



THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



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Beau

Victoria F. Sheehan
Commissioner

William Cass, P.E.
Assistant Commissioner

Bureau of Construction
April 19, 2017

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

1. Authorize the Department of Transportation to enter into a contract with Hi-Way Safety Systems, Inc. (Vendor 162024) of Rockland, MA on the basis of a low bid of \$353,193.68 for placement of 2.4 million feet of pavement markings during the spring/summer of 2017 along all Turnpike corridors, from the date of Governor and Council approval through September 15, 2017 unless extended by the Department in accordance with the Standard Specifications. 100% Turnpike Funds.

Funding is available as follows:	<u>FY 2017</u>
04-96-96-961017-7025	
Turnpike Renewal & Replacement	
400-500870 Highway Contract Payments	\$353,193.68

EXPLANATION

This project is part of the annual Turnpike Renewal and Replacement Program. This project will place approximately 2.4 million feet of pavement markings during the spring/summer of 2017. The pavement markings will be placed along the Turnpike system roadway segments, excluding areas within construction project limits or roadways with durable markings previously applied, and will include Turnpike's mainline, secondary roads and ramps.

Due to resource constraints, the Bureau of Traffic is not able to apply pavement markings for Turnpikes as has happened historically. This project will allow for continued application of pavement markings providing proper lane delineation for the safety of the traveling public.

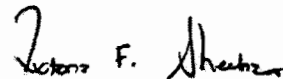
Page 2

Although the bid costs exceeded the Department's estimate, the low bid is felt to be reasonable for the work involved as there were 3 bids submitted for this project. Re-advertising this project would result, in our opinion, in higher prices and prevent the completion of the work in a timely manner. The Department considers it to be in the best interest of the State to accept this bid to accomplish these needed repairs.

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 and the bid reasonably conforms to the engineer's estimate in accordance with State procedure. 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.

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,



Victoria F. Sheehan
Commissioner

VFS/md

Department Estimate: \$324,926.73

Contract Amount: \$353,193.68

Over Estimate: \$ 28,266.95

Attachments

PROJECT: STATEWIDE STRIPING (TURNPIKES)

STATE NO: 40918

Date: February 28, 2017

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION: This project will place approximately 2.4 million feet of pavement markings during the spring/summer of 2017. The pavement markings will be placed along the Turnpike system roadway segments, excluding areas within construction project limits or roadways with durable markings previously applied, and will include Turnpike's mainline, secondary roads and ramps.

FEDERAL FUNDING: 0% (100% Turnpike funded from Turnpike's Renewal & Replacement program)

CONTINGENCY: No contingency is requested given the nature of the project and minimal risk for cost overruns.

PROJECT INITIATED: Bureau of Turnpike's Renewal & Replacement program

EXPLANATION: Due to resource constraints, the Bureau of Traffic is not able to apply pavement markings for Turnpikes as has happened historically. This project will allow for continued application of pavement markings providing proper lane delineation for the safety of the traveling public.

TRAFFIC IMPLICATIONS: Minimal traffic impacts are anticipated. Traffic control will be a mobile operation and follow the same procedures that the Traffic Bureau uses for striping operations. Lane closures or travel-in-shoulders will be used when traffic would be present on both sides of the striping operation. Lane and shoulder closure timeframes will be consistent with those developed by the Turnpike Bureau for maintenance operations or will follow more stringent requirements based upon location/lane configuration. Normal traffic patterns will be re-established prior to the beginning of peak hour traffic volumes.

COMPLETION DATE: September 15, 2017

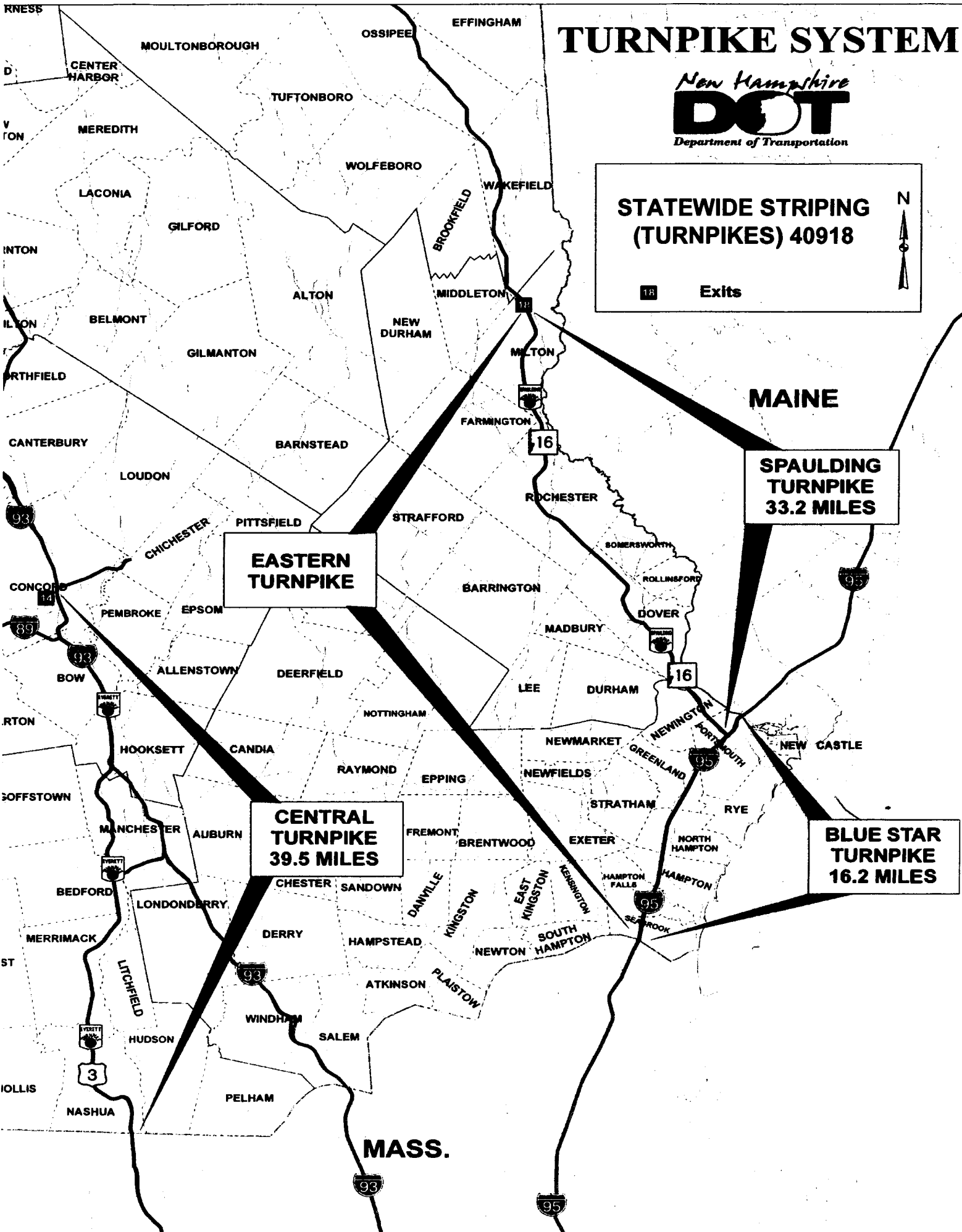
TURNPIKE SYSTEM



STATEWIDE STRIPING
(TURNPIKES) 40918



18 Exits



**EASTERN
TURNPIKE**

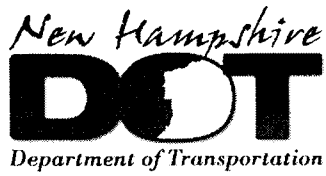
**CENTRAL
TURNPIKE
39.5 MILES**

MAINE

**SPAULDING
TURNPIKE
33.2 MILES**

**BLUE STAR
TURNPIKE
16.2 MILES**

MASS.



ABC Bid Data

STATEWIDE STRIPING (TURNPIKES)

40918

NON-FEDERAL

PROJECT: STATEWIDE STRIPING (TURNPIKES)
STATE PROJECT NUMBER: 40918
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: March 30, 2017, 2:00
SCOPE OF WORK: Striping along all Turnpike corridors
COMPLETION DATE: September 15, 2017
LOCATION:

Awarded To: HI-WAY SAFETY SYSTEMS,
INC.
9 ROCKVIEW WAY
ROCKLAND, MA 02370

Amount: \$353,193.68

Award Date:

Certified by: PETER.E.STAMNAS
Director of Project Development

Summary of Bidders

Contractor	Bid Amount	Rank
HI-WAY SAFETY SYSTEMS, INC. 9 ROCKVIEW WAY, ROCKLAND MA 02370	\$353,193.68	A
TMI SERVICES INC 4 MASTER DRIVE, FRANKLIN MA 02038	\$448,755.26	B
L & D SAFETY MARKINGS CORP 304 EAST MONTPELIER RD, BARRE VT 05641-8373	\$469,698.67	C

Item No.	Description	Unit	Quantity	PS&E		HI-WAY SAFETY SYSTEMS, INC. 9 ROCKVIEW WAY ROCKLAND, MA 02370		TMI SERVICES INC 4 MASTER DRIVE FRANKLIN, MA 02038	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

Items

618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	40,000.000	\$1.00	\$40,000.00	\$1.00	\$40,000.00	\$1.00	\$40,000.00
619.1	MAINTENANCE OF TRAFFIC	U	1.000	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$20,000.00	\$20,000.00
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.000	\$1,500.00	\$3,000.00	\$1,000.00	\$2,000.00	\$500.00	\$1,000.00
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.000	\$2,500.00	\$5,000.00	\$2,000.00	\$4,000.00	\$1,000.00	\$2,000.00
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	96,171.000	\$0.07	\$6,731.97	\$0.08	\$7,693.68	\$0.09	\$8,655.39
632.0106	RETROREFLECTIVE PAINT PAVE. MARKING, 6" LINE	LF	2,022,719.00 0	\$0.09	\$182,044.71	\$0.10	\$202,271.90	\$0.13	\$262,953.47
632.0112	RETROREFLECTIVE PAINT PAVE. MARKING, 12" LINE	LF	166,561.000	\$0.30	\$49,968.30	\$0.35	\$58,296.35	\$0.40	\$66,624.40
632.0118	RETROREFLECTIVE PAINT PAVE. MARKING, 18" LINE	LF	3,000.000	\$0.45	\$1,350.00	\$1.00	\$3,000.00	\$3.00	\$9,000.00
632.02	RETROREFLECTIVE PAINT PAVEMENT MARKING, SYMBOL OR WORD	SF	10,761.000	\$1.75	\$18,831.75	\$1.75	\$18,831.75	\$2.00	\$21,522.00
632.911	OBLITERATE PAVE. MARKING LINE, 12" WIDE & UNDER	LF	10,000.000	\$0.10	\$1,000.00	\$0.01	\$100.00	\$0.50	\$5,000.00
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	10,000.000	\$1.00	\$10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00
1010.15	FUEL ADJUSTMENT	\$	2,000.000	\$1.00	\$2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00

Totals: **\$324,926.73** **\$353,193.68** **\$448,755.26**

Item No.	Description	Unit	Quantity	PS&E		L & D SAFETY MARKINGS CORP 304 EAST MONTPELIER RD BARRE, VT 05641-8373		Unit Price	Total
				Unit Price	Total	Unit Price	Total		

Items

618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	40,000.000	\$1.00	\$40,000.00	\$1.00	\$40,000.00		
619.1	MAINTENANCE OF TRAFFIC	U	1.000	\$5,000.00	\$5,000.00	\$49,000.00	\$49,000.00		
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.000	\$1,500.00	\$3,000.00	\$1,000.00	\$2,000.00		
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.000	\$2,500.00	\$5,000.00	\$1,500.00	\$3,000.00		
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	96,171.000	\$0.07	\$6,731.97	\$0.10	\$9,617.10		
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632.0112	RETROREFLECTIVE PAINT PAVE. MARKING, 12" LINE	LF	166,561.000	\$0.30	\$49,968.30	\$0.35	\$58,296.35		
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632.02	RETROREFLECTIVE PAINT PAVEMENT MARKING, SYMBOL OR WORD	SF	10,761.000	\$1.75	\$18,831.75	\$1.75	\$18,831.75		
632.911	OBLITERATE PAVE. MARKING LINE, 12" WIDE & UNDER	LF	10,000.000	\$0.10	\$1,000.00	\$0.50	\$5,000.00		
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	10,000.000	\$1.00	\$10,000.00	\$1.00	\$10,000.00		
1010.15	FUEL ADJUSTMENT	\$	2,000.000	\$1.00	\$2,000.00	\$1.00	\$2,000.00		

Totals:	\$324,926.73	\$469,698.67
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PS&E Comparison

STATEWIDE STRIPING (TURNPIKES)

40918

NON-FEDERAL

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
Items								
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	40,000.000	\$1.00	\$40,000.00	\$1.00	\$40,000.00	\$0.00
619.1	MAINTENANCE OF TRAFFIC	U	1.000	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$0.00
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.000	\$1,000.00	\$2,000.00	\$1,500.00	\$3,000.00	(\$1,000.00)
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.000	\$2,000.00	\$4,000.00	\$2,500.00	\$5,000.00	(\$1,000.00)
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	96,171.000	\$0.08	\$7,693.68	\$0.07	\$6,731.97	\$961.71
632.0106	RETROREFLECTIVE PAINT PAVE. MARKING, 6" LINE	LF	2,022,719.000	\$0.10	\$202,271.90	\$0.09	\$182,044.71	\$20,227.19
632.0112	RETROREFLECTIVE PAINT PAVE. MARKING, 12" LINE	LF	166,561.000	\$0.35	\$58,296.35	\$0.30	\$49,968.30	\$8,328.05
632.0118	RETROREFLECTIVE PAINT PAVE. MARKING, 18" LINE	LF	3,000.000	\$1.00	\$3,000.00	\$0.45	\$1,350.00	\$1,650.00
632.02	RETROREFLECTIVE PAINT PAVEMENT MARKING, SYMBOL OR WORD	SF	10,761.000	\$1.75	\$18,831.75	\$1.75	\$18,831.75	\$0.00
632.911	OBLITERATE PAVE. MARKING LINE, 12" WIDE & UNDER	LF	10,000.000	\$0.01	\$100.00	\$0.10	\$1,000.00	(\$900.00)
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	10,000.000	\$1.00	\$10,000.00	\$1.00	\$10,000.00	\$0.00
1010.15	FUEL ADJUSTMENT	\$	2,000.000	\$1.00	\$2,000.00	\$1.00	\$2,000.00	\$0.00
Total:					\$353,193.68		\$324,926.73	\$28,266.95



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/11/2017

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 have ADDITIONAL INSURED provisions or 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 WM. F. Borhek Insurance Agency 311 Plymouth Street Halifax, MA 02338 Scott C Casagrande	781-293-6331	CONTACT NAME: Scott C Casagrande PHONE (A/C, No, Ext): 781-293-6331 FAX (A/C, No): 781-293-2171 E-MAIL ADDRESS:																				
	<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>Charter Oak Fire Ins.Co.</td> <td>25615</td> </tr> <tr> <td>INSURER B:</td> <td>Travelers Indemnity Company</td> <td>25658</td> </tr> <tr> <td>INSURER C:</td> <td>Travelers Property Casualty Co</td> <td>25674</td> </tr> <tr> <td>INSURER D:</td> <td>Riverport Insurance Company</td> <td>36684</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:	Charter Oak Fire Ins.Co.	25615	INSURER B:	Travelers Indemnity Company	25658	INSURER C:	Travelers Property Casualty Co	25674	INSURER D:	Riverport Insurance Company	36684	INSURER E:			INSURER F:	
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INSURED Hi-Way Safety Systems, Inc. Highway Safety Solutions Inc. Kathy DeLong 9 Rockview Way Rockland, MA 02370																						

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	ADDITIONAL INSURED	SUBROGATION WAIVED	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 <input checked="" type="checkbox"/> XCU GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X		CO-5G489458 CONTRACTUAL LIABILITY PER CG0001 10/01	12/31/2016	12/31/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Ded. \$ 1,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			810-5G203934	12/31/2016	12/31/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000			CUP-6G668759	12/31/2016	12/31/2017	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
D	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 Y	N/A	NHARP301072	12/31/2016	12/31/2017	<input checked="" type="checkbox"/> PER STATUTE <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

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project: Concord NH-2017 Statewide Striping. Contract# 40918
New Hampshire Department of Transportation is additional insured on General Liability coverage when required by written contract.

CERTIFICATE HOLDER NEWHAMP New Hampshire DOT 7 Hazen Drive Concord, NH 03302	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 Scott C Casagrande
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/20/2017

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.

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PRODUCER WM. F. Borhek Insurance Agency 311 Plymouth Street Halifax, MA 02338 Scott C Casagrande	CONTACT NAME: Scott C Casagrande PHONE (A/C, No, Ext): 781-293-6331 FAX (A/C, No): 781-293-2171 E-MAIL ADDRESS:																				
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INSURED State of NH NH DOT 7 Hazen Drive Concord, NH 03301																					

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> OCP GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PRS-4G434425-IND	04/20/2017	04/20/2018	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
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	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				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Evidence of OCP - Project#40918 for work performed by Hi-Way Safety Systems Inc.

CERTIFICATE HOLDER State of NH NH DOT 7 Hazen Drive Concord, NH 03301	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 Scott C Casagrande
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