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**THE STATE OF NEW HAMPSHIRE**  
 DEPARTMENT OF TRANSPORTATION



*Victoria F. Sheehan*  
 Commissioner

*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  
 July 12, 2021

**REQUESTED ACTION**

1. Authorize the Department of Transportation to enter into a contract with Pine Hill Construction, LLC (Vendor 156446) of Claremont, NH, on the basis of a low bid of \$756,420.00 for building demolition in the Westboro Railroad Yard in Lebanon, from the date of Governor and Council approval through November 19, 2021, unless extended by the Department in accordance with the Standard Specifications. 100% General Funds.

Funding is available in State Fiscal Year 2022 as follows:

Funding is available as follows:	<u>FY 2022</u>
04-96-96-963010-1073	
Demolitions of Structures	
400-500870 Highway Contract Payments	\$756,420.00

2. Further authorize that a contingency in the amount of \$75,642.00 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 2022</u>
04-96-96-963010-1073	
Demolitions of Structures	
400-500870 Highway Contract Payments	\$75,642.00

**EXPLANATION**

This project is a building demolition project, and includes the removal of four structures on a State of NH parcel at the former Westboro Railroad Yard, located in the City of Lebanon adjacent to NH 12A (Structures include the Roundhouse, Bunkhouse, Sandhouse, and Powerhouse Chimney).

The project site (State of NH owned former Westboro Railroad Yard) was identified for clean-up and ultimate disposition, through HB-4 funding in 2019. The project will demolish the structures per standard specifications, and regrade the site accordingly.

The proposed contingency amount is 10% of the contract amount. The contingency amount is requested to include any cost elements related to differing site conditions that may be encountered (surface and subsurface) during demolition of these structures.

Although the bid costs exceeded the Department's estimate by 0.36%, the low bid of 2 bids received is felt to be reasonable for the work involved. Re-advertising this project would result, in our opinion, in higher prices and prevent the completion of the work in a timely manner. The Department considers it to be in the best interest of the State to accept this bid to accomplish these needed repairs.

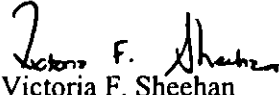
The Contractor has been prequalified by this Department. The Contract has been approved by the Attorney General as to form and execution, and the Department has certified that the necessary funds are available and the bid reasonably conforms to the engineer's estimate in accordance with State procedure. 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: 100% General 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: \$753,709.50  
Contract Amount: \$756,420.00  
Over Estimate: \$ 2,710.50  
Attachments



# ABC Bid Data

LEBANON  
42866  
NON-FEDERAL

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PROJECT:	LEBANON	Awarded To:	PINE HILL CONSTRUCTION LLC
STATE PROJECT NUMBER:	42866		519 JARVIS HILL ROAD
FED. PROJECT NUMBER:	NON-FEDERAL		CLAREMONT, NH 03743
DATE BIDS OPEN:	July 01, 2021, 2:00 PM	Amount:	\$756,420.00
SCOPE OF WORK:	Disposal and environmental mitigation efforts of the Westboro Rail Yard in Lebanon	Certified by:	PETER.E.STAMNAS
COMPLETION DATE:	November 19, 2021	Award Date:	<u>Director of Project Development</u>
LOCATION:	Grafton		

## Summary of Bidders

Contractor	Bid Amount	Rank
PINE HILL CONSTRUCTION LLC 519 JARVIS HILL ROAD, PO BOX 846, CLAREMONT NH 03743	\$756,420.00	A
AUDLEY, R. S., INC. 1113 ROUTE 3A, BOW NH 03304-4025	\$779,485.00	B

Item No.	Description	Unit	Quantity	PBAE		PINE HILL CONSTRUCTION LLC 519 JARVIS HILL ROAD CLAREMONT, NH 03743		AUDLEY, R. S., INC. 1113 ROUTE 3A BOW, NH 03304-0023	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

Items

201.01	CLEARING (F)	A	.45	\$10,000.00	\$4,500.00	\$4,000.00	\$1,800.00	\$32,000.00	\$14,400.00
201.881	INVASIVE SPECIES CONTROL TYPE I	SY	975.00	\$4.00	\$3,900.00	\$4.00	\$3,900.00	\$6.00	\$5,850.00
201.882	INVASIVE SPECIES CONTROL TYPE II	SY	975.00	\$4.00	\$3,900.00	\$4.00	\$3,900.00	\$6.00	\$5,850.00
202.201	DEMOLISHING BUILDINGS	U	1.00	\$289,750.00	\$289,750.00	\$285,000.00	\$285,000.00	\$368,000.00	\$368,000.00
202.301	BUILDING ASBESTOS ABATEMENT	U	1.00	\$240,132.00	\$240,132.00	\$210,000.00	\$210,000.00	\$73,000.00	\$73,000.00
202.8	REMOVAL OF FENCE	LF	1,125.00	\$4.00	\$4,500.00	\$3.00	\$3,375.00	\$10.00	\$11,250.00
203.1	COMMON EXCAVATION	CY	276.00	\$15.00	\$4,125.00	\$30.00	\$8,250.00	\$60.00	\$16,500.00
304.3	CRUSHED GRAVEL (F)	CY	160.00	\$30.00	\$4,800.00	\$50.00	\$8,000.00	\$75.00	\$12,000.00
607.260	CHAIN LINK FENCE WITH ALUMINUM COATED STEEL FABRIC, 6' HIGH	LF	875.00	\$25.00	\$18,875.00	\$50.00	\$33,750.00	\$35.00	\$23,625.00
607.4260	POST ASSEMBLIES FOR CHAIN LINK FENCE, 6' HIGH	EA	7.00	\$250.00	\$1,750.00	\$90.00	\$630.00	\$200.00	\$1,400.00
607.98	RESETTING GATE	U	1.00	\$2,000.00	\$2,000.00	\$1,200.00	\$1,200.00	\$1,200.00	\$1,200.00
607.996	TEMPORARY CHAIN LINK FENCE, 6' HIGH	LF	1,425.00	\$15.00	\$21,375.00	\$5.00	\$7,125.00	\$10.00	\$14,250.00
618.7	FLAGGERS	HR	600.00	\$35.00	\$21,000.00	\$35.00	\$21,000.00	\$35.00	\$21,000.00
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$10,000.00	\$10,000.00	\$8,000.00	\$8,000.00	\$45,000.00	\$45,000.00
645.512	COMPOST SOCK FOR PERMETER BERM	LF	875.00	\$5.50	\$4,812.50	\$6.00	\$5,250.00	\$6.00	\$5,250.00
645.531	SILT FENCE	LF	1,400.00	\$4.00	\$5,600.00	\$4.50	\$6,300.00	\$3.50	\$4,900.00
645.7	STORM WATER POLLUTION PREVENTION PLAN	U	1.00	\$2,000.00	\$2,000.00	\$3,000.00	\$3,000.00	\$5,500.00	\$5,500.00
645.71	MONITORING SWPPP AND EROSION AND SEDIMENT CONTROLS	HR	48.00	\$80.00	\$3,840.00	\$55.00	\$2,640.00	\$95.00	\$4,560.00
646.3	TURF ESTABLISHMENT WITH MULCH AND TACKIFIERS	A	2.50	\$2,300.00	\$5,750.00	\$3,200.00	\$8,000.00	\$2,200.00	\$5,500.00
647.1	HUMUS	CY	1,200.00	\$30.00	\$36,000.00	\$25.00	\$30,000.00	\$36.00	\$43,200.00
670.95	TEMPORARY SAFETY FENCE	LF	200.00	\$5.50	\$1,100.00	\$4.00	\$800.00	\$5.00	\$1,000.00
692.	MOBILIZATION	U	1.00	\$65,000.00	\$65,000.00	\$80,000.00	\$80,000.00	\$77,500.00	\$77,500.00
697.11	INVASIVE SPECIES CONTROL AND MANAGEMENT PLAN	U	1.00	\$1,000.00	\$1,000.00	\$4,500.00	\$4,500.00	\$750.00	\$750.00
699.	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00



# ABC Bid Data

LEBANON  
42866  
NON-FEDERAL

Item No.	Description	Unit	Quantity	PS&E		PINE HILL CONSTRUCTION LLC 619 JARVIS HILL ROAD CLAREMONT, NH 03743		AUDLEY, R. S., INC. 1113 ROUTE 3A BOW, NH 03304-0025	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00
1010.15	FUEL ADJUSTMENT	\$	10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00
<b>Totals:</b>					<b>\$763,709.50</b>		<b>\$766,420.00</b>		<b>\$779,485.00</b>
<b>Alt. Totals:</b>									
<b>Totals:</b>					<b>\$763,709.50</b>		<b>\$766,420.00</b>		<b>\$779,485.00</b>



## PS&E Comparison

LEBANON  
42866  
NON-FEDERAL

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
<b>Items</b>								
201.01	CLEARING (F)	A	.45	\$4,000.00	\$1,800.00	\$10,000.00	\$4,500.00	(\$2,700.00)
201.881	INVASIVE SPECIES CONTROL TYPE I	SY	975.00	\$4.00	\$3,900.00	\$4.00	\$3,900.00	\$0.00
201.882	INVASIVE SPECIES CONTROL TYPE II	SY	975.00	\$4.00	\$3,900.00	\$4.00	\$3,900.00	\$0.00
202.201	DEMOLISHING BUILDINGS	U	1.00	\$285,000.00	\$285,000.00	\$269,750.00	\$269,750.00	\$15,250.00
202.301	BUILDING ASBESTOS ABATEMENT	U	1.00	\$210,000.00	\$210,000.00	\$240,132.00	\$240,132.00	(\$30,132.00)
202.8	REMOVAL OF FENCE	LF	1,125.00	\$3.00	\$3,375.00	\$4.00	\$4,500.00	(\$1,125.00)
203.1	COMMON EXCAVATION	CY	275.00	\$30.00	\$8,250.00	\$15.00	\$4,125.00	\$4,125.00
304.3	CRUSHED GRAVEL (F)	CY	160.00	\$50.00	\$8,000.00	\$30.00	\$4,800.00	\$3,200.00
607.260	CHAIN LINK FENCE WITH ALUMINUM COATED STEEL FABRIC, 6' HIGH	LF	675.00	\$50.00	\$33,750.00	\$25.00	\$16,875.00	\$16,875.00
607.4260	POST ASSEMBLIES FOR CHAIN LINK FENCE, 6' HIGH	EA	7.00	\$90.00	\$630.00	\$250.00	\$1,750.00	(\$1,120.00)
607.98	RESETTING GATE	U	1.00	\$1,200.00	\$1,200.00	\$2,000.00	\$2,000.00	(\$800.00)
607.996	TEMPORARY CHAIN LINK FENCE, 6' HIGH	LF	1,425.00	\$5.00	\$7,125.00	\$15.00	\$21,375.00	(\$14,250.00)
618.7	FLAGGERS	HR	600.00	\$35.00	\$21,000.00	\$35.00	\$21,000.00	\$0.00
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$8,000.00	\$8,000.00	\$10,000.00	\$10,000.00	(\$2,000.00)



## PS&E Comparison

LEBANON  
42866  
NON-FEDERAL

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
645.512	COMPOST SOCK FOR PERIMETER BERM	LF	875.00	\$6.00	\$5,250.00	\$5.50	\$4,812.50	\$437.50
645.531	SILT FENCE	LF	1,400.00	\$4.50	\$6,300.00	\$4.00	\$5,600.00	\$700.00
645.7	STORM WATER POLLUTION PREVENTION PLAN	U	1.00	\$3,000.00	\$3,000.00	\$2,000.00	\$2,000.00	\$1,000.00
645.71	MONITORING SWPPP AND EROSION AND SEDIMENT CONTROLS	HR	48.00	\$55.00	\$2,640.00	\$80.00	\$3,840.00	(\$1,200.00)
646.3	TURF ESTABLISHMENT WITH MULCH AND TACKIFIERS	A	2.50	\$3,200.00	\$8,000.00	\$2,300.00	\$5,750.00	\$2,250.00
647.1	HUMUS	CY	1,200.00	\$25.00	\$30,000.00	\$30.00	\$36,000.00	(\$6,000.00)
670.95	TEMPORARY SAFETY FENCE	LF	200.00	\$4.00	\$800.00	\$5.50	\$1,100.00	(\$300.00)
692.	MOBILIZATION	U	1.00	\$80,000.00	\$80,000.00	\$65,000.00	\$65,000.00	\$15,000.00
697.11	INVASIVE SPECIES CONTROL AND MANAGEMENT PLAN	U	1.00	\$4,500.00	\$4,500.00	\$1,000.00	\$1,000.00	\$3,500.00
699.	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$0.00
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$0.00
1010.15	FUEL ADJUSTMENT	\$	10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00	\$0.00
<b>Total:</b>					<b>\$756,420.00</b>		<b>\$753,709.50</b>	<b>\$2,710.50</b>

May 14, 2021

## SUPPLEMENTAL PROJECT INFORMATION SHEET

**DESCRIPTION:** This project is a building demolition project, and includes the removal of four structures on a State of NH parcel at the former Westboro Railroad Yard, located in the City of Lebanon adjacent to NH 12A. (*Structures include the Roundhouse, Bunkhouse, Sandhouse, and Powerhouse Chimney.*)

**FEDERAL FUNDING:** 0% (100% State Funds (HB-4)).

**CONTINGENCY:** The proposed contingency amount is 10% of the contract amount. The contingency amount is requested to include any cost elements related to differing site conditions that may be encountered (surface and subsurface) during demolition of these structures.

**PROJECT INITIATED:** This project was initiated through State House Bill - 4.

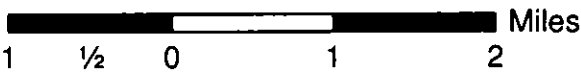
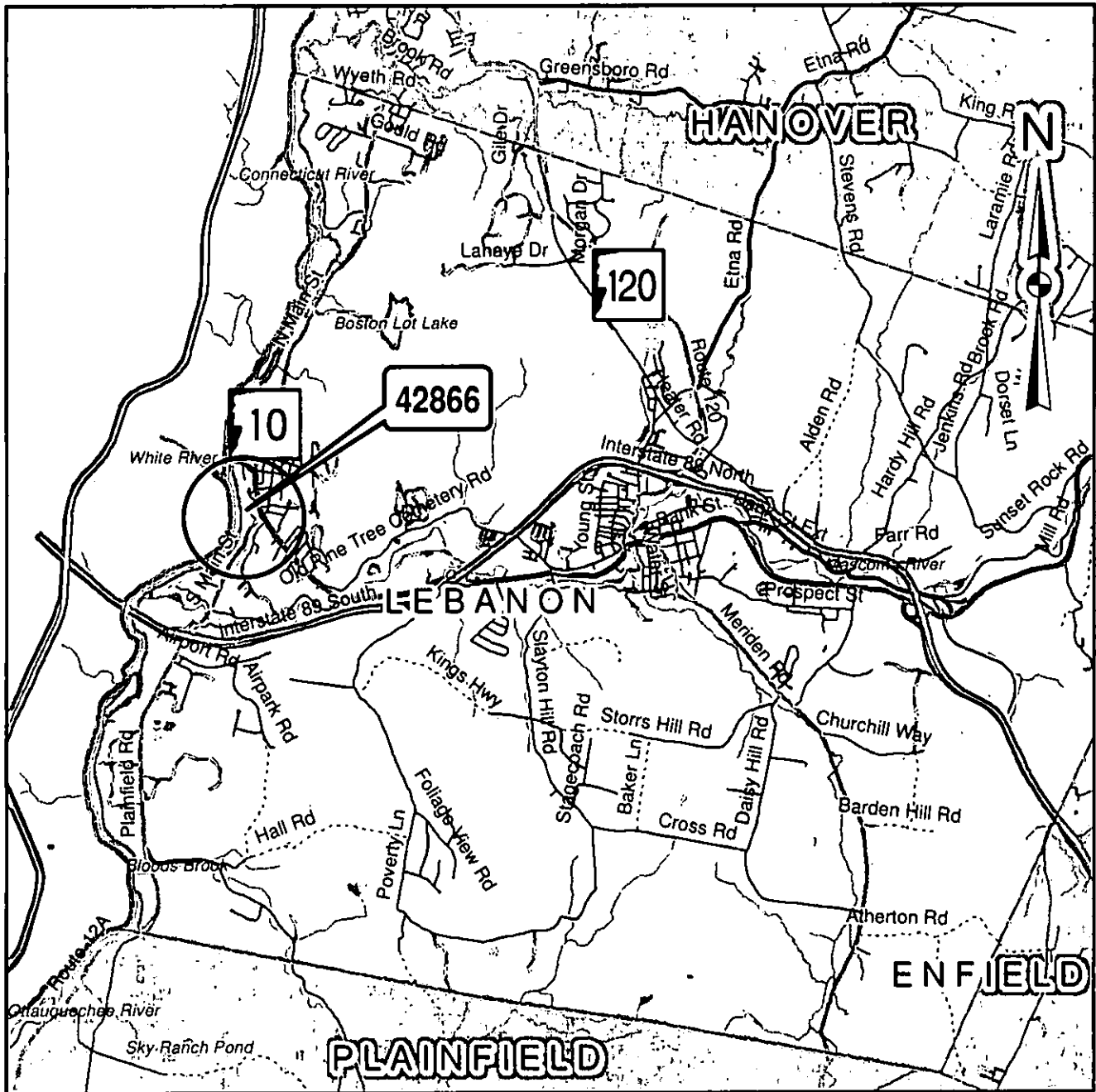
**PROJECT EXPLANATION:** The project site (State of NH owned former Westboro Railroad Yard) was identified for clean-up and ultimate disposition, through HB-4 funding. The project will demolish the structures per standard specifications, and regrade the site accordingly.

**TRAFFIC IMPLICATION:** Construction activities may require flagging for construction vehicle access at the NH 12A site entrance for hauling operations. No significant impacts to traffic on NH 12A is anticipated.

**FINAL COMPLETION DATE:** November 19, 2021



# LEBANON - WESTBORO RAILROAD YARD



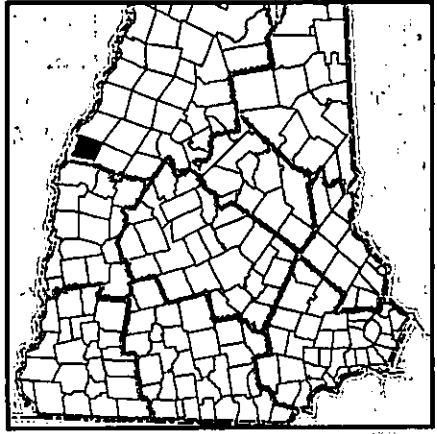
**LEGEND**

- Streams
- Water Bodies
- US Routes
- State Routes
- Interstates
- Local Roads
- Town Boundary

*New Hampshire*  
**DOT**  
 Department of Transportation

State #: 42866  
 Federal #: N/A

LOCATION MAP



04/20/20

SSD: 3/24/98, 4/26/97, 8/14/97, 6/13/08 & 12/04/09, 01/05/10, 04/06/10, 09/13/11, 10/19/12, 02/01/16

RR + extra Reg.  
Reduced OPC

LEBANON

42866

May 25, 2021

### NOTICE TO CONTRACTS

PROJECT MANAGER: Bill Oldenburg AD DATE: 06-01-21

DESIGNER: Dan Prehemo/Wayne Brooks BIDS DUE DATE: 06-24-21 7/1

OTHERS: \_\_\_\_\_

District 1  District 2  District 3  District 4  District 5  District 6

PLANS:  Separate Plan Set  Plan Set Attached to Proposal  Proposal Only (P.O.)

#### DETERMINATION OF PROJECT TYPE:

Prime Item Totals as a % of Construction Cost (less the potential subcontractor items below)

Bridge	\$ _____	_____ % of Total
Roadway	\$ _____	_____ % of Total
Specialty*	\$ <u>467,077.00</u>	<u>62.0</u> % of Total

\* Specialty Work includes Resurfacing, Building Demo, Signal, and Guardrail-only type Contracts.

Specialty/Subcontractor Item Totals as a % of Construction Cost

Pavement	\$ _____	_____ % of Total	Clearing	\$ <u>4,500.00</u>	<u>0.006</u> % of Total
Guardrail	\$ _____	_____ % of Total	abatement	\$ <u>240,132.00</u>	<u>31.9</u> % of Total
fencing	\$ <u>42,000.00</u>	<u>5.5</u> % of Total		\$ _____	_____ % of Total

If "Bridge", "Roadway" or "Specialty" above can maintain 50% or more of the construction cost as noted above, select the appropriate group below. If not, a "Reduced Prime Contractor Percentage" will be required and shall be noted below. Is a Specialty Item exclusion needed? Coordinate this with Specifications.

ROADWAY PROJECT  BRIDGE PROJECT  SPECIALTY PROJECT Demo

If this project does require a special provision to 108.01 to reduce the "Prime's Percentage of Work Performed", what percentage will be used? 30 %

BUY AMERICA:  NO  YES - Either Federally Funded or Due to Umbrella NEPA Document

#### WAGE DECISIONS:

ALTERNATE FUNDING:  NO  YES \_\_\_\_\_

#### COUNTIES

CONSTRUCTION PHASE:  Federal  Non-Federal

Check counties where contract work is being performed:

- Belknap
- Carroll
- Cheshire
- Coos
- Grafton
- Hillsborough
- Merrimack
- Rockingham
- Strafford
- Sullivan

- Other (please give county name):
- Maine \_\_\_\_\_
- Vermont \_\_\_\_\_
- Massachusetts \_\_\_\_\_

#### CONSTRUCTION CLASSIFICATION

#### SPECIAL INSURANCE REQUIREMENTS

- Specifications will check these:
- Building
  - Highway
  - Heavy

- 104.07 - RR Insurance
- 107.11 - Reduced OPC Building
- 107.11 - VT/ME/MA Insurance Coverage
- 107.11 - Extra Insurance Requirements - RR



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/28/2021

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 Insurance Center Claremont 107 Broad Street Claremont, NH 03743 Robert Sammon	<b>CONTACT NAME:</b> Jodie Raymond <b>PHONE (AC, No, Ext):</b> 603-542-2551 <b>FAX (AC, No):</b> 603-542-8033 <b>E-MAIL ADDRESS:</b> jraymond@insurancecenterinc.com
	<b>INSURER(S) AFFORDING COVERAGE</b>
<b>INSURED</b> Pine Hill Construction LLC P O Box 846 Claremont, NH 03743	<b>INSURER A:</b> Liberty Mutual Insurance
	<b>INSURER B:</b>
	<b>INSURER C:</b>
	<b>INSURER D:</b>
	<b>INSURER E:</b>
	<b>INSURER F:</b>


**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.

INER LTR	TYPE OF INSURANCE	ADOLTSUBIN (NSD) (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 Liab  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X X	BKS58255129 BKS58255129	01/01/2021 01/01/2021	01/01/2022 01/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS  <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	X X	BAS58255129	01/01/2021	01/01/2022	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 checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000	X X	USO58255129	01/01/2021	01/01/2022	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
A	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 checked="" type="checkbox"/> N N/A	X	XWA58255129	01/01/2021	01/01/2022	<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						

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

Project: Lebanon 42866; The State of New Hampshire, Dept of Transportation and New England Central Railroad Inc and their affiliates are named as Additional Insured.

<b>CERTIFICATE HOLDER</b>  NHDEPT1  State of New Hampshire Dept of Transportation P O Box 483 Concord, NH 03302-0483	<b>CANCELLATION</b>  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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# WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

### SCHEDULE

<p><b>Name Of Person Or Organization:</b></p> <p>State of New Hampshire Dept of Transportation and New England Central Railroad Inc</p>
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us** of Section IV - Conditions:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
State of NH Dept of Transportation & New England Central Railroad Inc	Lebanon Project #42866 Westboro Railroad Yard City of Lebanon NH
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

**A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

**B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:**

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/03/2021

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 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).

<b>PRODUCER</b> The Insurance Center Claremont 107 Broad Street Claremont, NH 03743 Robert Sammon	603-542-2551		<b>CONTACT NAME:</b> Jodie Raymond <b>PHONE (A/C, No, Ext):</b> 603-542-2551 <b>FAX (A/C, No):</b> 603-542-8033	
	<b>INSURED</b> New England Central Railroad Inc c/o Pine Hill Construction LLC P O Box 846 Claremont, NH 03743		<b>E-MAIL ADDRESS:</b>  <b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Liberty Mutual Insurance 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	ADOL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJ. <input type="checkbox"/> LOC <input type="checkbox"/> OTHER						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea. occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPROP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea. accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE    OTH-ER E L EACH ACCIDENT \$ E L DISEASE - EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$
A	Railroad Liability			BKS58255129	07/14/2021	01/01/2022	Limit 2,000,000 Aggregate 6,000,000

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

Project: Lebanon 42866; State of New Hampshire Railroad, New England Central Railroad Inc, their parents affiliates, successors & assigns is the named insured.

<b>CERTIFICATE HOLDER</b>  NEWENG8  New England Central Railroad Inc 2 Federal St Ste 201 St Albans, VT 05478	<b>CANCELLATION</b>  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 

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **CONTRACTUAL LIABILITY – RAILROADS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### **SCHEDULE**

<b>Scheduled Railroad:</b>	<b>Designated Job Site:</b>
New England Central Railroad Inc	Lebanon Project #42866 Westboro Railroad Yard City of Lebanon NH

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

With respect to operations performed for, or affecting, a Scheduled Railroad at a Designated Job Site, the definition of "insured contract" in the Definitions section is replaced by the following:

**9. "Insured Contract" means:**

- a. A contract for a lease of premises. However, that portion of the contract for a lease of premises that indemnifies any person or organization for damage by fire to premises while rented to you or temporarily occupied by you with permission of the owner is not an "insured contract";
- b. A sidetrack agreement;
- c. Any easement or license agreement;
- d. An obligation, as required by ordinance, to indemnify a municipality, except in connection with work for a municipality;
- e. An elevator maintenance agreement;
- f. That part of any other contract or agreement pertaining to your business (including an indemnification of a municipality in connection with work performed for a municipality) under which you assume the tort liability of another party to pay for "bodily injury" or "property damage" to a third person or organization. Tort liability means a liability that would be imposed by law in the absence of any contract or agreement.

Paragraph f. does not include that part of any contract or agreement:

- (1) That indemnifies an architect, engineer or surveyor for injury or damage arising out of:
  - (a) Preparing, approving or failing to prepare or approve maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
  - (b) Giving directions or instructions, or failing to give them, if that is the primary cause of the injury or damage;
- (2) Under which the insured, if an architect, engineer or surveyor, assumes liability for an injury or damage arising out of the insured's rendering or failure to render professional services, including those listed in Paragraph (1) above and supervisory, inspection, architectural or engineering activities.

## WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

### SCHEDULE

**Name Of Person Or Organization:**

State of New Hampshire Dept of Transportation  
and New England Central Railroad Inc

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. Transfer Of Rights Of Recovery Against Others To Us of Section IV - Conditions:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
08/03/2021

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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).

<b>PRODUCER</b> The Insurance Center Claremont 107 Broad Street Claremont, NH 03743 Robert Sammon	603-542-2551		<b>CONTACT NAME:</b> Jodie Raymond <b>PHONE (AC. No. Ext):</b> 603-542-2551 <b>FAX (AC. No.):</b> 603-542-8033 <b>E-MAIL:</b> jraymond@insurancecenterinc.com <b>ADDRESS:</b>
			<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> MESA U.W. SPECIALTY INSURANCE <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>

**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	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>Owners Protective</b> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER			MP002800200033	07/14/2021	11/19/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ - PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE    OTH-ER 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)

State of NH DOT, their parents, affiliates, successors and assigns is a named insured. Project: Lebanon 42866

<b>CERTIFICATE HOLDER</b> NHDOT03 State of New Hampshire NH Dept of Transportation P O Box 483 Concord, NH 03302-0483	<b>CANCELLATION</b> 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 <i>Jodie Raymond</i>
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