



**THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION**



97
Bent

**CHRISTOPHER D. CLEMENT, SR.
COMMISSIONER**

**JEFF BRILLHART, P.E.
ASSISTANT COMMISSIONER**

Bureau of Construction
March 31, 2014

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

REQUESTED ACTION

1. Authorize the Department of Transportation to enter into a contract with All States Asphalt, Inc. (Vendor 161291) of Sunderland, MA, on the basis of a low bid of \$1,075,712.00 for roadway resurfacing on approximately 4 miles of US 3 in Nashua and Merrimack, from the date of Governor and Council approval through August 1, 2014 unless extended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Funding is available as follows: FY 2014
04-96-96-963515-3054
Consolidated Federal Aid
400-500870 Highway Contract Payments \$1,075,712.00

2. Further authorize that a contingency in the amount of \$53,785.60 be approved for payment of latent conditions, which may appear during the construction of the project. The contingency requested is 5% of the contract amount.

Funding is available as follows: FY 2014
04-96-96-963515-3054
Consolidated Federal Aid
400-500870 Highway Contract Payments \$53,785.60

EXPLANATION

This project is part of the annual Federal Resurfacing Program. The work involves a pavement preservation treatment consisting of a thin lift (1/2 inch) bonded wearing course overlay. This section of US 3 had intensive pavement rehabilitation in 2004. The work then included a 2-inch inlay with a 1 1/2 overlay in Merrimack and the concrete slab was removed with full box reconstruction in Nashua. This section is in fair condition and is a good candidate for this preservation treatment to maintain and improve the riding surface and to extend the life of the existing roadways. All of the proposed work will remain within the right-of-way.

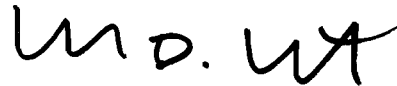
The contingency amount is proposed to be 5% of the contract amount. This is a one-season duration contract, with fixed limits, being constructed during a time of rising fuel prices. The project limits begin at the Nashua compact and end at the Merrimack compact. Adjusting limits to offset quantity overruns is not practical and potential fuel and asphalt adjustments need to be considered. Construction under high traffic volumes, maintaining two-lane traffic during certain hours and lane closure operations also increase the risk of overruns for traffic control operations.

The Contractor has been prequalified by this Department. The Contract has been approved by the Attorney General as to form and execution, and the Department has certified that the necessary funds are available. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Service's Office, and subsequent to Governor and Council approval will be on file at the Department of Transportation.

This project funding is 80% federal funds with 20% state match. Turnpike toll credit is being utilized for match requirements, effectively using 100% federal funds.

A copy of the Tabulation of Bids received for this project is attached along with the Contract Supplemental Sheet and a map indicating the location of the project.

Sincerely,



Christopher D. Clement, Sr.
Commissioner

CDC/md

Department Estimate: \$1,162,337.25
Contract Amount: \$1,075,712.00
Under Estimate: \$ 86,625.25

Attachments

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION: This project is located on US 3, beginning at the intersection of the Henri Burque Highway in Nashua, proceeding north approximately 4 miles to a pavement joint at the intersection of Greeley Street in Merrimack. The work involves paving a bonded wearing (1/2") course and repairing/replacing guardrail and minor drainage work.

FEDERAL FUNDING: 80% from Federal Resurfacing Program (PRRCS #452), with anticipated utilization of Turnpike Toll credits as the State's 20% match.

CONTINGENCY: The contingency amount is proposed to be 5% for this contract. This is a one-season duration contract, with fixed limits, being constructed during a time of rising fuel prices. The project limits begin at the Nashua compact and end at the Merrimack compact. Adjusting limits to offset quantity overruns is not practical and potential fuel and asphalt adjustments need to be considered. Construction under high traffic volumes, maintaining two-lane traffic during certain hours and lane closure operations also increase the risk of overruns for traffic control operations.

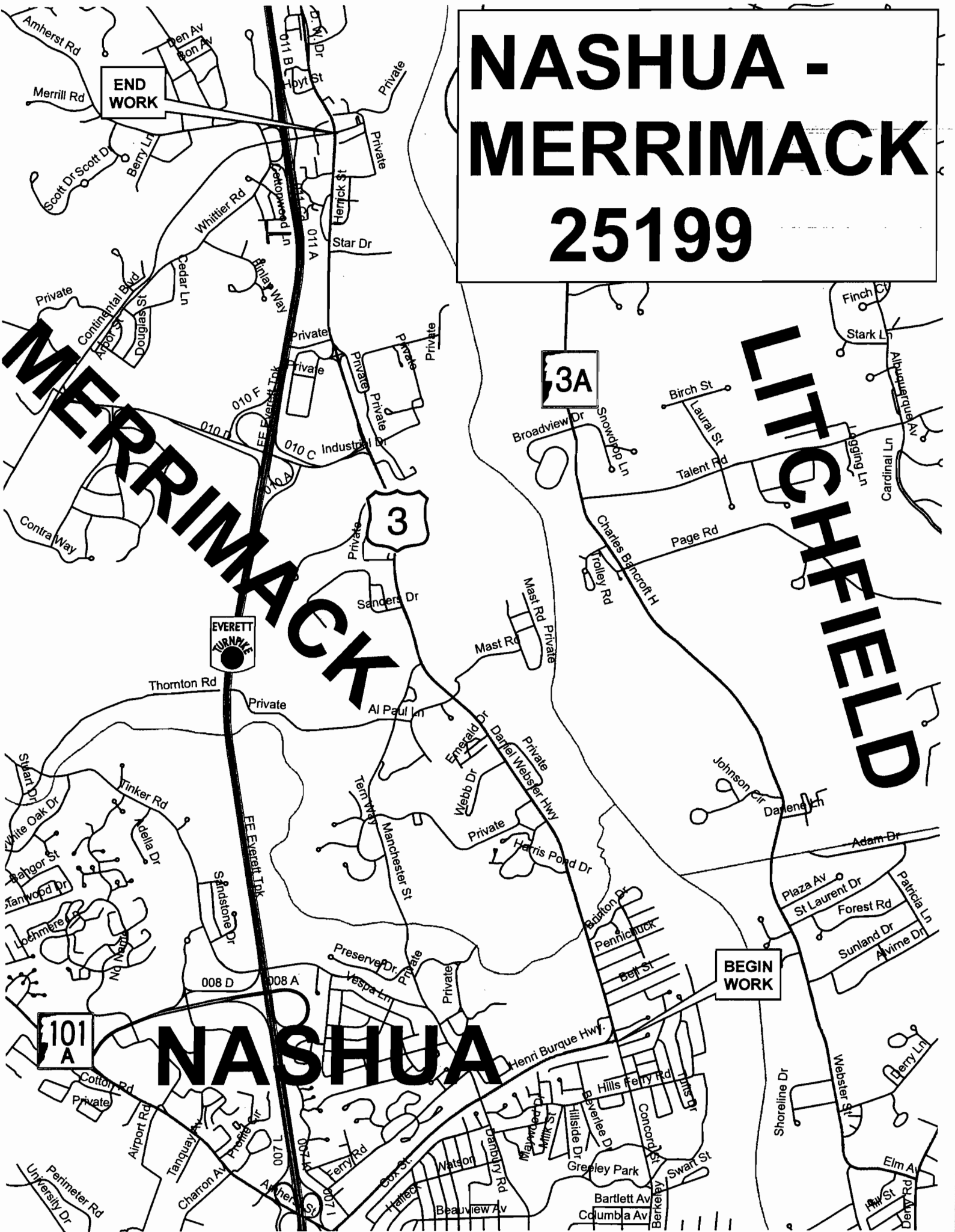
PROJECT INITIATED: State's 10-Year Transportation Improvement Program under the "parent" project PRRCS (Statewide Federal Resurfacing Program).

PROJECT EXPLANATION: This section of US 3 had intensive pavement rehabilitation in 2004. The work included a 2-inch inlay with a 1/2-inch overlay in Merrimack and the concrete slab was removed with full box reconstruction in Nashua. This section is in fair condition and needs treatment to maintain and improve the riding surface and to extend the life of the existing roadways. All of the proposed work will remain within the right-of-way.

TRAFFIC IMPLICATIONS: Minimal traffic implications are anticipated. Work will be done by lane closures returning to normal traffic patterns prior to the beginning of non-work hours. No work will be permitted from May 23 to May 27 (Memorial Day), July 3 to July 7 (July 4 weekend) and June 13 to June 15 (Ribfest), 2014. In Nashua, two-way traffic shall be maintained Monday through Friday between the hours of 7:00 am to 9:00 am and 3:00 pm to 7:00 pm. In Merrimack, two-way traffic shall be maintained at all times. Normal traffic patterns shall be restored prior to non-work hours.

COMPLETION DATE: August 1, 2014

NASHUA - MERRIMACK 25199



State of New Hampshire Department of Transportation

Project:	NASHUA - MERRIMACK X-A003(062) 25199	
County and Code:	HILLSBOROUGH COUNTY 011	
Date Bids Open:	March 20, 2014	
Scope of Work:	ROADWAY RESURFACING	
Location:	US 3 IN NASHUA AND MERRIMACK	
Completion Date:	August 1, 2014	
A ALL STATES ASPHALT, INC. 325 AMHERST ROAD, PO BOX 91 SUNDERLAND, MA 01375		\$1,075,712.00
B BROX INDUSTRIES, INC. 1471 METHUEN STREET DRACUT, MA 01826		\$1,154,480.75
C THE GORMAN GROUP LLC 200 CHURCH STREET ALBANY NY 12202		\$1,294,436.00

Item No.	Description	Unit	Quantity	A		B		C	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
202.7	REMOVAL OF GUARDRAIL	LF	250.00	\$5.00	\$1,250.00	\$0.65	\$162.50	\$1.58	\$395.00
403.1109	HOT BITUMINOUS PAVEMENT, MACHINE METHOD, HIGH STRENGTH	TON	350.00	\$87.00	\$30,450.00	\$90.00	\$31,500.00	\$92.00	\$32,200.00
403.12	HOT BITUMINOUS PAVEMENT, HAND METHOD	TON	25.00	\$125.00	\$3,125.00	\$130.00	\$3,250.00	\$135.00	\$3,375.00
413.6	CRACK FILL PRIOR TO THIN LIFT OVERLAY	LB	1,500.00	\$4.75	\$7,125.00	\$4.75	\$7,125.00	\$7.80	\$11,700.00
417	COLD PLANING BITUMINOUS SURFACES	SY	3,500.00	\$4.40	\$15,400.00	\$4.00	\$14,000.00	\$4.35	\$15,225.00
417.118	COLD PLANING BITUMINOUS SURFACES 18" WIDE, 0.5" DEEP	LF	23,300.00	\$0.60	\$13,980.00	\$0.60	\$13,980.00	\$0.88	\$20,504.00
419.1	BONDED WEARING COURSE TYPE C	SY	140,000.00	\$4.45	\$623,000.00	\$5.50	\$770,000.00	\$4.83	\$676,200.00
604.4	RECONSTRUCTING/ADJUSTING CATCH BASIN & DROP INLET	LF	25.00	\$300.00	\$7,500.00	\$250.00	\$6,250.00	\$500.00	\$12,500.00
604.52	RECONSTRUCTING/ADJUSTING DRAINAGE MANHOLES	LF	35.00	\$300.00	\$10,500.00	\$215.00	\$7,525.00	\$500.00	\$17,500.00
606.000	STEEL BEAM FOR BEAM GUARDRAIL	LF	300.00	\$7.00	\$2,100.00	\$8.00	\$2,400.00	\$8.50	\$2,550.00
606.014	6"X8" WOOD POST REPLACE- MENTS FOR BEAM GUARDRAIL POSTS	EA	15.00	\$58.00	\$870.00	\$50.00	\$750.00	\$58.00	\$870.00
606.0142	6"X8" WOOD POST ASSEMBLIES FOR BEAM GUARDRAIL POSTS	EA	15.00	\$15.00	\$225.00	\$12.00	\$180.00	\$13.00	\$195.00
606.1455	BEAM GUARDRAIL (TERM. UNIT TYPE EAGRT 25 FT.)	U	6.00	\$1,750.00	\$10,500.00	\$1,700.00	\$10,200.00	\$1,900.00	\$11,400.00
606.915	RESETTING GUARDRAIL BLOCK AND RAIL ONLY	LF	1,725.00	\$6.50	\$11,212.50	\$4.85	\$8,366.25	\$4.20	\$7,245.00
616.650	TRAFFIC SIGNAL DETECTOR LOOP 6 FT X 50 FT	EA	6.00	\$650.00	\$3,900.00	\$650.00	\$3,900.00	\$745.00	\$4,470.00
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	100,000.00	\$1.00	\$100,000.00	\$1.00	\$100,000.00	\$1.00	\$100,000.00

Item No:	Description	Unit	A			B			C		
			Quantity	Unit Price	Total	Unit Price	Total	Unit Price	Total		
618.7	FLAGGERS	HR	650.00	\$24.85	\$16,152.50	\$23.00	\$14,950.00	\$27.50	\$17,875.00		
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$85,240.00	\$85,240.00	\$42,000.00	\$42,000.00	\$125,000.00	\$125,000.00		
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.00	\$1,200.00	\$2,400.00	\$2,400.00	\$4,800.00	\$2,000.00	\$4,000.00		
619.253	PORTABLE CHANGEABLE MESSAGE SIGN (UNIT WEEK)	UWK	4.00	\$300.00	\$1,200.00	\$140.00	\$560.00	\$500.00	\$2,000.00		
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	114,500.00	\$0.12	\$13,740.00	\$0.12	\$13,740.00	\$0.14	\$16,030.00		
632.01049	SHORT TERM PAVEMENT MARKINGS, 4" LINE	LF	79,500.00	\$0.11	\$8,745.00	\$0.11	\$8,745.00	\$0.20	\$15,900.00		
632.3104	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 4" LINE	LF	3,500.00	\$0.50	\$1,750.00	\$0.50	\$1,750.00	\$1.05	\$3,675.00		
632.3108	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 8" LINE	LF	1,000.00	\$1.00	\$1,000.00	\$1.00	\$1,000.00	\$1.32	\$1,320.00		
632.3118	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 18" LINE	LF	325.00	\$3.00	\$975.00	\$3.00	\$975.00	\$4.20	\$1,365.00		
632.32	RETROREFLECT. THERMOPLAS. PAVEMENT MARKING, SYMBOL OR WORD	SF	1,500.00	\$5.00	\$7,500.00	\$5.00	\$7,500.00	\$7.50	\$11,250.00		
632.911	OBLITERATE PAVE. MARKING LINE, 12" WIDE & UNDER	LF	82,800.00	\$0.24	\$19,872.00	\$0.24	\$19,872.00	\$0.64	\$52,992.00		
632.92	OBLITERATE PAVEMENT MARKING, SYMBOL OR WORD	SF	1,500.00	\$1.50	\$2,250.00	\$1.50	\$2,250.00	\$1.05	\$1,575.00		
646.51	TURF ESTABLISHMENT WITH MULCH, TACKIFIERS AND LOAM	SY	3,500.00	\$5.50	\$19,250.00	\$0.50	\$1,750.00	\$9.75	\$34,125.00		
692	MOBILIZATION	U	1.00	\$29,500.00	\$29,500.00	\$30,000.00	\$30,000.00	\$66,000.00	\$66,000.00		
699	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00		
1010.15	FUEL ADJUSTMENT	\$	20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00		

\$1,075,712.00

\$1,154,480.75

\$1,294,436.00

A - PS&E Comparison

PS&E = NHDOT Cost Estimate

Item No:	Description	Unit	A-Bidder		PS&E		A-PS&E Difference	
			Quantity	Unit Price	Total	Unit Price		Total
202.7	REMOVAL OF GUARDRAIL	LF	250.00	\$5.00	\$1,250.00	\$6.00	\$1,500.00	(\$250.00)
403.1109	HOT BITUMINOUS PAVEMENT, MACHINE METHOD, HIGH STRENGTH	TON	350.00	\$87.00	\$30,450.00	\$80.00	\$28,000.00	\$2,450.00
403.12	HOT BITUMINOUS PAVEMENT, HAND METHOD	TON	25.00	\$125.00	\$3,125.00	\$150.00	\$3,750.00	(\$625.00)
413.6	CRACK FILL PRIOR TO THIN LIFT OVERLAY	LB	1,500.00	\$4.75	\$7,125.00	\$3.00	\$4,500.00	\$2,625.00
417	COLD PLANING BITUMINOUS SURFACES	SY	3,500.00	\$4.40	\$15,400.00	\$5.00	\$17,500.00	(\$2,100.00)
417.118	COLD PLANING BITUMINOUS SURFACES 18" WIDE, 0.5" DEEP	LF	23,300.00	\$0.60	\$13,980.00	\$0.75	\$17,475.00	(\$3,495.00)
419.1	BONDED WEARING COURSE TYPE C	SY	140,000.00	\$4.45	\$623,000.00	\$5.10	\$714,000.00	(\$91,000.00)
604.4	RECONSTRUCTING/ADJUSTING CATCH BASIN & DROP INLET	LF	25.00	\$300.00	\$7,500.00	\$250.00	\$6,250.00	\$1,250.00
604.52	RECONSTRUCTING/ADJUSTING DRAINAGE MANHOLES	LF	35.00	\$300.00	\$10,500.00	\$400.00	\$14,000.00	(\$3,500.00)
606.000	STEEL BEAM FOR BEAM GUARDRAIL	LF	300.00	\$7.00	\$2,100.00	\$9.00	\$2,700.00	(\$600.00)
606.014	6"X8" WOOD POST REPLACEMENTS FOR BEAM GUARDRAIL POSTS	EA	15.00	\$58.00	\$870.00	\$60.00	\$900.00	(\$30.00)
606.0142	6"X8" WOOD POST ASSEMBLIES FOR BEAM GUARDRAIL POSTS	EA	15.00	\$15.00	\$225.00	\$15.00	\$225.00	\$0.00
606.1455	BEAM GUARDRAIL (TERM. UNIT TYPE EAGRT 25 FT.)	U	6.00	\$1,750.00	\$10,500.00	\$2,000.00	\$12,000.00	(\$1,500.00)
606.915	RESETTING GUARDRAIL BLOCK AND RAIL ONLY	LF	1,725.00	\$6.50	\$11,212.50	\$5.00	\$8,625.00	\$2,587.50
616.650	TRAFFIC SIGNAL DETECTOR LOOP 6 FT X 50 FT	EA	6.00	\$650.00	\$3,900.00	\$650.00	\$3,900.00	\$0.00
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	100,000.00	\$1.00	\$100,000.00	\$1.00	\$100,000.00	\$0.00

A - PS&E Comparison

PS&E = NHDOT Cost Estimate

Item No:	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
618.7	FLAGGERS	HR	650.00	\$24.85	\$16,152.50	\$21.00	\$13,650.00	\$2,502.50
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$85,240.00	\$85,240.00	\$50,000.00	\$50,000.00	\$35,240.00
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.00	\$1,200.00	\$2,400.00	\$2,000.00	\$4,000.00	(\$1,600.00)
619.253	PORTABLE CHANGEABLE MESSAGE SIGN (UNIT WEEK)	UWK	4.00	\$300.00	\$1,200.00	\$250.00	\$1,000.00	\$200.00
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	114,500.00	\$0.12	\$13,740.00	\$0.12	\$13,740.00	\$0.00
632.01049	SHORT TERM PAVEMENT MARKINGS, 4" LINE	LF	79,500.00	\$0.11	\$8,745.00	\$0.10	\$7,950.00	\$795.00
632.3104	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 4" LINE	LF	3,500.00	\$0.50	\$1,750.00	\$0.50	\$1,750.00	\$0.00
632.3108	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 8" LINE	LF	1,000.00	\$1.00	\$1,000.00	\$2.00	\$2,000.00	(\$1,000.00)
632.3118	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 18" LINE	LF	325.00	\$3.00	\$975.00	\$3.33	\$1,082.25	(\$107.25)
632.32	RETROREFLECT. THERMOPLAS. PAVEMENT MARKING, SYMBOL OR WORD	SF	1,500.00	\$5.00	\$7,500.00	\$5.50	\$8,250.00	(\$750.00)
632.911	OBLITERATE PAVE. MARKING LINE, 12" WIDE & UNDER	LF	82,800.00	\$0.24	\$19,872.00	\$0.30	\$24,840.00	(\$4,968.00)
632.92	OBLITERATE PAVEMENT MARKING, SYMBOL OR WORD	SF	1,500.00	\$1.50	\$2,250.00	\$1.50	\$2,250.00	\$0.00
646.51	TURF ESTABLISHMENT WITH MULCH, TACKIFIERS AND LOAM	SY	3,500.00	\$5.50	\$19,250.00	\$9.00	\$31,500.00	(\$12,250.00)
692	MOBILIZATION	U	1.00	\$29,500.00	\$29,500.00	\$40,000.00	\$40,000.00	(\$10,500.00)
699	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$0.00

A - PS&E Comparison

PS&E = NHDOT Cost Estimate

Item No:	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
1010.15	FUEL ADJUSTMENT	\$	20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00	\$0.00
					\$1,075,712.00		\$1,162,337.25	(\$86,625.25)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/1/2014

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

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

PRODUCER Reagan Insurance 8 E Main Street P O Box 191 Marcellus NY 13108	CONTACT NAME:	
	PHONE (A/C, No, Ext): 315-673-2094	FAX (A/C, No): 315-673-1121
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : Old Republic Insurance Company	24147
	INSURER B : Hanover Insurance Companies	22292
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES CERTIFICATE NUMBER: 1478411647 REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Y	Y	MWZY300418	2/1/2014	2/1/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y	Y	MWTB300419	2/1/2014	2/1/2015	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Hired Phys Dmg \$145,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y	MWC30041700	2/1/2014	2/1/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
B	Leased/Rented Equip. & Installation Coverage			RHS875076309	2/1/2014	2/1/2015	\$850,000 \$1,000,000 Ded. \$2,500 Ded. \$1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Additional Insured and Waiver of Subrogation are applicable only if required by contract
General Liability policy is on a primary & non-contributory basis & includes completed operations/Auto policy is on a primary basis/Auto Hired Physical Damage Deds \$250 Comp/\$500 Coll
*MCS90 endorsement applies/*Workers Compensation: NY,CT,NH,VT,RI,ME,NJ,DE,MA
(All States)Project: Roadway Resurfacing (Bonded Wearing Course) on US 3 In Nashua-Merrimack
No. X-A003(062), 25199

CERTIFICATE HOLDER State of New Hampshire - DOT John O. Morton Building 7 Hazen Dr., PO Box 483 Concord NH 03302-0483	CANCELLATION 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
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/31/2014

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

PRODUCER H.J. Knight International 30 Braintree Hill Office Park Braintree, MA 02184	CONTACT NAME:		
	PHONE (A/C, No, Ext): (781) 966-3700	FAX (A/C, No): (781) 966-3701	
E-MAIL ADDRESS:			
INSURER(S) AFFORDING COVERAGE		NAIC #	
INSURER A : National Fire and Marine Insurance Company			
INSURED All States Asphalt, Inc and Subsidiaries 325 Amherst Road P.O. Box 91 Sunderland, MA 01375	INSURER B : Zurich-American		16535
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

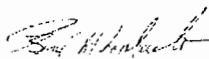
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		42-UMO-100149-01	02/01/2014	02/01/2015	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Commercial Umbrella		AEC 4647378-03	02/01/2014	02/01/2015	ES 5,000,000 10,000,000

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

If included on the underlying general liability policy as an additional insured, the certificate holder is included as additional insured's on a primary and non-contributory basis per written contract agreement for work performed by the named insured.

Project: Roadway Resurfacing (Bonded Wearing Course) on US 3 in Nashua-Merrimack, Project No. X-A003(062), 25199

CERTIFICATE HOLDER State of New Hampshire-DOT John O. Morton Building 7 Hazen Dr., PO Box 483 Concord, NH 03302-0483	CANCELLATION 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 



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/1/2014

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

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

PRODUCER James P Reagan Agency 8 E Main Street P O Box 191 Marcellus NY 13108	CONTACT NAME: PHONE (A/C, No, Ext): 315-673-2094	FAX (A/C, No): 315-673-1121
	E-MAIL ADDRESS:	
INSURED ALLSTA State of New Hampshire Department of Transportation John O. Morton Building 7 Hazen Dr., PO Box 483 Concord NH 03302-0483	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Old Republic Insurance Company	NAIC # 24147
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		

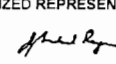
COVERAGES	CERTIFICATE NUMBER: 1454550655	REVISION NUMBER:
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THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> OCP GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC			MWZY302172	3/31/2014	2/1/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

Contractor: All States Asphalt, Inc.
 OCP: (All States)Project: Roadway Resurfacing (Bonded Wearing Course) on US 3 In Nashua-Merrimack
 No. X-A003(062), 25199

CERTIFICATE HOLDER State of New Hampshire - DOT John O. Morton Building 7 Hazen Dr., PO Box 483 Concord NH 03302-0483	CANCELLATION 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 
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/1/2014

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PRODUCER James P Reagan Agency 8 E Main Street P O Box 191 Marcellus NY 13108	CONTACT NAME: PHONE (A/C, No, Ext): 315-673-2094 FAX (A/C, No): 315-673-1121 E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE NAIC #	
INSURED ALLSTA State of New Hampshire Department of Transportation John O. Morton Building 7 Hazen Dr., PO Box 483 Concord NH 03302-0483	INSURER A: Arch Ins Co (AmWINS) 11150	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

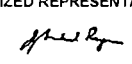
COVERAGES **CERTIFICATE NUMBER:** 1928028031 **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Excess OCP GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			267494	3/31/2014	3/31/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

Contractor: All States Asphalt, Inc.
Excess OCP: (All States)Project: Roadway Resurfacing (Bonded Wearing Course) on US 3 In Nashua-Merrimack No. X-A003(062), 25199

CERTIFICATE HOLDER State of New Hampshire - DOT John O. Morton Building 7 Hazen Dr., PO Box 483 Concord NH 03302-0483	CANCELLATION 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 
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