



JGR  
32C

STATE OF NEW HAMPSHIRE  
DEPARTMENT of NATURAL and CULTURAL RESOURCES  
DIVISION of PARKS and RECREATION  
172 Pembroke Road Concord, New Hampshire 03301  
Phone: (603) 271-3556 Fax: (603) 271-3553  
Web: www.nhstateparks.org

October 22, 2021

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

**REQUESTED ACTION**

Authorize the Department of Natural and Cultural Resources, Division of Parks and Recreation (Division) to enter into a Cooperative Project Agreement (CPA) with the University of New Hampshire (UNH) (VC #177867) in the amount of \$123,750 for the purpose of completing the Statewide Comprehensive Outdoor Recreation Plan effective upon Governor and Executive Council approval through September 30, 2023. 52% Federal Funds / 48% Other Funds (Agency Income).

Funds are available in the following accounts for Fiscal Years 2022 and 2023, and are anticipated to be available in Fiscal Year 2024, upon the continued appropriation of funds in the future operating budget with the authority to adjust encumbrances between fiscal years within the price limitation through the Budget Office, if needed and justified.

	<u>FY 2022</u>	<u>FY 2023</u>	<u>FY 2024</u>
03-035-035-351510-37170000, <u>LW Conservation Fund Grants</u> 072-500574 - Grants Federal	\$12,518.50	\$27,350.00	\$29,206.50
03-035-035-351510-40160000, <u>Office of Community Rec</u> 102-500731 - Contracts for Program Services	\$12,518.50	\$27,350.00	\$14,806.50
Total:	\$25,037.00	\$54,700.00	\$44,013.00

**EXPLANATION**

UNH will prepare a Statewide Comprehensive Recreation Plan (SCORP) acceptable to the National Parks Service on behalf of the Division. Parties to this agreement have agreed that the plan will include analysis of issues, needs, and recommendations. Public participation will play an important role in identifying the above topics. Staff at UNH recently assisted the State in the preparation of the 2019-2023 SCORP update therefore they have the unique experience necessary to assist in the preparation of New Hampshire's 2024-2028 SCORP.

In 2021, the State of New Hampshire received notification of its grant allocation under the Land and Water Conservation Fund (LWCF) program. The LWCF program authorized the Secretary of the Interior to provide financial assistance to States for the acquisition and/or development of public outdoor recreation areas for facilities found to be in accord with the SCORP. Part of the eligibility requirements for the LWCF funding mandates that States have an approved SCORP planning document in place. Since

its inception in 1965 the LWCF program has led to over 680 public outdoor recreation land acquisition and development projects throughout the state, totaling almost \$44,000,000.00 in grant assistance.

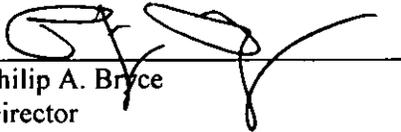
The agency funds will be used to assist in meeting the required federal match. The current 2019-2023 SCORP is due to expire on December 31, 2023.

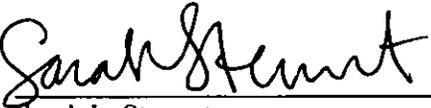
The Attorney General's Office has approved this CPA as to form, substance, and execution.

Respectfully submitted,

Concurred,

(24)

  
Philip A. Bryce  
Director

  
Sarah L. Stewart  
Commissioner

**COOPERATIVE PROJECT AGREEMENT**

between the

**STATE OF NEW HAMPSHIRE, Department of Natural and Cultural Resources**

and the

**University of New Hampshire of the UNIVERSITY SYSTEM OF NEW HAMPSHIRE**

- A. This Cooperative Project Agreement (hereinafter "Project Agreement") is entered into by the State of New Hampshire, **Department of Natural and Cultural Resources**, (hereinafter "State"), and the University System of New Hampshire, acting through **University of New Hampshire**, (hereinafter "Campus"), for the purpose of undertaking a project of mutual interest. This Cooperative Project shall be carried out under the terms and conditions of the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, except as may be modified herein.
- B. This Project Agreement and all obligations of the parties hereunder shall become effective on the date the Governor and Executive Council of the State of New Hampshire approve this Project Agreement ("Effective date") and shall end on **9/30/23**. If the provision of services by Campus precedes the Effective date, all services performed by Campus shall be performed at the sole risk of Campus and in the event that this Project Agreement does not become effective, State shall be under no obligation to pay Campus for costs incurred or services performed; however, if this Project Agreement becomes effective, all costs incurred prior to the Effective date that would otherwise be allowable shall be paid under the terms of this Project Agreement.
- C. The work to be performed under the terms of this Project Agreement is described in the proposal identified below and attached to this document as Exhibit A, the content of which is incorporated herein as a part of this Project Agreement.

**Project Title: 2024-208 NH Statewide Comprehensive Outdoor Recreation Plan (SCORP)**

- D. The Following Individuals are designated as Project Administrators. These Project Administrators shall be responsible for the business aspects of this Project Agreement and all invoices, payments, project amendments and related correspondence shall be directed to the individuals so designated.

**State Project Administrator**

Name: Eric Feldbaum  
 Address: Division of Parks and Recreation  
 172 Pembroke Road  
 Concord, NH 03301  
 eric.feldbaum@dnrc.nh.gov  
 Phone: 603-271-3556

**Campus Project Administrator**

Name: Kimberly Becker  
 Address: Sponsored Programs Administration  
 15 College Road  
 Durham, NH 03824-2620  
 kimberly.becker@unh.edu  
 Phone: 603-358-2443

- E. The Following Individuals are designated as Project Directors. These Project Directors shall be responsible for the technical leadership and conduct of the project. All progress reports, completion reports and related correspondence shall be directed to the individuals so designated.

**State Project Director**

Name: Eric Feldbaum  
 Address: Division of Parks and Recreation  
 172 Pembroke Road  
 Concord, NH 03301  
 eric.feldbaum@dnrc.nh.gov  
 Phone: 603-271-3556

**Campus Project Director**

Name: Bob Barcelona  
 Address: Recreation Management and Policy  
 Hewitt Hall Room 191  
 Durham, Nh 03824  
 bob.barcelona@unh.edu  
 Phone: 603-862-1442

F. Total State funds in the amount of \$123,748 have been allotted and are available for payment of allowable costs incurred under this Project Agreement. State will not reimburse Campus for costs exceeding the amount specified in this paragraph.

Check if applicable

Campus will cost-share 10 % of total costs during the term of this Project Agreement.

Federal funds paid to Campus under this Project Agreement are from Grant/Contract/Cooperative Agreement No. \_\_\_\_\_ from \_\_\_\_\_ under CFDA# \_\_\_\_\_. Federal regulations required to be passed through to Campus as part of this Project Agreement, and in accordance with the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, are attached to this document as Exhibit B, the content of which is incorporated herein as a part of this Project Agreement.

G. Check if applicable

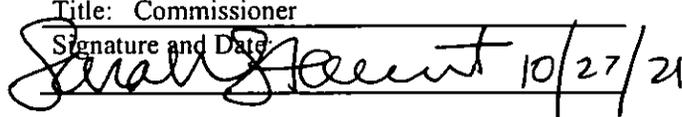
Article(s) \_\_\_\_\_ of the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002 is/are hereby amended to read:

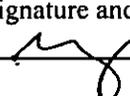
H.  State has chosen **not to take** possession of equipment purchased under this Project Agreement.  
 State has chosen **to take** possession of equipment purchased under this Project Agreement and will issue instructions for the disposition of such equipment within 90 days of the Project Agreement's end-date. Any expenses incurred by Campus in carrying out State's requested disposition will be fully reimbursed by State.

This Project Agreement and the Master Agreement constitute the entire agreement between State and Campus regarding this Cooperative Project, and supersede and replace any previously existing arrangements, oral or written; all changes herein must be made by written amendment and executed for the parties by their authorized officials.

IN WITNESS WHEREOF, the University System of New Hampshire, acting through the University of New Hampshire and the State of New Hampshire, \_\_\_\_\_ have executed this Project Agreement.

**By An Authorized Official of:**  
**University of New Hampshire**  
Name: Karen M. Jensen  
Title: Director, Sponsored Programs Administration  
Signature and Date:  
Karen Jensen Digitally signed by Karen Jensen  
Date: 2021.10.01 16:18:04 -0400

**By An Authorized Official of:**  
**Division of Parks and Recreation**  
Name: Sarah L. Stewart  
Title: Commissioner  
Signature and Date:  
 10/27/21

**By An Authorized Official of:** the New Hampshire Office of the Attorney General  
Name: Michael Haley  
Title: Assistant Attorney General  
Signature and Date:  
 10/27/2021

**By An Authorized Official of:** the New Hampshire Governor & Executive Council  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Signature and Date: \_\_\_\_\_

## EXHIBIT A

- A. Project Title:** 2024-2028 NH Statewide Comprehensive Outdoor Recreation Plan (SCORP)
- B. Project Period:** effective upon Governor and Council approval through 09/30/23
- C. Objectives:** • Based on information collected, write and deliver final SCORP report and deliver outreach presentations communicating study findings and implications as appropriate.

**D. Scope of Work:**

Task 1: SCORP Vision

- Consultation with Implementing Partners (e.g. Federal, State, Municipal, Non-Profit organizational partners) to address changes to 2024-2028 SCORP format
- Meet with various stakeholders to address formatting, provide content, identify ways that SCORP is used in their agencies, and discuss how to make the SCORP more useful for their agencies and constituencies
- Develop draft guiding priorities for NH SCORP
- Initiate and complete FY 2022 (project beginning after 9/1/21)

Task 2: Background Research

- Provide updated statewide demographic profile information and provide analysis of statewide demographic trends
- Provide data and information on outdoor recreation trends in New Hampshire
- Provide data and information on health and wellness trends
- Provide information on economic and social impacts of outdoor recreation in New Hampshire
- Develop a series of GIS maps reflecting priority initiatives (e.g. sociographic data, location of parks and protected areas, recreation assets) and based on previous and current SCORPs
- Initiate and complete FY 2022 (project beginning after 9/1/21)

Task 3: Public Engagement

- Representative public survey of New Hampshire residents to understand outdoor recreation participation and opinions regarding outdoor recreation, land conservation, resource priorities, and management (n=2000)
- Public online survey of outdoor recreation participants to gauge interest and to gather input from New Hampshire residents who did not have an opportunity to take part in the representative survey (non-probability sample)
- Local recreation provider/leader survey to assess the demand and support for outdoor recreation in New Hampshire at the municipal and regional level. Survey will address the condition, accessibility, support, and intentions to develop or improve outdoor recreation resources. Scope of survey will include municipal recreation staff, state park managers, conservation staff and committee leadership, and elected officials. Will partner with the NH Municipal Association, NH Recreation and Park Association (NHRPA), NH Department of Natural and Conservation Resources (DNCR), NH Regional Planning Commissions, school associations, and NH Association of Conservation Commissions to generate samples and coordinate data collection.
- Focus groups (2) to garner opinions from groups traditionally underrepresented in outdoor recreation (e.g. persons of color, New Americans)
- Initiate and complete FY 2023

(continued)

Task 4: Priorities, Goals and Actions

- Based on information obtained in Task 2 and 3, develop and finalize SCORP priorities, goals, and actions
- Obtain input from key stakeholders (identified in Task 1) on draft priorities, goals, and actions and revise as needed
- Initiate and complete FY 2024

**Task 5: Open Project Selection Process**

- Use information obtained through all tasks to establish objective criteria and standards for LWCF project selections based on New Hampshire's priority of needs
- Initiate and complete FY 2024

**Task 6: Final SCORP Report and Presentation**

- Based on information collected in Tasks 1-6, write and deliver final SCORP report and deliver outreach presentations communicating study findings and implications as appropriate

**E. Deliverables Schedule:** Initiate and complete FY 2024 (final draft report delivered 09/01/23)

**F. Budget and Invoicing Instructions:** Campus will submit invoices to State on regular Campus invoice forms no more frequently than monthly and no less frequently than quarterly. Invoices will be based on actual project expenses incurred during the invoicing period, and shall show current and cumulative expenses by major cost categories, and shall document cumulative cost sharing through the end of the invoicing period. State will pay Campus within 30 days of receipt of each invoice. Campus will submit its final invoice not later than 30 days after the Project Period end date.

BUDGET	STATE	COST SHARE	TOTAL
Salaries:	\$50,813	0	\$ 50,813
Fringe:	\$ 4,014	0	\$ 4,014
Supplies:	\$ 2,000	0	\$ 2,000
Travel:	\$ 3,000	0	\$ 3,000
Consultants	\$ 30,500	0	\$ 30,500
F&A	\$ 33,421	\$13,775	\$ 47,196
<b>TOTAL</b>	<b>\$123,748</b>	<b>\$13,775</b>	<b>\$137,523</b>

# State of New Hampshire

## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that UNIVERSITY OF NEW HAMPSHIRE a New Hampshire State Chartered (Legislative) formed to transact business in New Hampshire on July 01, 1923. I further certify that it has paid the fees required by law and has not dissolved.

Business ID: 66982

Certificate Number: 0005228604



IN TESTIMONY WHEREOF,  
I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 19th day of January A.D. 2021.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State

## Business Information

### Business Details

---

Business Name:	UNIVERSITY OF NEW HAMPSHIRE	Business ID:	66982
Business Type:	State Chartered (Legislative)	Business Status:	Active
Business Creation Date:	07/01/1923	Name in State of Formation:	Not Available
Date of Formation in Jurisdiction:	07/01/1923		
Principal Office Address:	268 Mast Rd, Durham, NH, 03824, USA	Mailing Address:	268 MAST ROAD, DURHAM, NH, 03824, USA
Citizenship / State of Formation:	Domestic/New Hampshire		
		Last Annual Report Year:	N/A
		Next Report Year:	N/A
Duration:	Perpetual		
Business Email:	venky@unhdot.edu	Phone #:	603-862-0015
Notification Email:	NONE	Fiscal Year End Date:	NONE

---

### Principal Purpose

---

S.No	NAICS Code	NAICS Subcode
No records to view.		

---

### Principals Information

---

No Principal(s) listed for this business.

---

**Lavoie, Leanne**



**Sent:** Lavoie, Leanne  
Tuesday, November 12, 2019 1:39 PM  
**To:** Lavoie, Leanne  
**Subject:** FW: Signing Authority - UNH

**From:** Smith, Nancy <Nancy.Smith@doj.nh.gov>  
**Sent:** Wednesday, May 23, 2018 2:01 PM  
**To:** DOJ-Civil Bureau <Dist-CivilBureau@doj.nh.gov>; DOJ-Transportation <Transportation@doj.nh.gov>; DOJ-Environmental Bureau <EnvironmentalBureau@doj.nh.gov>  
**Subject:** FW: Signing Authority - UNH

In case you review "Cooperative Project Agreements" between your state agencies and UNH under the master agreement – below is a updated list of the authorized signors for UNH.

Nancy

<b>Institution</b>	<b>Individual</b>	<b>Title</b>
Granite State College	Lisa Shawney	Dean of Finance & Administration
Keene State College	Susan LaPanne Audrey J. Arsenault	VP for Finance and Planning Director of Sponsored Projects and Research
Plymouth State University	Tracy Claybaugh Andrew Ines	Vice President for Finance and Administration Interim Director, Office of Research & Sponsored Programs
University of New Hampshire	Victor Sosa Karen Jensen Louise Griffin Darrel Covell	Manager of Research Administration Manager of Sponsored Programs Administration Senior Director For Research & Sponsored Program Administration Cooperative Ext – Dir of Finance, Admin, and Facilities
University System of New Hampshire	Catherine Provencher Diane Cotter Heather Huckins	Vice Chancellor for Financial Affairs & Treasurer Senior Contract Officer Interim Senior Contract Officer





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/25/2021

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).

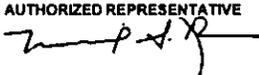
<b>PRODUCER</b> Fred C. Church Insurance 41 Wellman Street Lowell MA 01851	<b>CONTACT NAME:</b> Danielle Ballou <b>PHONE (A/C, No, Ext):</b> 978-322-7168 <b>FAX (A/C, No):</b> 978-454-1865 <b>E-MAIL ADDRESS:</b> dballou@fredchurch.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> University System of New Hampshire 5 Chenell Drive, Suite 301 Concord NH 03301	<b>INSURER A:</b> United Educators Insurance	<b>NAIC #</b> 10020
	<b>INSURER B:</b> Acadia Insurance Company	<b>NAIC #</b> 31325
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	

**COVERAGES**      **CERTIFICATE NUMBER:** 1065111234      **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 SUBR INSD 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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		E0195B	11/1/2020	11/1/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ \$
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		CAA5267641	11/1/2020	11/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 1,000,000		E0195B	11/1/2020	11/1/2021	EACH OCCURRENCE \$ 40,000,000 AGGREGATE \$ 40,000,000 \$
	<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 <input type="checkbox"/> N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liability Educators Legal Liability		E0195B	11/1/2020	11/1/2021	Each Occurrence \$1,000,000 Aggregate \$3,000,000 Ea. Occ. / Aggregate \$30,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**\*\*Additional Insured Status is Provided Where Required by Contract as respects General Liability\*\***  
 Evidence of insurance University of New Hampshire at Durham, University of New Hampshire at Manchester, Keene State College, Plymouth State University, NHPB, New Hampshire Public Television (NHPTV), University of New Hampshire Foundation, Inc., UNH Alumni Association, Center for Public Responsibility, and Corporate Citizenship, Granite State College, New Hampshire Fiber Network, Inc. (NHFN, Inc.)

<b>CERTIFICATE HOLDER</b>  NH Department of Natural and Cultural Resources 172 Pembroke Road Plymouth Concord NH 03301 United States	<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 
--	--



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
08/25/2021

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).

<b>PRODUCER</b> RSC Insurance Brokerage, Inc. One New Hampshire Avenue Suite 125 Portsmouth NH 03801	<b>CONTACT NAME:</b> Janine D'Ambrosio <b>PHONE (A/C, No, Ext):</b> (803) 778-8985 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> jdambrosio@risk-strategies.com
	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> MEMIC Indemnity Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
<b>INSURED</b> University System of New Hampshire 5 Chenell Drive Concord NH 03301	

**COVERAGES**                      **CERTIFICATE NUMBER:** 21-22                      **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
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  <b>GEN'L AGGREGATE LIMIT APPLIES PER:</b> <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						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 \$ \$
A	<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	3102807054	04/01/2021	04/01/2022	<input 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

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

<b>CERTIFICATE HOLDER</b>  NH Department of Natural and Cultural Resources 172 Pembroke Road  Concord NH 03301	<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 