



# State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES  
25 Capitol Street - Room 120  
Concord, New Hampshire 03301

Charles M. Arlinghaus  
Commissioner  
(603) 271-3201

Joseph B. Bouchard  
Assistant Commissioner  
(603) 271-3204

Catherine A. Keane  
Deputy Commissioner  
(603) 271-2059

Division of Public Works  
Design and Construction  
Project No.81089R- Contract B

July 8, 2021

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

## REQUESTED ACTION

- 1). Authorize the Division of Public Works Design and Construction to enter into a contract with R.S. Audley Inc, Bow, New Hampshire , (VC #347725), for a total price not to exceed \$1,694,000, for the Manchester Anti-Terrorism/Force Protection REBID, Manchester, New Hampshire. This contract is effective upon Governor and Council approval through May 9, 2022 unless extended in accordance with the contract terms. **100% Capital - Federal Funds.**
- 2.) Further authorize that a contingency in the amount of \$140,000 be approved for unanticipated modifications, for the Manchester Anti-Terrorism/Force Protection REBID, Manchester, New Hampshire bringing the total to \$1,834,000. **100% Capital - Federal Funds**
- 3). Further authorize the amount of \$68,600 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 311152), for engineering services provided, bringing the total to \$1,902,600. **100% Capital - Federal Funds.**

Funding is available in account titled the Department of Military Affairs and Veterans Services:

02-12-12-120030-71630000 19-146:11B Fed State Repair

034-500162 – Contract/Building Repair	\$ 1,694,000
034-500162 – Contingency	\$ 140,000
034-500162-- Interagency – DPW Fees	<u>\$ 68,600</u>
Sub-Total	\$ 1,902,600
<b>GRAND TOTAL</b>	<b>\$ 1,902,600</b>

### EXPLANATION

This project makes site improvements at the National Guard Readiness Center in Manchester. The work will include site grading, new storm water drainage structures, groundwater management, lighting, changing fence lines, reconfiguring traffic lanes and parking lots, installing new sidewalks and paving. Also, new trees and lawn areas will be planted.

Site upgrades to the Manchester Readiness Center are necessary to improve compliance with Federal Anti-Terrorism Force Protection requirements. Measures include increasing the distance between vehicular traffic and buildings, and parking and fence line adjustments to improve Fire Lanes. Site drainage structures will manage storm water runoff and control groundwater by diverting it away from the building.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and execution; and the Department of Administrative Services 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 Services, Division of Public Works Design and Construction.

Attached please find a copy of the tabulation of bids for this project along with the contract supplemental information sheet.

Respectfully submitted,



Charles M. Arlinghaus,  
Commissioner

Department Estimate:	\$ 805,500
Bid Amount:	<u>\$ 552,500</u>
Under Estimate:	\$ 253,000

## CONTRACT SUPPLEMENTAL INFORMATION SHEET

**PROJECT:** DPW Project No. 81089R, Contract B  
Manchester Antiterrorism Force Protection - REBID  
1059 Canal Street Manchester, NH 03101

**DESCRIPTION:** This project makes site improvements at the National Guard Readiness Center in Manchester. The work will include site grading, new storm water drainage structures, groundwater management, lighting, changing fence lines, reconfiguring traffic lanes and parking lots, installing new sidewalks and paving. Also, new trees and lawn areas will be planted.

**EXPLANATION:** Site upgrades to the Manchester Readiness Center are necessary to improve compliance with Federal Anti-Terrorism Force Protection requirements. Measures include increasing the distance between vehicular traffic and buildings, and parking and fence line adjustments to improve Fire Lanes. Site drainage structures will manage storm water runoff and control groundwater by diverting it away from the building.

### **ALTERNATES**

**EXPLANATION:** Alternate Number 1, NORTH PARKING AREA: Construct Parking area and entrance, site drainage and erosion control, utilities, site lighting and landscaping. Add \$307,500.

Alternate Number 2, LOCUST STREET: Construct Locust Street roadway, sidewalks, site drainage and erosion control, utilities, fencing and landscaping. Add \$296,000.

Alternate Number 3: SAGAMORE STREET: Construct West Sagamore Street roadway, sidewalks, site drainage and erosion control, utilities, Site lighting and landscaping. Add \$538,000.

UNDER  
ESTIMATE

EXPLANATION: The Low Bid was significantly under the Department estimate. Just prior to bidding, some scope was removed from the base bid and included in the Bid Alternates because the estimate for the base bid was higher than the budget. However, the estimate for the base bid work was never revised to represent the reduced scope of work. As a precaution, the Department met with the Low Bidder and verified their bid covered the full scope of the contract.

DEPARTMENT

ESTIMATE: \$ 805,500

LOW BID: \$ 552,500



Division of Public Works

# ABC Bid Data

MANCHESTER

81089RB

NON-FEDERAL

PROJECT: MANCHESTER  
 STATE PROJECT NUMBER: 81089RB  
 FED. PROJECT NUMBER: NON-FEDERAL  
 DATE BIDS OPEN: June 09, 2021, 2:00  
 SCOPE OF WORK: Upgrades to Manchester Readiness Center and Site REBID  
 COMPLETION DATE: May 09, 2022  
 LOCATION: Hillsborough

Awarded To:

Amount: \$0.00

Award Date:

Certified by:

Director of Project Development

## Summary of Bidders

Contractor	Bid Amount	Rank
AUDLEY RRS INC 1113 ROUTE 3A BOW NH 03304-4025	\$552,500.00	A
NORTHEAST EARTH MECHANICS INC 159 BARNSTEAD ROAD, PITTSFIELD NH 03263	\$1,080,500.00	B

Item # 901: \$472,000.  
 Item # 902: \$80,500.

Base Bid = \$552,500.

Alt 1, Item 991 = \$307,500.

Alt 2, Item 992 = \$296,000.

Alt 3, Item 993 = \$538,000.

Total This Contract = ~~\$1,693,500.~~  
 1,694,000. —

### BUREAU OF PUBLIC WORKS

Award to R.S. Audley, Inc.  
 Hold for Negotiation  
 Cancel Contract  
 User Agency NG.  
 Authorized by [Signature]  
 Date 106/17/2021



Division of Public Works

# ABC Bid Data

MANCHESTER

81089RB

NON-FEDERAL

Item No.	Description	Unit	Quantity	PS&E		AUDLEY, R. S., INC. 1113 ROUTE 3A BOW, NH 03304-6025		NORTHEAST EARTH MECHANICS INC 189 BARNSTEAD ROAD PITTSFIELD, NH 03263	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

**Items**

901	BASE BID SCOPE SITE DRAINAGE PAVING AND SIDEWALK	U	1.00	\$805,500.00	\$805,500.00	\$472,000.00	\$472,000.00	\$1,000,000.00	\$1,000,000.00
902	ALLOWANCE FOR UNFORESEEN CONDITIONS AND OWNER INITIATED CHANGES	\$	\$0,500.00	\$1.00	\$80,500.00	\$1.00	\$80,500.00	\$1.00	\$80,500.00
<b>Totals:</b>					<b>\$886,000.00</b>		<b>\$552,500.00</b>		<b>\$1,080,500.00</b>

**ADD ALTERNATES 81089B REBID**

**ADD ALTERNATE 1**

991	ADD ALTERNATE 1 NORTH PARKING AREA	U	1.00	\$267,909.00	\$267,909.00	\$307,500.00	\$307,500.00	\$475,000.00	\$475,000.00
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**ADD ALTERNATE 2**

992	ADD ALTERNATE 2 LOCUST STREET	U	1.00	\$328,860.00	\$328,860.00	\$296,000.00	\$296,000.00	\$365,000.00	\$365,000.00
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**ADD ALTERNATE 3**

993	ADD ALTERNATE 3 SAGAMORE STREET	U	1.00	\$419,682.00	\$419,682.00	\$538,000.00	\$538,000.00	\$850,000.00	\$850,000.00
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<b>Alt. Totals:</b>									
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<b>Totals:</b>					<b>\$886,000.00</b>		<b>\$552,500.00</b>		<b>\$1,080,500.00</b>
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# State of New Hampshire

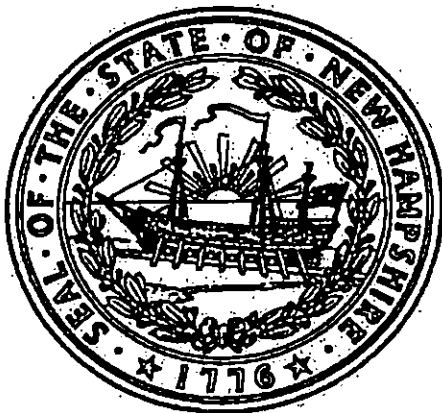
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that R. S. AUDLEY, INC. is a New Hampshire Profit Corporation registered to transact business in New Hampshire on October 14, 1955. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 6242

Certificate Number: 0005366530



IN TESTIMONY WHEREOF,  
I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 12th day of May A.D. 2021.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/17/2021

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

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

<b>PRODUCER</b> THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511		<b>CONTACT NAME:</b> Christine Holman, CPCU, CIC <b>PHONE (A/C No. Ext):</b> (603) 224-2562 <b>FAX (A/C No):</b> (603) 224-8912 <b>E-MAIL ADDRESS:</b> cholman@rowleyagency.com	
<b>INSURED</b> R.S. Audley, Inc. 1113 Route 3-A Bow NH 03304		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Travelers <b>NAIC #</b> 28188 <b>INSURER B:</b> Crum & Forster <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES** **CERTIFICATE NUMBER:** 21-22 all lines **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.

INSTR	TYPE OF INSURANCE	ADOL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CG0001 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC			DT-CO-50429382-PKX-21	1/1/2021	1/1/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" 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			010-09587210-21-26-0	1/1/2021	1/1/2022	COMBINED SINGLE LIMIT (Per accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 2,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			DTM-CUP-50429401-TIL-21	1/1/2021	1/1/2022	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 P/CO Aggregate \$ 10,000,000
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	MA States: ME, ME DE-81596091-21-26-0 COP OSLAN Coverage applies	1/1/2021	1/1/2022	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Leased/Rented			DT-660-30828427-COP-21	1/1/2021	1/1/2022	Limit 775,000
B	Pollution			PKC100765	2/18/2021	2/18/2022	Per Claim/Aggregate 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 RE: #81089RB - Upgrades to Manchester Readiness Center & Site REBID. When required by written contract The State of New Hampshire, its agencies, and its agents and employees shall be named as additional insureds under general liability and automobile liability coverage

**CERTIFICATE HOLDER**

State of NH  
 Dept of Administrative Services  
 7 Hazen Dr.  
 Room 250  
 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  
 C Holman, CPCU, CIC/C *Christine Holman*





# EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
6/21/2021

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

AGENCY THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511		PHONE (AAC.No. Ext): (603) 224-2562	COMPANY Hanover Ins - Bedford P.O. Box 81042 Woburn MA 01813-1042	
FAX (AAC.No.): (603) 224-8912	E-MAIL ADDRESS: gstevens@rowleyagency.com			
CODE: 28-1116	SUB CODE:			
AGENCY CUSTOMER ID #: 00005060				
INSURED R.S. Audley, Inc.; State of NH Dept of Admin Servs any, all subcontractors 1113 Route 3A Bow NH 03304		LOAN NUMBER	POLICY NUMBER IEV061721	
		EFFECTIVE DATE 6/17/2021	EXPIRATION DATE 6/17/2022	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

## PROPERTY INFORMATION

LOCATION/DESCRIPTION Loc# 00001 1059 Canal Street Manchester, NH 03101
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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 EVIDENCE OF PROPERTY INSURANCE 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.

## COVERAGE INFORMATION

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Job Specific Builders Risk New		
Job Specific Special form	1694000	2500
Job Specific Earthquake (C)	1694000	25,000
Job Specific Flood	1694000	25,000

## REMARKS (Including Special Conditions)

waiver of subrogation applies

## 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.

## ADDITIONAL INTEREST

NAME AND ADDRESS  State of New Hampshire Dept of Administrative Services 7 Hazen Dr. Room 250 Concord, NH 03302	MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
LOAN #		
AUTHORIZED REPRESENTATIVE C Holman, CPCU, CIC/CH <i>Christie Holman</i>		



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/21/2021

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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<b>PRODUCER</b> THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511		<b>CONTACT NAME:</b> Christine Holman, CPCU, CIC <b>PHONE (A/C, No, Ext):</b> (803) 224-2562 <b>FAX (A/C, No):</b> (803) 224-8012 <b>E-MAIL ADDRESS:</b> cholman@rowleyagency.com	
<b>INSURED</b> State of New Hampshire, Dept of Administrative Services 7 Hazen Dr. Room 250 Concord NH 03302		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Travelers NAIC # 28188 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

**COVERAGES**      **CERTIFICATE NUMBER:** CL2162139188      **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	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owners & Contractors Protective			OCP061721	06/17/2021	06/17/2022	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 - COM/OP AGG \$ OTHER: \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ OTHER: \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ OTHER: \$
	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 \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Manchester 81089RB - upgrades to the Manchester readiness center site to improve compliance with Fed Anti Terrorism force protection measures

### CERTIFICATE HOLDER

### CANCELLATION

State of New Hampshire Dept of Admin Services 7 Hazen Dr. Room 205 Concord NH 03302	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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