etc.)

Business Name History

Name Name Type

THE STUDENT CONSERVATION

Legal ASSOCIATION, INC.

Non-Profit Corporation - Foreign - Information

Business ID:

Status: **Good Standing**

Entity Creation Date: 4/25/1996

State of Business.:

Principal Office Address: 689 River Road

PO Box 550 Charlestown NH 03603

689 River Road **Principal Mailing Address:**

PO Box 550

Charlestown NH 03603

Expiration Date: Perpetual Last Annual Report Filed Date: 1/24/2011

Last Annual Report Filed: 2010

Registered Agent

THE STUDENT CONSERVATION Agent Name:

ASSOCIATION, INC.

689 River Road Office Address:

PO Box 550

Charlestown NH 03603

Mailing Address:

Important Note: The status reflected for each entity on this website only refers to the status of the entity's filing requirements with this office. It does not necessarily reflect the disciplinary status of the entity with any state agency. Requests for disciplinary information should be directed to agencies with licensing or other regulatory authority over the entity.

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SECRETARY'S CERTIFICATE

At a meeting of the of the Board of Directors of The Student Conservation Association, Inc. (the "Corporation"), duly and regularly held in accordance with the bylaws of the Corporation on March 22, 2013, at which a quorum, as prescribed by law and the bylaws of the Corporation, was present and voting throughout, the following resolution was unanimously adopted, and such resolution has not been revoked, cancelled, annulled or amended:

NOW THEREFORE, BE IT RESOLVED, that, upon the direction of the President/Chief Executive Officer, Dale M. Penny, each of the: Chief Financial Officer, Richard J. Seaman; the Executive Vice President/Assistant Secretary, Valerie Bailey; the Senior Vice President, Scott C. Weaver; the Senior Vice President for Program, Robert Coates; the Senior Vice President for Advancement, Karen Davis; the Senior Vice President for Marketing, Jamie Patten; and the Senior Vice President for Business Development, Steven Nolan; be, and each hereby is, individually authorized, empowered and directed to execute on behalf of the Corporation all cooperative agreements and other contracts requiring such execution, and to make, execute and deliver, under the corporate seal of the Corporation or otherwise, any and all written instruments necessary or proper to effectuate the power and authority hereby conferred.

Dated: March 25, 2013

Name: Peter H. Jost

Title: Secretary

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/05/2013

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

	ne terms and conditions of the policy ertificate holder in lieu of such endor				ndorse	ment. A stat	ement on th	is certificate does not c	onfer r	ights to the
PRO	DUCER			<u>r</u>	CONTAC NAME:	CT Joan A	ucoin			
	d C. Church, Inc. Wellman Street				PHONE	978 3227	321	FAX (A/C, No):	(978) 45	4-1865
Low	rell, MA 01851 0) 225-1865				(A/C, No	iaucoi	n@fredcchurch.c			
1001	0) 223-1803				ADDRES		LIBERIES AFFOR	IDING COVERAGE		NAIC #
					INCHES	Hanover	nsurance Compa			22292
INSI	JRED				INSURE	KA:		e, a Reciprocal Risk Retention Gro	oup	10020
	Student Conservation Association, Inc.				INSURE	RB:			•	
689	River Road				INSURE					
Cha	rlestown, NH 03603				INSURE					
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	GENERAL LIABILITY							EACH OCCURRENCE	\$ 1,000	
	X COMMERCIAL GENERAL LIABILITY							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000	,000
	CLAIMS-MADE X OCCUR							MED EXP (Any one person)	\$ 5,000	1
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	POLICY PRO- JECT LOC								\$	-
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	,000
	X ANY AUTO							BODILY INJURY (Per person)	s	
Α	ALL OWNED SCHEDULED AUTOS AUTOS			AHN9487242		4/1/2013	4/1/2014	BODILY INJURY (Per accident)	\$	
	NON-OWNED							PROPERTY DAMAGE (Per accident)	\$	
	HIRED AUTOS AUTOS							(Fer accident)	\$	
	UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	s 25,00	0,000
В	X EXCESS LIAB CLAIMS-MADE			GLX201200420300		4/1/2013	4/1/2014	AGGREGATE	s 25,00	0,000
	X 1,000,000							AGGREGATE	s	•
	WORKERS COMPENSATION							WC STATU- OTH- TORY LIMITS ER	3	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							TORY LIMITS ER	\$	-
	OFFICER/MEMBER EXCLUDED?	N/A								
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	s	
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	a	
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/25/2013

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

Charlestown, NH 03603		INSURER F:					
ghandantan awa 02602		INSURER E :					
689 River Road		INSURER D:					
Student Conservation Associa	ation	INSURER C:					
INSURED		INSURER B:					
Branden Miller		INSURER A: LIBERTY MUT INS CO	23043				
Brentwood, TN 37027		INSURER(S) AFFORDING COVERAGE	NAIC#				
5500 Maryland Way, Suite 33	0	E-MAIL ADDRESS: april_rushton@ajg.com					
Arthur J. Gallagher Risk Mar Gallagher Healthcare	nagement Services, Inc.	PHONE (A/C, No, Ext): 615-377-5155 FAX (A/C, N	o): 615-263-5881				
PRODUCER	1-615-661-7500	CONTACT NAME: April Rushton					
certificate notice in fleu of such endorsement(s).							

CERTIFICATE NUMBER: 32625402 COVERAGES 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		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
	GENERAL LIABILITY						EACH OCCURRENCE	\$
	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
	CLAIMS-MADE OCCUR						MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$
							GENERAL AGGREGATE	\$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$
	POLICY PRO- JECT LOC							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO						BODILY INJURY (Per person)	\$
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
	DED RETENTION\$							\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC1Z11253482013	03/20/13	03/20/14	X WC STATU- OTH- TORY LIMITS ER	
	ANY PROPRIETOR/PARTNÉR/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$ 500,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	" ^ ^					E.L. DISEASE - EA EMPLOYEE	\$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 500,000
	DIRTION OF COEDATIONS / LOGATIONS / LEUR	7						

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

CERTIFICATE HOLDER	CANCELLATION
State of New Hampshire Dept of Resources & Economic Development Attn: Johanna Lyons	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
172 Pembroke Road	AUTHORIZED REPRESENTATIVE
Concord, NH 03302-1856	Christie LReune

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Student Conservation Association, Inc. 689 River Rd. Charlestown, NH 03603

April 5, 2013

State of NH
Attn: Johanna Lyons
DRED -- Dept of Parks & Recreation
PO Box 1856
Concord, NH 03302-1856

Re: Approval of new commissioner Jeff Rose.

Please be advised that I, Richard Seaman, CFO, of the Student Conservation Association, Inc. acknowledge that Jeff Rose is the new Commissioner of DRED and has full signatory authority on the SCA contract with DRED.

Richard Seaman

Thank you,

Chief Financial Officer

The Student Conservation Association, Inc.

rseaman@thesca.org

(603)504-3321

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STATE OF NEW HAMPSHIRE DEPARTMENT of RESOURCES and ECONOMIC DEVELOPMENT

DIVISION of PARKS and RECREATION

P.O. Box 1856 Concord, New Hampshire 03302-1856 172 Pembroke Road PHONE: (603) 271-3556 FAX: (603) 271-3553 E-MAIL: nhparks@dred.state.nh.us WEB: www.nhstateparks.org

October 1, 2012

His Excellency, Governor John H. Lynch and the Honorable Executive Council State House Concord, New Hampshire 03301

REQUESTED ACTION

Pursuant to RSA 21-1:80, (b), authorize the Department of Resources and Economic Development, Division of Parks and Recreation to enter into a SOLE SOURCE contract amendment with The Student Conservation Association, Inc. (VC #173352), Charlestown, NH, by increasing the contract amount by \$1,900 from \$95,160 to \$97,060 to provide services for various park projects upon Governor and Executive Council approval through June 30, 2013. No additional time is involved in this amendment. The original contract was approved by the Governor and Executive Council on May 9, 2012, Item #69B. 100% Capital Funds

Funding is available in account titled, 11-253:1:XII-B State Park Repairs, as follows:

03-35-35-351530-09900000-034-500162

Capital Projects

FY 2013

EXPLANATION

The Student Conservation Association - NH Conservation Corps (SCA-NH) is a residential national service program based at Bear Brook State Park. The program is collaboration between the SCA-NH, the Division of Parks and Recreation (Division), the Corporation for National Service, and other municipal, federal and non-profit partners. The goal of this service is to deliver high quality conservation service and a rewarding learning experience for interns.

In May 2012, the Governor and Executive Council approved the original contract with SCA-NH to provide members (all between the ages of 18-25) to be recruited to work throughout the State enhancing public recreation areas as assigned by the Division. The amendment to adjust the contract amount is necessary to correct an error made during the initial development of project costs; the prior year's rates were used. This adjustment will allow for proper reimbursement to the SCA-NH.

The SCA-NH and the Division have had a successful partnership for 18 years. Consequently, we request that this amendment to the contract be awarded as a sole source. Recent projects include interpretive services at four parks, building painting in parks, and campsite development and installation of yurts at Milan Hill State Park.

The Attorney General's Office has reviewed and approved this amendment to the contract as to form, substance and execution.

Respectfully submitted,

Philip Bryce Director

Concurred

George M. Bald Commissioner



AMENDMENT OF CONTRACT

The <u>Department of Resources and Economic Development</u> and <u>The Student Conservation Association</u>, <u>Inc.</u>, hereby mutually agree to amend the contract to provide services for various park projects, originally approved by the Governor and Executive Council on May 9, 2012, Item #69B.

1. Amend Exhibit B of the contract as follows:

 Spring Hitch 2012
 =
 increase by \$190 from \$9,516 to \$9,706

 Hitch II
 =
 increase by \$380 from \$19,032 to \$19,412

 Hitch IV X 2
 =
 increase by \$760 from \$38,064 to \$38,824

 Spring Hitch 2013
 =
 increase by \$190 from \$9,516 to \$9,706

Total contract not to exceed:

increase by \$1,900 from \$95,160 to \$97,060

2. All other terms and conditions of this contract shall remain the same in full force and effect as originally set forth; and

originally set forth; and	
3. This amendment is subject to approval by the C	Governor and Executive Council.
IN WITNESS WHEREOF, the parties hereto have set t	their hands as of the day and year written.
Witness White	George M. Bald, Commissioner Department of Resources and Economic Development
Atherene Marman Witness	Date Richard J. Scaman, CFO The Student Conservation Association, Inc.
	Date 9.45.12

Approved as to form, substance and execution:

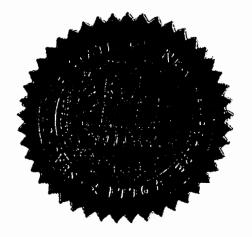
Attorney General

Date

State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that THE STUDENT CONSERVATION ASSOCIATION, INC., a(n) New York nonprofit corporation, registered to do business in New Hampshire on April 25, 1996. I further certify that it is in good standing as far as this office is concerned, having paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 17th day of April, A.D. 2012

William M. Gardner Secretary of State

SECRETARY'S CERTIFICATE

At a meeting of the of the Board of Directors of The Student Conservation Association, Inc. (the "Corporation"), duly and regularly held in accordance with the bylaws of the Corporation on March 23, 2012, at which a quorum, as prescribed by law and the bylaws of the Corporation, was present and voting throughout, the following resolution was unanimously adopted, and such resolution has not been revoked, cancelled, minuled or amended:

NOW THEREFORE, BE IT RESOLVED, that, upon the direction of the President/Chief Executive Officer, Dale M. Penny, each of the: Chief Financial Officer, Richard J. Seaman; the Executive Vice President/Assistant Secretary, Valerie Bailey; the Senior Vice President, Scott C. Weaver; the Senior Vice President for Program, Robert Coates; the Senior Vice President for Marketing, Jamie Patten; and the Senior Vice President for Business Development, Steven Nolan; be, and each hereby is, individually authorized, empowered and directed to execute on behalf of the Corporation all cooperative agreements and other contracts requiring such execution, and to make, execute and deliver, under the corporate seal of the Corporation or otherwise, any and all written instruments necessary or proper to effectuate the power and authority hereby conferred.

Dated: April 12, 2012

Name: Peter H. Jost

Title: Secretary

CERTIFICATION

The undersigned, corporate secretary for The Student Conservation Association, Inc., hereby affirms that the foregoing Secretary's Certificate dated April 12, 2012 remains in full force and effect this 25th day of September, 2012

Peter H. Jost, Secretary



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/13/2012

HIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS LERTIFICATE 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(les) 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	1-978-458-1865	HAME: Joan Aucoin				
Fred C. Church		PHONE [AKC. No. Ext): 978-322-7321	FAX (AC, No): 978-454-1865			
41 Wellman Street		ADDRESS: jaucoin@fredcchurch.com				
P.O. Box 1865 Lowell, MA 01853-1865		WSURER(S) AFFORDING COVERAGE				
LOWell, RA 01653-1865		MSURER A: United Educators Insurance				
INSURED		INSURER B: Hanover Insurance Company	<u> </u>			
The Student Conservation As	ssociation, Inc.	MSURER C:				
689 River Road		INSURER D:				
		MSURER E:				
Charlestown, NH 03603		INSURER F:				
		DEVISION WILL	ARFR:			

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A	GENERAL LIABILITY	IMSK I	CGL201200420300	04/01/12	04/01/13	EACH OCCURRENCE	\$ 1,000,000
	X COMMERCIAL GENERAL LIABILITY	1	İ			DAMAGE TO RENTED PREMISES (Es pocumença)	\$ 1,000,000
	CLAIMS-MADE X OCCUR	1]			MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	§ Included
1		1 1				GENERAL AGGREGATE	\$ 3,000,000
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	X EXCESS LIAB CLAIMS-MADE	1				AGGREGATE	\$ 25,000,000
.	DED X RETENTIONS 1,000,000	1]	1			\$
	WORKERS COMPENSATION	_				TORY LIMITS ER	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE Y / N					E.L. EACH ACCIDENT	\$
- 10	OFFICERMEMBER EXCLUDED? (Mandatory in NH)	M/A				ELL DISEASE - EA EMPLOYEE	\$
l i	If yes, describe under DESCRIPTION OF OPERATIONS below	- 1	,	1		E.L. DISEASE - POLICY LIMIT	\$
-†	DESCRIPTION OF EVALUATION DRIVE	 					
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DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Affact ACORD 101, Additional Remarks Schedule, M more space is required)
As required by contract and as their interest may apply, the Certificate Holder is an Additional Insured with respect to General Liability Coverage.

CERTIFICATE HOLDER	CANCELLATION
State of New Hampshire Dept of Resources and Economic Development Johanna Lyons	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
172 Pembroke Road	AUTHORIZED REPRESENTATIVE
Commond, NH 03302-1856	Herman P Laterman

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STUDECON

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

04/16/2012

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

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

PRODUCER		CONTACT NAME:					
USI Insurance Svcs of NE, Inc.		PHONE (A/C, No, Ext): 603 625-1100 (A/C, No):					
PO Box 6360	j	E-MAIL ADDRESS:					
Manchester, NH 03108-6360	Ť	Appress;	INSURER(S)	AFFORDING COVERAGE	NAIC #		
603 625-1100	f	INSURER A : Libert			65315		
WSURED		INSURER B:					
The Student Conservation Associa	ation	INSURER C:		<u> </u>			
689 River Road; P O Box 550	. F	<u> </u>					
Charlestown, NH 03603-550	i –	MSURER D:					
		INSURER E:					
COVERAGES CERTIFICATE		MSURER F:		REVISION NUMBER:			
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ANY PROPRIETOR/PARTNER/EXECUTIVE N N/A (Mandatory in NH)				EL. DISEASE - EA EMPLOYEE \$50			
If yes, describe under					0,000		
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Norkers Comp Information **					•		
LH; Voluntary Compensation; Other States	Coverage						
, AL, AR, AZ, CA, CO, CT, DC, DE, GA, HI, IA	, ID, IL, IN, KY, LA, MA,	MD, ME, MI, M	N, MO, MS,	, MT, NC, NH,			
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TIFICATE HOLDER	CA	NCELLATION					
State of NH		SHOULD ANY OF T	HE ABOVE DE	SCRIBED POLICIES BE CANCEL	LED BEFORE		
Division of Parks and Recreation		INE EXPIRATION ACCORDANCE WI	DATE THE	REOF, NOTICE WILL BE DE LICY PROVISIONS.	THAFKED (M		
Attn: Johanna Lyons	'	ACCORDANCE WITH THE POLICY PROVISIONS.					
PO Box 1856	AUT	THORIZED REPRESE	TATIVE				
Concord, NH 03302-1856							
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STATE OF NEW HAMPSHIRE DEPARTMENT of RESOURCES and ECONOMIC DEVELOPMENT

DIVISION of PARKS and RECREATION

172 Pembroke Road P.O. Box 1856 Concord, New Hampshire 03302-1856 PHONE: (603) 271-3556 FAX: (603) 271-3553 E-MAIL: nhparks@dred.state.nh.us WEB: www.nhstateparks.org

April 16, 2012

His Excellency, Governor John H. Lynch and the Honorable Executive Council State House Concord, New Hampshire 03301

REQUESTED ACTION

Pursuant to RSA 21-I:80, (b), authorize the Department of Resources and Economic Development, Division of Parks and Recreation to enter into a **SOLE SOURCE** contract with The Student Conservation Association, Inc. (VC #173352), Charlestown, NH, in the amount of \$95,160 to provide services for various park projects upon Governor and Executive Council approval through June 30, 2013. 100% Capital Funds

Funding is available in account titled, 11-253:1:XII-B State Park Repairs, as follows:

03-35-35-351530-09900000-034-500162

Capital Projects

FY 2012

FY 2013

\$9,516

\$85,644

EXPLANATION

The Student Conservation Association - NH Conservation Corps (SCA-NH) is a residential national service program based at Bear Brook State Park. The program is collaboration between the SCA-NH, the Division of Parks and Recreation, the Corporation for National Service, and other municipal, federal and non-profit partners. The goal of this service is to deliver high quality conservation service and a rewarding learning experience for interns.

This contract provides members (all between the ages of 18-25) to be recruited to work throughout the State enhancing public recreation areas as assigned by the Division of Parks and Recreation. This partnership investment has resulted in over \$2,000,000 in project value to the State Park System over the past 18 years, and has become a role model program other states have followed.

The SCA-NH and the Division of Parks and Recreation have had a successful partnership for 18 years. Consequently, we request this contract be awarded as a sole source. Recent projects include interpretive services at four parks, building painting in parks and campsite development and installation of yurts at Milan Hill State Park.

The Attorney General's Office has reviewed and approved this contract as to form, substance and execution.

Respectfully submitted,

Philip Bryce

George M. Bald

Commissioner

Concurred.

recycled pap



Subject:

State Park Improvement Project FORM NUMBER P-37 (version 1/09)

AGREEMENT

The State of New Hampshire and the Contractor hereby mutually agree as follows:

GENERAL PROVISIONS

_1. IDENTIFICATION.	•				
1.1 State Agency Name	1.2 State Agency Address				
DRED Division of Parks and Recreation	PO Box 1856, Concord NH03302-1856				
1.3 Contractor Name	1.4 Contractor Address				
The Student Conservation Association, Inc	PO Box 550, 689 River Rd, Charlestown NH 03063-0550				
1.5 Contractor Phone 1.6 Account Number	1.7 Completion Date 1.8 Price Limitation				
Number 603-543-1700 x 132 09900000-034-50016	June 30, 2013 \$95,160				
1.9 Contracting Officer for State Agency	1.10 State Agency Telephone Number				
Johanna Lyons, Program Specialist	603-271-3556 x 218				
1.11 Contractor Senature	1.12 Name and Title of Contractor Signatory				
His De	Richard Seaman, Chief Financial Officer				
proven to be the person whose name is signed in block 1.11, and a indicated in block 1.12. 1.13.1 Signature of Notary Public or Justice of the Peace [Seal] 1.13.2 Name and Title of Notary or Justice of the Peace	ly appeared the person identified in block the strip state of the executed this an author in the practity of the executed this an author in the practity of the executed this an author in the practity of the executed this an author in the practity of the executed this an author is a state of the executed this an author is a state of the executed this area.				
Lawillagh Box Jey Norang	fable:				
Approval by the N.H. Department of Administration, Division	1.15 Name and Title of State Agency Signatory George M. Bald, Commissioner				
By: n/n	Director, On:				
17 Approval by the Attorney General (Form, Substance and Exe	cution)				
	On: 4/27/2012				
	1,0,,20,0				
18 Approval by the Governor and Executive Council	170772012				

2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED. The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, this Agreement, and all obligations of the parties hereunder, shall not become effective until the date the Governor and Executive Council approve this Agreement ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT.

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

5. CONTRACT PRICE/PRICE LIMITATION/PAYMENT.

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.
5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. In addition, the Contractor shall comply with all applicable copyright laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination. 6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41... C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

7. PERSONNEL.

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.



8. EVENT OF DEFAULT/REMEDIES.

- 8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):
- 8.1.1 failure to perform the Services satisfactorily or on schedule;
- 8.1.2 failure to submit any report required hereunder; and/or 8.1.3 failure to perform any other covenant, term or condition of this Agreement.
- 8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:
 8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;
 8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;
- 8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or
- 8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

- 9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.
- 9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.
 9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.
- 10. TERMINATION. In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination

Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

- 11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.
- 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS. The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written consent of the N.H. Department of Administrative Services. None of the Services shall be subcontracted by the Contractor without the prior written consent of the State.
- 13. INDEMNIFICATION. The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.

- 14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
- 14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$250,000 per claim and \$2,000,000 per occurrence; and
- 14.1.2 fire and extended coverage insurance covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property. 14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.
- 14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than fifteen (15) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be

attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to endeavor to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than ten (10) days prior written notice of cancellation or modification of the policy.

15. WORKERS' COMPENSATION.

- 15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("Workers' Compensation").
- 15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.
- 16. WAIVER OF BREACH. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.
- 17. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.
- 18. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire.
- 19. CONSTRUCTION OF AGREEMENT AND TERMS. This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual

- intent, and no rule of construction shall be applied against or in favor of any party.
- 20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.
- 21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.
- 22. SPECIAL PROVISIONS. Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.
- 23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.
- 24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.

State of New Hampshire Department of Resources and Economic Development Division of Parks and Recreation

STATE PARK IMPROVEMENT PROJECT

Exhibit A

The SCA – NH Corps shall be responsible for the labor to scrape, prime and paint various state park buildings and to install and refurbish picnic tables, fire rings and other projects as assigned by the Supervisor of Parks Operations.

The SCA – NH Corps will supply one six person crew for four 24 day hitches, 20 working days and 4 days off and one six person crew for two 10 day hitches; one to be supplied in the spring of 2012 and the other in the spring of 2013.

The Division of Parks and Recreation agrees to provide training in proper painting methods and paint, supplies and materials.

Exhibit B

The SCA will invoice the Division at the completion of each hitch.

Spring Hitch 2012	=	\$9,516
Hitch II	=	\$19,032
Hitch III	=	\$19,032
Hitch IV x 2	=	\$38,064
Spring Hitch 2013	=	\$9,516

Total contract not to exceed: \$95,160

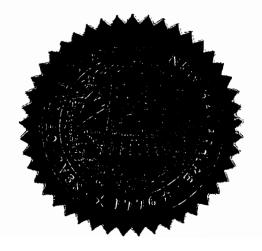
Exhibit C

There are no special or additional provisions to this contract.

State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that THE STUDENT CONSERVATION ASSOCIATION, INC., a(n) New York nonprofit corporation, registered to do business in New Hampshire on April 25, 1996. I further certify that it is in good standing as far as this office is concerned, having paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 17th day of April, A.D. 2012

William M. Gardner Secretary of State

SECRETARY'S CERTIFICATE

At a meeting of the of the Board of Directors of The Student Conservation Association, Inc. (the "Corporation"), duly and regularly held in accordance with the bylaws of the Corporation on March 23, 2012, at which a quorum, as prescribed by law and the bylaws of the Corporation, was present and voting throughout, the following resolution was unanimously adopted, and such resolution has not been revoked, cancelled, annulled or amended:

NOW THEREFORE, BE IT RESOLVED, that, upon the direction of the President/Chief Executive Officer, Dale M. Penny, each of the: Chief Financial Officer, Richard J. Seaman; the Executive Vice President/Assistant Secretary, Valerie Bailey; the Senior Vice President, Scott C. Weaver; the Senior Vice President for Program, Robert Coates; the Senior Vice President for Advancement, David Evancich; the Senior Vice President for Marketing, Jamie Patten; and the Senior Vice President for Business Development, Steven Nolan; be, and each hereby is, individually authorized, empowered and directed to execute on behalf of the Corporation all cooperative agreements and other contracts requiring such execution, and to make, execute and deliver, under the corporate seal of the Corporation or otherwise, any and all written instruments necessary or proper to effectuate the power and authority hereby conferred.

Dated: April 12, 2012

Name: Peter H. Jost

Title: Secretary



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/13/2012

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

ODUCER	1-978-458-1865	NAME: Joan Aucoin	
ed C. Church			78-454-1865
Wellman Street		ADDRESS: jaucoin@fredcchurch.com	
O. Box 1865 well, MA 01853-1865	5	INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A: United Educators Insurance	
URED		INSURER B: Hanover Insurance Company	
e Student Conservation Association, Inc.		INSURER C:	
9 River Road		INSURER D:	
arlestown, NH 03603	1	INSURER E:	
	·	INSURER F:	
)VERAGES	CERTIFICATE NUMBER: 26628167	REVISION NUMBER:	

HIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD NDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS SERTIFICATE 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.

TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	. EJMIT	S
GENERAL LIABILITY	1		CGL201200420300	04/01/12	04/01/13	Chorrocontinente	\$ 1,000,000
X COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
CLAIMS-MADE X OCCUR	ł					MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	§ Included -
						GENERAL AGGREGATE	\$ 3,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	<pre>\$ Included</pre>
POUCY PRO- LOC	1 1						\$
UTOMOBILE LIABILITY			AMN9487242	04/01/12	04/01/13	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
OTUAYNA	1 1					BODILY INJURY (Per person)	\$
ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
HIRED AUTOS NON-OWNED						PROPERTY DAMAGE (Per accident)	\$
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		ļ					\$
UMBRELLA LIAB X OCCUR			GLX201200420300	04/01/12	04/01/13	EACH OCCURRENCE	\$ 25,000,000
X EXCESS LIAB CLAIMS-MADE		l		1		AGGREGATE	\$ 25,000,000
DED X RETENTION\$ 1,000,000	ĺ						\$
WORKERS COMPENSATION						WC STATU- TORY LIMITS ER	
AND EMPLOYERS' LIABILITY  ANY PROPRIETOR/PARTNER/EXECUTIVE	J					E.L. EACH ACCIDENT	\$
OFFICER/MEMBER EXCLUDED? (Mendatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$
If yes, describe under DESCRIPTION OF OPERATIONS below		-				E.L. DISEASE - POLICY LIMIT	\$

CREPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) required by contract and as their interest may apply, the Certificate Holder is an Additional Insured with pect to General Liability Coverage.

RTIFICATE HOLDER	CANCELLATION
te of New Hampshire t of Resources and Economic Development anna Lyons	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Pembroke Road	AUTHORIZED REPRESENTATIVE
_rd, NH 03302-1856	Herman P Laturman

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ERTIFICATE OF LIABILITY INSURANCE 04/16/2012 HIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS ERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES ELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED EPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. MPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to ne terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the ertificate holder in lieu of such endorsement(s). CONTACT NAME: DUCER FAX (A/C, No): I Insurance Svcs of NE, Inc. PHONE (A/C, No, Ext): 603 625-1100 Box 6360 E-MAIL ADDRESS nchester, NH 03108-6360 INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Liberty Mutual Ins Companies 625-1100 65315 RED INSURER B The Student Conservation Association INSURER C: 689 River Road; P O Box 550 INSURER D Charlestown, NH 03603-550 INSURER E : INSURER F: **REVISION NUMBER: 'ERAGES CERTIFICATE NUMBER:** IS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD DICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS RTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. CLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP LIMITS TYPE OF INSURANCE **POLICY NUMBER** GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) COMMERCIAL GENERAL LIABILITY \$ CLAIMS-MADÉ OCCUR MED EXP (Any one person) PERSONAL & ADV INJURY \$ \$ GENERAL AGGREGATE PRODUCTS - COMP/OP AGG s GEN'L AGGREGATE LIMIT APPLIES PER: s POLICY COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY **BODILY INJURY (Per person)** s ANY AUTO ALL OWNED SCHEDULED \$ **BODILY INJURY (Per accident)** AUTOS NON-OWNED AUTOS AUTOS PROPERTY DAMAGE (Per accident) \$ HIRED AUTOS UMBRELLA LIAB **EACH OCCURRENCE** OCCUR **EXCESS LIAB** AGGREGATE CLAIMS-MADE DED RETENTION \$ VORKERS COMPENSATION 03/20/2012 03/20/2013 X WC STATU-WA1Z1D253482062 NO EMPLOYERS' LIABILITY \$500,000 NY PROPRIETOR/PARTNER/EXECUTIVE FFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT N/A N \$500,000 E.L. DISEASE - EA EMPLOYEE Kandatory in NH) yes, describe under ESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT \$500,000 PTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) rkers Comp Information ** 1; Voluntary Compensation; Other States Coverage IL, AR, AZ, CA, CO, CT, DC, DE, GA, HI, IA, ID, IL, IN, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, NH, M, NV, NY, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT

FICATE HOLDER	CANCELLATION
State of NH Division of Parks and Recreation Attn: Johanna Lyons	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
PO Box 1856	AUTHORIZED REPRESENTATIVE
Concord, NH 03302-1856	8 2 11 1

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