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

CHARLES M. ARLINGHAUS  
Commissioner  
(603)-271-3201

JOSEPH B. BOUCHARD  
Assistant Commissioner  
(603)-271-3204

Division of Public Works  
Design and Construction  
Project No. 80929 – Contract S

July 31, 2017

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

**REQUESTED ACTION**

1). Authorize the Division of Public Works Design and Construction to enter into a contract with ECS Engineered Construction Services, (VC# 272731) Brentwood, New Hampshire, for a total price not to exceed \$2,236,714, for Steam Conversion at the Main Annex and Twitchell Buildings at State Office Park South, Concord, New Hampshire. This contract is effective through October 15, 2018, unless extended in accordance with the contract terms. **100% General Funds.**

2). Further authorize the amount of \$25,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), for engineering services provided, bringing the total to \$2,261,714. **100% General Funds.**

Funding is available in account titled Department of Administrative Services as follows:

01-14-14-141510-69370000	Heating-State Owned Bldgs.	<u>SFY18</u>
	103-500736 – Contracts for OP Services	\$2,236,714
	103-500736 – Interagency – DPW Fees	<u>\$ 25,000</u>
	<b>Total</b>	<b>\$2,261,714</b>

### **EXPLANATION**

This is a turn-key project that consists of furnishing all required demolition and construction services necessary to complete the installation of the HVAC and associated plumbing, fire protection, electrical, architectural and other building systems as indicated on the attached plans and in these specifications for the Main, Main Annex and Twitchell buildings located at the Gov. Hugh Gallen State Office Park Campus.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and execution; and the Department of Administrative Services has certified that the necessary funds are available. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Services, Division of Public Works Design and Construction.

Attached please find a copy of the tabulation of bids for this project along with the contract supplemental information sheet.

Respectfully submitted,



Charles M. Arlinghaus,  
Commissioner

Department Estimate:	\$3,227,765
Contract Amount:	<u>\$2,236,714</u>
Under Estimate:	\$ 991,051

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 80929, Contract S – Steam Conversion, Main, Main Annex and Twitchell Building, State Office Park South, Concord, New Hampshire.

DESCRIPTION: This is a turn-key project that consists of furnishing all required demolition and construction services necessary to complete the installation of the HVAC and associated plumbing, fire protection, electrical, architectural and other building systems as indicated on the attached plans and in these specifications for the Main, Main Annex and Twitchell buildings located at the Gov. Hugh Gallen State Office Park Campus.

EXPLANATION: With the closing of Concord Steam, there are a total of 26 State Buildings that will require heating system installations in order to maintain space temperatures during the winter months. This project will complete the installation of HVAC systems necessary to provide space heating for these three facilities.

UNDER ESTIMATE

EXPLANATION: The bids were 30 percent below the construction estimate. There were two bidders who are qualified in steam construction. Having a longer bid process, as well as qualified bidders, and providing alternates helped lower the bids received.

DEPARTMENT

ESTIMATE: \$3,227,765

LOW BID: \$2,236,714



Division of Public Works

# ABC Bid Data

CONCORD  
809295  
NON-FEDERAL

PROJECT: CONCORD  
STATE PROJECT NUMBER: 809295  
FED. PROJECT NUMBER: NON-FEDERAL  
DATE BIDS OPEN: May 31, 2017, 02:00 PM  
SCOPE OF WORK: Steam Conversion - Main, Main Annex and Twitchell  
COMPLETION DATE: October 15, 2018  
LOCATION: Merrimack

Certified by: \_\_\_\_\_  
Administrator

## Summary of Bidders

Contractor	Bid Amount	Rank
ECS CONSTRUCTION SERVICES 326 ROUTE 125, BRENTWOOD NH 03833	\$ 2,071,723.00	A
RTH MECHANICAL CONTRACTORS INC 99 PINE ROAD, BRENTWOOD NH 03833-6510	\$ 2,298,970.00	B

### BUREAU OF PUBLIC WORKS

Award to A Bidder - ECS Const.

Hold for Negotiation

Cancel Contract

User Agency DAS

Authorized by MLJ

Date 6/5/17

Base Bid: \$2,071,723  
 Alt 1 : 112,749  
 Alt 2 : 52,242  
 \$2,236,714

Item No.	Description	Unit	Quantity	PS&E		ECS CONSTRUCTION SERVICES		RTH MECHANICAL CONTRACTORS INC	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

901	DEMOLITION AND INSTLN OF GAS BOILER SYSTEMS AT MAIN W/CONNECTIONS TO MAIN ANNEX & TUNNEL	U	1.00	\$2,893,695.00	\$2,893,695.00	\$1,612,623.00	\$1,612,623.00	\$190,545.00	\$190,545.00
902	DEMOLITION AND INSTALLATION OF NEW ROOF AT MARKING ROOM PER BID DOCUMENTS	U	1.00	\$26,800.00	\$26,800.00	\$152,100.00	\$152,100.00	\$1,801,425.00	\$1,801,425.00
903	ALLOWANCE FOR OWNER INITIATED CHANGES FOR BID ITEM 1	\$	300,000.00	\$1.00	\$300,000.00	\$1.00	\$300,000.00	\$1.00	\$300,000.00
904	ALLOWANCE FOR OWNER INITIATED CHANGES FOR BID ITEM 2	\$	7,000.00	\$1.00	\$7,000.00	\$1.00	\$7,000.00	\$1.00	\$7,000.00
Totals:					\$3,227,495.00		\$2,071,723.00		\$2,298,970.00

**80929S ADD ALTERNATES  
ADD ALTERNATE No.1**

991	ALTERNATE NO. 1: REPLACE 6-INCH, 8 PSI STEAM LINE SERVING NORTH PAVILION AND PEASLEE	U	1.00	\$708,708.00	\$708,708.00	\$112,749.00	\$112,749.00	\$200,000.00	\$200,000.00
Totals:					\$708,708.00		\$112,749.00		\$200,000.00

**ADD ALTERNATE No. 2**

992	ALTERNATE NO. 2: REPLACE 3-INCH, 24 PSI STEAM LINE FROM RUMFORD TO TWITCHELL	U	1.00	\$14,860.00	\$14,860.00	\$52,242.00	\$52,242.00	\$140,000.00	\$140,000.00
Totals:					\$14,860.00		\$52,242.00		\$140,000.00



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/5/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101	<b>CONTACT NAME:</b> Lynn Blanchard, CIC, CISR <b>PHONE (A/C, No. Ext):</b> (603) 669-3218 <b>E-MAIL ADDRESS:</b> lblanchard@crossagency.com <b>FAX (A/C, No):</b> (603) 645-4331													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: The Charter Oak Fire Ins Co</td> <td>25615</td> </tr> <tr> <td>INSURER B: The Travelers Indemnity Co. &amp; its</td> <td>25658</td> </tr> <tr> <td>INSURER C: Travelers Property Casualty Company</td> <td>25674</td> </tr> <tr> <td>INSURER D: Maine Employers Mutual Ins Co</td> <td>11149</td> </tr> <tr> <td>INSURER E: Crum &amp; Forster</td> <td>11123</td> </tr> <tr> <td>INSURER F: RSUI Indemnity</td> <td>22314</td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: The Charter Oak Fire Ins Co	25615	INSURER B: The Travelers Indemnity Co. & its	25658	INSURER C: Travelers Property Casualty Company	25674	INSURER D: Maine Employers Mutual Ins Co	11149	INSURER E: Crum & Forster	11123	INSURER F: RSUI Indemnity
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<b>INSURED</b> Engineered Construction Services, Inc. DBA: ECS Construction Services PO Box 160 Raymond ME 04071														

**COVERAGES** CERTIFICATE NUMBER: 17-18 All lines 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	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X		COOE243940	3/7/2017	3/7/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <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			810-0E783041	3/7/2017	3/7/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			0J183171	3/7/2017	3/7/2018	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
D	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	5101800481 (3a.) CT MA ME NH VT All officers included	3/7/2017	3/7/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
E	<b>Professional/Pollution</b>			PKC104868	3/7/2017	3/7/2018	\$2M Aggregate/\$1M Occ \$5,000 Ded
F	<b>Excess Liability</b>			NHA076826	3/7/2017	3/7/2018	\$15M Aggregate/\$15M Occ \$10,000 Ret

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

RE: Steam Conversion - Main, Main Annex & Twitchell Buildings - Concord, NH. Project # 80929S. State of New Hampshire, Department of Administrative Services is Additional Insured under General Liability as required by written contract.

**CERTIFICATE HOLDER**

State of New Hampshire  
 Department of Administrative Services  
 Contract Office, Room 130  
 7 Hazen Drive  
 Concord, NH 03302-0483

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

M Guarino/JSC

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
7/11/2017

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.

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<b>PRODUCER</b> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101	<b>CONTACT NAME:</b> Lynn Blanchard, CIC, CISR <b>PHONE (AC, No, Ext):</b> (603) 669-3218 <b>FAX (A/C, No):</b> (603) 645-4331 <b>E-MAIL ADDRESS:</b> lblanchard@crossagency.com													
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<b>INSURED</b> State of NH, Department of Administrative Services ECS Construction Services, Inc. PO Box 160 Raymond ME 04071														

**COVERAGES**      **CERTIFICATE NUMBER:** State of NH OCP 2017      **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	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>OCP</b> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PRS-4G43706A	6/14/2017	6/14/2018	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <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) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N/A				PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
RE: Steam Conversion - Main, Main Annex & Twitchell Buildings - Concord, NH. Project # 80929S. Refer to policy for exclusionary endorsements and special provisions.

<b>CERTIFICATE HOLDER</b>  State of New Hampshire Department of Administrative Services Contract Office, Room 130 7 Hazen Drive Concord, NH 03302-0483	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE Michael Guarino/LM5
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# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
7/11/2017

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

<b>PRODUCER</b> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101	<b>CONTACT NAME:</b> Lynn Blanchard, CIC, CISR	
	<b>PHONE (A/C, No, Ext):</b> (603) 669-3218	<b>FAX (A/C, No):</b> (603) 645-4331
	<b>E-MAIL ADDRESS:</b> lblanchard@crossagency.com	
	<b>PRODUCER CUSTOMER ID:</b> 00197512	
<b>INSURED</b> State of NH, Department of Administrative Services ECS Construction Services, Inc. PO Box 160 Raymond ME 04071	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Liberty Mutual Holding Co	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	

**COVERAGES**      **CERTIFICATE NUMBER:** State of NH 2017      **REVISION NUMBER:**

**LOCATION OF PREMISES / DESCRIPTION OF PROPERTY** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Project #80929S - Steam Conversion at 105 Pleasant Street, Concord, NH - Main, Main Annex and Twitchell buildings.

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/> PROPERTY <input type="checkbox"/> CAUSES OF LOSS <input type="checkbox"/> DEDUCTIBLES <input type="checkbox"/> BASIC BUILDING <input type="checkbox"/> BROAD CONTENTS <input type="checkbox"/> SPECIAL <input type="checkbox"/> EARTHQUAKE <input type="checkbox"/> WIND <input type="checkbox"/> FLOOD <input type="checkbox"/> Builders Risk				<input type="checkbox"/> BUILDING <input type="checkbox"/> PERSONAL PROPERTY <input type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> EXTRA EXPENSE <input type="checkbox"/> RENTAL VALUE <input type="checkbox"/> BLANKET BUILDING <input type="checkbox"/> BLANKET PERS PROP <input type="checkbox"/> BLANKET BLDG & PP	
A X	<b>INLAND MARINE</b> <input type="checkbox"/> CAUSES OF LOSS <input type="checkbox"/> NAMED PERILS	TYPE OF POLICY <b>Builder's Risk</b>  POLICY NUMBER <b>IM8426936</b>	6/14/2017	6/14/2018	<input checked="" type="checkbox"/> Limit at Single Location <input checked="" type="checkbox"/> Temporary Storage <input checked="" type="checkbox"/> In Transit <input checked="" type="checkbox"/> Deductible	\$ 2,236,714 \$ 500,000 \$ 500,000 \$ 1,000
	<input type="checkbox"/> CRIME <input type="checkbox"/> TYPE OF POLICY					\$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$

**SPECIAL CONDITIONS / OTHER COVERAGES** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
RE: Steam Conversion - Main, Main Annex & Twitchell Buildings - Concord, NH. Project # 80929S. Refer to policy for exclusionary endorsements and special provisions.

<b>CERTIFICATE HOLDER</b>  State of New Hampshire Department of Administrative Services Contract Office, Room 130 7 Hazen Drive Concord, NH 03302-0483	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b>  Michael Guarino/LM5 <i>Michael Guarino</i>