



# State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES

25 Capitol Street - Room 120  
Concord, New Hampshire 03301

82 ml

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. 80965R - Contract D

February 28, 2022

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 Ray's Electric and General Contracting, Inc. (VC# 323734) Berlin, New Hampshire, for a total price not to exceed \$2,047,000 for the Re-bid Highway Maintenance Facility, Colebrook/Dixville, New Hampshire. This contract is effective upon Governor and Council approval through November 1, 2022, unless extended in accordance with the contract terms. **100% Highway Funds.**

2). Further authorize the amount of \$75,000 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 \$2,122,000. **100% Highway Funds.**

Funding is available in account titled Dept. of Transportation as follows:

	<b><u>SFY22</u></b>
04-96-96-960030-16850000 17-228:2-II:E Dixville Patrol 034- 500161 New Construction	\$ 1,180,000
04-96-96-960030-16830000 17-228:2-II:C Salt Sheds 034-500162 Repair Renovate	\$ 161,500
04-96-96-960030-13480000 19-146:2-II:E Statewide Salt 034-500161 New Construction	\$ 86,500
04-96-96-960030-93530000 L21:216 Patrol Sheds DO 034-500161 New Construction	<u>\$ 619,000</u>
<b>Subtotal</b>	<b>\$ 2,047,000</b>
 04-96-96-960030-93530000 L21:216 Patrol Sheds DO 034-500161 New Construction - DPW Fees	 <u>\$ 75,000</u>
<b>Grand Total</b>	<b>\$ 2,122,000</b>

#### **EXPLANATION**

This project will construct a 3,600 SF wood-framed Patrol Building for staff quarters and vehicle storage, and a 2,500 SF Salt Building for the storage of highway salt. A new fuel dispenser with above ground diesel storage will be provided, and a new septic system and drilled well will be constructed.

This satellite Department of Transportation (DOT) shed is responsible for maintaining NH Route 26 through Dixville Notch and currently operates from a garage located on property owned by the Balsams Resort. In order for the Balsams to redevelop their property, the DOT has negotiated a property swap and will be relocated to a site with better access to NH Route 26.

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 Transportation 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:	\$ 1,625,480
Contract Amount:	<u>\$ 2,047,000</u>
Over Estimate:	\$ 421,520

## CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 80965R, Contract D  
Highway Maintenance Facility, Valley Road,  
Colebrook/Dixville, New Hampshire

DESCRIPTION: This project will construct a 3,600 SF wood-framed Patrol Building for staff quarters and vehicle storage, and a 2,500 SF Salt Building for the storage of highway salt. A new fuel dispenser with aboveground diesel storage will be provided, and a new septic system and drilled well will be constructed.

EXPLANATION: This satellite Department of Transportation (DOT) shed is responsible for maintaining NH Route 26 through Dixville Notch and currently operates from a garage located on property owned by the Balsams Resort. In order for the Balsams to redevelop their property, the DOT has negotiated a property swap and will be relocated to a site with better access to NH Route 26.

### OVER ESTIMATE

EXPLANATION: The low bid was 11% higher than the estimate and considered to be within industry standards.

### ALTERNATE

EXPLANATION: ADD Alternate #1, for the bid amount of \$238,000, was accepted to pave the entryway and maintenance yard of the facility.

DEPARTMENT ESTIMATE: \$ 1,625,480

LOW BID: \$ 1,809,900

OVER ESTIMATE: \$ 184,420



Division of Public Works

## ABC Bid Data

COLEBROOK/DIXVILLE

80965R-D

NON-FEDERAL

PROJECT: COLEBROOK/DIXVILLE  
STATE PROJECT NUMBER: 80965R-D  
FED. PROJECT NUMBER: NON-FEDERAL  
DATE BIDS OPEN: October 27, 2021, 2:00  
SCOPE OF WORK: REBID HIGHWAY MAINTENANCE FACILITY  
COMPLETION DATE: November 01, 2022  
LOCATION: Coos

Awarded To:

Amount: \$0.00

Award Date:

Certified by:

Director of Project Development

### Summary of Bidders

Contractor	Bid Amount	Rank
RAY'S ELECTRIC,& GENERAL CONTRACTING INC PO BOX 597, BERLIN NH 03570	\$1,809,000.00	A
HEBERT, DANIEL INC. 12 PLEASANT ST., COLEBROOK NH 03576	\$1,915,794.00	B

901 - \$1,122,000  
902 - 148,000  
903 - 191,000  
904 - 248,000  
905 - 75,000  
906 - 25,000  
991 - 238,000 Add Alternate #1  
\$2,047,000

### BUREAU OF PUBLIC WORKS

☒ Award to A Bidder \$2,047,000  
☐ Hold for Negotiation  
☐ Cancel Contract

User Agency DOT

Authorized by MWJ

Date 12/3/21



# ABC Bid Data

COLEBROOK/DIXVILLE  
80965R-D  
NON-FEDERAL

Item No.	Description	Unit	Quantity	PS&E		RAY'S ELECTRIC & GENERAL CONTRACTING INC PO BOX 597 BERLIN, NH 03570		HEBERT, DANIEL INC. 12 PLEASANT ST. COLEBROOK, NH 03576	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

## Items

901	PATROL BUILDING	U	1.00	\$990,000.00	\$990,000.00	\$1,122,000.00	\$1,122,000.00	\$1,297,928.00	\$1,297,928.00
902	SITework FOR HIGHWAY MAINTENANCE FACILITY	U	1.00	\$176,880.00	\$176,880.00	\$148,000.00	\$148,000.00	\$102,438.00	\$102,438.00
903	FUEL STATION	U	1.00	\$165,000.00	\$165,000.00	\$191,000.00	\$191,000.00	\$122,068.00	\$122,068.00
904	SALT BUILDING	U	1.00	\$193,600.00	\$193,600.00	\$248,000.00	\$248,000.00	\$293,360.00	\$293,360.00
905	UNFORESEEN OR OWNER INITIATED CHANGES	\$	75,000.00	\$1.00	\$75,000.00	\$1.00	\$75,000.00	\$1.00	\$75,000.00
906	UTILITY FEES	\$	25,000.00	\$1.00	\$25,000.00	\$1.00	\$25,000.00	\$1.00	\$25,000.00
Totals:					\$1,625,480.00		\$1,809,000.00		\$1,915,794.00

## 80965R-D ADD ALTERNATE 1

### 80965R-D ADD ALTERNATE 1

991	ADD ALTERNATE 1: HOT BITUMIOUS PAVEMENT ITEM 403.11	U	1.00	\$200,000.00	\$200,000.00	\$238,000.00	\$238,000.00	\$268,478.00	\$268,478.00
Alt. Totals:									
Totals:					\$1,625,480.00		\$1,809,000.00		\$1,915,794.00

# 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 RAY'S ELECTRIC AND GENERAL CONTRACTING, INC. is a New Hampshire Profit Corporation registered to transact business in New Hampshire on June 18, 1971. 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: 17837

Certificate Number: 0005337807



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 2nd day of April A.D. 2021.

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner  
Secretary of State



## Business Information

### Business Details

---

Business Name:	RAY'S ELECTRIC AND GENERAL CONTRACTING, INC.	Business ID:	17837
Business Type:	Domestic Profit Corporation	Business Status:	Good Standing
Business Creation Date:	06/18/1971	Name in State of Incorporation:	Not Available
Date of Formation in Jurisdiction:	06/18/1971		
Principal Office Address:	33 JERICO ROAD, BERLIN, NH, 03570, USA	Mailing Address:	PO BOX 597, BERLIN, NH, 03570, USA
Citizenship / State of Incorporation:	Domestic/New Hampshire		
		Last Annual Report Year:	2022
		Next Report Year:	2023
Duration:	Perpetual		
Business Email:	rays@raysnh.com	Phone #:	NONE
Notification Email:	rays@raysnh.com	Fiscal Year End Date:	NONE

---

### Principal Purpose

---

S.No	NAICS Code	NAICS Subcode
1	OTHER / ELECTRICAL (1997 AR)	

---



## Principals Information

Name/Title	Business Address
Denis Binette / Vice President	33 Jericho Road Po Box 597, Berlin, NH, 03570, USA
Denis Binette / Treasurer	33 Jericho Road Po Box 597, Berlin, NH, 03570, USA
Steven Binette / Director	33 Jericho Road Po Box 597, Berlin, NH, 03570, USA
Steven Binette / President	33 Jericho Road Po Box 597, Berlin, NH, 03570, USA
Francine Nichols / Secretary	33 Jericho Rd Po Box 597, Berlin, NH, 03570, USA

Page 1 of 1, records 1 to 5 of 5

## Registered Agent Information

Name: Binette, Steven M

Registered Office 33 Jericho Road, Berlin, NH, 03570, USA  
Address:

Registered Mailing 33 Jericho Road, Berlin, NH, 03570, USA  
Address:

## Trade Name Information

No Trade Name(s) associated to this business.

## Trade Name Owned By

No Records to View.

## Trademark Information

Trademark Number	Trademark Name	Business Address	Mailing Address
------------------	----------------	------------------	-----------------

No records to view.

<a href="#">Filing History</a>	<a href="#">Address History</a>	<a href="#">View All Other Addresses</a>	<a href="#">Name History</a>	<a href="#">Shares</a>
<a href="#">Businesses Linked to Registered Agent</a>		<a href="#">Return to Search</a>	<a href="#">Back</a>	

NH Department of State, 107 North Main St. Room 204, Concord, NH 03301 -- [Contact Us](#)  
[\(/online/Home/ContactUS\)](#)

Version 2.1 © 2014 PCC Technology Group, LLC, All Rights Reserved.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/7/2021

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).

PRODUCER THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Rachel Giunta PHONE (A/C, No, Ext): (603) 224-2562 FAX (A/C, No): (603) 224-8012 E-MAIL ADDRESS: rgiunta@rowleyagency.com
INSURED Ray's Electric and General Contracting, Inc. P.O. Box 597 Berlin NH 03570-0597	INSURER(S) AFFORDING COVERAGE INSURER A: Cincinnati Ins INSURER B: Eastern Alliance Insurance Group 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 INSD	SUBR 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 <input checked="" type="checkbox"/> Contractual <input checked="" type="checkbox"/> X, C, U Hazards GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			EPP0193760	5/14/2021	5/14/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 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 Liability \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS			EBA0386629	5/14/2021	5/14/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Underinsured motorist combined sir \$ 1,000,000
A	<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 \$ 0			EPP0193760	5/14/2021	5/14/2022	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 Products/Completed Ops \$ 3,000,000
B	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	N/A	3A States: NH 01-0000116962	5/14/2021	5/14/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Motor Truck Cargo			EPP0193760	5/14/2021	5/14/2022	Single Conveyance/\$1,000 Ded \$10,000
A	Inland Marine			EPP0193760	5/14/2021	5/14/2022	Leased/Rented Equipment \$100,000

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

Colebrook-Dixville 80965RD Covering operations usual to insured throughout the policy term. The State of New Hampshire, its agencies, and its agents and employees are additional insureds when required by written contract.

## CERTIFICATE HOLDER

## CANCELLATION

State of New Hampshire c/o Department of Administrative Services 7 Hazen Drive Room 250 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 Rachel Giunta/RG <i>Rachel A Giunta</i>
---	---

© 1988-2014 ACORD CORPORATION. All rights reserved.



# EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
03/17/2022

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 <b>THE ROWLEY AGENCY INC.</b> 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511		PHONE (A/C, No, Ext): (603) 224-2562		COMPANY <b>Acadia Insurance Company</b> One Acadia Commons P.O. Box 9010 Westbrook ME 04098-5010	
FAX (A/C, No): (603) 224-8012		E-MAIL ADDRESS: ryansimpson@rowleyagency.co			
CODE:		SUB CODE:			
AGENCY CUSTOMER ID #: 00007878					
INSURED <b>Ray's Electric and General Contracting, Inc. &amp; State of NH Dep of Admin Services</b> P.O. Box 597 Berlin NH 03570-0597		LOAN NUMBER		POLICY NUMBER <b>CIM5432292</b>	
		EFFECTIVE DATE <b>12/7/2021</b>		EXPIRATION DATE <b>12/7/2022</b>	
				<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:					

## PROPERTY INFORMATION

LOCATION/DESCRIPTION <b>Loc# 00001 Lot 258-1-1 Valley Road Colebrook, NH 03576</b>
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
<b>Builders Risk-Jobsite Limit-Special Form</b>	<b>\$2,047,000</b>	<b>\$2,500</b>
<b>Job Specific Earthquake (C)</b>		<b>\$25,000</b>
<b>Job Specific Flood</b>		<b>\$25,000</b>

## REMARKS (Including Special Conditions)

<b>Colebrook-Dixville 80965RD</b> <b>Waiver of Subrogation Applies</b> <b>Named Insured also includes: Any &amp; All Subcontractors</b>
---

## 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  <b>State of New Hampshire Department of Administrative Services 7 Hazen Drive Room 250 Concord, NH 03302</b>	MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
	LOAN #	
	AUTHORIZED REPRESENTATIVE  <b>Rachel Giunta/RG</b> <i>Rachel A Giunta</i>	

ACORD 27 (2009/12)  
INS027 (200912).02

© 1993-2009 ACORD CORPORATION. All rights reserved.

The ACORD name and logo are registered marks of ACORD





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/7/2021

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> Rachel Giunta <b>PHONE (A/C, No, Ext):</b> (603) 224-2562 <b>E-MAIL ADDRESS:</b> rgiunta@rowleyagency.com <b>FAX (A/C, No):</b> (603) 224-8012	
<b>INSURED</b> State of New Hampshire Department of Administrative Services P.O. Box 597 Berlin NH 03570-0597		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Cincinnati Ins INSURER B: 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY			ENP12072021	12/7/2021	12/7/2022	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 & Contractors Protec						MED EXP (Any one person) \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						PERSONAL & ADV INJURY \$
	AUTOMOBILE LIABILITY						GENERAL AGGREGATE \$ 3,000,000
	ANY AUTO						PRODUCTS - COM/POP AGG \$
	ALL OWNED AUTOS						
	HIRED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$
	SCHEDULED AUTOS						BODILY INJURY (Per person) \$
	NON-OWNED AUTOS						BODILY INJURY (Per accident) \$
	UMBRELLA LIAB						PROPERTY DAMAGE (Per accident) \$
	EXCESS LIAB						
	DED						EACH OCCURRENCE \$
	RETENTION \$						AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						PER STATUTE OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						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)  
Colebrook-Dixville 80965RC

**CERTIFICATE HOLDER****CANCELLATION**

State of New Hampshire  
c/o Department of Administrative Services  
7 Hazen Drive  
Room 250  
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

Rachel Giunta/RG

*Rachel A. Giunta*