



THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



33 Beaulieu

Victoria F. Sheehan
Commissioner

William Cass, P.E.
Assistant Commissioner

Bureau of Construction
October 25, 2015

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

REQUESTED ACTION

1. Authorize the Department of Transportation to enter into a contract with Evroks Corporation (Vendor 155652) of Winnisquam, NH on the basis of a low bid of \$230,853.45 for bridge rehabilitation work on the Prescott Road bridge over NH 101 in Raymond, from the date of Governor and Council approval through September 30, 2016 unless extended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Table with 3 columns: Funding description, FY 2016, FY 2017. Row 1: 04-96-96-963515-3054 Consolidated Federal Aid. Row 2: 400-500870 Highway Contract Payments \$100,853.45 \$130,000.00

2. Further authorize that a contingency in the amount of \$23,085.35 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.

Table with 3 columns: Funding description, FY 2016, FY 2017. Row 1: 04-96-96-963515-3054 Consolidated Federal Aid. Row 2: 400-500870 Highway Contract Payments \$10,085.35 \$13,000.00

EXPLANATION

This project is part of the State's 10-Year Transportation Improvement Plan under the Statewide FBRPI Program to address bridge preservation efforts. This project consists of bridge rehabilitation work on the Prescott Road bridge over NH 101 in Raymond. The scope of work includes replacement of the bridge deck pavement and membrane, partial and full depth deck repair, replacement of the expansion joint, and minor work to provide temporary access from NH101 Eastbound to Old Prescott Road for emergency access. This existing bridge over NH 101 was built in 1985. The concrete deck is showing signs of deterioration and the expansion joint is leaking on the abutments and bearings. This preservation project will address and fix these issues to extend the life of the structure and keep it off the State's red list.

The contingency amount is proposed to be 10% of the contract amount, and is necessary as this work includes the rehabilitation of the bridge, which typically has higher risks of cost and quantity overruns due to the nature of the rehabilitation work and the inability to accurately quantify the extent of deck repairs. Until the existing pavement and membrane on the deck is removed, the true extent of the repair work is only an estimate.

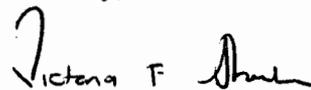
Although the bid costs exceeded the Department's estimate, the low bid is felt to be reasonable for the work involved as there were 3 bids submitted for this project. Re-advertising this project would result, in our opinion, in higher prices. The Department considers it to be in the best interest of 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 that 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 80% federal funds with 20% state match. Turnpike toll credit is being utilized for match requirements, effectively using 100% federal 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.

Sincerely,



Victoria F. Sheehan
Commissioner

VFS/md

Department Estimate: \$197,020.00
Contract Amount: \$230,853.45
Over Estimate: \$ 33,833.45

Attachments

RAYMOND

X-A004(410)

40458

August 6, 2015

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION: This project consists of bridge rehabilitation work on the Prescott Road bridge over NH 101 in Raymond. The work limits are the immediate limits of the bridge. The scope of work includes replacement of the bridge deck pavement and membrane, partial and full depth deck repair, replacement of the expansion joint, and minor work to provide temporary access from NH101 Eastbound to Old Prescott Road for emergency access.

FEDERAL FUNDING: 80% Federal Funding with the State's 20% match being Turnpike Toll Credits

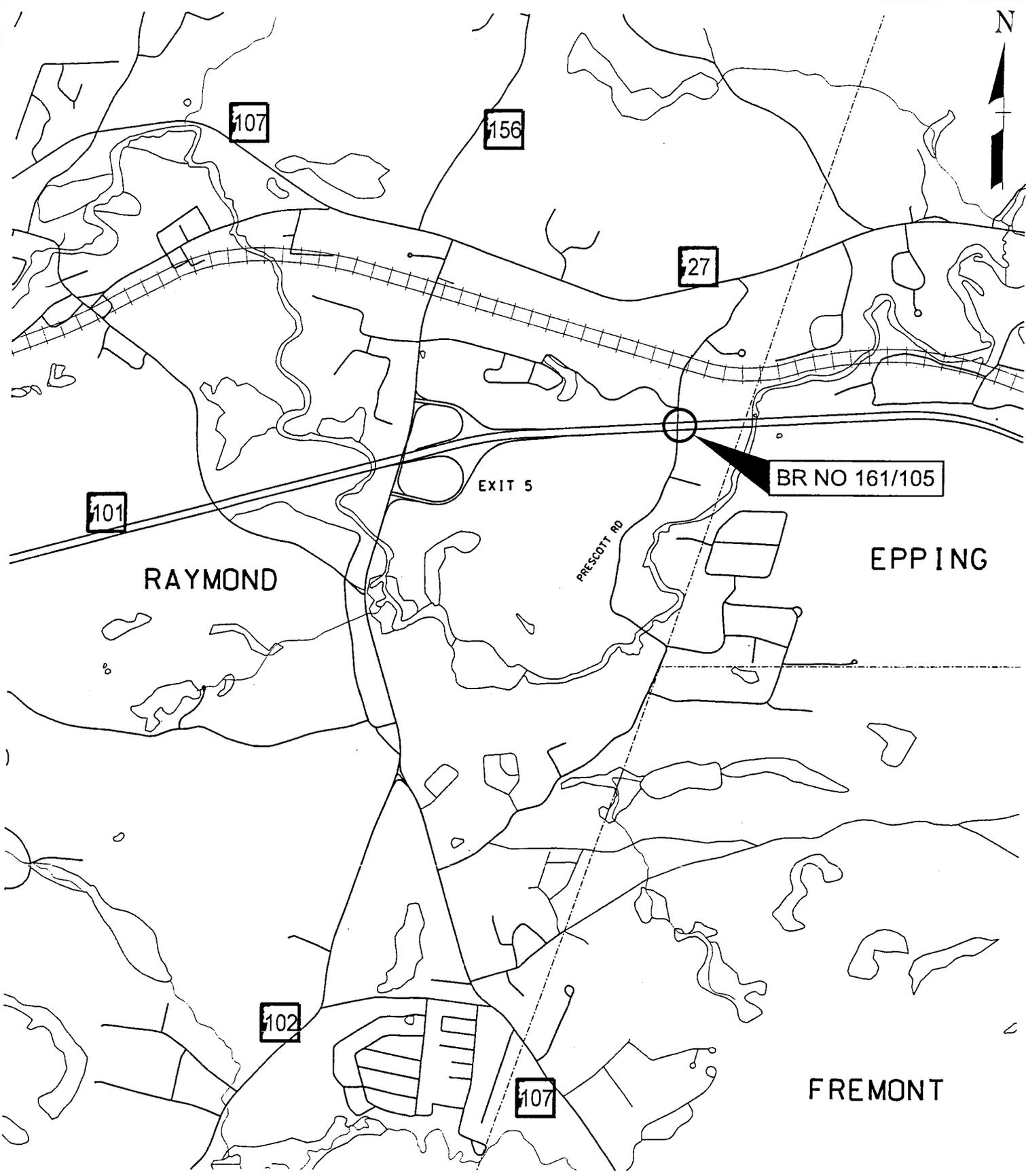
CONTINGENCY: The Contingency amount is proposed to be 10%. This work includes the rehabilitation of the bridge, which typically has higher risks of costs and quantity overruns due to the nature of the rehabilitation work and the inability to accurately quantify the extent of deck repairs. Until the existing pavement and membrane on the deck is removed, the true extent of the repair work is only an estimate.

PROJECT INITIATED: State's 10-Year Transportation Improvement Plan

PROJECT EXPLANATION: This existing bridge over NH101 was built in 1985. The concrete deck is showing signs of deterioration and the expansion joint is leaking on the abutments and bearings. This preservation project will address and fix these issues to extend the life of the structure and keep it off the State's red list.

TRAFFIC IMPLICATIONS: The bridge will be closed to traffic for a period of six weeks. Traffic (1,000 vpd) will maneuver around the project by way of signed detours.

COMPLETION DATE: Friday, September 30, 2016



101

107

156

27

EXIT 5

BR NO 161/105

RAYMOND

PRESCOTT RD

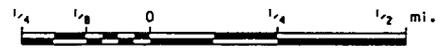
EPPING

102

107

FREMONT

RAYMOND 40458



GRAPHIC SCALE

**State of New Hampshire
Department of Transportation**

40458.01

Project: RAYMOND X-A004(410) 40458
County and Code: ROCKINGHAM COUNTY 015
Date Bids Open: September 23, 2015
Scope of Work: BRIDGE REHABILITATION
Location: PRESCOTT ROAD BRIDGE OVER NH 101 IN RAYMOND
Completion Date: September 30, 2016

A EVROKS CORP. PO BOX 669 WINNISQUAM, NH 03289	\$230,853.45
B R.M. PIPER, INC. PO BOX 490, PLYMOUTH, NH 03264	\$342,796.50
C T BUCK CONSTRUCTION INC (B001) 249 MERROW RD AUBURN, ME 04210	\$381,223.00

Item No:	Description	Unit	Quantity	A		B		C	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
304.3	CRUSHED GRAVEL (F)	CY	5.00	\$110.00	\$550.00	\$50.00	\$250.00	\$100.00	\$500.00
403.11	HOT BITUMINOUS PAVEMENT, MACHINE METHOD	TON	56.30	\$175.00	\$9,852.50	\$185.00	\$10,415.50	\$200.00	\$11,260.00
403.12	HOT BITUMINOUS PAVEMENT, HAND METHOD	TON	5.00	\$600.00	\$3,000.00	\$425.00	\$2,125.00	\$200.00	\$1,000.00
403.6	PAVEMENT JOINT ADHESIVE	LF	2,500.00	\$0.20	\$500.00	\$2.50	\$6,250.00	\$2.00	\$5,000.00
403.911	HOT BITUMINOUS BRIDGE PAVEMENT, 1" BASE COURSE	TON	50.00	\$175.00	\$8,750.00	\$185.00	\$9,250.00	\$200.00	\$10,000.00
403.99	TEMPORARY BITUMINOUS PAVEMENT	TON	10.00	\$300.00	\$3,000.00	\$325.00	\$3,250.00	\$200.00	\$2,000.00
502.101	REMOVAL OF EXISTING BRIDGE STRUCTURE	U	1.00	\$25,000.00	\$25,000.00	\$45,000.00	\$45,000.00	\$40,000.00	\$40,000.00
504.1	COMMON BRIDGE EXCAVATION (F)	CY	6.00	\$40.00	\$240.00	\$50.00	\$300.00	\$125.00	\$750.00
511.0001	CONCRETE BRIDGE DECK PAVEMENT REMOVAL (F)	SY	877.00	\$15.30	\$13,418.10	\$14.00	\$12,278.00	\$18.00	\$15,786.00
511.02	PREPARATION FOR PARTIAL DEPTH CONCRETE BRIDGE DECK REPAIRS	SY	20.00	\$225.00	\$4,500.00	\$450.00	\$9,000.00	\$350.00	\$7,000.00
511.03	PREPARATION FOR FULL DEPTH CONCRETE BRIDGE DECK REPAIRS	SY	5.00	\$400.00	\$2,000.00	\$700.00	\$3,500.00	\$600.00	\$3,000.00
512.0201	PREPARATION FOR CONCRETE REPAIRS, CLASS II	SY	3.00	\$500.00	\$1,500.00	\$750.00	\$2,250.00	\$600.00	\$1,800.00
520.01	CONCRETE CLASS AA	CY	3.00	\$570.00	\$1,710.00	\$1,100.00	\$3,300.00	\$1,500.00	\$4,500.00
520.0201	CONCRETE CLASS AA, ABOVE FOOTINGS	CY	6.00	\$4,170.00	\$25,020.00	\$1,100.00	\$6,600.00	\$1,200.00	\$7,200.00
534.3	WATER REPELLENT (SILANE/ SILOXANE)	GAL	47.00	\$100.00	\$4,700.00	\$100.00	\$4,700.00	\$75.00	\$3,525.00
538.2	BARRIER MEMBRANE, PEEL AND STICK - VERTICAL SURFACES (F)	SY	12.00	\$50.00	\$600.00	\$30.00	\$360.00	\$30.00	\$360.00

Item No:	Description	Unit	Quantity	A		B		C	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
538.6	BARRIER MEMBRANE, HEAT WELDED - MACHINE METHOD (F)	SY	877.00	\$18.00	\$15,786.00	\$21.50	\$18,855.50	\$25.00	\$21,925.00
541.5	PVC WATERSTOPS, NH TYPE 5 (F)	LF	34.00	\$5.00	\$170.00	\$11.00	\$374.00	\$20.00	\$680.00
544.2	REINFORCING STEEL, EPOXY COATED (F)	LB	391.00	\$4.35	\$1,700.85	\$6.00	\$2,346.00	\$5.00	\$1,955.00
559.41	ASPHALTIC PLUG FOR CRACK CONTROL (F)	LF	34.00	\$142.00	\$4,828.00	\$150.00	\$5,100.00	\$145.00	\$4,930.00
561.1001	PREFABRICATED STRIP SEAL EXPANSION JOINT (F)	LF	37.00	\$660.00	\$24,420.00	\$650.00	\$24,050.00	\$900.00	\$33,300.00
562.1	SILICONE JOINT SEALANT (F)	LF	22.00	\$20.00	\$440.00	\$10.00	\$220.00	\$25.00	\$550.00
609.55	RESET GRANITE CURB (BRIDGE)	LF	20.00	\$70.00	\$1,400.00	\$75.00	\$1,500.00	\$1.00	\$20.00
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	13,500.00	\$1.00	\$13,500.00	\$1.00	\$13,500.00	\$1.00	\$13,500.00
618.7	FLAGGERS	HR	100.00	\$21.00	\$2,100.00	\$25.00	\$2,500.00	\$30.00	\$3,000.00
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$12,700.00	\$12,700.00	\$40,000.00	\$40,000.00	\$50,000.00	\$50,000.00
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.00	\$1,000.00	\$2,000.00	\$4,750.00	\$9,500.00	\$7,000.00	\$14,000.00
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	1.00	\$1,000.00	\$1,000.00	\$10,000.00	\$10,000.00	\$10,000.00	\$10,000.00
628.22	SAWED BITUMINOUS PAVEMENT (BRIDGE)	LF	34.00	\$2.00	\$68.00	\$2.50	\$85.00	\$10.00	\$340.00
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	950.00	\$2.00	\$1,900.00	\$2.25	\$2,137.50	\$2.50	\$2,375.00
645.531	SILT FENCE	LF	100.00	\$3.00	\$300.00	\$3.00	\$300.00	\$5.00	\$500.00
670.0491	CONSTRUCT AND REMOVE TEMPORARY ACCESS ROAD	U	1.00	\$10,000.00	\$10,000.00	\$27,500.00	\$27,500.00	\$55,000.00	\$55,000.00
692	MOBILIZATION	U	1.00	\$17,600.00	\$17,600.00	\$50,000.00	\$50,000.00	\$37,467.00	\$37,467.00
698.13	FIELD OFFICE TYPE C	MON	8.00	\$825.00	\$6,600.00	\$750.00	\$6,000.00	\$1,000.00	\$8,000.00

Item No:	Description	Unit	Quantity	A		B		C	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
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
1002.1	REPAIRS OR REPLACEMENTS AS NEEDED - BRIDGE STRUCTURES	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00
					\$230,853.45		\$342,796.50		\$381,223.00

A - PS&E Comparison

PS&E = NHDOT Cost Estimate

Item No:	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
304.3	CRUSHED GRAVEL (F)	CY	5.00	\$110.00	\$550.00	\$34.00	\$170.00	\$380.00
403.11	HOT BITUMINOUS PAVEMENT, MACHINE METHOD	TON	56.30	\$175.00	\$9,852.50	\$110.00	\$6,193.00	\$3,659.50
403.12	HOT BITUMINOUS PAVEMENT, HAND METHOD	TON	5.00	\$600.00	\$3,000.00	\$135.00	\$675.00	\$2,325.00
403.6	PAVEMENT JOINT ADHESIVE	LF	2,500.00	\$0.20	\$500.00	\$0.25	\$625.00	(\$125.00)
403.911	HOT BITUMINOUS BRIDGE PAVEMENT, 1" BASE COURSE	TON	50.00	\$175.00	\$8,750.00	\$150.00	\$7,500.00	\$1,250.00
403.99	TEMPORARY BITUMINOUS PAVEMENT	TON	10.00	\$300.00	\$3,000.00	\$105.00	\$1,050.00	\$1,950.00
502.101	REMOVAL OF EXISTING BRIDGE STRUCTURE	U	1.00	\$25,000.00	\$25,000.00	\$15,000.00	\$15,000.00	\$10,000.00
504.1	COMMON BRIDGE EXCAVATION (F)	CY	6.00	\$40.00	\$240.00	\$35.00	\$210.00	\$30.00
511.0001	CONCRETE BRIDGE DECK PAVEMENT REMOVAL (F)	SY	877.00	\$15.30	\$13,418.10	\$14.00	\$12,278.00	\$1,140.10
511.02	PREPARATION FOR PARTIAL DEPTH CONCRETE BRIDGE DECK REPAIRS	SY	20.00	\$225.00	\$4,500.00	\$300.00	\$6,000.00	(\$1,500.00)
511.03	PREPARATION FOR FULL DEPTH CONCRETE BRIDGE DECK REPAIRS	SY	5.00	\$400.00	\$2,000.00	\$550.00	\$2,750.00	(\$750.00)
512.0201	PREPARATION FOR CONCRETE REPAIRS, CLASS II	SY	3.00	\$500.00	\$1,500.00	\$800.00	\$2,400.00	(\$900.00)
520.01	CONCRETE CLASS AA	CY	3.00	\$570.00	\$1,710.00	\$850.00	\$2,550.00	(\$840.00)
520.0201	CONCRETE CLASS AA, ABOVE FOOTINGS	CY	6.00	\$4,170.00	\$25,020.00	\$925.00	\$5,550.00	\$19,470.00
534.3	WATER REPELLENT (SILANE/ SILOXANE)	GAL	47.00	\$100.00	\$4,700.00	\$75.00	\$3,525.00	\$1,175.00
538.2	BARRIER MEMBRANE, PEEL AND STICK - VERTICAL SURFACES (F)	SY	12.00	\$50.00	\$600.00	\$42.00	\$504.00	\$96.00

A - PS&E Comparison

PS&E = NHDOT Cost Estimate

Item No:	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
538.6	BARRIER MEMBRANE, HEAT WELDED - MACHINE METHOD (F)	SY	877.00	\$18.00	\$15,786.00	\$20.00	\$17,540.00	(\$1,754.00)
541.5	PVC WATERSTOPS, NH TYPE 5 (F)	LF	34.00	\$5.00	\$170.00	\$10.00	\$340.00	(\$170.00)
544.2	REINFORCING STEEL, EPOXY COATED (F)	LB	391.00	\$4.35	\$1,700.85	\$2.00	\$782.00	\$918.85
559.41	ASPHALTIC PLUG FOR CRACK CONTROL (F)	LF	34.00	\$142.00	\$4,828.00	\$90.00	\$3,060.00	\$1,768.00
561.1001	PREFABRICATED STRIP SEAL EXPANSION JOINT (F)	LF	37.00	\$660.00	\$24,420.00	\$600.00	\$22,200.00	\$2,220.00
562.1	SILICONE JOINT SEALANT (F)	LF	22.00	\$20.00	\$440.00	\$20.00	\$440.00	\$0.00
609.55	RESET GRANITE CURB (BRIDGE)	LF	20.00	\$70.00	\$1,400.00	\$85.00	\$1,700.00	(\$300.00)
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	13,500.00	\$1.00	\$13,500.00	\$1.00	\$13,500.00	\$0.00
618.7	FLAGGERS	HR	100.00	\$21.00	\$2,100.00	\$26.00	\$2,600.00	(\$500.00)
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$12,700.00	\$12,700.00	\$15,000.00	\$15,000.00	(\$2,300.00)
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.00	\$1,000.00	\$2,000.00	\$2,500.00	\$5,000.00	(\$3,000.00)
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	1.00	\$1,000.00	\$1,000.00	\$5,000.00	\$5,000.00	(\$4,000.00)
628.22	SAWED BITUMINOUS PAVEMENT (BRIDGE)	LF	34.00	\$2.00	\$68.00	\$4.50	\$153.00	(\$85.00)
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	950.00	\$2.00	\$1,900.00	\$1.50	\$1,425.00	\$475.00
645.531	SILT FENCE	LF	100.00	\$3.00	\$300.00	\$3.00	\$300.00	\$0.00
670.0491	CONSTRUCT AND REMOVE TEMPORARY ACCESS ROAD	U	1.00	\$10,000.00	\$10,000.00	\$3,000.00	\$3,000.00	\$7,000.00
692	MOBILIZATION	U	1.00	\$17,600.00	\$17,600.00	\$20,000.00	\$20,000.00	(\$2,400.00)
698.13	FIELD OFFICE TYPE C	MON	8.00	\$825.00	\$6,600.00	\$1,000.00	\$8,000.00	(\$1,400.00)

A - PS&E Comparison

PS&E = NHDOT Cost Estimate

Item No:	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference	
				Unit Price	Total	Unit Price	Total		
699	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$0.00	
1002.1	REPAIRS OR REPLACEMENTS AS NEEDED - BRIDGE STRUCTURES	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$0.00	
					\$230,853.45			\$197,020.00	\$33,833.45



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/15/2015

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 CROSS INSURANCE - LACONIA 155 Court Street Laconia NH 03246	CONTACT NAME: Sarah Cullen, AINS, ACSR	
	PHONE (A/C, No, Ext): (603) 524-2425 FAX (A/C, No): (603) 524-3666 E-MAIL ADDRESS: scullen@crossagency.com	
INSURED Evroks Corporation P.O. Box 669 Winnisquam NH 03289-0669	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Travelers Ins. Co.	-
	INSURER B: Travelers Property Casualty Company	25674
	INSURER C: The Charter Oak Fire Ins Co	25615
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: CL1562642896 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
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			DTC05594N950COF15	6/30/2015	6/30/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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 Employee Benefits Liability \$ 1,000,000
B	<input checked="" type="checkbox"/> 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			DT8107371N344TIL15	6/30/2015	6/30/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist combined \$ 1,000,000
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			DTSMCUP7371N368TIL15	6/30/2015	6/30/2016	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
C	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	DTHUB1589R87215	6/30/2015	6/30/2016	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Raymond X-A004(410), 40458 - State of New Hampshire, Department of Transportation is named as additional insureds for ongoing operations but only with respect to liability arising out of work performed by or on behalf of Evroks Corporation.

CERTIFICATE HOLDER State of New Hampshire Department of Transportation PO Box 483 Concord, NH 03302	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 S Cullen, AINS, ACSR/ <i>Sarah Cullen</i>

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/15/2015

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 CROSS INSURANCE - LACONIA 155 Court Street Laconia NH 03246	CONTACT NAME: Sarah Cullen, AINS, ACSR	
	PHONE (A/C, No, Ext): (603) 524-2425 FAX (A/C, No): (603) 524-3666 E-MAIL ADDRESS: scullen@crossagency.com	
INSURED State of New Hampshire Dept of Transportation C/O Evroks Corporation P.O. Box 669 Winnisquam NH 03289-0669	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Travelers Indemnity Co	25658
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: CL1593051708 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY			PRS-7E068054-IND	10/15/2015	10/15/2016	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input checked="" type="checkbox"/> Owners & Contractors						MED EXP (Any one person) \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY \$
	OTHER:						GENERAL AGGREGATE \$ 3,000,000
							PRODUCTS - COMP/OP AGG \$
							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR					EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$
	DED	RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A				OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Raymond X-A004(410), 40458

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire Department of Transportation PO Box 483 Concord, NH 03302	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE S Cullen, AINS, ACSR/ <i>Sarah Cullen</i>

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