



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

VICKI V. QUIRAM
Commissioner
(603)-271-3201

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

Division of Public Works
Design and Construction
Project No. 80899R – Contract B

September 27, 2016

Her Excellency, Governor Margaret Wood Hassan
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 D. L King and Associates, Inc. (VC# 168979) Nashua, NH, for a total price not to exceed \$490,786, for the New Hampshire State Library Moisture Intrusion Remediation, Concord, NH. This contract is effective upon Governor and Council approval through May 31, 2017, unless extended in accordance with the contract terms. **47% General – Capital Funds, 53% Transfer/Other Funds.**

2). Further authorize pursuant to 220:13, Laws of 2015, the amount of \$10,438 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), Capital Clerk for oversight and engineering services provided, bringing the total to \$501,224. **100% Capital – General Funds.**

3). Further authorize the amount of \$927 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), for engineering services provided, bringing the total to \$502,151. **86.99% General – Operating Funds, 13.01% Transfer/Other Funds.**

Funding is available in account titled Administrative Services – Division of Plant & Property Management as follows:

01-14-14-146030-49770000 State Library	<u>SFY17</u>
034-500162- Repair/Renovations Bldgs.	\$ 231,801
034-500162- Interagency DPW Fees	<u>10,438</u>
Sub-Total	\$ 242,239

01-14-14-141510-29500000 General Services Maint. & Grounds

048-500226- Repair/Renovations Bldgs.	\$ 258,985
048-500226- Interagency DPW Fees	<u>927</u>
Sub-Total	\$ 259,912
Grand Total	\$ 502,151

EXPLANATION

This project includes exterior repointing of the granite parapet, removal and replacement of existing roofing system at the tower area. The project also includes repointing of two (2) chimneys.

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,


for Vicki V. Quiram
Commissioner

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: NH State Library-Moisture Intrusion Remediation DPW
Project No. 80899, Contract B

DESCRIPTION: Exterior repointing of the granite parapet and removal and replacement of existing roofing system at the tower area. The project also includes repointing of two (2) chimneys.

UNDER
ESTIMATE

EXPLANATION: The low base bid for the project was 4% below the budgeted amount for the base bid of this project. The only other bid was 7% above the budget.

ALTERNATES

EXPLANATION: The base bid included completing the south side of the building only. Due to the severity of the water intrusion we negotiated with the contractor to proceed with the Alternates and complete the repointing for the entire parapet to eliminate water intrusion into the facility.

Alternate #1: Add work to repair joints at parapet on East face of building.

Alternate #2: Add work to repair joints at parapet on North face of building.

Alternate #1: Add work to repair joints at parapet on West face of building.

DEPARTMENT

BASE BID ESTIMATE:	\$242,000 (without Alternates included)
LOW BASE BID:	\$233,940 (without Alternates included)
Estimate with Alternates:	\$500,000
Negotiated Cost with Alternates:	\$490,785.68



ABC Bid Data

CONCORD
80899 Contract B
NON-FEDERAL

PROJECT: CONCORD
STATE PROJECT NUMBER: 80899 Contract B
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: August 31, 2016, 02:00 PM
SCOPE OF WORK: NH State Library, Moisture Intrusion Remediation
COMPLETION DATE: December 31, 2016
LOCATION: Merrimack

Summary of Bidders

Contractor	Bid Amount	Rank
D. L. KING & ASSOCIATES INC. 27 TANGLEWOOD DRIVE, NASHUA NH 03062-1044 BROOKSTONE BUILDERS, INC. 600 HARVEY ROAD, MANCHESTER NH 03103-3320	\$ 233,940.00	A
	\$ 266,000.00	B

*Amended contract to
on PLK King per 18
was \$490,785.*

BUREAU OF PUBLIC WORKS

✓ Award to: D.L. King + Assoc, Inc.
Hold for Negotiation
Cancel Contract
User Agency: DAS
Authorized by: [Signature]
Date: 10/27/2016

1pd ✓

2016 Miss log # 3483721

Item No.	Description	Unit	Quantity	PS&E		D. L. KING & ASSOCIATES INC.		BROOKSTONE BUILDERS, INC.	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
901	MOISTURE INTRUSION REMEDIATION	U	1.000	\$218,000.00	\$218,000.00	\$209,940.00	\$209,940.00	\$242,000.00	\$242,000.00
902	MOISTURE INTRUSION REMEDIATION ALLOWANCE FOR MODIFICATIONS	\$	24,000.000	\$1.00	\$24,000.00	\$1.00	\$24,000.00	\$1.00	\$24,000.00
	LUMP SUM GRAND TOTAL:				\$ 242,000.00		\$233,940.00		\$ 266,000.00

State Alternate

Alt #1 ADD WORK TO REPAIR JOINTS

991	ALTERNATE #1 - ADD WORK TO REPAIR JOINTS AT PARAPET EAST FACE	U	1.000	\$84,000.00	\$84,000.00	\$112,000.00	\$112,000.00	\$117,655.00	\$117,655.00
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Alt #2 Add Work to Repair Joints

992	ALTERNATE #2 - ADD WORK TO REPAIR JOINTS AT PARAPET NORTH FACE	U	1.000	\$108,000.00	\$108,000.00	\$99,000.00	\$99,000.00	\$158,382.00	\$158,382.00
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Alt #3 - Add Work to Repair Joints

993	ALTERNATE #3 - ADD WORK TO REPAIR JOINTS AT PARAPET WEST FACE	U	1.000	\$66,000.00	\$66,000.00	\$97,000.00	\$97,000.00	\$92,766.00	\$92,766.00
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Totals: **\$500,000.00** **\$541,940.00** **\$634,803.00**



dikingNH.com
info@dikingNH.com

27 Tanglewood Drive Nashua, NH 03062-1044
Office: 603-883-5880
Fax: 603-883-5061

September 20, 2016

SENT VIA E-MAIL

Mr. Keith Hemingway RA
Contract Manager
NHBPW
7 Hazen Dr.
Concord, NH 03302

Re: Moisture Intrusion Remediation State Library of New Hampshire
Project Number 80899-Contract B
Negotiated Alternate Repricing

Dear Keith:

Pursuant to our contract negotiation and based on a May 31, 2017 Substantial Completion Date we revise the alternates pricing as follows:

	<u>Description</u>	<u>Cost</u>
1	Base Bid: South Elevation & 2 Chimneys	\$ 209,940.00
2	Allowance	\$ 24,000.00
3	Alternate 2: Repair Masonry Joints North Parapit	\$ 93,363.20
4	Alternate 1: Repair Masonry Joints East Parapit	\$ 92,275.12
5	Alternate 3: Repair Masonry Joints West Parapit	\$ 71,207.36
	Bid Cost	\$ 490,785.68

Yours truly,

Arthur E King, Jr P.E.

Cc: T.Kupper; R. White

General Contractor, Design-Builder & Construction Manager, WBE, NH DOT DBE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/26/2016

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: Renee Skillings PHONE (A/C, No, Ext): (603) 224-2562 FAX (A/C, No): (603) 224-8012 E-MAIL ADDRESS: rskillings@rowleyagency.com													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A Arbella Insurance Group</td> <td></td> </tr> <tr> <td>INSURER B Arbella Protection Ins Co</td> <td>41360</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A Arbella Insurance Group		INSURER B Arbella Protection Ins Co	41360	INSURER C:		INSURER D:		INSURER E:		INSURER F:
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INSURER E:														
INSURER F:														
INSURED D.L. King & Associates, Inc. 27 Tanglewood Drive Nashua NH 03062														

COVERAGES **CERTIFICATE NUMBER:** 16-17 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.

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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			8500062916	9/3/2016	9/3/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea 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
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			1020032951	9/3/2016	9/3/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE			4600062918	9/3/2016	9/3/2017	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 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 Y N/A	9126050915 3A States: NH/MA Excluded Officers: Donna & Arthur King, Jr.	9/3/2016	9/3/2017	<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	LEASED/RENTED EQUIPMENT			8500062916	9/3/2016	9/3/2017	LIMIT 30,000 DED 500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Project #80899 Contract B; Moisture Intrusion Mitigation - State Library 30 Park St., Concord, NH
 It is agreed and understood The State of NH Department of Administrative Services is included as additional insured with regard to general liability when required by written contract.

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services 7 Hazen Drive PO Box 483 Concord, NH 03301	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Renee Skillings/RLS <i>Renee L. Skillings</i>
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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

9/26/2016

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Renee Skillings PHONE (A/C, No. Ext): (603) 224-2562 FAX (A/C, No): (603) 224-8012 E-MAIL ADDRESS: rskillings@rowleyagency.com PRODUCER CUSTOMER ID: 00007629
	INSURER(S) AFFORDING COVERAGE
INSURED D.L. King & Associates, Inc., State of NH Dept of Admin Svcs & all Subs on the Project 27 Tanglewood Drive Nashua NH 03062	INSURER A: Peerless Insurance Co. NAIC # 24198
	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES **CERTIFICATE NUMBER:** 16-17 BR #80899 **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Job #80899, Contract B, Moisture Intrusion Mitigation, State Library, 30 Park St., Concord, NH 03301

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/> PROPERTY <input type="checkbox"/> CAUSES OF LOSS <input type="checkbox"/> DEDUCTIBLES <input type="checkbox"/> BASIC <input type="checkbox"/> BUILDING <input type="checkbox"/> BROAD <input type="checkbox"/> CONTENTS <input type="checkbox"/> SPECIAL <input type="checkbox"/> EARTHQUAKE <input type="checkbox"/> WIND <input type="checkbox"/> FLOOD				<input type="checkbox"/> BUILDING <input type="checkbox"/> PERSONAL PROPERTY <input type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> EXTRA EXPENSE <input type="checkbox"/> RENTAL VALUE <input type="checkbox"/> BLANKET BUILDING <input type="checkbox"/> BLANKET PERS PROP <input type="checkbox"/> BLANKET BLDG & PP	\$ \$ \$ \$ \$ \$ \$ \$ \$
A	<input checked="" type="checkbox"/> INLAND MARINE <input type="checkbox"/> CAUSES OF LOSS <input type="checkbox"/> NAMED PERILS	TYPE OF POLICY Builders Risk POLICY NUMBER BR09272016	9/26/2016	3/26/2017	<input checked="" type="checkbox"/> JOBSITE <input checked="" type="checkbox"/> TRANSIT <input checked="" type="checkbox"/> TEMPORARY STORAGE <input checked="" type="checkbox"/> SOFT COSTS	\$ 490,786 \$ 245,393 \$ 245,393 \$ 50,000
	<input type="checkbox"/> CRIME <input type="checkbox"/> TYPE OF POLICY					\$ \$ \$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$ \$
A	<input type="checkbox"/> BUILDERS RISK CONTINUED	BR09272016	9/26/2016	3/26/2017	<input checked="" type="checkbox"/> EARTHQUAKE <input checked="" type="checkbox"/> SEWER BACKUP	\$ 490,786 \$ 250,000

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 RE: Project #80899, Contract B - Moisture Intrusion Mitigation - State Library, 30 Park Dr., Concord, NH

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services 7 Hazen Drive Concord, NH 03301	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Renee Skillings/RLS <i>Renee L. Skillings</i>



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
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	INSURER(S) AFFORDING COVERAGE	
INSURED State of New Hampshire Department of Administrative c/o D.L. King & Associates, Inc. 27 Tanglewood Drive Nashua NH 03062	INSURER A: Great American	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		NAIC #

COVERAGES **CERTIFICATE NUMBER:** 16-17 OCP #80899 **REVISION NUMBER:**

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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"/> Owners & Contractors GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		OCP09272016	9/26/2016	3/26/2017	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE				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	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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