APR05'21 PM12:36 RCVD 105 mc

State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES
25 Capitol Street - Room 120
Concord, New Hampshire 03301

Charles M. Arlinghaus
Commissioner
(603) 271-3201

Joseph B. Bouchard
Assistant Commissioner
(603) 271-3204

Catherine A. Keane
Deputy Commissioner
(603) 271-2059

Division of Public Works
Design and Construction
Project No. 81104 – Contract C

March 1, 2021

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 D.E.W. Construction Corp (VC# 339683), Williston, VT, for a total price not to exceed $1,318,315, for the Glencliff Home Electrical System Enhancement, Benton, New Hampshire. This contract is effective upon Governor and Council approval through February 25, 2022, unless extended in accordance with the contract terms. **75% Capital Funds 25% General Funds.**

2). Further authorize that a contingency in the amount of $75,000 be approved for unanticipated expenses for the Glencliff Home Electrical System Enhancement, Benton, New Hampshire, bringing the total to $1,393,315. **71% Capital Funds 29% General Funds.**

3). Further authorize the amount of $35,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 311152), for engineering services provided, bringing the total to $1,428,315. **69% Capital Fund 31% General Funds.**

Funding is available in Capital Fund accounts titled Department of Health and Human Services as follows:

05-95-95-950030-13590000-034-500161	19-146:14IV Glencliff Electric	$ 985,820
05-95-95-950030-17010000-034-500161	Lamott Wing Window Replacement	$ 6,775
	SUB TOTAL	**$992,595**

Funding is available in General Fund accounts titled Department of Health and Human Services as follows:

05-95-95-950010-56850000-103-502664-	Contract Repairs Bldg-Grounds	$ 414,720
05-95-95-910010-78920000-048-500226 –	Contract Maint Bldg-Grounds	$ 21,000
	SUB TOTAL	**$435,720**
	GRAND TOTAL	**$1,428,315**

EXPLANATION

The work of this project includes upgrades to the existing hydroelectric system at the lower station at the Glencliff Home in Benton to increase the amount of electricity being generated for the facility's use. It also Includes additional electrical work and controls that will help monitor the equipment and allow the facility to meter the electrical usage, and provide a more consistent level of service to the home. The work of this contract also includes the removal and replacement of existing steam turbines in the Boiler building to provide additional power for the home. The existing turbines are no longer operational. Currently, all electricity is generated by diesel generators, with a limited amount provided by the hydro wheel. The intent is to upgrade the capabilities of the hydro generation capabilities so that the output of electricity can be increased from this natural source. The steam turbine being installed in the steam plant will utilize residual steam to also generate electricity, thus reducing the load on the aging diesel generators, reducing the carbon footprint and saving the amount of diesel fuel purchased and consumed on an annual basis.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Department of Justice as to form and execution; and the Department of Health and Human Services, Glencliff Home 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:	$1,118,000
Contract Amount:	$1,208,017 (negotiated)
Over Estimate:	$90,017

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 81104, Contract C – Glencliff Home Electrical System Enhancement, Benton, New Hampshire.

DESCRIPTION: The work of this project includes upgrades to the existing hydroelectric system at the lower station at the Glencliff Home in Benton to increase the amount of electricity being generated for the facility's use. It also Includes additional electrical work and controls that will help monitor the equipment and allow the facility to meter the electrical usage, and provide a more consistent level of service to the home. The work of this contract also includes the removal and replacement of existing steam turbines in the Boiler building to provide additional power for the home. The existing turbines are no longer operational. Currently, all electricity is generated by diesel generators, with a limited amount provided by the hydro wheel. The intent is to upgrade the capabilities of the hydro generation capabilities so that the output of electricity can be increased from this natural source. The steam turbine being installed in the steam plant will utilize residual steam to also generate electricity, thus reducing the load on the aging diesel generators, reducing the carbon footprint and saving the amount of diesel fuel purchased and consumed on an annual basis.

EXPLANATION: This project will increase the electrical generation capacity at the Glencliff Home and reduce the load on the aging diesel generators, while also reducing the use of diesel fuel. The existing generators are used all of the time and the cost of maintenance has increased. The installation of the turbines will help reduce the load on the generators and reduce maintenance costs on the aging equipment.

OVER ESTIMATE EXPLANATION: Though a total of three contractors attended the pre-bid walk-through conferences, only one submitted a bid. The

single bid was about 18 percent higher than the estimate, but the final amount reflects negotiations to reduce cost by about 8 percent. The scope of this project is specialized in that it requires detailed coordination between a mechanical contractor that has extensive knowledge of steam systems as well as an electrical contractor that is familiar with electrical generating system and the specific requirements associated with a health care facility. And lastly, the location of the facility is remote so many contractors have found that getting the necessary personnel to the site to complete the work is not cost effective for them.

ALTERNATE: Alternate No. 1 was accepted for the bid amount of $110,298. The work of the Alternate includes minor renovations to the hydro building to make it weather-tight and structurally sound to adequately house the new electrical system enhancements.

DEPARTMENT ESTIMATE: $1,118,000
LOW BID: $1,208,017 (negotiated)

ABC Bid Data

Division of Public Works

BENTON
81104C
NON-FEDERAL

PROJECT:	BENTON	Awarded To:			
STATE PROJECT NUMBER:	81104C				
FED. PROJECT NUMBER:	NON-FEDERAL				
DATE BIDS OPEN:	December 16, 2020,				
SCOPE OF WORK:	GLENCLIFF HOME ELECTRICAL SYSTEM ENHANCEMENT	Amount:	$0.00	Certified by:	Director of Project Development
COMPLETION DATE:	February 25, 2022	Award Date:			
LOCATION:	Grafton				

Summary of Bidders

Contractor	Bid Amount	Rank
D.E.W CONSTRUCTION CORP SUITE 130, 277 BLAIR PARK ROAD, WILLISTON VT 05495	$1,310,412.00	A

negotiated bid items:

#901 - $475,208
#902 - 35,483
#903 - 667,326
#904 - 30,000
$1,208,017
Add Alternate #9 - 103,523
total = $1,318,315

BUREAU OF PUBLIC WORKS
✓ Award to A' Bidder (negotiated) $1,318,315
Hold for Negotiation
Cancel Contract
User Agency DHHS
Authorized by HLJ
Date 2/5/21

ABC Bid Data

Division of Public Works

BENTON
81104C
NON-FEDERAL

Item No.	Description	Unit	Quantity	P&E. Unit Price	P&E. Total	D.E.W CONSTRUCTION CORP. SUITE 130 WILLISTON, VT 05495 Unit Price	D.E.W CONSTRUCTION CORP. Total	Unit Price	Total

Items

901	ALL WORK ASSOCIATED WITH UPGRADES TO HYDO PER PLANS AND SPECIFICATIONS	U	1.00	$465,000.00	$465,000.00	$500,919.00	$500,919.00		
902	ALL WORK ASSOCIATED WITH INSTALLATION OF ELECTRICAL SUBMETERING PER PLANS AND SPECIFICATIONS	U	1.00	$53,000.00	$53,000.00	$66,844.00	$66,844.00		
903	ALL WORK ASSOCIATED WITH INSTALLATION OF STEAM TURBINE	U	1.00	$570,000.00	$570,000.00	$712,649.00	$712,649.00		
904	ALLOWANCE	$	30,000.00	$1.00	$30,000.00	$1.00	$30,000.00		
			Totals:		$1,118,000.00		$1,310,412.00		

ALTERNATES 81104C

ALTERNATE ONE

991	ADD ALTERNATE NUMBER 1	U	1.00	$54,000.00	$54,000.00	$110,298.00	$110,298.00		

Alt. Totals:			
Totals:	$1,118,000.00	$1,310,412.00	

ABC Bid Data

Division of Public Works

BENTON
81104C
NON-FEDERAL

Item No.	Description	Unit	Quantity	PSEE Unit Price	PSEE Total	D.E.W CONSTRUCTION CORP SUITE 130 WILLISTON, VT 05495 Unit Price	D.E.W CONSTRUCTION CORP SUITE 130 WILLISTON, VT 05495 Total	Unit Price	Total
Items									
901	ALL WORK ASSOCIATED WITH UPGRADES TO HYDO PER PLANS AND SPECIFICATIONS	U	1.00	$465,000.00	$465,000.00	$500,919.00	$500,919.00		
902	ALL WORK ASSOCIATED WITH INSTALLATION OF ELECTRICAL SUBMETERING PER PLANS AND SPECIFICATIONS	U	1.00	$53,000.00	$53,000.00	$68,844.00	$68,844.00		
903	ALL WORK ASSOCIATED WITH INSTALLATION OF STEAM TURBINE	U	1.00	$570,000.00	$570,000.00	$712,649.00	$712,649.00		
904	ALLOWANCE	$	30,000.00	$1.00	$30,000.00	$1.00	$30,000.00		
			Totals:		$1,118,000.00		$1,310,412.00		
ALTERNATES 81104C									
ALTERNATE ONE									
991	ADD ALTERNATE NUMBER 1	U	1.00	$54,000.00	$54,000.00	$110,298.00	$110,298.00		
			Alt. Totals:						
			Totals:		$1,118,000.00		$1,310,412.00		

DEW CONSTRUCTION

February 01, 2021

State of New Hampshire
Department of Administrative Services
Division of Public Works – Design & Construction
Attn: Beverly Kowalik
John O. Morton Building
7 Hazen Drive, Room 250
POB 483
Concord, NH 03302-0483

Re: Glencliff Home Electrical System Enhancement
Negotiated Letter

Beverly,

We offer the following negotiated amounts for the above project's base bid and add alternate 01.

Bid Item	Original Bid Cost	Neg Bid Cost	
901	$500,919.00	$475,208.00	
902	$66,844.00	$35,483.00	
903	$712,649.00	$667,326.00	
Allowance	$30,000.00	$30,000.00	
Total Base Bid	$1,310,412.00	$1,208,017.00	
Alternate 01	$110,298.00	$6,775.00	Windows
		$103,523.00	Remaining Work
Contract Total	$1,420,710.00	$1,318,315.00	

This is in accordance with the project plans, specifications and addendum 01.

If you have any questions regarding the enclosed, please let us know.

Sincerely,

Scott P. Carter
Senior Estimator
Head of Estimating

cc: Project team members, DEW file.

DEWCONS-01 MKAVANAGH

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/8/2021

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 have ADDITIONAL INSURED provisions or 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
Hickok & Boardman Insurance Group
346 Shelburne Rd
Burlington, VT 05401

CONTACT NAME: Melissa Kavanagh
PHONE (A/C, No, Ext): (802) 383-1621 FAX (A/C, No): (802) 658-0541
E-MAIL ADDRESS: mkavanagh@hbinsurance.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : CNA	
INSURER B : Berkley Assurance Company	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
DEW Construction Corp.
277 Blair Park Road Suite 130
Williston, VT 05495

COVERAGES CERTIFICATE NUMBER: 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	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	X UMBRELLA LIAB / X OCCUR	X		6076434865	4/1/2021	4/1/2022	EACH OCCURRENCE	$ 10,000,000
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$ 10,000,000
	DED X RETENTION $ 10,000						AGG. PRODUCTS-COMPLETED OPS	$ 10,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N	N/A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
B	Prof Liab/Pollution			PCADB-5014109-0421	4/1/2021	4/1/2022	Each Claim/Agg	2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project: Benton, Project No. 81104C (Glencliff Home Electrical System Enhancement – DEW Project #10242)

Additional Insured status applies for the State of New Hampshire Department of Administrative Services on the Umbrella policy per terms & conditions of the attached form CNA75504XX (03-2015)

CERTIFICATE HOLDER

State of New Hampshire
c/o Department of Administrative Services
7 Hazen Drive, Room 250
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

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CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 02/24/2021

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 have ADDITIONAL INSURED provisions or 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
Aon Risk Services Central, Inc.
Chicago IL Office
200 East Randolph
Chicago IL 60601 USA

CONTACT NAME:
PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Zurich American Ins Co	16535
INSURER B:	American Zurich Ins Co	40142
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
DEW Construction Corp
277 Blair Park Road, Suite 130
Williston VT 05495 USA

COVERAGES **CERTIFICATE NUMBER:** 570086137105 **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. Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT X LOC OTHER:			GL0437328713	04/01/2021	04/01/2022	EACH OCCURRENCE	$2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$500,000
							MED EXP (Any one person)	$15,000
							PERSONAL & ADV INJURY	$2,000,000
							GENERAL AGGREGATE	$4,000,000
							PRODUCTS - COMP/OP AGG	$4,000,000
A	AUTOMOBILE LIABILITY X ANY AUTO X OWNED AUTOS ONLY X HIRED AUTOS ONLY SCHEDULED AUTOS X NON-OWNED AUTOS ONLY			BAP 4373286-13	04/01/2021	04/01/2022	COMBINED SINGLE LIMIT (Ea accident)	$2,000,000
							BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION						EACH OCCURRENCE	
							AGGREGATE	
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N N If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WC437328513	04/01/2021	04/01/2022	X PER STATUTE 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

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

RE: Benton, Project No. 81104C (Glencliff Home Electrical System Enhancement - DEW Project #10242). State of New Hampshire, Department of Administrative Services, and all other parties as required by contract are included as Additional Insured in accordance with the policy provisions of the General Liability and Automobile Liability policies. General Liability and Automobile Liability policies evidenced herein are Primary and Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions. A Waiver of Subrogation is granted in favor of All parties as required by contract in accordance with the policy provisions of the General Liability, Automobile Liability and Employer's Liability policies.

CERTIFICATE HOLDER

State of New Hampshire
c/o Department of Administrative Service
7 Hazen Drive, Room 250
Concord NH 03302 USA

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

Aon Risk Services Central Inc.

Holder Identifier : DFH

Certificate No : 570086137105

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CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 03/08/2021

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 have ADDITIONAL INSURED provisions or 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).

Holder Identifier :

PRODUCER
Aon Risk Services Central, Inc.
Chicago IL Office
200 East Randolph
Chicago IL 60601 USA

CONTACT NAME:
PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Zurich American Ins Co	16535
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
State of New Hampshire
c/o Dept. of Administrative Services
7 Hazen Drive,
Concord NH 03302 USA

COVERAGES CERTIFICATE NUMBER: 570088297723 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,

Limits shown are as requested

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			OCP202815301	04/01/2021	04/01/2022	EACH OCCURRENCE	
	CLAIMS-MADE / OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	
							MED EXP (Any one person)	
							PERSONAL & ADV INJURY	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	
	POLICY / PRO-JECT / LOC						PRODUCTS - COMP/OP AGG	
	OTHER:						Each Occurrence	$2,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	
	ANY AUTO						BODILY INJURY (Per person)	
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	
	DED / RETENTION							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER (Mandatory in NH) Y / N	N / A					E.L. EACH ACCIDENT	
	If yes, describe under DESCRIPTION OF OPERATIONS below						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)

"Owner's and Contractor's Protective Liability (OCP) Coverage for the benefit of the State of New Hampshire Department of Administrative Services."
RE: Glencliff Home Electrical System Enhancement. DEW Project Number: 10142. Job Location: 393 High Street, Benton, New Hampshire.

Certificate No : 570088297723

CERTIFICATE HOLDER

D.E.W. Construction Corp.
277 Blair Park Road, Suite 130
Williston, VT 05495 USA

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

Aon Risk Services Central Inc.

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DEWCONS-01 MKAVANAGH

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/19/2021

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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PRODUCER
Hickok & Boardman Insurance Group
346 Shelburne Rd
Burlington, VT 05401

CONTACT NAME: Melissa Kavanagh
PHONE (A/C, No, Ext): (802) 383-1621 FAX (A/C, No): (802) 658-0541
E-MAIL ADDRESS: mkavanagh@hbinsurance.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Liberty Mutual Insurance	23043
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
DEW Construction Corp.
The State of New Hampshire
Department of Administrative Services, subs and sub-subs
277 Blair Park Road Suite 130
Williston, VT 05495

COVERAGES CERTIFICATE NUMBER: 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	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Builders Risk			62797242BMO1Q1	2/19/2021	2/19/2022	Deductible $5,000	1,318,315

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project Address: 393 High Street, Glencliff, NH 03238

The State of New Hampshire Department of Administrative Services, subs and sub-subs are included as additional named insureds on the above referenced Builders Risk policy. Waiver of Subrogation applies.

CERTIFICATE HOLDER

State of New Hampshire
Department of Administrative Services
7 Hazen Drive, Room 250
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

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Business Information

Business Details

Business Name:	D.E.W. CONSTRUCTION CORP.	Business ID:	286133
Business Type:	Foreign Profit Corporation	Business Status:	Good Standing
Business Creation Date:	01/09/1998	Name in State of Incorporation:	D.E.W. CONSTRUCTION CORP.
Date of Formation in Jurisdiction:	01/09/1998		
Principal Office Address:	277 Blair Park Road S130, Williston, VT, 05495, USA	Mailing Address:	277 Blair Park Road S130, Williston, VT, 05495, USA
Citizenship / State of Incorporation:	Foreign/Vermont		
		Last Annual Report Year:	2021
		Next Report Year:	2022
Duration:	Perpetual		
Business Email:	mfrancis@dewconstruction.com	Phone #:	NONE
Notification Email:	mfrancis@dewconstruction.com	Fiscal Year End Date:	NONE

Principal Purpose

S.No	NAICS Code	NAICS Subcode
1	OTHER / GENERAL CONSTRUCTION.	

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Principals Information

Name/Title	Business Address
Donald Wells / President	277 Blair Park Road, Suite 130, Williston, VT, 05495, USA
Donald Wells / Director	277 Blair Park Road, Suite 130, Williston, VT, 05495, USA
Michael Francis / Director	277 Blair Park Road, Suite 130, Williston, VT, 05495, USA
Michael Francis / Treasurer	277 Blair Park Road, Suite 130, Williston, VT, 05495, USA
Pamela Moreau / Secretary	277 Blair Park Rd, Ste 130, Williston, VT, 05495, USA

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Registered Agent Information

Name:	Farhm Michael
Registered Office Address:	MacMillin Co, 17 Elm Street, Keene, NH, 03431, USA
Registered Mailing Address:	MacMillin Co, 17 Elm Street, Keene, NH, 03431, USA

Trade Name Information

Business Name	Business ID	Business Status
DEW Health Care Group (/online/BusinessInquire/TradeNameInformation?businessID=359740)	552151	Expired

Trade Name Owned By

Name	Title	Address

Trademark Information

Trademark Number	Trademark Name	Business Address	Mailing Address
No records to view.			

Filing History Address History View All Other Addresses Name History

Shares Businesses Linked to Registered Agent Return to Search Back

NH Department of State, 107 North Main St. Room 204, Concord, NH 03301 -- **Contact Us (/online/Home/ContactUS)**

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