



# State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES  
OFFICE OF THE COMMISSIONER  
25 Capitol Street – Room 120  
Concord, New Hampshire 03301

*WJ* *JM*

LINDA M. HODGDON  
Commissioner  
(603) 271-3201

JOSEPH B. BOUCHARD  
Assistant Commissioner  
(603) 271-3204

Bureau of Public Works  
Design and Construction  
Project No. 80737 – Contract B

September 29, 2014

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

### REQUESTED ACTION

1). Authorize the Bureau of Public Works Design and Construction to enter into a contract with Gerard A. Laflamme, Inc., (VC#174091) Londonderry, NH, for a total price not to exceed \$409,000, for the Manchester Circuit Court Generator, Manchester, NH. This contract is effective upon Governor and Council approval through May 4, 2015, unless extended in accordance with the contract terms. **95.7% Capital - General Funds, 4.3% Other Funds (Facilities Escrow Account).**

2). Further authorize the amount of \$600 be approved for payment to the Department of Administrative Services, Bureau of Public Works Design and Construction (VC# 177875), for engineering services provided, bringing the total to \$409,600. **100% Other Funds (Facilities Escrow Account).**

Funding is available in account titled Department of Administrative Services - Bureau of Court Facilities as follows:

|                          |                             |                   |
|--------------------------|-----------------------------|-------------------|
| 01-14-14-146530-12860000 | Manchester Circuit Court    | <u>SFY15</u>      |
| 034-500162               | – Repair/Renovations Bldgs. | \$ 391,600        |
| 01-10-10-100010-85100000 | Manchester Circuit Court    |                   |
| 048-500162               | – Repair/Renovations Bldgs. | \$ 17,400         |
| 048-500162               | – Interagency BPW Fees      | <u>600</u>        |
|                          | Sub-total                   | \$ 18,000         |
|                          | <b>Grand Total</b>          | <b>\$ 409,600</b> |

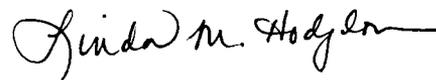
### **EXPLANATION**

This project will install a new outdoor generator and rewire various loads in the building to be backed up by standby power. The main goal is to keep the building heated in the event of a winter power outage and keep various other systems functioning during any outage.

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 – Bureau of Court Facilities 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, Bureau 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,



Linda M. Hodgdon  
Commissioner

|                      |                  |
|----------------------|------------------|
| Department Estimate: | \$368,720        |
| Contract Amount:     | <u>\$409,000</u> |
| Over Estimate:       | \$ 40,280        |

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80737, Contract B – Manchester Circuit Court Generator, Manchester.

DESCRIPTION: Install a new outdoor generator and rewire various loads in the building to be backed up by standby power. The main goal is to keep the building heated in the event of a winter power outage and keep various other systems functioning during any outage.

EXPLANATION: The building facilities staff is concerned with winter freezing of building systems in the event that the utility power fails. Another benefit will be to put the emergency lighting on the generator so all the battery powered units can be eliminated thus reducing maintenance costs.

OVER ESTIMATE

EXPLANATION: Because the generator is being installed on the roof, the contractor has to block traffic on a city street to be able to use a crane to place the generator. He is likely building in a premium for the higher risk involved.

DEPARTMENT

ESTIMATE: \$368,720  
LOW BID: \$409,000

**BIDDER SUMMARY**

PROJECT NAME: MANCHESTER CIRCUIT COURT GENERATOR NON-FEDERAL 80737-B  
PROJECT NUMBER: 80737-B  
COUNTY: MERRIMACK COUNTY 013  
BID OPENING DATE: 08/25/2014  
SCOPE OF WORK: INSTALL A NEW GENERATOR AT MANCHESTER CIRCUIT COURT  
LOCATION: MANCHESTER NH  
COMPLETION DATE: 05/04/2015

**BID RESULTS**

|  |    |            |          |
|--|----|------------|----------|
| 1 GERARD A LAFLAMME, INC - 100 HARVEY ROAD LONDONDERRY, NH 03053             | \$ | 409,000.00 | ACCEPTED |
| 3 GREEN MOUNTAIN COMMUNICATIONS INC - 702 RIVERWOOD DRIVE PEMBROKE, NH 03275 | \$ | 426,939.00 | ACCEPTED |
| 2 MARTINI NORTHERN, LLC (B001) - 299 HANOVER ST PORTSMOUTH, NH 03801         | \$ | 488,000.00 | ACCEPTED |

Item 1: \$371,000.00  
Item 2: \$25,000.00  
Item 3: \$101,000.00  
Item 4: \$409,000.00

BUREAU OF PUBLIC WORKS

Award to Gerard A. LaFlamme, Inc.  
 Hold for Negotiation  
 Cancel Contract  
User Agency: DAS - Courts  
Authorized by: [Signature]  
Date: 09/09/2014

| ITEM NO. | DESCRIPTION   | UNIT | QUANTITY  | UNIT PRICE    | TOTAL         | PS&E | UNIT PRICE    | TOTAL         | A | UNIT PRICE    | TOTAL         |
|----------|---|------|-----------|---------------|---------------|------|---------------|---------------|---|---------------|---------------|
| 901.00   | INSTALL GENERATOR INCLISV OF GEN CONDITIONS PER DRAWINGS AND SPECS    | EA   | 1.00      | \$ 335,200.00 | \$ 335,200.00 |      | \$ 371,000.00 | \$ 371,000.00 |   | \$ 371,000.00 | \$ 371,000.00 |
| 902.00   | ALLOWANCE #1 FOR ELEC, MECH & STRUC SAFETY/CODE VIOLATIONS UNFORESEEN | \$   | 25,000.00 | \$ 1.00       | \$ 25,000.00  |      | \$            | \$ 25,000.00  |   | \$ 1.00       | \$ 25,000.00  |
| 903.00   | ALLOWANCE #2 FOR OWNER INITIATED CHANGES/HAZMAT ABATEMENT             | \$   | 10,000.00 | \$ 1.00       | \$ 10,000.00  |      | \$            | \$ 10,000.00  |   | \$ 1.00       | \$ 10,000.00  |
| 904.00   | ALLOWANCE #3 FOR PRGRMNG BLDG CONTROLS. NO MARKUP                     | \$   | 3,000.00  | \$ 1.00       | \$ 3,000.00   |      | \$            | \$ 3,000.00   |   | \$ 1.00       | \$ 3,000.00   |
|          |   |      |           |               | \$ 373,200.00 |      |               | \$ 373,200.00 |   |               | \$ 409,000.00 |

| ITEM NO. | DESCRIPTION   | UNIT | QUANTITY  | UNIT PRICE    | TOTAL         | PS&E | UNIT PRICE    | TOTAL         | UNIT PRICE    | TOTAL         |
|----------|---|------|-----------|---------------|---------------|------|---------------|---------------|---------------|---------------|
| 01.00    | INSTALL GENERATOR INCLSV OF GEN CONDITIONS PER DRAWINGS AND SPECS     | EA   | 1.00      | \$ 335,200.00 | \$ 335,200.00 |      | \$ 388,939.00 | \$ 388,939.00 | \$ 388,939.00 | \$ 388,939.00 |
| 02.00    | ALLOWANCE #1 FOR ELEC, MECH & STRUC SAFETY/CODE VIOLATIONS UNFORESEEN | \$   | 25,000.00 | \$ 1.00       | \$ 25,000.00  |      | \$ 1.00       | \$ 25,000.00  | \$ 1.00       | \$ 25,000.00  |
| 03.00    | ALLOWANCE #2 FOR OWNER INITIATED CHANGES/HAZMAT ABATEMENT             | \$   | 10,000.00 | \$ 1.00       | \$ 10,000.00  |      | \$ 1.00       | \$ 10,000.00  | \$ 1.00       | \$ 10,000.00  |
| 04.00    | ALLOWANCE #3 FOR PRGRMNG BLDG CONTROLS. NO MARKUP                     | \$   | 3,000.00  | \$ 1.00       | \$ 3,000.00   |      | \$ 1.00       | \$ 3,000.00   | \$ 1.00       | \$ 3,000.00   |
|          |   |      |           |               |               |      |               | \$ 373,200.00 |               | \$ 426,939.00 |

| ITEM NO. | DESCRIPTION   | UNIT | QUANTITY  | UNIT PRICE    | TOTAL         | PS&E | UNIT PRICE | TOTAL         | C | UNIT PRICE    | TOTAL         |
|----------|---|------|-----------|---------------|---------------|------|------------|---------------|---|---------------|---------------|
| 901.00   | INSTALL GENERATOR INCLISIV OF GEN CONDITIONS PER DRAWINGS AND SPECS   | EA   | 1.00      | \$ 335,200.00 | \$ 335,200.00 |      |            | \$ 335,200.00 |   | \$ 450,000.00 | \$ 450,000.00 |
| 902.00   | ALLOWANCE #1 FOR ELEC, MECH & STRUC SAFETY/CODE VIOLATIONS UNFORESEEN | \$   | 25,000.00 | \$ 1.00       | \$ 25,000.00  |      |            | \$ 25,000.00  |   | \$ 1.00       | \$ 25,000.00  |
| 903.00   | ALLOWANCE #2 FOR OWNER INITIATED CHANGES/HAZMAT ABATEMENT             | \$   | 10,000.00 | \$ 1.00       | \$ 10,000.00  |      |            | \$ 10,000.00  |   | \$ 1.00       | \$ 10,000.00  |
| 904.00   | ALLOWANCE #3 FOR PRGRMG BLDG CONTROLS. NO MARKUP                      | \$   | 3,000.00  | \$ 1.00       | \$ 3,000.00   |      |            | \$ 3,000.00   |   | \$ 1.00       | \$ 3,000.00   |
|          |   |      |           |               |               |      |            | \$ 373,200.00 |   |               | \$ 488,000.00 |



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/12/2014

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).

|   |   |                                      |
|---|---|--------------------------------------|
| <b>PRODUCER</b><br>THE ROWLEY AGENCY INC.<br>139 Loudon Road<br>P.O. Box 511<br>Concord NH 03302-0511 | <b>CONTACT NAME:</b> Kelley Massey          |                                      |
|   | <b>PHONE (A/C, No, Ext):</b> (603) 224-2562 | <b>FAX (A/C, No):</b> (603) 224-8012 |
| <b>E-MAIL ADDRESS:</b> kmassey@rowleyagency.com   |   |                                      |
| <b>INSURER(S) AFFORDING COVERAGE</b>  |   | <b>NAIC #</b>                        |
| <b>INSURER A:</b> Firemen's Ins Co of Wash. DC  |   | 21784                                |
| <b>INSURER B:</b> Acadia Insurance Company  |   |                                      |
| <b>INSURER C:</b>   |   |                                      |
| <b>INSURER D:</b>   |   |                                      |
| <b>INSURER E:</b>   |   |                                      |
| <b>INSURER F:</b>   |   |                                      |

**COVERAGES**                      **CERTIFICATE NUMBER:** 13-14 General                      **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  |           |          | CPA023562416     | 12/19/2013              | 12/19/2014              | EACH OCCURRENCE  | \$ 1,000,000 |
|          | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC |           |          |                  |                         |                         | DAMAGE TO RENTED PREMISES (Ea occurrence)                | \$ 250,000   |
|          |  |           |          |                  |                         |                         | 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   |           |          | CAA023562515     | 12/19/2013              | 12/19/2014              | COMBINED SINGLE LIMIT (Ea accident)                      | \$ 1,000,000 |
|          | <input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> NON-OWNED AUTOS   |           |          |                  |                         |                         | BODILY INJURY (Per person)                               | \$           |
|          |  |           |          |                  |                         |                         | BODILY INJURY (Per accident)                             | \$           |
|          |  |           |          |                  |                         |                         | PROPERTY DAMAGE (Per accident)                           | \$           |
|          |  |           |          |                  |                         |                         | Underinsured motorist                                    | \$           |
| B        | UMBRELLA LIAB  |           |          | CUR023562816     | 12/19/2013              | 12/19/2014              | EACH OCCURRENCE  | \$ 5,000,000 |
|          | <input checked="" type="checkbox"/> EXCESS LIAB<br><input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$  |           |          |                  |                         |                         | AGGREGATE  | \$ 5,000,000 |
|          |  |           |          |                  |                         |                         |  | \$           |
| A        | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  |           |          | WPA027786615     | 12/19/2013              | 12/19/2014              | <input checked="" type="checkbox"/> WC STATU-TORY LIMITS | OTH-ER       |
|          | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N       | N/A      | 3A States: NH ME |                         |                         | E.L. EACH ACCIDENT                                       | \$ 500,000   |
|          |  |           |          |                  |                         |                         | E.L. DISEASE - EA EMPLOYEE                               | \$ 500,000   |
|          |  |           |          |                  |                         |                         | E.L. DISEASE - POLICY LIMIT                              | \$ 500,000   |
| A        | Leased/Rented Equipment  |           |          | CPA023562416     | 12/19/2013              | 12/19/2014              | Limit  | \$60,000     |
| A        | Installation Floater   |           |          | CPA023562416     | 12/19/2013              | 12/19/2014              | Limit  | \$100,000    |

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Project: Manchester Circuit Court Generator, Project Number 80737, Contract B.

|   |   |
|---|---|
| <b>CERTIFICATE HOLDER</b><br><br>State of New Hampshire<br>Department of Administrative Services<br>Bureau of Public Works<br>7 Hazen Drive<br>Concord, NH 03300-0483 | <b>CANCELLATION</b><br><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
|   | <b>AUTHORIZED REPRESENTATIVE</b><br><br>Rhonda Noble/RLN <i>Rhonda L. Noble</i>   |





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/12/2014

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|   |  |                                      |
|---|--|--------------------------------------|
| <b>PRODUCER</b><br>THE ROWLEY AGENCY INC.<br>139 Loudon Road<br>P.O. Box 511<br>Concord NH 03302-0511                                   | <b>CONTACT NAME:</b> Kelley Massey<br><b>PHONE (A/C, No, Ext):</b> (603) 224-2562<br><b>E-MAIL ADDRESS:</b> kmassey@rowleyagency.com | <b>FAX (A/C, No):</b> (603) 224-8012 |
|   | <b>INSURER(S) AFFORDING COVERAGE</b>   |                                      |
| <b>INSURED</b><br>State of NH, Dpt of Admin Services; Gerard A. LaFlamme, Inc. and Any/All Subs<br>P.O. Box 5706<br>Manchester NH 03108 | <b>INSURER A:</b> Liberty Mutual Ins Co  |                                      |
|   | <b>INSURER B:</b>  |                                      |
|   | <b>INSURER C:</b>  |                                      |
|   | <b>INSURER D:</b>  |                                      |
|   | <b>INSURER E:</b>  |                                      |
|   | <b>INSURER F:</b>  |                                      |

|                  |                                      |                         |
|------------------|--------------------------------------|-------------------------|
| <b>COVERAGES</b> | <b>CERTIFICATE NUMBER:</b> BR-80737R | <b>REVISION NUMBER:</b> |
|------------------|--------------------------------------|-------------------------|

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   |
|----------|--|-----------|----------|---------------|-------------------------|-------------------------|--|
|          | <b>GENERAL LIABILITY</b><br><input type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC |           |          |               |                         |                         | EACH OCCURRENCE \$<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$<br>MED EXP (Any one person) \$<br>PERSONAL & ADV INJURY \$<br>GENERAL AGGREGATE \$<br>PRODUCTS - COMP/OP AGG \$       |
|          | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS   |           |          |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$  |
|          | <b>UMBRELLA LIAB</b><br><b>EXCESS LIAB</b><br><input type="checkbox"/> OCCUR<br><input type="checkbox"/> CLAIMS-MADE<br>DED RETENTION \$   |           |          |               |                         |                         | EACH OCCURRENCE \$<br>AGGREGATE \$   |
|          | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  |           |          |               |                         |                         | <input type="checkbox"/> Y <input type="checkbox"/> N<br>N/A<br>WC STATUTORY LIMITS<br>OTHER<br>E.L. EACH ACCIDENT \$<br>E.L. DISEASE - EA EMPLOYEE \$<br>E.L. DISEASE - POLICY LIMIT \$ |
| A        | <b>Builders Risk</b><br>35 Amherst St, Manchester  |           |          | B91491211836  | 10/15/2014              | 10/15/2015              | \$409,000 LIMIT<br>\$1,000 Deductible  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Attesting to builders risk coverage at Manchester Circuit Court Generator, Project Number 80737, Contract B.

|   |   |
|---|---|
| <b>CERTIFICATE HOLDER</b><br><br>State of New Hampshire<br>Department of Administrative Services<br>Bureau of Public Works<br>7 Hazen Drive<br>Concord, NH 03300-0483 | <b>CANCELLATION</b><br><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br><br>Rhonda Noble/RLN <i>Rhonda L. Noble</i> |
|---|---|