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State of New Hampshire  
DEPARTMENT OF SAFETY  
OFFICE OF THE COMMISSIONER  
33 HAZEN DR. CONCORD, NH 03305  
603/271-2791

FEB 19 AM 11:35 DAS

JOHN J. BARTHELMES  
COMMISSIONER

January 24, 2019

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**Requested Action**

Pursuant to RSA 21-P:12-a, the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services (FSTEMS) requests authorization to enter into a grant agreement with the City of Concord (VC#177376-B005) for a total amount of \$126,999.00 for the purpose of implementing a mobile integrated healthcare (MIH) program called NH Project FIRST. Effective upon Governor and Council approval through September 29, 2019. Funding source: 100% Federal Funds.

Funding is available in the SFY 2019 operating budget as follows:

02-023-023-237010-44570000 Dept. of Safety – FSTEMS – 100% Nat'l Fire Academy Grant (FR-CARA) SFY 2019  
072-500574 Grants to Local Gov't - Federal \$126,999.00  
Activity Code: 23SAMHSA19

**Explanation**

NH Project FIRST (First responders Initiating Recovery, Support, and Treatment) is designed to utilize specially trained first responders to connect at-risk individuals with treatment and recovery programs; train at-risk individuals and their support systems on overdose emergency care including the use of naloxone; and increase the number of first responders who can administer naloxone.

The City of Concord plans to hire a full-time, temporary first responder to implement a mobile integrated healthcare (MIH) program. The grant funds will also provide for the purchase of a projector, projector screen, and promotional materials for community outreach events. These funds will also provide for a computer tablet and accessories, a cellular telephone, and reporting software to support the data collection and tracking of the anticipated reduction in overdoses and overdose fatalities, along with the expected increase of at-risk individuals who are referred to treatment in the community.

The grant listed above is funded from the FFY 2019 First Responder Comprehensive Addiction and Recovery Act, which was awarded to the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services (FSTEMS) from the US Department of Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA). The grant funds are to be used to implement the MIH program to reduce the number of opioid overdoses and opioid overdose deaths, as well as increase the number of at-risk individuals entering into treatment and recovery services throughout the State.

Grant guidance and applications are available to all New Hampshire licensed emergency medical services (EMS) units. Subrecipients submit applications to this office, which are reviewed by the FSTEMS FR-CARA Staff, the FR-CARA Advisory Committee, and approved by the FSTEMS Director. The criteria for approval are based on grant eligibility in accordance with the grant's current guidance and the documented needs of the local communities.

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January 24, 2019  
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The First Responder Comprehensive Addiction and Recovery Act (FR-CARA) grants are 100% federally funded by SAMHSA with no match requirement. In the event that Federal Funds are no longer available, General Funds and/or Highway Funds will not be requested to support this program.

Respectfully submitted,

  
John J. Barthelmes  
Commissioner of Safety

**GRANT AGREEMENT**

The State of New Hampshire and the Subrecipient hereby  
Mutually agree as follows:  
**GENERAL PROVISIONS**

**1. Identification and Definitions.**

<b>1.1. State Agency Name</b> NH Department of Safety, Fire Standards & Training and Emergency Medical Services		<b>1.2. State Agency Address</b> 33 Hazen Drive Concord, NH 03305	
<b>1.3. Subrecipient Name</b> City of Concord (VC#177376-B005)		<b>1.4. Subrecipient Tel. #/Address</b> 603-225-8532 41 Green Street, Concord, NH 03301	
<b>1.5 Effective Date</b> G & C Approval	<b>1.6. Account Number</b> AU #44570000	<b>1.7. Completion Date</b> September 29, 2019	<b>1.8. Grant Limitation</b> \$126,999.00
<b>1.9. Grant Officer for State Agency</b> Paula Holigan, FR-CARA Program Manager		<b>1.10. State Agency Telephone Number</b> (603) 223-4200	
"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."			
<b>1.11. Subrecipient Signature 1</b> 		<b>1.12. Name &amp; Title of Subrecipient Signor 1</b> Thomas J. Aspell, Jr., City Manager	
<b>Subrecipient Signature 2</b>		<b>Name &amp; Title of Subrecipient Signor 2</b>	
<b>Subrecipient Signature 3</b>		<b>Name &amp; Title of Subrecipient Signor 3</b>	
<b>1.13. Acknowledgment:</b> State of New Hampshire, County of <u>Merrimack</u> , on <u>1/23/19</u> , before the undersigned officer, personally appeared the person identified in block 1.12., known to me (or satisfactorily proven) to be the person whose name is signed in block 1.11., and acknowledged that he/she executed this document in the capacity indicated in block 1.12.			
<b>1.13.1. Signature of Notary Public or Justice of the Peace</b> (Seal) 			
<b>1.13.2. Name &amp; Title of Notary Public or Justice of the Peace</b> SUZANNE M. STEVENS, Notary Public My Commission Expires February 15, 2022			
<b>1.14. State Agency Signature(s)</b> By:  On: <u>1/29/19</u>		<b>1.15. Name &amp; Title of State Agency Signor(s)</b> Steven R. Lavoie, Director of Administration	
<b>1.16. Approval by Attorney General (Form, Substance and Execution) (if G &amp; C approval required)</b> By:  Assistant Attorney General, On: <u>1/30/2019</u>			
<b>1.17. Approval by Governor and Council (if applicable)</b> By: _____ On: <u> / /</u>			

**2. SCOPE OF WORK:** In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:12-a, the Subrecipient identified in block 1.3 (hereinafter referred to as "the Subrecipient"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

Subrecipient Initials: TJA      2.)                           3.)                           Date: 1/23/19

3. **AREA COVERED.** Except as otherwise specifically provided for herein, the Subrecipient shall perform the Project in, and with respect to, the State of New Hampshire.

4. **EFFECTIVE DATE: COMPLETION OF PROJECT.**

4.1. This Agreement, and all obligations of the parties hereunder, shall become effective on the date of approval of this Agreement by the Governor and Council of the State of New Hampshire if required (block 1.17), or upon signature by the State Agency as shown in block 1.14 ("the effective date").

4.2. Except as otherwise specifically provided herein, the Project, including all reports required by this Agreement, shall be completed in its entirety prior to the date in block 1.7 (hereinafter referred to as "the Completion Date").

5. **GRANT AMOUNT: LIMITATION ON AMOUNT: VOUCHERS: PAYMENT.**

5.1. The Grant Amount is identified and more particularly described in EXHIBIT B, attached hereto.

5.2. The manner of, and schedule of payment shall be as set forth in EXHIBIT B.

5.3. In accordance with the provisions set forth in EXHIBIT B, and in consideration of the satisfactory performance of the Project, as determined by the State, and as limited by subparagraph 5.5 of these general provisions, the State shall pay the Subrecipient the Grant Amount. The State shall withhold from the amount otherwise payable to the Subrecipient under this subparagraph 5.3 those sums required, or permitted, to be withheld pursuant to N.H. RSA 80:7 through 7-c.

5.4. The payment by the State of the Grant amount shall be the only, and the complete payment to the Subrecipient for all expenses, of whatever nature, incurred by the Subrecipient in the performance hereof, and shall be the only, and the complete, compensation to the Subrecipient for the Project. The State shall have no liabilities to the Subrecipient other than the Grant Amount.

5.5. Notwithstanding anything in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made, hereunder exceed the Grant limitation set forth in block 1.8 of these general provisions.

6. **COMPLIANCE BY SUBRECIPIENT WITH LAWS AND REGULATIONS.** In connection with the performance of the Project, the Subrecipient shall comply with all statutes, laws regulations, and orders of federal, state, county, or municipal authorities which shall impose any obligations or duty upon the Subrecipient, including the acquisition of any and all necessary permits.

7. **RECORDS and ACCOUNTS.**

7.1. Between the Effective Date and the date three (3) years after the Completion Date the Subrecipient shall keep detailed accounts of all expenses incurred in connection with the Project, including, but not limited to, costs of administration, transportation, insurance, telephone calls, and clerical materials and services. Such accounts shall be supported by receipts, invoices, bills and other similar documents.

7.2. Between the Effective Date and the date three (3) years after the Completion Date, at any time during the Subrecipient's normal business hours, and as often as the State shall demand, the Subrecipient shall make available to the State all records pertaining to matters covered by this Agreement. The Subrecipient shall permit the State to audit, examine, and reproduce such records, and to make audits of all contracts, invoices, materials, payrolls, records of personnel, data (as that term is hereinafter defined), and other information relating to all matters covered by this Agreement. As used in this paragraph, "Subrecipient" includes all persons, natural or fictional, affiliated with, controlled by, or under common ownership with, the entity identified as the Subrecipient in block 1.3 of these provisions.

8. **PERSONNEL.**

8.1. The Subrecipient shall, at its own expense, provide all personnel necessary to perform the Project. The Subrecipient warrants that all personnel engaged in the Project shall be qualified to perform such Project, and shall be properly licensed and authorized to perform such Project under all applicable laws.

8.2. The Subrecipient shall not hire, and it shall not permit any subcontractor, subgrantee, or other person, firm or corporation with whom it is engaged in a combined effort to perform the Project, to hire any person who has a contractual relationship with the State, or who is a State officer or employee, elected or appointed.

8.3. The Grant Officer shall be the representative of the State hereunder. In the event of any dispute hereunder, the interpretation of this Agreement by the Grant Officer, and his/her decision on any dispute, shall be final.

9. **DATA: RETENTION OF DATA: ACCESS.**

9.1. As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations,

computer programs, computer printouts, notes, letters, memoranda, paper, and documents, all whether finished or unfinished.

9.2. Between the Effective Date and the Completion Date the Subrecipient shall grant to the State, or any person designated by it, unrestricted access to all data for examination, duplication, publication, translation, sale, disposal, or for any other purpose whatsoever.

9.3. No data shall be subject to copyright in the United States or any other country by anyone other than the State.

9.4. On and after the Effective Date all data, and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason, whichever shall first occur.

9.5. The State, and anyone it shall designate, shall have unrestricted authority to publish, disclose, distribute and otherwise use, in whole or in part, all data.

10. **CONDITIONAL NATURE OR AGREEMENT.** Notwithstanding anything in this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability or continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available or appropriated funds. In the event of a reduction or termination of those funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Subrecipient notice of such termination.

11. **EVENT OF DEFAULT: REMEDIES.**

11.1. Any one or more of the following acts or omissions of the Subrecipient shall constitute an event of default hereunder (hereinafter referred to as "Events of Default"):

11.1.1 Failure to perform the Project satisfactorily or on schedule; or

11.1.2 Failure to submit any report required hereunder; or

11.1.3 Failure to maintain, or permit access to, the records required hereunder; or

11.1.4 Failure to perform any of the other covenants and conditions of this Agreement.

11.2. Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

11.2.1 Give the Subrecipient a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Subrecipient notice of termination; and

11.2.2 Give the Subrecipient a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the Grant Amount which would otherwise accrue to the Subrecipient during the period from the date of such notice until such time as the State determines that the Subrecipient has cured the Event of Default shall never be paid to the Subrecipient; and

11.2.3 Set off against any other obligation the State may owe to the Subrecipient any damages the State suffers by reason of any Event of Default; and

11.2.4 Treat the agreement as breached and pursue any of its remedies at law or in equity, or both.

12. **TERMINATION.**

12.1. In the event of any early termination of this Agreement for any reason other than the completion of the Project, the Subrecipient shall deliver to the Grant Officer, not later than fifteen (15) days after the date of termination, a report (hereinafter referred to as the "Termination Report") describing in detail all Project Work performed, and the Grant Amount earned, to and including the date of termination.

12.2. In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall entitle the Subrecipient to receive that portion of the Grant amount earned to and including the date of termination.

12.3. In the event of Termination under paragraphs 10 or 12.4 of these general provisions, the approval of such a Termination Report by the State shall in no event relieve the Subrecipient from any and all liability for damages sustained or incurred by the State as a result of the Subrecipient's breach of its obligations hereunder.

12.4. Notwithstanding anything in this Agreement to the contrary, either the State or, except where notice default has been given to the Subrecipient hereunder, the Subrecipient, may terminate this Agreement without cause upon thirty (30) days written notice.

13. **CONFLICT OF INTEREST.** No officer, member of employee of the Subrecipient, and no representative, officer or employee of the State of New Hampshire or of the governing body of the locality or localities in which the Project is to be performed, who exercises any functions or responsibilities in the review or

Subrecipient Initials: [Signature]

2.) [Signature]

3.) [Signature]

Date: 12/3/91

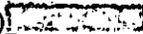


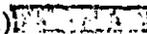
**EXHIBIT A**

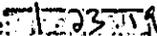
**Scope of Services**

1. The Department of Safety, Division of Fire Standards & Training and Emergency Medical Services (hereinafter referred to as "the State") is awarding the City of Concord (hereinafter referred to as "the Subrecipient") \$126,999.00 to implement a Mobile Integrated Healthcare (MIH) program.
2. "The Subrecipient" agrees to submit quarterly progress reports and requests for reimbursement within fifteen (15) days after each quarter (January 15<sup>th</sup>, April 15<sup>th</sup>, July 15<sup>th</sup>, and October 15<sup>th</sup>) until all activities associated with the grant award have been completed.
3. "The Subrecipient" agrees that the project grant period ends September 29, 2019 and that a final performance and expenditure report will be sent to "the State" by October 30, 2019.
4. "The Subrecipient" agrees to comply with all applicable federal and state laws, rules, regulations, and requirements.
5. "The Subrecipient" shall maintain financial records, supporting documents, and all other pertinent records for a period of three (3) years from the grant period end date, or longer if notified by the Department of Safety that an active audit requires the documents to be maintained and accessible for a period longer than the original grant period end date.

Subrecipient Initials: 

2.) 

3.) 

Date: 

**EXHIBIT B**

**Grant Amount and Method of Payment**

**i. GRANT AMOUNT**

<b>Total Grant (Federal Award): \$126,999.00</b>	<b>Project Cost is 100% Federal Funds</b>
<b>Awarding Agency: Substance Abuse and Mental Health Services Administration (SAMHSA)</b>	
<b>Award Title: First Responder- Comprehensive Addiction &amp; Recovery Act (FR-CARA)</b>	
<b>Award Number: 5H79SP080286-02</b>	
<b>Catalog of Federal Domestic Assistance (CFDA) Number: 93.243 (FR-CARA)</b>	
<b>Applicant's Data Universal Numbering System (DUNS): 073976680</b>	

**ii. PAYMENT SCHEDULE**

- a. "The Subrecipient" agrees the total payment by "the State" under this grant agreement shall be up to \$126,999.00.
  
- b. "The State" shall reimburse up to \$126,999.00 to "the Subrecipient" upon "the State" receiving appropriate documentation of expended funds (i.e, copies of payroll, sign-in sheets, invoices and cancelled checks), and quarterly progress reports from "the Subrecipient".

Subrecipient Initials: [Signature]

2.) [Signature]

3.) [Signature]

Date: 1/23/19

**EXHIBIT C**

**Special Provisions**

1. This grant agreement may be terminated upon thirty (30) days written notice by either party.
2. "The Subrecipient" ensures Federal award funds will supplement, and not replace (supplant) nonfederal funds for this project and ensures that federal funds do not supplant funds that have been budgeted for the same purpose through non-federal sources. If required, "the Subrecipient" agrees to demonstrate that a reduction in non-federal resources occurred for reasons other than the receipt of expected receipt of federal funds.
3. "The Subrecipient" agrees to have an audit conducted in compliance with OMB Circular 2 CFR 200, if applicable. If a compliance audit is not required, at the end of each audit period "the Subrecipient" will certify in writing that they have not expended the amount of federal funds that would require a compliance audit (\$750,000). If required, they will forward for review and clearance a copy of the completed audit(s) to "the State".

Additionally, "the Subrecipient" has or will notify their auditor of the above requirements prior to performance of the audit. "The Subrecipient" will also ensure that, if required, the entire grant period will be covered by a compliance audit, which in some cases will mean more than one audit must be submitted. "The Subrecipient" will advise the auditor to cite specifically that the audit was done in accordance with OMB Circular 2 CFR 200 as codified by HHS at 45 CFR 75. "The Subrecipient" will also ensure that all records concerning this grant will be kept on file for a minimum of three (3) years from the end of this audit period.

4. "The Subrecipient" agrees to acknowledge federal funding when issuing statements, press releases, requests for proposals, bid invitations, and other documents describing projects or programs funded in whole or in part with federal funds and will include the percentage and dollar amounts of the total program or project costs financed with federal funds; and the percentage and dollar amount of the total costs financed by nongovernmental sources.
5. "The Subrecipient" agrees to comply with all grant compliance and certification requirements as referenced in the NH Project FIRST, FR-CARA Grant Guidance.
6. Order of Precedence: In the event of conflict or ambiguity among any of the text of the Contract Documents, the following Order of Precedence shall govern:
  - a. State of New Hampshire, Department of Safety, Grant Agreement;
  - b. State of New Hampshire, FR-CARA, NH Project FIRST Grant Guidance Document;
  - c. State of New Hampshire, FR-CARA, NH Project FIRST Grant Award Letter;
  - d. State of New Hampshire, FR-CARA, NH Project FIRST Application, which is herein included by reference.

Subrecipient Initials: [Signature]

2.) [Signature]

3.) [Signature]

Date: 1/23/19

# CITY OF CONCORD

*In the year of our Lord two thousand and nineteen*

**RESOLUTION** ACCEPTING THE TERMS OF THE FIRST RESPONDER COMPREHENSIVE ADDICTION AND RECOVERY ACT (FR-CARA) GRANT AND ACCEPTING AND APPROPRIATING THE SUM OF UP TO ONE HUNDRED AND TWENTY-SIX THOUSAND NINE HUNDRED NINETY-NINE DOLLARS (\$126,999) TO IMPLEMENT A MOBILE INTEGRATED HEALTHCARE (MIH) PROGRAM, PENDING BOTH NH FIRE STANDARDS AND TRAINING & EMS APPROVAL AND GOVERNOR AND COUNCIL APPROVAL, TO ENHANCE THE CITY'S ABILITY TO RESPOND TO EMERGENCIES INVOLVING OPIOID OVERDOSES

Page 1 of 2

**The City of Concord resolves as follows:**

**WHEREAS,** the City of Concord has been notified of available grant funding in the amount of up to \$126,999 for the FR-CARA grant implementation of Project FIRST (First Responders Initiating Recovery, Support, and Treatment) in this City; and

**WHEREAS,** the Concord City Council approved a consent resolution, dated September 10, 2018, at their regular meeting, authorizing the City Manager to apply for the above grant; and

**WHEREAS,** the City of Concord desires to utilize this funding to implement initiatives to improve access to treatment to at-risk individuals and their families and support networks to access treatment, information, and other resources, and to train at-risk individuals and their families and support networks on CPR and naloxone administration; and

**WHEREAS,** there is no financial match required for this grant program; and

**WHEREAS,** this appropriation is for a purpose not included in the Fiscal Year 2019 adopted budget, therefore Section 37 of the City Charter requires a two-thirds vote of the City Council.

**NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Concord that:**

1. The sum of.....\$126,999  
be and is hereby appropriated as follows:

Miscellaneous Special Revenue Fund  
First Responders Initiating Recovery, Support, and Treatment.....\$126,999

2. Funding to meet said appropriation shall be provided from the following source:

Miscellaneous Special Revenue Fund  
Federal Department of Health and Human Services, Substance Abuse and Mental  
Health Services Administration  
FR-CARA grant .....\$126,999

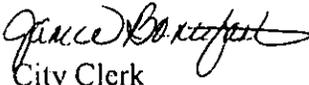
**CITY OF CONCORD**

*In the year of our Lord two thousand and nineteen*

**RESOLUTION** ACCEPTING THE TERMS OF THE FIRST RESPONDER COMPREHENSIVE ADDICTION AND RECOVERY ACT (FR-CARA) GRANT AND ACCEPTING AND APPROPRIATING THE SUM OF UP TO ONE HUNDRED AND TWENTY-SIX THOUSAND NINE HUNDRED NINETY-NINE DOLLARS (\$126,999) TO IMPLEMENT A MOBILE INTEGRATED HEALTHCARE (MIH) PROGRAM, PENDING BOTH NH FIRE STANDARDS AND TRAINING & EMS APPROVAL AND GOVERNOR AND COUNCIL APPROVAL, TO ENHANCE THE CITY'S ABILITY TO RESPOND TO EMERGENCIES INVOLVING OPIOID OVERDOSES

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3. Sums as appropriated shall be expended under the direction of the City Manager.
4. The resolution shall take effect upon its passage.

A true copy; I attest:   
City Clerk

*In City Council*  
January 14, 2019  
Passed

  
City Clerk



CERTIFICATE OF AUTHORITY

I, Janice Bonenfant, as City Clerk of the City of Concord New Hampshire, hereby certify that Thomas J. Aspell, Jr. City Manager of the City of Concord New Hampshire, is authorized to act on behalf of the City of Concord in negotiating for and accepting grant funds in connection with the First Responder Comprehensive Addiction and Recovery Act (FR-CARA) Grant, per action taken by the Concord New Hampshire City Council on January 14, 2019.

OFFICIAL SEAL

Signature: Janice Bonenfant

Date: 1-14-2019

*[Faint, illegible text]*

NOTARIZATION

State of New Hampshire

County of Merrimack

On this 17<sup>th</sup> day of January 2019, before me Michelle Mulholland the undersigned officer personally appeared Janice Bonenfant who acknowledged herself to be the City Clerk of the City of Concord NH and that she, as the City Clerk being authorized to do so, executed the foregoing instrument for the purpose of therein contained.

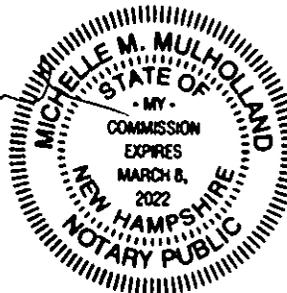
In witness thereof, I hereunto set my hand and official seal

Notary Public:

Michelle M. Mulholland

My Commission Expires:

3/8/2022





## CERTIFICATE OF COVERAGE

The New Hampshire Public Risk Management Exchange (Primex<sup>3</sup>) is organized under the New Hampshire Revised Statutes Annotated, Chapter 5-B, Pooled Risk Management Programs. In accordance with those statutes, its Trust Agreement and bylaws, Primex<sup>3</sup> is authorized to provide pooled risk management programs established for the benefit of political subdivisions in the State of New Hampshire.

Each member of Primex<sup>3</sup> is entitled to the categories of coverage set forth below. In addition, Primex<sup>3</sup> may extend the same coverage to non-members. However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, amendments, rules, policies and procedures that are applicable to the members of Primex<sup>3</sup>, including but not limited to the final and binding resolution of all claims and coverage disputes before the Primex<sup>3</sup> Board of Trustees. The Additional Covered Party's per occurrence limit shall be deemed included in the Member's per occurrence limit, and therefore shall reduce the Member's limit of liability as set forth by the Coverage Documents and Declarations. The limit shown may have been reduced by claims paid on behalf of the member. General Liability coverage is limited to Coverage A (Personal Injury Liability) and Coverage B (Property Damage Liability) only, Coverage's C (Public Officials Errors and Omissions), D (Unfair Employment Practices), E (Employee Benefit Liability) and F (Educator's Legal Liability Claims-Made Coverage) are excluded from this provision of coverage.

The below named entity is a member in good standing of the New Hampshire Public Risk Management Exchange. The coverage provided may, however, be revised at any time by the actions of Primex<sup>3</sup>. As of the date this certificate is issued, the information set out below accurately reflects the categories of coverage established for the current coverage year.

This Certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend, or alter the coverage afforded by the coverage categories listed below.

<b>Participating Member:</b> Primex3 Members as per attached Schedule of Members Property & Liability Program		<b>Member Number:</b>		<b>Company Affording Coverage:</b> NH Public Risk Management Exchange - Primex <sup>3</sup> Bow Brook Place 46 Donovan Street Concord, NH 03301-2624	
Type of Coverage	Effective Date (mm/dd/yyyy)	Expiration Date (mm/dd/yyyy)	Limits - NH Statutory Limits May Apply, if Not:		
<input checked="" type="checkbox"/> <b>General Liability (Occurrence Form)</b> <input type="checkbox"/> <b>Professional Liability (describe)</b> <input type="checkbox"/> Claims Made <input type="checkbox"/> Occurrence	7/1/2018	7/1/2019	Each Occurrence	\$ 5,000,000	
			General Aggregate	\$ 5,000,000	
			Fire Damage (Any one fire)		
			Med Exp (Any one person)		
<input type="checkbox"/> <b>Automobile Liability</b> Deductible    Comp and Coll: <input type="checkbox"/> Any auto			Combined Single Limit (Each Accident)		
			Aggregate		
<input type="checkbox"/> <b>Workers' Compensation &amp; Employers' Liability</b>			<input type="checkbox"/> Statutory		
			Each Accident		
			Disease - Each Employee		
			Disease - Policy Limit		
<input type="checkbox"/> <b>Property (Special Risk includes Fire and Theft)</b>			Blanket Limit, Replacement Cost (unless otherwise stated)		
<b>Description:</b> Proof of Primex Member coverage only.					

<b>CERTIFICATE HOLDER:</b>	<b>Additional Covered Party</b>	<b>Loss Payee</b>	<b>Primex<sup>3</sup> - NH Public Risk Management Exchange</b>
NH Dept of Safety 33 Hazen Dr. Concord, NH 03301			By: <i>Tammy Denver</i>
			Date: 6/25/2018    tdenver@nhprimex.org
			Please direct inquires to: <b>Primex<sup>3</sup> Claims/Coverage Services</b> 603-225-2841 phone 603-228-3833 fax

<b>Member</b>	<b>Member #</b>
Albany School District	859
Allenstown School District	792
Alton School District	786
Amherst School District	701
Andover School District	702
Ashland School District	822
Ashuelot Pond Dam Village District	457
Auburn School District	902
Barnstead School District	785
Barrington School District	838
Bartlett School District	903
Bartlett Village Water Precinct	459
Bath School District	768
BCEP Solid Waste	510
Bedford School District	779
Belknap County Conservation District	597
Belknap County Conservation District	597
Benton School District	848
Berlin School District	904
Berlin Water Works	500
Bethlehem School District	856
Bethlehem Village District	568
Bow School District	703
Brentwood School District	704
Brookline School District	834
Campton School District	705
Campton Village Precinct	565
Campton-Thornton Fire Department	550
Candia School District	906
Carroll County	600
Central NH Special Operations Unit	450
Chatham School District	860
Chester School District	707
Chesterfield School District	706
Chichester School District	708
City of Berlin	120
→ City of Concord	145
City of Dover	156
City of Keene	210
City of Laconia	213
City of Lebanon	217
City of Portsmouth	275
City of Rochester	280
City of Somersworth	293
Claremont School District	909
Cochecho Arts and Technology Academy	1203
Colebrook Fire Precinct	577
Concord School District	710
Contoocook Valley School District	802
Contoocook Village Precinct	592
Conway School District	911
Coos County	602
Coos County Conservation District	451
Copple Crown Village District	456
Cornish School District	912
Croydon School District	957
CSI Charter School	1209
Deerfield School District	825
Derry Cooperative School District	711
Dover School District	900
Dresden School District	913



## CERTIFICATE OF COVERAGE

The New Hampshire Public Risk Management Exchange (Primex<sup>3</sup>) is organized under the New Hampshire Revised Statutes Annotated, Chapter 5-B, Pooled Risk Management Programs. In accordance with those statutes, its Trust Agreement and bylaws, Primex<sup>3</sup> is authorized to provide pooled risk management programs established for the benefit of political subdivisions in the State of New Hampshire.

Each member of Primex<sup>3</sup> is entitled to the categories of coverage set forth below. In addition, Primex<sup>3</sup> may extend the same coverage to non-members. However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, amendments, rules, policies and procedures that are applicable to the members of Primex<sup>3</sup>, including but not limited to the final and binding resolution of all claims and coverage disputes before the Primex<sup>3</sup> Board of Trustees. The Additional Covered Party's per occurrence limit shall be deemed included in the Member's per occurrence limit, and therefore shall reduce the Member's limit of liability as set forth by the Coverage Documents and Declarations. The limit shown may have been reduced by claims paid on behalf of the member. General Liability coverage is limited to Coverage A (Personal Injury Liability) and Coverage B (Property Damage Liability) only. Coverage's C (Public Officials Errors and Omissions), D (Unfair Employment Practices), E (Employee Benefit Liability) and F (Educator's Legal Liability Claims-Made Coverage) are excluded from this provision of coverage.

The below named entity is a member in good standing of the New Hampshire Public Risk Management Exchange. The coverage provided may, however, be revised at any time by the actions of Primex<sup>3</sup>. As of the date this certificate is issued, the information set out below accurately reflects the categories of coverage established for the current coverage year.

This Certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend, or alter the coverage afforded by the coverage categories listed below.

<b>Participating Member:</b> Primex3 Members as per attached Schedule of Members Workers' Compensation Program	<b>Member Number:</b>	<b>Company Affording Coverage:</b> NH Public Risk Management Exchange - Primex <sup>3</sup> Bow Brook Place 46 Donovan Street Concord, NH 03301-2624
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Type of Coverage	Effective Date (mm/dd/yyyy)	Expiration Date (mm/dd/yyyy)	Limits - NH Statutory Limits May Apply, If Not:	
<input type="checkbox"/> General Liability (Occurrence Form) <input type="checkbox"/> Professional Liability (describe) <input type="checkbox"/> Claims Made <input type="checkbox"/> Occurrence			Each Occurrence	
			General Aggregate	
			Fire Damage (Any one fire)	
			Med Exp (Any one person)	
<input type="checkbox"/> Automobile Liability Deductible    Comp and Coll: <input type="checkbox"/> Any auto			Combined Single Limit (Each Accident)	
			Aggregate	
<input checked="" type="checkbox"/> Workers' Compensation & Employers' Liability	7/1/2018	7/1/2019	<input checked="" type="checkbox"/> Statutory	\$2,000,000
			Each Accident	\$2,000,000
			Disease - Each Employee	
			Disease - Policy Limit	
<input type="checkbox"/> Property (Special Risk Includes Fire and Theft)			Blanket Limit, Replacement Cost (unless otherwise stated)	

**Description:** Proof of Primex Member coverage only.

<b>CERTIFICATE HOLDER:</b>	<b>Additional Covered Party</b>	<b>Loss Payee</b>	<b>Primex<sup>3</sup> - NH Public Risk Management Exchange</b>
NH Dept of Safety 33 Hazen Dr. Concord, NH 03301			<b>By:</b> <i>Tammy Downer</i>
			<b>Date:</b> 6/25/2018    tdenver@nhprimex.org Please direct inquires to: <b>Primex<sup>3</sup> Claims/Coverage Services</b> 603-225-2841 phone 603-228-3833 fax

<b>Member</b>	<b>Member #</b>
Albany School District	859
Allenstown School District	792
Alton School District	786
Amherst School District	701
Andover School District	702
Androscoggin Valley Regional Refuse	421
Ashland School District	822
Ashuelot Pond Dam Village District	457
Auburn School District	902
Barnstead School District	785
Barrington School District	838
Bartlett School District	903
Bath School District	768
Bedford School District	779
Belknap County Conservation District	597
Belknap County Conservation District	597
Benton School District	848
Berlin School District	904
Berlin Water Works	500
Bethlehem School District	856
Bow School District	703
Brentwood School District	704
Brookline School District	834
Campton School District	705
Candia School District	906
Chatham School District	860
Chester School District	707
Chesterfield School District	706
Chichester School District	708
City of Berlin	120
→ City of Concord	145
City of Dover	156
City of Franklin	175
City of Lebanon	217
City of Rochester	280
City of Somersworth	293
Claremont School District	909
Cochecho Arts and Technology Academy	1203
Concord Regional Solid Waste/Resource Recovery Cooperative	400
Concord School District	710
Contoocook Valley School District	802
Contoocook Village Precinct	592
Conway School District	911
Copple Crown Village District	456
Cornish School District	912
Croydon School District	957
CSI Charter School	1209
Deerfield School District	825
Derry Cooperative School District	711
Dover School District	900
Dresden School District	913
Dummer School District	914
Dunbarton School District	712
East Kingston School District	819
Eaton School District	915
Epping School District	713
Epsom School District	714
Errol School District	917
Exeter Region Cooperative School District	839
Exeter School District	780
Farmington School District	958