



THE STATE OF NEW HAMPSHIRE  
DEPARTMENT OF TRANSPORTATION

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JEFF BRILLHART, P.E.  
ACTING COMMISSIONER

Bureau of Construction  
February 17, 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 Annseal, Inc. (Vendor 160681) of Johnson City, NY on the basis of a low bid of \$733,719.00 for approximately 74 miles of crack sealing treatment throughout the State, from the date of Governor and Council approval through August 28, 2015 unless extended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Funding is available as follows: FY 2015  
04-96-96-963515-3054  
Consolidated Federal Aid  
400-500870 Highway Contract Payments \$733,719.00

2. Further authorize that a contingency in the amount of \$36,685.95 be approved for payment of latent conditions, which may appear during the construction of the project. The contingency requested is 5% of the contract amount.

Funding is available as follows: FY 2015  
04-96-96-963515-3054  
Consolidated Federal Aid  
400-500870 Highway Contract Payments \$36,685.95

**EXPLANATION**

This project is part of the annual Federal Resurfacing Program. The work involves crack sealing of 13 roadway segments totaling 74 miles in Districts II, III, IV and V. The purpose of this project is to preserve and extend the life of existing pavement placed by recent resurfacing projects. The sections were last resurfaced between 2008 and 2011. Crack seal will be full width for all of the proposed sections.

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The contingency amount is proposed to be 5% of the contract amount. Project limits are fixed and cannot be adjusted to offset quantity over runs. The quantities are estimated based on visual inspection and perceived degree of cracking. Actual field quantities will vary and the upcoming winter may increase the number and severity of cracks.

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: \$795,100.00  
Contract Amount: \$733,719.00  
Under Estimate: \$ 61,381.00

Attachments

January 7, 2014

**SUPPLEMENTAL PROJECT INFORMATION SHEET**

**DESCRIPTION:** The project consists of crackseal treatment of thirteen (13) roadway segments/locations, totaling approximately 74 miles, in the Counties of Belknap, Carroll, Cheshire, Grafton, Hillsborough, Merrimack, Rockingham, Strafford as follows:

- District 2:** Lebanon-Hanover (NH 10): 2.9 miles  
Newbury-Bradford (NH 103): 7.0 miles
- District 3:** Loudon-Canterbury-Gilmanton-Belmont (NH 106): 7.7 miles  
Conway (US 302): 2.5 miles  
Tilton (US 3): 4.1 miles
- District 4:** Keene (NH 12): 2.9 miles
- District 5:** Henniker-Hopkinton (US 202): 7.3 miles  
Pembroke-Concord (US 3): 4.3 miles  
Manchester-Hooksett-Bow (NH 3A): 12.7 miles  
Derry-Auburn-Manchester (NH 28 By-Pass): 8.0 miles  
Londonderry (NH 102): 2.5 miles  
Windham-Salem-Derry-Atkinson-Hampstead (NH 111): 9.2 miles
- District 6:** Rollinsford (NH 4): 2.9 miles

**FEDERAL FUNDING:** Construction funding is 80% Federal Funding, with Turnpike Toll Credits anticipated for the State's 20% match.

**CONTINGENCY:** The contingency requested is 5% of the contract amount. Project limits are fixed and cannot be adjusted to offset quantity over runs. The upcoming winter may increase the number and severity of cracks.

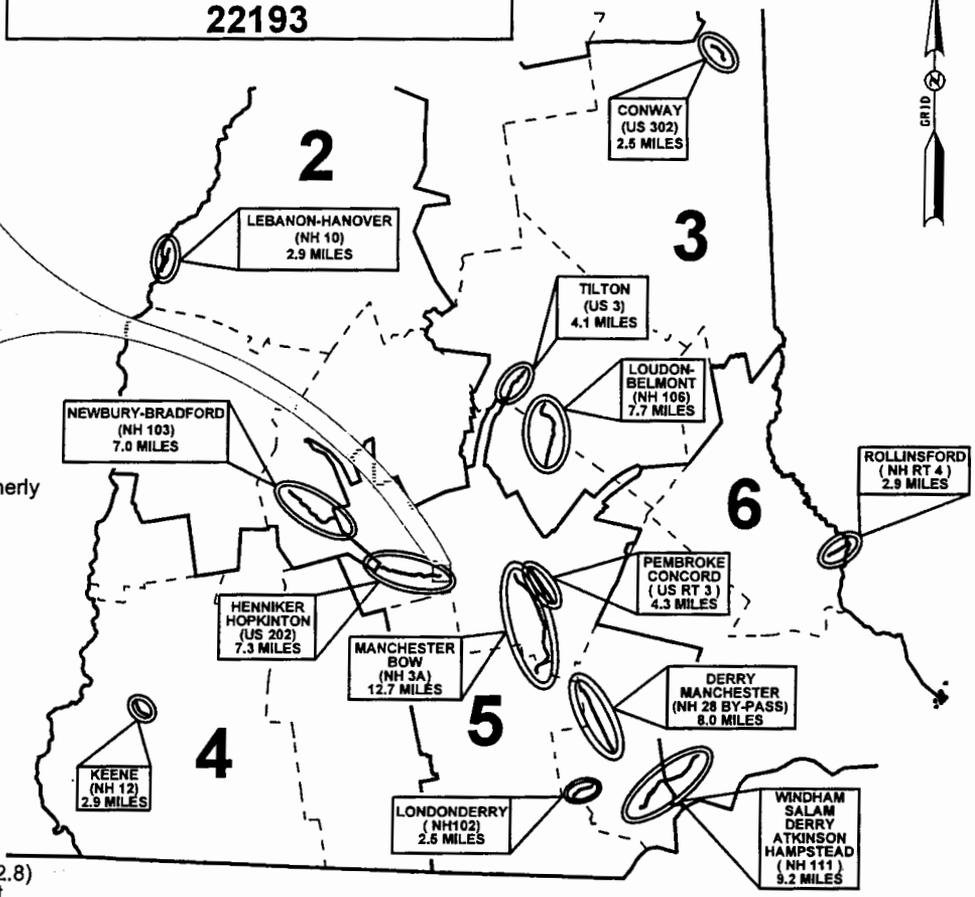
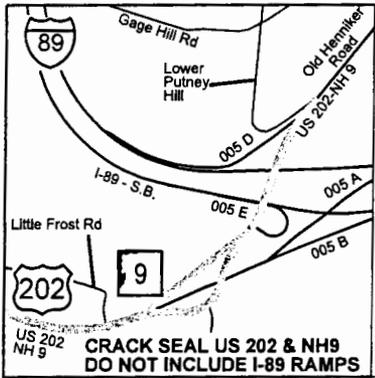
**PROJECT INITIATED:** State's 10-Year Transportation Improvement Plan

**PROJECT EXPLANATION:** The purpose of this project is to preserve and extend the life of existing pavement placed by recent Resurfacing projects. The above sections were last resurfaced between 2008 and 2011. Crack seal will be full width for all of the proposed sections.

**TRAFFIC IMPLICATIONS:** One lane, alternating two way traffic will be required. Lane closures will not be allowed during peak commuting hours. Lane closure lengths will be restricted to 1/2 mile or less. Due to high traffic volumes, night work is proposed for the Keene NH 12, Tilton US 3, and Londonderry NH 102 segments.

**COMPLETION DATE:** August 28, 2015

# STATEWIDE CRACKSEAL 22193



**District 2:**

**Lebanon-Hanover (NH 10): 2.9 miles**  
This section starts at 480 ft. north of Maple St. (Lebanon Urban Compact) and proceeds northerly 2.9 miles to 410 ft. south of Granger Cir. (Hanover Urban Compact).

**Newbury-Bradford (NH 103): 7.0 miles**  
This section starts at a pavement joint located 1,800 feet southeast of Mountain Road and proceeds easterly 7.0 miles to the Warner Town Line.

**District 3:**

**Conway (US 302): 2.5 miles** - This section starts at NH 16 and proceeds southerly to NH 113

**Loudon-Belmont (NH 106): 7.7 miles** - This section starts at a pavement joint 100' North of Gues Meadow Road in Loudon (mm 12.8) and proceeds northerly 7.7 miles to a pavement joint just north of Perkins Road (mm 20.5) in Belmont.

**Tilton (US 3): 4.1 miles** - This section starts at the NH park and ride (mm 67.1) and proceeds easterly to 250' east of Bay Road.

**District 4:**

**Keene (NH 12): 2.9 miles** - This section starts at a pavement joint just north of the West St interchange (mm 15.4) on NH 9 / NH 12 and proceeds northerly on NH 12, 2.9 miles to a pavement joint located 2,500 feet north of the Wyman Road/Corporate Drive intersection.

**District 5:**

**Henniker-Hopkinton (US 202): 7.3 miles** - This section starts at a pavement joint located just east of Br. 125/125 over Rush Road in Henniker (mm 40.4) and proceeds easterly 7.3 miles to a pavement joint just east of Lower Putney Hill Road (mm 47.7) (see inset).

**Pembroke-Concord (US 3): 4.3 miles** - This section starts at a pavement joint located 150 feet south of Dearborn Road in Pembroke and proceeds northerly 4.3 miles to a pavement joint located approximately 350 feet south of the Urban Compact Line / Airport Road intersection in Concord. Skip 1,600 LF in the vicinity of Bow Lane. This area is within the limits of work for the Pembroke 14477A project.

**Manchester-Bow (NH 3A): 12.7 miles** - This section starts at a pavement joint located at the Manchester Urban Compact Line (1,100 feet south of Country Club Drive) and proceeds northerly 12.7 miles to Concord City Line/Urban Compact Line (at the Bow Junction Irving Truck Stop drive). Include the Hooksett Safety Inspection / Rest Area as part of the work. The inspection / rest area is located approximately 900 feet south of Hackett Hill Road. Skip the section being resurfaced by the I-93 rest area project, Hooksett 15970.

**Derry-Auburn-Manchester (NH 28 By-Pass): 8.0 miles** - This section starts at Tsienneto Road (Urban Compact Line) in Derry and proceeds northerly 8.0 miles to a pavement joint located just north of the Massabesic Traffic Circle in Manchester. The traffic circle is not included.

**Londonderry (NH 102): 2.5 miles** - This section starts at a pavement joint 100' east of Avery Rd and proceeds easterly 2.5 miles to a pavement joint 500 feet east of the junction of NH 128. Include the pullout area located approximately 2000 feet west of Old Nashua Road.

**Windham-Salem-Derry-Atkinson-Hampstead (NH 111): 9.2 miles** - This section starts at Delahunty Rd in Windham (mm 18.2) and proceeds easterly 9.2 miles to a pavement joint east of Danville Road in Hampstead (mm 27.4).

**District 6:**

**Rollinsford (NH 4): 2.9 miles** - This section starts at a pavement joint located just north of Oak Street (Urban Compact) and proceeds northerly 2.9 miles to the Maine State Line.



<b>STATE OF NEW HAMPSHIRE</b>			
DEPARTMENT OF TRANSPORTATION - BUREAU BRIDGE DESIGN			
FEDERAL PROJECT NO.	STATE PROJECT NO.	SHEET NO.	TOTAL SHEETS
X-A002(305)	22193	1	1

**State of New Hampshire  
Department of Transportation**

22193.01

**Project:** STATEWIDE X-A002(305) 22193

**County and Code:** 8 COUNTIES SEE THE PROSECUTION OF WORK

**Date Bids Open:** February 5, 2015

**Scope of Work:** CRACKSEAL TREATMENT OF 13 ROADWAY  
SEGMENTS/LOCATIONS TOTALING APPROXIMATELY  
17 MILES

**Location:** SEE THE PROSECUTION OF WORK

**Completion Date:** August 28, 2015

A ANNSEAL, INC.  
130 MAIN STREET, SUITE 38 JOHNSON CITY, NY 13790 \$733,719.00

B COSTELLO INDUSTRIES INC  
123 COSTELLO ROAD NEWINGTON CT 06111 \$779,000.00

C NICOM COATINGS CORPORATION  
140 INDUSTRIAL LANE BARRE, VT 05641 \$983,495.00

D THE GORMAN GROUP LLC  
200 CHURCH STREET ALBANY NY 12202 \$1,194,062.00

Item No:	Description	Unit	Quantity	A		B		C	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
413.1	HOT-POURED CRACK SEALANT	LB	297,100.00	\$1.27	\$377,317.00	\$1.64	\$487,244.00	\$1.65	\$490,215.00
413.19	HOT POURED CRACK SEALANT (NIGHT)	LB	49,600.00	\$1.72	\$85,312.00	\$1.64	\$81,344.00	\$1.80	\$89,280.00
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	60,000.00	\$1.00	\$60,000.00	\$1.00	\$60,000.00	\$1.00	\$60,000.00
618.7	FLAGGERS	HR	3,600.00	\$16.00	\$57,600.00	\$14.00	\$50,400.00	\$23.50	\$84,600.00
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$114,500.00	\$114,500.00	\$59,012.00	\$59,012.00	\$101,400.00	\$101,400.00
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	4.00	\$2,000.00	\$8,000.00	\$2,000.00	\$8,000.00	\$2,000.00	\$8,000.00
692	MOBILIZATION	U	1.00	\$20,990.00	\$20,990.00	\$23,000.00	\$23,000.00	\$140,000.00	\$140,000.00
1010.15	FUEL ADJUSTMENT	\$	10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00
					\$733,719.00		\$779,000.00		\$983,495.00

Item No:	Description	Unit	Quantity	D		Total	
				Unit Price	Total	Unit Price	Total
413.1	HOT-POURED CRACK SEALANT	LB	297,100.00	\$1.70	\$505,070.00		
413.19	HOT POURED CRACK SEALANT (NIGHT)	LB	49,600.00	\$1.70	\$84,320.00		
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	60,000.00	\$1.00	\$60,000.00		
618.7	FLAGGERS	HR	3,600.00	\$20.00	\$72,000.00		
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$255,872.00	\$255,872.00		
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	4.00	\$3,700.00	\$14,800.00		
692	MOBILIZATION	U	1.00	\$192,000.00	\$192,000.00		
1010.15	FUEL ADJUSTMENT	\$	10,000.00	\$1.00	\$10,000.00		
					\$1,194,062.00		

# 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	
413.1	HOT-POURED CRACK SEALANT	LB	297,100.00	\$1.27	\$377,317.00	\$1.00	\$297,100.00	\$80,217.00
413.19	HOT POURED CRACK SEALANT (NIGHT)	LB	49,600.00	\$1.72	\$85,312.00	\$1.75	\$86,800.00	(\$1,488.00)
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	60,000.00	\$1.00	\$60,000.00	\$1.00	\$60,000.00	\$0.00
618.7	FLAGGERS	HR	3,600.00	\$16.00	\$57,600.00	\$22.00	\$79,200.00	(\$21,600.00)
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$114,500.00	\$114,500.00	\$200,000.00	\$200,000.00	(\$85,500.00)
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	4.00	\$2,000.00	\$8,000.00	\$3,000.00	\$12,000.00	(\$4,000.00)
692	MOBILIZATION	U	1.00	\$20,990.00	\$20,990.00	\$50,000.00	\$50,000.00	(\$29,010.00)
1010.15	FUEL ADJUSTMENT	\$	10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00	\$0.00
					\$733,719.00		\$795,100.00	(\$61,381.00)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/13/2015

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).

<b>PRODUCER</b> Harding Brooks Associates LLC 441 Commerce Rd.  Vestal NY 13850	<b>CONTACT NAME:</b> Pam DeMarco <b>PHONE (A/C No. Ext):</b> (607) 729-9292 <b>E-MAIL ADDRESS:</b> pdemarco@hardingbrooks.com	<b>FAX (A/C. No.):</b> (607) 798-6693
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> AnnSeal Inc PO Box 615  Bible School Park NY 13737	<b>INSURER A:</b> Travelers Indemnity Company of	<b>NAIC #</b> 25682
	<b>INSURER B:</b> Travelers Property Casualty	<b>NAIC #</b> 25674
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** CL144103066                      **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	ADDITIONAL INSURER	SUBROGATION	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			DTC08177P123TCT14	4/1/2014	4/1/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	<input checked="" type="checkbox"/> XCU						PERSONAL & ADV INJURY \$ 1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$ 2,000,000
<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC							PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY			DT-810-8177P123-TCT-14	4/1/2014	4/1/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
Supplementary							\$ 1,000,000
B	<input checked="" type="checkbox"/> UMBRELLA LIAB		<input checked="" type="checkbox"/> OCCUR	DTSMCUP3E984711TIL14	4/1/2014	4/1/2015	EACH OCCURRENCE \$ 9,000,000
	<input type="checkbox"/> EXCESS LIAB		<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 9,000,000
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000						
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			DTEUB1821B00014	4/1/2014	4/1/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A				E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 500,000
							E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
All operations usual and incidental to the business of the named insured.

<b>CERTIFICATE HOLDER</b> (603) 271-1558  The State of New Hampshire John O. Morton Building PO Box 483 Concord, NH 03302-0483	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b>  Thomas Harding/PAM



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/13/2015

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 Harding Brooks Associates LLC 441 Commerce Rd.  Vestal NY 13850	CONTACT NAME: Pam DeMarco	
	PHONE (A/C No. Ext): (607) 729-9292 FAX (A/C No): (607) 798-6693 E-MAIL ADDRESS: pdemarco@hardingbrooks.com	
INSURED The State of New Hampshire John O. Morton Building PO Box 483 Concord NH 03302-0483	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Travelers Indemnity Company	25658
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: CL1521304026 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	GENERAL LIABILITY			PRS 7E059924	2/13/2015	2/13/2016	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$
	<input checked="" type="checkbox"/> Owners & Contractors						PERSONAL & ADV INJURY \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 3,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						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						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED						RETENTION \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			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 (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
All operations usual and incidental to the business of the named insured.

**CERTIFICATE HOLDER**

AnnSeal, Inc.  
PO Box 615  
Bible School Park, NY 13737

**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



### Additional Instructions for Form DB-120.1

By signing this form, the insurance carrier identified in box "3" on this form is certifying that it is insuring the business referenced in box "1a" for disability benefits under the New York State Disability Benefits Law. The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed as the certificate holder in box "2". *This Certificate is valid for the earlier of one year after this form is approved by the insurance carrier or its licensed agent, or the policy expiration date listed in box "3c".*

Please Note: Upon the cancellation of the disability benefits policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of NYS Disability Benefits Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Disability Benefits Law.

### DISABILITY BENEFITS LAW

#### §220.Subd. 8

- (a) The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in employment as defined in this article, and notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits for all employees has been secured as provided by this article. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any disability benefits to any such employee if so employed.
- (b) The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in employment as defined in this article, and notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits for all employees has been secured as provided by this article.