



THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



*Beamer
32*

JEFF BRILLHART, P.E.
ACTING COMMISSIONER

Bureau of Construction
April 3, 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 Pike Industries, Inc. (Vendor 177300) of Belmont, NH on the basis of a single bid of \$1,780,185.50 for 18.9 miles of pavement preservation on NH 16 in the Towns of Ossipee, Tamworth, Albany, Madison and Conway, from the date of Governor and Council approval through September 18, 2015 unless extended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Funding is available as follows for FY 2015 and is contingent upon the availability and continued appropriation of FY 2016 funds.

Funding is available as follows:	<u>FY 2015</u>	<u>FY 2016</u>
04-96-96-963515-3054 Consolidated Federal Aid		
400-500870 Highway Contract Payments	\$500,000.00	1,280,185.50

2. Further authorize that a contingency in the amount of \$178,018.55 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 2015</u>
04-96-96-963515-3054 Consolidated Federal Aid	
400-500870 Highway Contract Payments	\$178,018.55

EXPLANATION

This project is part of the annual Federal Resurfacing Program. The work involves maintenance paving consisting of ¾" paver shim overlay. The NH 16 roadway is in poor condition containing thermal cracks, wheel path cracking, and potholes. The most distressed areas were drag shimmed last year as an interim measure. Overlaying the pavement with a ¾" paver shim will improve the safety and serviceability of the roadway and extend the service life.

The contingency amount is proposed to be 10% of the contract amount. This project has fixed limits and adjusting the limits to offset quantity overruns is not practical. Due to a narrow existing roadway and the contractor working within a limited work space during alternating one-way traffic, there is an increased risk of cost overruns for traffic control operations.

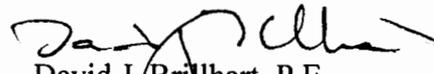
Although there was only one bid submitted for this project, it is the opinion of the Department that the bid is reasonable for the work involved. Readvertising this project would result, in our opinion, in higher prices and prevent the completion of the work this year. The Department considers it to be in the best interest of the State of New Hampshire to accept this bid to accomplish these needed pavement repairs before additional deterioration occurs.

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,


David J. Brillhart, P.E.
Acting Commissioner

DJB/md

Department Estimate: \$1,919,645.14
Contract Amount: \$1,780,185.50
Under Estimate: \$ 139,459.64

Attachments

March 3, 2015

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION OF WORK: This project consists of 18.9 miles of pavement preservation in the Town of Ossipee on NH 16 beginning 100 feet south of the bridge over Lovell River and continues north through the Towns of Tamworth, Albany, Madison and ending at the intersection of Thorne Hill Road in the Town of Conway. Also included is crushed gravel for shoulder leveling and constructing centerline rumble strips in the Town of Madison. There is no anticipated bridge, guardrail, or drainage work involved on this project.

FEDERAL FUNDING: 80% (Federal Resurfacing Program) with the anticipated utilization of Turnpike Toll Credits as the State's 20% match.

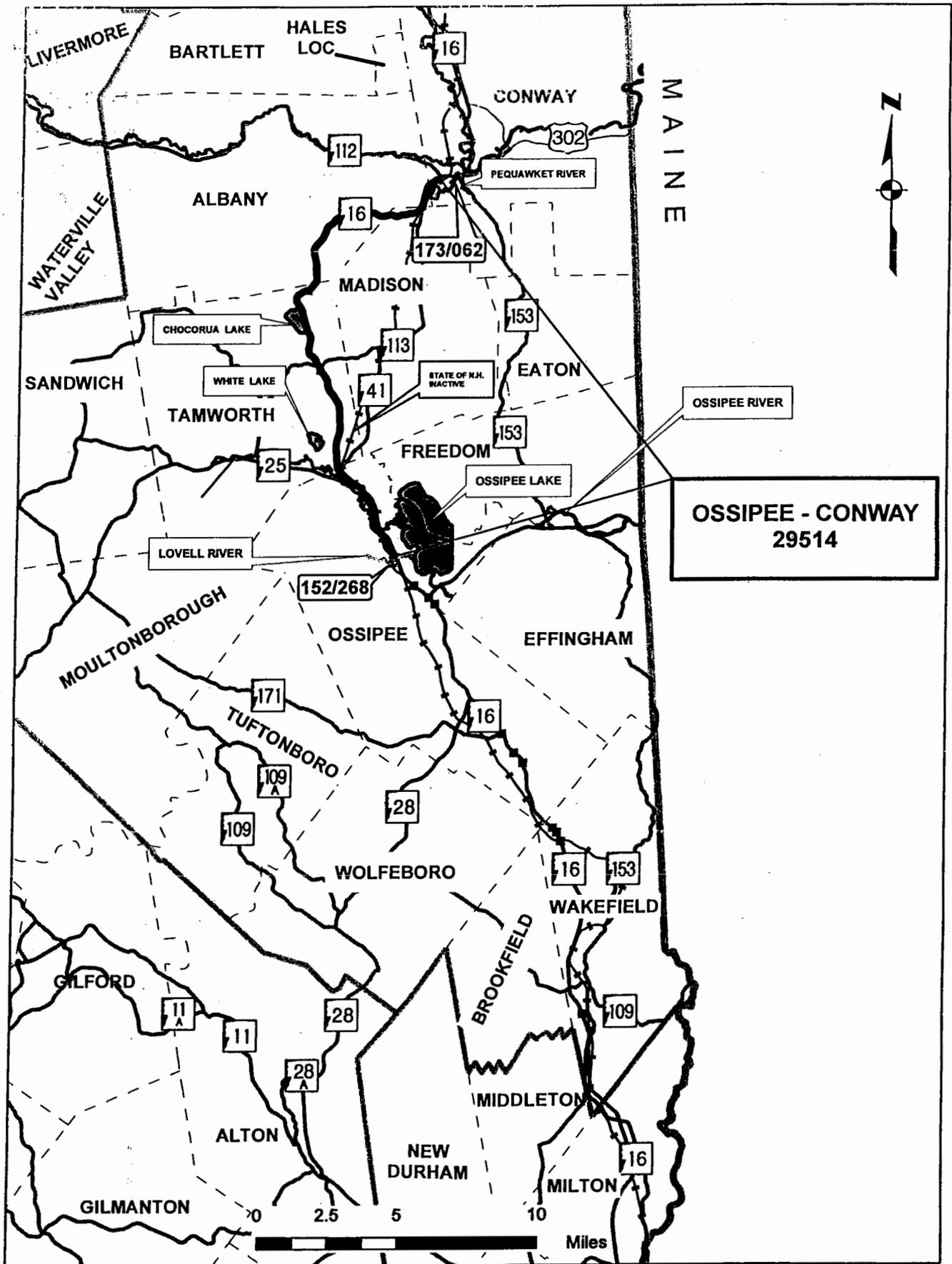
CONTINGENCY: The Contingency amount is proposed to be 10% of the contract amount. This project has fixed limits and adjusting the limits to offset quantity overruns is not practical. Due to a narrow existing roadway and the Contractor working within a limited work space during alternating one-way traffic, there is an increased risk of cost overruns for traffic control operations.

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

PROJECT EXPLANATION: The NH 16 roadway is in poor condition containing thermal cracks, wheel path cracking, and potholes. Overlaying the pavement with a 3/4" Paver Shim will improve the safety and serviceability of the roadway until such time (2017 or 2019) as a more aggressive pavement rehabilitation can be completed.

TRAFFIC IMPLICATIONS: Short term one lane, alternating two-way traffic will be utilized during non-holiday daytime hours, with the use of Flaggers or Uniformed Officers. The minimum lane width will be 12 feet. Two-way traffic will be maintained during non-work hours. Night work may be required in areas of high traffic volumes. Emergency vehicles will be allowed to safely pass through the work zone.

COMPLETION DATE: September 18, 2015



**OSSIPEE - CONWAY
29514**

**State of New Hampshire
Department of Transportation**

Project: OSSIPEE-CONWAY X-A004(160)
29514

County and Code: CARROLL COUNTY 003

Date Bids Open: March 26, 2015

Scope of Work: ROADWAY PAVEMENT

Location: OSSIPEE, TAMWORTH, ALBANY, MADISON AND
CONWAY

Completion Date: September 18, 2015

A PIKE INDUSTRIES, INC.
3 EASTGATE PARK RD BELMONT, NH 03220

\$1,780,185.50

Item No:	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total
304.32	CRUSHED GRAVEL FOR SHOULDER LEVELING	TON	2,200.00	\$19.00	\$41,800.00		
403.1109	HOT BITUMINOUS PAVEMENT, MACHINE METHOD, HIGH STRENGTH	TON	1,100.00	\$82.00	\$90,200.00		
403.12	HOT BITUMINOUS PAVEMENT, HAND METHOD	TON	130.00	\$150.00	\$19,500.00		
403.4	MATERIAL TRANSFER VEHICLE (MTV)	TON	1,100.00	\$3.00	\$3,300.00		
403.6	PAVEMENT JOINT ADHESIVE	LF	13,000.00	\$0.22	\$2,860.00		
411.3	PLANT MIX SURFACE TREATMENT (ASPAHLT CEMENT), PAVER SHIM	TON	16,800.00	\$77.00	\$1,293,600.00		
413.5	POLYMER MODIFIED CRACK TREATMENT WITH AGGREGATE SPECIAL INSTALLATION (F)	GAL	254.00	\$27.00	\$6,858.00		
417	COLD PLANING BITUMINOUS SURFACES	SY	5,500.00	\$2.50	\$13,750.00		
417.1189	COLD PLANING BITUMINOUS SURFACES, 18" WIDE, VARIABLE DEPTH	LF	950.00	\$7.00	\$6,650.00		
417.4121	RUMBLE STRIPS, 12" WIDE (LOW PROFILE DEPTH 1/4")	LF	7,700.00	\$1.15	\$8,855.00		
615.03	TRAFFIC SIGN TYPE C (F)	SF	12.50	\$65.00	\$812.50		
615.06	TRAFFIC SIGN TYPE CC (F)	SF	6.00	\$12.00	\$72.00		
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	49,000.00	\$1.00	\$49,000.00		
618.7	FLAGGERS	HR	1,200.00	\$24.00	\$28,800.00		
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$45,000.00	\$45,000.00		
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	3.00	\$1,300.00	\$3,900.00		
619.27	TRAILER-MOUNTED SPEED LIMIT SIGN	U	2.00	\$750.00	\$1,500.00		
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	412,000.00	\$0.13	\$53,560.00		

Item No:	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total	Unit Price	Total
632.3104	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 4" LINE	LF	1,500.00	\$0.60	\$900.00				
632.3106	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 6" LINE	LF	140.00	\$1.00	\$140.00				
632.3118	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 18" LINE	LF	180.00	\$4.00	\$720.00				
632.32	RETROREFLECT. THERMOPLAS. PAVEMENT MARKING, SYMBOL OR WORD	SF	755.30	\$8.00	\$6,042.40				
632.911	OBLITERATE PAVE. MARKING LINE, 12" WIDE & UNDER	LF	1,500.00	\$0.45	\$675.00				
632.912	OBLITERATE PAVE. MARKING LINE, OVER 12" WIDE	LF	180.00	\$1.00	\$180.00				
632.92	OBLITERATE PAVEMENT MARKING, SYMBOL OR WORD	SF	755.30	\$2.00	\$1,510.60				
692	MOBILIZATION	U	1.00	\$30,000.00	\$30,000.00				
1010.15	FUEL ADJUSTMENT	\$	20,000.00	\$1.00	\$20,000.00				
1010.2	ASPHALT CEMENT ADJUSTMENT	\$	50,000.00	\$1.00	\$50,000.00				
							\$1,780,185.50		

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	
304.32	CRUSHED GRAVEL FOR SHOULDER LEVELING	TON	2,200.00	\$19.00	\$41,800.00	\$18.00	\$39,600.00	\$2,200.00
403.1109	HOT BITUMINOUS PAVEMENT, MACHINE METHOD, HIGH STRENGTH	TON	1,100.00	\$82.00	\$90,200.00	\$90.00	\$99,000.00	(\$8,800.00)
403.12	HOT BITUMINOUS PAVEMENT, HAND METHOD	TON	130.00	\$150.00	\$19,500.00	\$130.00	\$16,900.00	\$2,600.00
403.4	MATERIAL TRANSFER VEHICLE (MTV)	TON	1,100.00	\$3.00	\$3,300.00	\$3.50	\$3,850.00	(\$550.00)
403.6	PAVEMENT JOINT ADHESIVE	LF	13,000.00	\$0.22	\$2,860.00	\$0.25	\$3,250.00	(\$390.00)
411.3	PLANT MIX SURFACE TREATMENT (ASPAHLT CEMENT), PAVER SHIM	TON	16,800.00	\$77.00	\$1,293,600.00	\$79.00	\$1,327,200.00	(\$33,600.00)
413.5	POLYMER MODIFIED CRACK TREATMENT WITH AGGREGATE SPECIAL INSTALLATION (F)	GAL	254.00	\$27.00	\$6,858.00	\$50.00	\$12,700.00	(\$5,842.00)
417	COLD PLANING BITUMINOUS SURFACES	SY	5,500.00	\$2.50	\$13,750.00	\$2.90	\$15,950.00	(\$2,200.00)
417.1189	COLD PLANING BITUMINOUS SURFACES, 18" WIDE, VARIABLE DEPTH	LF	950.00	\$7.00	\$6,650.00	\$2.50	\$2,375.00	\$4,275.00
417.4121	RUMBLE STRIPS, 12" WIDE (LOW PROFILE DEPTH 1/4")	LF	7,700.00	\$1.15	\$8,855.00	\$0.25	\$1,925.00	\$6,930.00
615.03	TRAFFIC SIGN TYPE C (F)	SF	12.50	\$65.00	\$812.50	\$43.00	\$537.50	\$275.00
615.06	TRAFFIC SIGN TYPE CC (F)	SF	6.00	\$12.00	\$72.00	\$15.00	\$90.00	(\$18.00)
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	49,000.00	\$1.00	\$49,000.00	\$1.00	\$49,000.00	\$0.00
618.7	FLAGGERS	HR	1,200.00	\$24.00	\$28,800.00	\$23.00	\$27,600.00	\$1,200.00
619.1	MAINTENANCE OF TRAFFIC MESSAGE SIGN	U	1.00	\$45,000.00	\$45,000.00	\$30,000.00	\$30,000.00	\$15,000.00
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	3.00	\$1,300.00	\$3,900.00	\$2,900.00	\$8,700.00	(\$4,800.00)
619.27	TRAILER-MOUNTED SPEED LIMIT SIGN	U	2.00	\$750.00	\$1,500.00	\$2,060.00	\$4,120.00	(\$2,620.00)

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	
632.0104	RETROREFLECTIVE PAINT PAVE. MARKING, 4" LINE	LF	412,000.00	\$0.13	\$53,560.00	\$0.14	\$57,680.00	(\$4,120.00)
632.3104	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 4" LINE	LF	1,500.00	\$0.60	\$900.00	\$1.00	\$1,500.00	(\$600.00)
632.3106	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 6" LINE	LF	140.00	\$1.00	\$140.00	\$1.25	\$175.00	(\$35.00)
632.3118	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 18" LINE	LF	180.00	\$4.00	\$720.00	\$4.00	\$720.00	\$0.00
632.32	RETROREFLECT. THERMOPLAS. PAVEMENT MARKING, SYMBOL OR WORD	SF	755.30	\$8.00	\$6,042.40	\$6.25	\$4,720.63	\$1,321.78
632.911	OBLITERATE PAVE. MARKING LINE, 12" WIDE & UNDER	LF	1,500.00	\$0.45	\$675.00	\$0.35	\$525.00	\$150.00
632.912	OBLITERATE PAVE. MARKING LINE, OVER 12" WIDE	LF	180.00	\$1.00	\$180.00	\$1.35	\$243.00	(\$63.00)
632.92	OBLITERATE PAVEMENT MARKING, SYMBOL OR WORD	SF	755.30	\$2.00	\$1,510.60	\$1.70	\$1,284.01	\$226.59
692	MOBILIZATION	U	1.00	\$30,000.00	\$30,000.00	\$140,000.00	\$140,000.00	(\$110,000.00)
1010.15	FUEL ADJUSTMENT	\$	20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00	\$0.00
1010.2	ASPHALT CEMENT ADJUSTMENT	\$	50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00	\$0.00
					\$1,780,185.50		\$1,919,645.14	(\$139,459.64)

Certificate of Insurance

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON YOU THE CERTIFICATE HOLDER. THIS CERTIFICATE IS NOT AN INSURANCE POLICY AND DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICIES LISTED BELOW. POLICY LIMITS ARE NO LESS THAN THOSE LISTED, ALTHOUGH POLICIES MAY INCLUDE ADDITIONAL SUBLIMIT/LIMITS NOT LISTED BELOW.

This is to Certify that

Pike Industries, Inc.
3 Eastgate Park Road
Belmont NH 03220

NAME AND
ADDRESS
OF INSURED



Liberty Mutual
INSURANCE

Is, at the issue date of this certificate, insured by the Company under the policy(ies) listed below. The insurance afforded by the listed policy(ies) is subject to all their terms, exclusions and Conditions and is not altered by any requirement, term or condition of any contract or other document with respect to which this certificate may be issued.

TYPE OF POLICY	EXP DATE		POLICY NUMBER	LIMIT OF LIABILITY		
	<input type="checkbox"/> CONTINUOUS	<input type="checkbox"/> EXTENDED				
WORKERS COMPENSATION	9/1/2015		WA7-C8D-004095-024 WC7-C81-004095-014	COVERAGE AFFORDED UNDER WC LAW OF THE FOLLOWING STATES: -024: All States except OH, ND, WA, WY and WI -014: WI		
				EMPLOYERS LIABILITY		
			Bodily Injury by Accident		\$1,000,000 Each Accident	
			Bodily Injury By Disease		\$1,000,000 Policy Limit	
			Bodily Injury By Disease		\$1,000,000 Each Person	
COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> OCCURRENCE <input type="checkbox"/> CLAIMS MADE	9/1/2015		TB2-C81-004095-114 -Per Project Aggregate included.	General Aggregate		\$2,000,000
				Products / Completed Operations Aggregate		\$2,000,000
				Each Occurrence		\$2,000,000
				Personal & Advertising Injury		\$2,000,000 Per Person / Organization
				Other Damage to Premises Rented to You: \$100,000		Other Medical Exp: \$5,000
AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> OWNED <input checked="" type="checkbox"/> NON-OWNED <input checked="" type="checkbox"/> HIRED	9/1/2015		AS2-C81-004095-124 Comp Ded \$10,000 Coll Ded \$10,000	Each Accident—Single Limit		\$2,000,000 B.I. And P.D. Combined
				Each Person		
				Each Accident or Occurrence		
				Each Accident or Occurrence		
OTHER						
ADDITIONAL COMMENTS RE: Project No. 29514, Ossipee-Conway X-A004(160), 29514. State of New Hampshire, Department of Transportation is listed as additional insured with regards to the general liability policy, where required by written contract						

* If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date.

NOTICE OF CANCELLATION: (NOT APPLICABLE UNLESS A NUMBER OF DAYS IS ENTERED BELOW.) BEFORE THE STATED EXPIRATION DATE THE COMPANY WILL NOT CANCEL OR REDUCE THE INSURANCE AFFORDED UNDER THE ABOVE POLICIES UNTIL AT LEAST 30 DAYS NOTICE OF SUCH CANCELLATION HAS BEEN MAILED TO:

Liberty Mutual Insurance Group

RE: Project No. 29514

Certificate Holder

State of New Hampshire
Department of Transportation
PO Box 483
Concord NH 03302

Stanley S. Esposito, Jr.

Stan Esposito

AUTHORIZED REPRESENTATIVE

Pittsburgh / 0387
12 Federal Street, Ste. 310
Pittsburgh PA 15212-5706 412-231-1331 4/7/2015
OFFICE PHONE DATE ISSUED

This certificate is executed by LIBERTY MUTUAL INSURANCE GROUP as respects such insurance as is afforded by those Companies NM 772 07-10

RAILROAD PROTECTIVE LIABILITY DECLARATIONS



Issued by Liberty Mutual Fire Insurance Company

Policy Number	TE2-681-054474-645	Issuing Office	Bala Cynwyd, PA
Renewal of	New	Issue Date	2015-03-30
Account Number	8-036771	Sub Account	0000

Named Insured and Mailing Address
Green Mountain Railroad
One Railroad Lane
Burlington, VT 05401

Form of Business Other

Policy Period: The policy period is from 05/04/2015 to 05/04/2016 12:01 A.M. standard time at the Insured's mailing address.

Job Location:

Crossing AAR-DOT#400-899D Walpole, NH
Paving Roadway

Designated Contractor:
Pike Industries Inc.

Designated Contractor Mailing Address:
3 Eastgate Park Road
Belmont, NH 03220

Name and Address of Involved Governmental Authority or Other Contracting Party:
State of NH Department of Transportation
PO Box 4837 Hazen Drive Concord, NH 03302

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

LIMITS OF INSURANCE

Each Occurrence Limit	\$ 2,000,000
Aggregate Limit	\$ 6,000,000

SCHEDULE

The declarations are completed on the accompanying "Declarations Extension Schedule(s)".

Railroad Protective Liability Coverage Part Premium	\$ 800
Endorsement Premium	\$
Other Charge(s)	\$
Amount Payable at Inception	\$ 800

Policywriting Minimum Premium \$

Forms Applicable: See Attached Inventory

Producer 0002 008060
Marsh Casualty Advisory Representative
3560 Lenox Rd., Ste 2400
Atlanta, GA 30326

Producer
Blickle K 9931
Bala Cynwyd, PA 390

Countersigned By:

Dana D. Skuttes

Authorized Representative

Certificate of Insurance

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON YOU THE CERTIFICATE HOLDER. THIS CERTIFICATE IS NOT AN INSURANCE POLICY AND DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICIES LISTED BELOW. POLICY LIMITS ARE NO LESS THAN THOSE LISTED. ALTHOUGH POLICIES MAY INCLUDE ADDITIONAL SUBLIMIT/LIMITS NOT LISTED BELOW.

This is to Certify that

Pike Industries, Inc.
3 Eastgate Park Road
Belmont NH 03220

NAME AND
ADDRESS
OF INSURED



Liberty Mutual
INSURANCE

is, at the issue date of this certificate, insured by the Company under the policy(ies) listed below. The insurance afforded by the listed policy(ies) is subject to all their terms, exclusions and Conditions and is not altered by any requirement, term or condition of any contract or other document with respect to which this certificate may be issued.

TYPE OF POLICY	EXP DATE <input type="checkbox"/> CONTINUOUS <input type="checkbox"/> EXTENDED <input checked="" type="checkbox"/> POLICY TERM	POLICY NUMBER	LIMIT OF LIABILITY	
WORKERS COMPENSATION	9/1/2015	WA7-C8D-004095-024 WC7-C81-004095-014	COVERAGE AFFORDED UNDER WC LAW OF THE FOLLOWING STATES: -024: All States except OH, ND, WA, WY and WI -014: WI	EMPLOYERS LIABILITY
				Bodily Injury by Accident \$1,000,000 Each Accident
				Bodily Injury By Disease \$1,000,000 Policy Limit
COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> OCCURRENCE <input type="checkbox"/> CLAIMS MADE	9/1/2015	TB2-C81-004095-114 -Per Project Aggregate included.	General Aggregate Products / Completed Operations Aggregate Each Occurrence Personal & Advertising Injury Other Damage to Premises Rented to You: \$100,000	\$2,000,000
				\$2,000,000
				\$2,000,000
				\$2,000,000 Per Person / Organization
				Other Medical Exp: \$5,000
				Each Accident—Single Limit B.I. And P.D. Combined
AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> OWNED <input checked="" type="checkbox"/> NON-OWNED <input checked="" type="checkbox"/> HIRED	9/1/2015	AS2-C81-004095-124 Comp Ded \$10,000 Coll Ded \$10,000		\$2,000,000
				Each Person
				Each Accident or Occurrence
				Each Accident or Occurrence
OTHER				

RETRO DATE

ADDITIONAL COMMENTS

RE: Project # 28933 & 28833 - Railroad Crossing AAR-DOT #400-899D Walpole, NH
Green Mountain Railroad is listed as additional insured, where required by written contract.

* If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date.

NOTICE OF CANCELLATION: (NOT APPLICABLE UNLESS A NUMBER OF DAYS IS ENTERED BELOW.) BEFORE THE STATED EXPIRATION DATE THE COMPANY WILL NOT CANCEL OR REDUCE THE INSURANCE AFFORDED UNDER THE ABOVE POLICIES UNTIL AT LEAST 30 DAYS NOTICE OF SUCH CANCELLATION HAS BEEN MAILED TO:

Project # 28933 & 28833 - Railroad Crossing AAR-DOT #400-899D Walpole, NH

Liberty Mutual Insurance Group

Certificate Holder

Green Mountain Railroad
One Railroad Lane
Burlington VT 05401

Stanley S. Esposito, Jr.

Stan Esposito

AUTHORIZED REPRESENTATIVE

Pittsburgh / 0387
12 Federal Street, Ste. 310
Pittsburgh PA 15212-5706

412-231-1331 3/30/2015

OFFICE

PHONE

DATE ISSUED

This certificate is executed by LIBERTY MUTUAL INSURANCE GROUP as respects such insurance as is afforded by those Companies NM 772 07-10



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/27/2015

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 MARSH USA, INC. TWO ALLIANCE CENTER 3560 LENOX ROAD, SUITE 2400 ATLANTA, GA 30326 J34420...EX-14-15	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS:	FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE	
INSURED PIKE INDUSTRIES, INC. (BELMONT) 3 EASTGATE PARK ROAD BELMONT, NH 03220	INSURER A: American Guarantee & Liability Ins Co NAIC # 26247	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** ATL-003344639-01 **REVISION NUMBER:** 1

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			AUC655102505	09/01/2014	09/01/2015	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N	N/A			<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
RE: RAILROAD CROSSING AAR-DOT #400-899D WALPOLE, NH
GREEN MOUNTAIN RAILROAD IS INCLUDED AS ADDITIONAL INSURED(S) PER WRITTEN CONTRACT.

CERTIFICATE HOLDER

GREEN MOUNTAIN RAILROAD
ATTN: MARY ANNE MICHEALS
1 RAILROAD LANE
BURLINGTON, VT

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
of Marsh USA Inc.
Manashi Mukherjee *Manashi Mukherjee*



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/06/2015

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 MARSH USA, INC. TWO ALLIANCE CENTER 3560 LENOX ROAD, SUITE 2400 ATLANTA, GA 30326	CONTACT NAME: _____																					
	PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: _____																					
J34420-...EX-14-15	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>American Guarantee & Liability Ins Co</td> <td>26247</td> </tr> <tr> <td>INSURER B:</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>INSURER C:</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>INSURER D:</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>INSURER E:</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>INSURER F:</td> <td>_____</td> <td>_____</td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	American Guarantee & Liability Ins Co	26247	INSURER B:	_____	_____	INSURER C:	_____	_____	INSURER D:	_____	_____	INSURER E:	_____	_____	INSURER F:	_____	_____
INSURER(S) AFFORDING COVERAGE		NAIC #																				
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INSURER C:	_____	_____																				
INSURER D:	_____	_____																				
INSURER E:	_____	_____																				
INSURER F:	_____	_____																				
INSURED PIKE INDUSTRIES, INC. (BELMONT) 3 EASTGATE PARK ROAD BELMONT, NH 03220																						

COVERAGES **CERTIFICATE NUMBER:** ATL-003347444-01 **REVISION NUMBER:** 2

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ _____ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ _____ MED EXP (Any one person) \$ _____ PERSONAL & ADV INJURY \$ _____ GENERAL AGGREGATE \$ _____ PRODUCTS - COMP/OP AGG \$ _____ _____ \$ _____		
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ _____ BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____ _____ \$ _____		
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	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	N/A				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ _____ E.L. DISEASE - EA EMPLOYEE \$ _____ E.L. DISEASE - POLICY LIMIT \$ _____		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
RE: OSSIPEE-CONWAY X-A004(160), 29514
STATE OF NEW HAMPSHIRE - D.O.T. IS INCLUDED AS ADDITIONAL INSURED(S) PER WRITTEN CONTRACT.

CERTIFICATE HOLDER STATE OF NEW HAMPSHIRE - D.O.T. P.O. BOX 483 CONCORD, NH 03302-0483	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Manashi Mukherjee <i>Manashi Mukherjee</i>
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**OWNERS AND CONTRACTORS PROTECTIVE
LIABILITY DECLARATIONS**



Issued by Liberty Mutual Fire Insurance Company

Policy Number TF2-681-054474-705
Renewal of New
Account Number 8-036771

Issuing Office Bala Cynwyd, PA
Issue Date 2015-04-07
Sub Account 0000

Named Insured and Mailing Address
State of New Hampshire - D.O.T.
PO Box 483
Concord, NH 03302-0483

Form of Business Other

Policy Period: The policy period is from 04/10/2015 to 04/10/2016 12:01 A.M. standard time at the Insured's mailing address.

Designated Contractor: Pike Industries, Inc.

Mailing Address: 3 Eastgate Park Rd.
Belmont, NH 03220

Location of Coverage Operations: Ossipee - Conway X-A004(160), 29514

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

LIMITS OF INSURANCE

Each Occurrence Limit \$ 2,000,000
Aggregate Limit \$ 3,000,000

SCHEDULE

The declarations are completed on the accompanying "Declarations Extension Schedule(s)".

Owners and Contractors Protective Liability Coverage Part Premium \$ 800
Endorsement Premium \$
Total Estimated Premium \$ 800
Other Charges(s) \$

Policywriting Minimum Premium \$

Forms Applicable: See Attached Inventory

Producer 0002 008060
Marsh Casualty Advisory Representative
3560 Lenox Rd., Ste 2400
Atlanta, GA 30326

Countersigned By:

Producer
Blickle K 9931
Baya Cynwyd, PA 390

Authorized Representative