



Victoria F. Sheehan
Commissioner

THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



William Cass, P.E.
Assistant Commissioner

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

Bureau of Construction
March 9, 2022

REQUESTED ACTION

1. Authorize the Department of Transportation to enter into a contract with Connecticut Sealcoating, LLC of Waterbury, CT (Vendor 391477), on the basis of a low bid of \$304,435.75 for pavement crack seal on eight roadway sections in nine towns, including: Bartlett, Hart's Location, Whitefield, Lancaster, Northumberland, Jefferson, Carroll, Lincoln and Conway, in Districts 1 and 3 (Project: Statewide Crack Seal Tier 2 N 43526), from the date of Governor and Council approval through August 19, 2022, unless amended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Funding is available in State Fiscal Years 2022 and 2023, with the ability to adjust encumbrances through the Budget Office between State Fiscal Years if needed and justified:

Funding is available as follows:	<u>FY 2022</u>	<u>FY 2023</u>
04-96-96-963515-3054		
Consolidated Federal Aid		
400-500870 Highway Contract Payments	\$213,105.09	\$91,330.66

2. Further authorize that a contingency in the amount of \$30,443.58 be approved for payment of latent conditions, which may appear during the construction of the project. The contingency requested is 10% of the contract amount.

Funding is available as follows:	<u>FY 2023</u>
04-96-96-963515-3054	
Consolidated Federal Aid	
400-500870 Highway Contract Payments	\$30,443.58

EXPLANATION

This project is part of the State's Ten-Year Transportation Improvement Plan, under the Paving-Tier-2-Resurfacing Program. The project involves 35.1 miles of pavement crack seal on 8 sections in 9 towns in Maintenance Districts 1 and 3.

- 22127 – Bartlett, US 302, FW Crack Seal, 1.1 Miles
- 22128 – Hart's Location, US 302, FW Crack Seal, 0.3 Miles
- 22129 – Whitefield-Lancaster, US 3, FW Crack Seal, 7.5 Miles
- 22130 – Northumberland, US 3, FW Crack Seal, 6.1 Miles
- 22131 – Lancaster, US 2, FW Crack Seal, 1.4 Miles
- 22132 – Jefferson-Carroll, NH 115, FW Crack Seal, 9.7 Miles

- 22133 – Lincoln, US 3, FW Crack Seal, 4.4 Miles
- 22319 – Conway, US 302, FW Crack Seal, 4.6 Miles

This project will extend the pavement lifespan through sealing cracks formed by age and temperature change.

The proposed contingency amount is 10% of the contract amount. This project was quantified based on field observations and aerial photos. Field adjustments may be required due to varying field conditions. In addition, the sections will continue to deteriorate through the 2021-2022 winter.

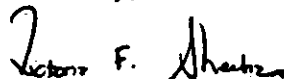
The Contractor has been prequalified by this Department. The Contract has been approved by the Attorney General as to form and execution, and the Department has certified that the necessary funds are available and the bid reasonably conforms to the engineer's estimate in accordance with State procedure. 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.

This project funding is: 80% Federal (Pave-T2-Resurf), with anticipated utilization of Turnpike Toll Credits for the State's 20% match, 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.

Your approval of this resolution is respectfully requested.

Sincerely,



Victoria F. Sheehan
Commissioner

VFS/pcj

Department Estimate: \$349,079.00
Contract Amount: \$304,435.75
Under Estimate: \$ 44,643.25
Attachments



ABC Bid Data

STATEWIDE CRACK SEAL TIER 2 N

43526

X-A005(129)

PROJECT: STATEWIDE CRACK SEAL TIER 2 N

STATE PROJECT NUMBER: 43526

FED. PROJECT NUMBER: X-A005(129)

DATE BIDS OPEN: March 03, 2022, 2:00

SCOPE OF WORK: Crack sealing various Tier 2 roads in the northern half of the State.

COMPLETION DATE: August 19, 2022

LOCATION: Carroll, District 3, Grafton, District 1, Coos

Awarded To: CONNECTICUT
SEALCOATING LLC
51 EAST AURORA STREET
WATERBURY, CT 06708

Amount: \$304,435.75

Award Date:

Certified by: PETER.E.STAMNAS

Director of Project Development

Summary of Bidders

Contractor	Bid Amount	Rank
CONNECTICUT SEALCOATING LLC 51 EAST AURORA STREET, WATERBURY CT 06708	\$304,435.75	A
ANNSEAL, INC. 130 MAIN STREET, STE 3, JOHNSON CITY NY 13790	\$317,906.16	B
COASTAL ROAD REPAIR LLC 590 BRIDGTON ROAD, WESTBROOK ME 04092	\$409,467.98	C

ABC Bid Data

STATEWIDE CRACK SEAL TIER 2 N

43526

X-A005(129)

Item No.	Description	Unit	Quantity	P&E		CONNECTICUT SEALCOATING LLC 81 EAST AURORA STREET WATERBURY, CT 06708		ANNSEAL, INC. 138 MAIN STREET, STE 3 JOHNSON CITY, NY 13790	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

Items

413.1	HOT-POURED CRACK SEALANT	LB	81,809.00	\$2.00	\$163,618.00	\$1.75	\$143,165.75	\$2.24	\$183,252.16
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	19,320.00	\$1.00	\$19,320.00	\$1.00	\$19,320.00	\$1.00	\$19,320.00
618.7	FLAGGERS	HR	798.00	\$31.50	\$25,137.00	\$25.00	\$19,950.00	\$33.00	\$26,334.00
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$80,000.00	\$80,000.00	\$80,000.00	\$80,000.00	\$71,350.00	\$71,350.00
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	4.00	\$2,376.00	\$9,504.00	\$2,000.00	\$8,000.00	\$800.00	\$3,200.00
619.279	AUTOMATED TRAILER-MOUNTED SPEED LIMIT SIGN	U	2.00	\$2,750.00	\$5,500.00	\$1,000.00	\$2,000.00	\$550.00	\$1,100.00
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.00	\$2,000.00	\$4,000.00	\$5,000.00	\$10,000.00	\$1,250.00	\$2,500.00
692.	MOBILIZATION	U	1.00	\$30,000.00	\$30,000.00	\$20,000.00	\$20,000.00	\$8,850.00	\$8,850.00
1010.15	FUEL ADJUSTMENT	\$	2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00

Totals:	\$349,079.00	\$304,435.75	\$317,906.16
Alt. Totals:			
Totals:	\$349,079.00	\$304,435.75	\$317,906.16

ABC Bid Data

STATEWIDE CRACK SEAL TIER 2 N

43526

X-A005(129)

Item No.	Description	Unit	Quantity	PS&E		COASTAL ROAD REPAIR LLC 898 BREDGETON ROAD WESTBROOK, ME 04092		Unit Price	Total
				Unit Price	Total	Unit Price	Total		

Items

413.1	HOT-POURED CRACK SEALANT	LB	\$1,809.00	\$2.00	\$163,618.00	\$2.22	\$181,615.98		
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	19,320.00	\$1.00	\$19,320.00	\$1.00	\$19,320.00		
618.7	FLAGGERS	HR	798.00	\$31.50	\$25,137.00	\$44.00	\$35,112.00		
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$90,000.00	\$90,000.00	\$136,000.00	\$136,000.00		
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	4.00	\$2,376.00	\$9,504.00	\$700.00	\$2,800.00		
619.279	AUTOMATED TRAILER-MOUNTED SPEED LIMIT SIGN	U	2.00	\$2,750.00	\$5,500.00	\$3,000.00	\$6,000.00		
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.00	\$2,000.00	\$4,000.00	\$3,000.00	\$6,000.00		
692.	MOBILIZATION	U	1.00	\$30,000.00	\$30,000.00	\$20,620.00	\$20,620.00		
1010.15	FUEL ADJUSTMENT	\$	2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00		

Totals:	\$349,079.00	\$409,467.98	
Alt. Totals:			
Totals:	\$349,079.00	\$409,467.98	

PS&E Comparison

STATEWIDE CRACK SEAL TIER 2 N

43526

X-A005(129)

				A-Bidder		PS&E		
Item No.	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total	A-PS&E Difference
Items								
413.1	HOT-POURED CRACK SEALANT	LB	81,809.00	\$1.75	\$143,165.75	\$2.00	\$163,618.00	(\$20,452.25)
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	19,320.00	\$1.00	\$19,320.00	\$1.00	\$19,320.00	\$0.00
618.7	FLAGGERS	HR	798.00	\$25.00	\$19,950.00	\$31.50	\$25,137.00	(\$5,187.00)
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$80,000.00	\$80,000.00	\$90,000.00	\$90,000.00	(\$10,000.00)
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	4.00	\$2,000.00	\$8,000.00	\$2,376.00	\$9,504.00	(\$1,504.00)
619.279	AUTOMATED TRAILER-MOUNTED SPEED LIMIT SIGN	U	2.00	\$1,000.00	\$2,000.00	\$2,750.00	\$5,500.00	(\$3,500.00)
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.00	\$5,000.00	\$10,000.00	\$2,000.00	\$4,000.00	\$6,000.00
692.	MOBILIZATION	U	1.00	\$20,000.00	\$20,000.00	\$30,000.00	\$30,000.00	(\$10,000.00)
1010.15	FUEL ADJUSTMENT	\$	2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00	\$0.00
Total:					\$304,435.75		\$349,079.00	(\$44,643.25)

October 18, 2021

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION: This project is part of the Tier 2 Federal Resurfacing program and involves 35.1 miles of pavement crack seal on 8 sections in 9 towns in Maintenance Districts 1 and 3.

Section ID	Town/City	Road	Proposed Work	Length
22127	Bartlett	US 302	FW Crack Seal	1.1 Miles
22128	Hart's Location	US 302	FW Crack Seal	0.3 Miles
22129	Whitefield-Lancaster	US 3	FW Crack Seal	7.5 Miles
22130	Northumberland	US 3	FW Crack Seal	6.1 Miles
22131	Lancaster	US 2	FW Crack Seal	1.4 Miles
22132	Jefferson-Carroll	NH 115	FW Crack Seal	9.7 Miles
22133	Lincoln	US 3	FW Crack Seal	4.4 Miles
22319	Conway	US 302	FW Crack Seal	4.6 Miles

FEDERAL FUNDING: Pave-T2-Resurf (80%)/ Turnpike Toll Credits Match (20%)

CONTINGENCY: The proposed contingency amount is 10% of the contract amount. This project was quantified based on field observations and aerial photos. Field adjustments may be required due to varying field conditions. In addition, the sections will continue to deteriorate through the 2021-2022 winter.

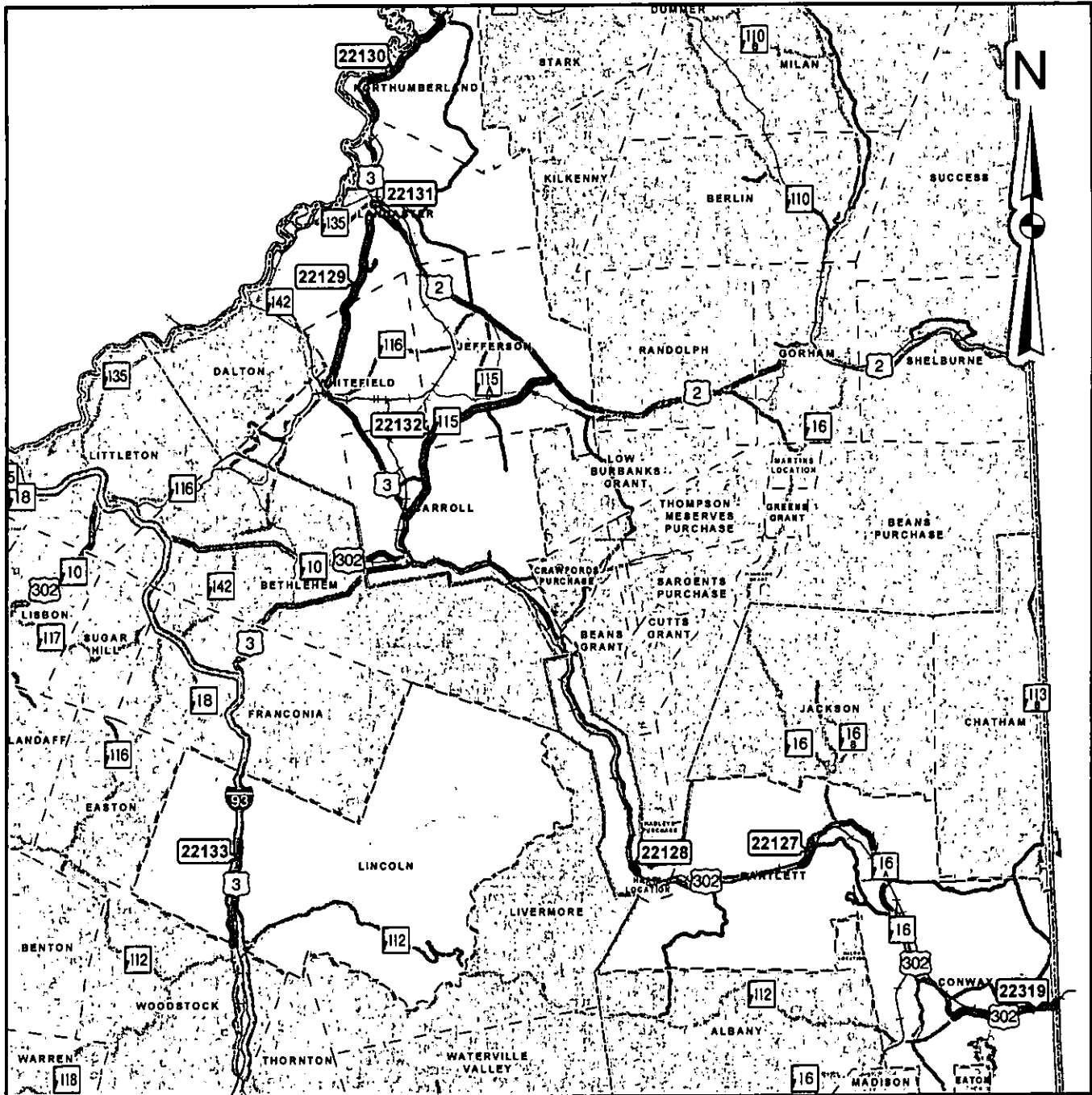
PROJECT INITIATED: This project was initiated through the State's Ten-Year Transportation Improvement Program, Paving-Tier-2-Resurfacing.

PROJECT EXPLANATION: This project will extend the pavement lifespan through sealing cracks formed by age and temperature change.

TRAFFIC IMPLICATION: This project will use one lane, alternating two-way traffic, lane shifts, and shoulder closures where necessary to complete the work, supplemented with flaggers. Night operations will be required for Sections 22127 and 22319.

FINAL COMPLETION DATE: August 19, 2022.

Statewide Tier 2 Crack Seal - 43526



0 3 6 9 12
Miles

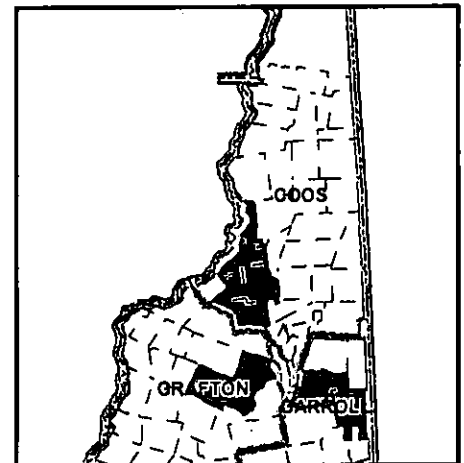
LEGEND

- 43526
- Interstates
- US Routes
- State Routes
- Unnumbered Routes
- Urban Compacts

New Hampshire
DOT
Department of Transportation

State #: 43526
Federal #: X-A005(129)

LOCATION MAP



State of New Hampshire

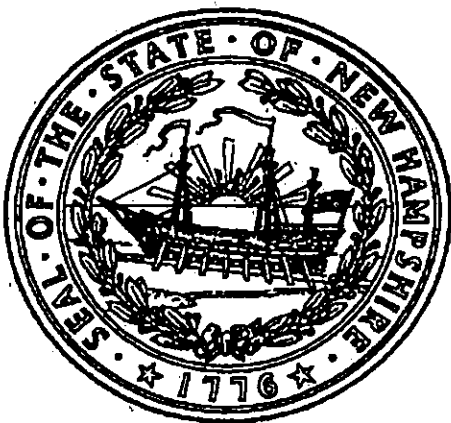
Department of State

CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that CONNECTICUT SEALCOATING LLC is a Connecticut Limited Liability Company registered to transact business in New Hampshire on April 20, 2022. 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: 896866

Certificate Number : 0005763933



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 20th day of April A.D. 2022.

A handwritten signature in black ink, appearing to read "David M. Scanlan", is written over a circular stamp that partially overlaps the seal of the state.

David M. Scanlan
Secretary of State

(Limited partnership, Limited liability professional partnership or LLC)

Limited Partnership or LLC Certification of Authority

I, Scott Sambrook hereby certify that I am a Partner, Member or Manager
(Name)
of Connecticut Seaboard LLC limited liability partnership under RSA 304-B,
(Name of Partnership or LLC)

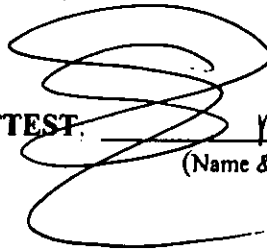
a limited liability professional partnership under RSA 304-D, or a limited liability company under RSA 304-C.

I certify that I am authorized to bind the partnership or LLC. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person listed above currently occupies the position indicated and that they have full authority to bind the partnership or LLC and that this authorization shall remain valid for thirty (30) days from the date of this Corporate Resolution

DATED

April 26, 2022

ATTEST



(Name & Title)

Managing member



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/26/2022

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 The Magnolia Agency 5 Essex Square Suite 2B Essex CT 06426		CONTACT NAME: Rich Varralo PHONE (A/C, No, Ext): (860) 681-8155 FAX (A/C, No): E-MAIL ADDRESS: rich@magnoliainsagency.com	
INSURED Connecticut Sealcoating, LLC 51 E Aurora Street Waterbury CT 06702		INSURER(S) AFFORDING COVERAGE INSURER A: United States Fire Insurance Company INSURER B: The North River Insurance Company INSURER C: The Continental Casualty Company INSURER D: INSURER E: INSURER F:	

COVERAGES**CERTIFICATE NUMBER:** CL2242800471**REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		506-903867-1	03/09/2022	03/09/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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 Employee Benefits \$ 1,000,000
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY		506-903867-1	03/09/2022	03/09/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		582-118544-7	03/09/2022	03/09/2023	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
	<input checked="" type="checkbox"/> 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	408-742861-5	03/09/2022	03/09/2023
A	Railroad Protective Liability		506-903867-1	03/09/2022	03/09/2023	General Aggregate \$2,000,000 Each Occurrence \$1,000,000

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

Railroad Protective Liability If the Contract involves work on, over, under or within 20 feet of the right-of-way of the railroad, on behalf of and payable to the railroad company and, if applicable, to the owner of the railroad corridor specified in the Prosecution of Work.

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire Department of Transportation
PO Box 483
7 Hazen Dr
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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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/09/2022

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 The Magnolia Agency 5 Essex Square Suite 2B Essex CT 06426	CONTACT NAME: Rich Varrato PHONE (A/C, No, Ext): (860) 581-8155 E-MAIL: rich@magnoliainsagency.com FAX (A/C, No): INSURER(S) AFFORDING COVERAGE INSURER A: Liberty Surplus Insurance Corporation INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED State of New Hampshire Railroad, New Hampshire Central Railroad Inc, their affiliates, successors and assigns US 3 North Umbertland NH 03582	NAIC # 10725

COVERAGES	CERTIFICATE NUMBER: CL225300508	REVISION NUMBER:
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.		

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Railroad Protective Coverage GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		05062022-1	05/06/2022	05/06/2023	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 6,000,000 PRODUCTS - COM/POP AGG \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$			
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY								
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$								EACH OCCURRENCE \$ AGGREGATE \$ PER STATUTE OTH-ER
	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 <input type="checkbox"/> N/A							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)

Statewide Crack Seal Tier 2 N 43526

Section 22130 - US 3, Northumberland
(New Hampshire Central Railroad)

Section 22127, 22319-US 302, Bartlett, Conway (Conway Scenic Railroad)

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire Department of Transportation PO Box 483 7 Hazen Dr 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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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/09/2022

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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 The Magnolia Agency 5 Essex Square Suite 2B Essex CT 06428	CONTACT NAME: Rich Varrato PHONE (A/C, No, Ext): (860) 581-8155 E-MAIL ADDRESS: rich@magnoliainsagency.com FAX (A/C, No): INSURER(S) AFFORDING COVERAGE INSURER A: Liberty Surplus Insurance Corporation INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 10725
INSURED State of New Hampshire Railroad, New Hampshire Conway Scenic Railroad Inc, their affiliates, successors and assigns US 302 Conway NH 03818		

COVERAGES **CERTIFICATE NUMBER:** CL225300506 **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 WYD	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"/> Railroad Protective Coverage GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		05062022-2	05/03/2022	05/03/2023	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 6,000,000 PRODUCTS - COMP/OP AGG \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	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					PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> 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	Y/N <input type="checkbox"/>	N/A			

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

Statewide Crack Seal Tier 2 N 43528

Section 22130 - US 3, Northumberland
(New Hampshire Central Railroad)

Section 22127, 22319-US 302, Bartlett, Conway (Conway Scenic Railroad)

CERTIFICATE HOLDER

State of New Hampshire Department of Transportation PO Box 483 7 Hazen Dr 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

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/09/2022

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	CONTACT NAME: Rich Varrato
The Magnolia Agency	PHONE (A/C, No, Ext): (880) 581-8155 FAX (A/C, No):
5 Essex Square	E-MAIL ADDRESS: rich@magnoliainsagency.com
Suite 2B	INSURER(S) AFFORDING COVERAGE
Essex CT 06426	INSURER A: Colony Insurance Company NAIC # 39993
INSURED	INSURER B:
New Hampshire Department of Transportation	INSURER C:
7 Hazen Dr	INSURER D:
Concord NH 03301	INSURER E:
	INSURER F:

COVERAGES	CERTIFICATE NUMBER: CL2242700485	REVISION NUMBER:
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.		

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY		042720221	04/27/2022	07/27/2022	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	DAMAGE TO RENTED PREMISES (Ea occurrence) \$				
	<input checked="" type="checkbox"/> Owners and Contractors Protective	MED EXP (Any one person) \$				
		PERSONAL & ADV INJURY \$				
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$ 3,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					PRODUCTS - COM/OP AGG \$
	OTHER:					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY					PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB					\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$
	DED RETENTION \$					AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y / N				PER STATUTE OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below	N / A				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)

Statewide Crack Seal Tier 2 N 43526

Section 22130 - US 3, Northumberland
(New Hampshire Central Railroad)

Section 22127, 22319-US 302, Bartlett, Conway (Conway Scenic Railroad)

CERTIFICATE HOLDER	CANCELLATION
State of New Hampshire Department of Transportation PO Box 483 7 Hazen Dr 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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