



State of New Hampshire

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

16 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. 80739R – Contract B

May 6, 2014

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

REQUESTED ACTION

1). Authorize the Department of Administrative Services to enter into an agreement with Samyn D'Elia Architects, PA. (Vendor No. 155730) Concord, N. H., for a total price not to exceed \$678,000 for Professional Services for the N. H. Marine Patrol Headquarters, Gilford. The contract is effective upon Governor and Council approval through May 1, 2016. **100% Capital – Other Funds (Navigation Safety).**

2). Further authorize that a contingency in the amount of \$50,500 be approved for unanticipated site survey, Geo-Technical services, Structural Engineering and design of new fuel storage/pumping system for the N. H. Marine Patrol Headquarters., bringing the total to \$728,500. **100% Capital – Other Funds (Navigation Safety).**

3). Further authorize that an amount of \$19,100 be approved for payment to the Department of Administrative Services, Bureau of Public Works Design and Construction (**Vendor Code 177875**) for engineering services provided, bringing the total to \$747,600. **100% Capital – Other Funds (Navigation Safety).**

Funding is available in account titled Department of Safety as follows:

02-23-23-230030-79850000 NH Marine Patrol	<u>SFY14</u>
034-500152 – Design/Study	\$678,000
034-500152 – Contingency	50,500
034-500152 – BPW Fees - Interagency	<u>\$ 19,100</u>
Grand total	\$747,600

EXPLANATION

Per Chapter 195:2, I, D Laws of 2013, this project will include Civil Engineering, Architectural, Structural, Plumbing, Fire Protection, HVAC and Electrical Engineering design services for approximately 26,000 gross square foot proposed building. Services will include providing planning, design, documentation, CM bidding/negotiation and construction administrative services for the new Marine Patrol Headquarters for the Department of Safety.

In December 2013, the Bureau of Public Works Design & Construction solicited Registered Architects and Engineers, by public announcement in the State, for interest in providing consultant services for Construction of the N. H. Marine Patrol Headquarters.

Sixteen (16) consultant firms submitted letters of interest and were considered for this assignment. These consultant firms were rated on the basis of comprehension of the assignment, clarity of the proposal, capacity to perform in a timely manner, quality and experience of the project manager and the team, and overall suitability for the assignment. Ultimately a short list of four (4) firms was developed.

Interviews were held with the following four (4) Consultant firms on February 19, 2014.

CMK Architects
Manchester, NH

The Architects
Manchester, NH

Smith, Alvarez, Sienkiewicz,
Architects
Burlington, VT

Samyn – D'Elia Architects, PA
Ashland, NH

Based on their technical proposal, presentation and experience on projects of a similar nature, the firm of Samyn D'Elia Architects, PA. was chosen as best qualified for the project. The Consultant Selection Committee included representatives from the Department of Safety and the Bureau of Public Works Design and Construction. A copy of the firm's Statement of Qualifications is provided, herewith, for your information and convenience.

The consultant selection process employed by the Department for this project is in accordance with RSAs 21-l:22, 21-l:22-c and 21-l:22-d, all applicable Federal laws and the Department's procedures for "Selection of Engineers, Architects and Surveyors" dated July 28, 2005.

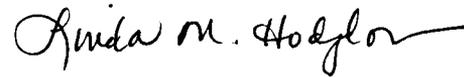
Her Excellency, Governor Margaret Wood Hassan
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May 6, 2014

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The agreement has been approved by the Attorney General as to form and execution; and the Department of Safety has certified that the necessary funds are available. Copies of the fully executed agreement are on file at the Secretary of State's Office and the Department of Administrative Services – Bureau of Public Works Design and Construction.

Respectfully submitted,

A handwritten signature in cursive script that reads "Linda M. Hodgdon". The signature is written in black ink and includes a long, sweeping horizontal line at the end.

Linda M. Hodgdon
Commissioner

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80739, Contract A – N. H. Marine Patrol Headquarters, Gilford.

DESCRIPTION: This project is to replace the existing Marine Patrol Headquarters building in Gilford NH. The existing facility provides office space, secure booking area, a dock for Marine Patrol vessels, storage facility, mechanic's shop, ADA accessible boating education classrooms, boat registration and administration functions. BPW will use an existing site and building analysis already completed to provide a 26,000 S.F. building and develop on-site parking. The life expectancy for this project is 50 years.

CONSTRUCTION

ESTIMATE: \$ 9,379,313.00 Total available funds

Interview/Selection date: 21 Feb. 2014

**COMMITTEE PROPOSAL RATING FOR
NAME OF PROJECT/STATEWIDE**

Consultant Name	Comprehension of Assignment	Clarity of Proposal	Capacity to Perform in a Timely Manner	Quality and Experience of PM/Team	Overall Suitability for the Assignment	Total Score	Cumulative Score
CMK Architects							94.0
Michelle Juliano BPW	4	4	4	4	4	20	
Gary Brown BPW	5	3	1	3	2	14	
apt. Mark Armaganian DOS	5	3	4	5	4	21	
Capt. Tim Dunleavy DOS	5	3	4	4	4	20	
Sgt. Crystal McLain DOS	5	4	3	4	3	19	
Dennis Mires							89.5
Michelle Juliano BPW	4	3.5	4	4	4	19.5	
Gary Brown BPW	3	5	3	5	3	19	
apt. Mark Armaganian DOS	2	2	3	5	4	16	
Capt. Tim Dunleavy DOS	4	3	4	4	4	19	
Sgt. Crystal McLain DOS	3	4	3	4	2	16	
Samyn- D'Elia							110.0
Michelle Juliano BPW	4.5	4.5	4	4.5	4.5	22	
Gary Brown BPW	5	3	3	4	3	18	
apt. Mark Armaganian DOS	5	5	5	5	5	25	
Capt. Tim Dunleavy DOS	5	4	4	5	4	22	
Sgt. Crystal McLain DOS	5	4	4	5	5	23	
Smith Alvarz							97.0
Michelle Juliano BPW	4	4	3.5	4.5	4	20	
Gary Brown BPW	3	3	3	3	4	16	
apt. Mark Armaganian DOS	5	4	5	4	5	23	
Capt. Tim Dunleavy DOS	5	3	4	4	4	20	
Sgt. Crystal McLain DOS	3	4	3	5	3	18	

<==== Highest Rating

Explanation of Consultant Selection Committee – Marine Patrol Headquarters, Gilford.

Members are selected using the approved guidelines for the Bureau of Public Works Design and Construction "Selection of Engineering, Architects, and Surveyor Services". Per these guidelines, the Committee should consist of the Bureau Administrator plus two other Project Managers.

The Assistant Administrator manages the day-to-day oversight of the Consultant assignments, and is the second member of all the selection committees. Her job description specifically outlines her involvement in the management of the consultants. She brings the expertise of the day-to-day working with consultants. Her past and present experience involves frequent interaction with consultants, including review of consultants' proposals and their engineering work.

The Project Manager, for the specific work the consultant is being hired for, brings additional expertise concerning the capabilities of various consultants. His years of project management experience and experience provide the more detailed perspective about the various consultants' strengths or weaknesses and how they would fit with the project needs.

Captain Mark Armaganian, of the Department of Safety has spent his entire career working with the State Police at various duties. He presently oversees State Police Field Operations for Troop D, Troop g, Marine Patrol, State Security, and State Hospital Campus Police. He is uniquely qualified to provide vision and direction regarding the design approach, operational aspects of this project, based on extensive experience with numerous Enforcement Units.

Captain Tim Dunleavy, of the Department of Safety has spent 25 years working at the Marine Police Headquarters. His duties include: Education/ Training Officer, Boat Safety Training Prosecutor, Purchaser, and Law Enforcement Supervisor for NH's Seacoast. He is uniquely qualified to provide vision and direction regarding his experience in staff and public training, knowledge of the site, and operations of the facility and requirements.

Sergeant Crystal McLain, of the Department of Safety has spent 14 years working at the Marine Police Headquarters. She provided detailed knowledge of the day to day operations of the facility. .

BPW Assist. Administrator - PM5
BPW Project Manager - PM3

Michelle Juliano- 25 years State service
Gary Brown - 2 years State Service/34 years private sector

Department of Safety:

Cpt, Mark Armaganian

Troop D, Troop G, Marine Patrol, State House Security, State Hospital Campus

Cpt. Tim Dunleavy -

Patrol Officer Supervisor - 25 years State Service

Sgt. Crystal McLain -

Patrol Officer at Marine Patrol Headquarters- 14 years State Service



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/14/2014

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).

PRODUCER Ashland Insurance Center PO Box 659 44 Main Street Ashland NH 03217	CONTACT NAME: ASHLAND, POULOS PHONE (A/C No. Ext): (603) 968-4451 E-MAIL ADDRESS: snorman@poulosinsurance.com	FAX (A/C No.): (603) 968-7183
	INSURER(S) AFFORDING COVERAGE	
INSURED Samyn - D Elia Architects Pa 20 Main Street Po Box 1259 Ashland NH 03217	INSURER A: Liberty Mutual Insurance NAIC # 23035	
	INSURER B: Peerless 24198	
	INSURER C: Vos - Cna Insurance Company	
	INSURER D:	
	INSURER E:	

COVERAGES **CERTIFICATE NUMBER:** CL1431419692 **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 INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		BOP8266409	5/5/2014	5/5/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 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
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	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) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WC9031131	5/5/2014	5/5/2015	WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C	Professional Liability		AEH004315163	11/16/2013	11/16/2014	Claims Made \$2,000,000 Deductible 10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Architects Project#80739R-B

CERTIFICATE HOLDER (603) 271-3515 State of New Hampshire Bureau of Public Works Design & Construct Michelle L Juliano PO Box 483 7 Hazen Drive Concord, NH 03302-0483	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 Sherry Norman / SHERRY
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/12/2014

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PRODUCER Ashland Insurance Center PO Box 659 44 Main Street Ashland NH 03217	CONTACT NAME: ASHLAND, POULOS	
	PHONE (A/C, No, Ext): (603) 968-4451	FAX (A/C, No): (603) 968-7183
E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Progressive Northern Ins Co		38628
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** CL1431219648 **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		
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR _____ _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/POP AGG \$ _____ \$		
A	AUTOMOBILE LIABILITY <input 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			66486813-7	3/29/2014	9/29/2014	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 250,000 BODILY INJURY (Per accident) \$ 500,000 PROPERTY DAMAGE (Per accident) \$ 100,000 MC1 \$		
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ _____ \$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Project #80739R-B

CERTIFICATE HOLDER State of New Hampshire Bureau of Public Works Design & Construct Michelle L Juliano, PE PO Box 483 7 Hazen Drive Concord, NH 03302-0483	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 Sherry Norman/SHERRY
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3/12/2014

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	PHONE (A/C No. Ext): (603) 968-4451	FAX (A/C No.): (603) 968-7183
E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: SAFECO Insurance Co of America		24740
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES CERTIFICATE NUMBER: CL1431219649 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.

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	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$	
A	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			K2262942	2/8/2014	2/8/2015	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 250,000 BODILY INJURY (Per accident) \$ 500,000 PROPERTY DAMAGE (Per accident) \$ 100,000 Coverage Discount \$	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UK5815608	2/8/2014	2/8/2015	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	

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