



# State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES

25 Capitol Street - Room 100  
Concord, New Hampshire 03301  
(603) 271-3201 | [Office@das.nh.gov](mailto:Office@das.nh.gov)

Charles M. Arlinghaus  
Commissioner

Catherine A. Keane  
Deputy Commissioner

Sheri L. Rockburn  
Assistant Commissioner

Division of Public Works  
Design and Construction  
Project No. 81227- Contract B

September 16, 2022

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 Stephens-Marquis Associates, Inc. (VC #157584), Merrimack, New Hampshire for a total price not to exceed \$258,900 for Lebanon Circuit Court Remove & Replace Underground Fuel Storage. This contract is effective upon Governor and Council approval through August 18, 2023, unless extended in accordance with the contract terms. **100% Capital**
- 2) Further authorize that a contingency in the amount of \$19,000 be approved for unanticipated site expenses for Lebanon Circuit Court Remove & Replace Underground Fuel Storage, Lebanon, New Hampshire, bringing the total to \$277,900. **100% Capital**
- 3) Further authorize the amount of \$10,000 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 \$287,900. **100% Capital**

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

FY 2023

01-14-14-146530-92670000 L21:11A2-Lebanon Crt Rep Tank	
034-500162 - Capital Projects	\$ 258,900
034-500162 - Capital Projects - Contingency	\$ 19,000
034-500162 - Capital Projects - DPW Fees	\$ 10,000
<b>Grand Total</b>	<b>\$ 287,900</b>

**EXPLANATION**

Per Chapter 107:1, I, A, 2, Laws of 2021, Lebanon Circuit Courthouse – Remove and Replace Underground Fuel Storage Tank. This project will remove the existing 2,000-gallon underground oil tank and replace it with a 2,000-gallon underground propane tank at the Lebanon Circuit Courthouse, in Lebanon, NH. In addition, the two oil-fired burners will be replaced with propane-fired.

The original, 30-year-old 2,000-gallon oil tank failed in the fall of 2019 due to a leak in the interstitial lining. A temporary aboveground oil tank was installed to allow the building to operate while awaiting a new underground tank. The existing tank has been decommissioned by the Department of Environmental Services and no contamination was identified.

A public bid opening was held on July 20, 2022. Two (2) bid proposals were received and the contract was awarded to the lowest qualified bidder. The low bid was within 4% of the Department estimate and considered within industry standards.

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.

Respectfully submitted,



Charles M. Arlinghaus,  
Commissioner

DEPARTMENT ESTIMATE: \$ 270,000  
LOW BID: \$ 258,900  
UNDER ESTIMATE: \$ 11,100



# ABC Bid Data

LEBANON  
81227B  
NON-FEDERAL

PROJECT:	LEBANON	Awarded To:	
STATE PROJECT NUMBER:	81227B		
FED. PROJECT NUMBER:	NON-FEDERAL		
DATE BIDS OPEN:	July 20, 2022, 2:00 PM		
SCOPE OF WORK:	LEBANON CIRCUIT COURT REMOVE AND REPLACE UNDERGROUND STORAGE TANK	Amount:	\$0.00
COMPLETION DATE:	August 18, 2023	Award Date:	
LOCATION:	Grafton	Certified by:	<u>Director of Project Development</u>

## Summary of Bidders

Contractor	Bid Amount	Rank
STEPHENS-MARQUIS ASSOCIATES 17 DANIEL WEBSTER HWY MERRIMACK NH 03054	\$258,900.00	A
D. L. KING & ASSOCIATES INC. 45 BATES ROAD, MERRIMACK NH 03054	\$287,845.00	B

**BUREAU OF PUBLIC WORKS**

Award to Stephens-Marquis Assoc

Hold for Negotiation

Cancel Contract

User Agency NH DAS - Courts

Authorized by [Signature]

Date 10/26/2022

7:54 AM

*Handwritten notes:*

Item # 901 = \$ 238,900.-

# 902 = \$ 20,000.-

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Total this Contract = \$ 258,900.-



Division of Public Works

# ABC Bid Data

LEBANON  
81227B  
NON-FEDERAL

Item No.	Description	Unit	Quantity	PS&E		STEPHENS-MARQUIS ASSOCIATES 717 DANIEL WEBSTER HWY MERRIMACK, NH 03054		D. L. KING & ASSOCIATES INC. 45 BATES ROAD MERRIMACK, NH 03054	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

**Items**

901	REMOVE AND REPLACE THE UNDERGROUND FUEL TANK AND BURNERS	U	1.00	\$250,000.00	\$250,000.00	\$238,900.00	\$238,900.00	\$267,845.00	\$267,845.00
902	ALLOWANCE #1 FOR OWNERS CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS	\$	20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00
<b>Totals:</b>					<b>\$270,000.00</b>		<b>\$258,900.00</b>		<b>\$287,845.00</b>
<b>Alt. Totals:</b>									
<b>Totals:</b>					<b>\$270,000.00</b>		<b>\$258,900.00</b>		<b>\$287,845.00</b>



Division of Public Works

## PS&E Comparison

LEBANON  
81227B  
NON-FEDERAL

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
<b>Items</b>								
901	REMOVE AND REPLACE THE UNDERGROUND FUEL TANK AND BURNERS	U	1.00	\$238,900.00	\$238,900.00	\$250,000.00	\$250,000.00	(\$11,100.00)
902	ALLOWANCE #1 FOR OWNERS CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS	\$	20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00	\$0.00
<b>Total:</b>					\$258,900.00	\$270,000.00		(\$11,100.00)

Certificate of Authority # 1

(Corporation, Non-Profit Corporation)

**Corporate Resolution**

I, MEUSSA MARQUIS, hereby certify that I am duly elected Clerk/Secretary/Officer of  
(Name)

Stephens Marquis Associates, Inc.. I hereby certify the following is a true copy of a vote taken at  
(Name of Corporation)

a meeting of the Board of Directors/shareholders, duly called and held on July 28, 2022,  
at which a quorum of the Directors/shareholders were present and voting.

VOTED: That DENNIS STEPHENS (may list more than one person) is  
(Name and Title) PRESIDENT

duly authorized to enter into contracts or agreements on behalf of

Stephens Marquis Associates, Inc. with the State of New Hampshire and any of  
(Name of Corporation)

its agencies or departments and further is authorized to execute any documents  
which may in his/her judgment be desirable or necessary to effect the purpose of  
this vote.

I hereby certify that said vote has not been amended or repealed and remains in full force  
and effect as of the date of the contract to which this certificate is attached. This authority  
remains valid for thirty (30) days from the date of this Corporate Resolution. I further certify  
that it is understood that the State of New Hampshire will rely on this certificate as evidence that  
the person(s) listed above currently occupy the position(s) indicated and that they have full  
authority to bind the corporation. To the extent that there are any limits on the authority of any  
listed individual to bind the corporation in contracts with the State of New Hampshire, all such  
limitations are expressly stated herein.

DATED: July 28, 2022

ATTEST: Melissa Marquis  
(Name & Title)  
TREASURER

# State of New Hampshire

## Department of State

### CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that STEPHENS-MARQUIS ASSOCIATES, INC. is a New Hampshire Profit Corporation registered to transact business in New Hampshire on March 25, 1994. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 207213

Certificate Number: 0005844440



IN TESTIMONY WHEREOF,  
I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 10th day of August A.D. 2022.

A handwritten signature in black ink, appearing to read "David M. Scanlan".

David M. Scanlan  
Secretary of State



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/25/2022

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> THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511		<b>CONTACT NAME:</b> Lauren Hilton <b>PHONE (A/C, No, Ext):</b> (603) 224-2562 <b>FAX (A/C, No):</b> (603) 224-0012 <b>E-MAIL ADDRESS:</b> lhilton@rowleyagency.com	
<b>INSURED</b> Stephens-Marquis Associates, Inc. 717 Daniel Webster Hwy Merrimack NH 03054		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Citizens Insurance Company of America <b>INSURER B:</b> Allmerica Financial Benefits 41840 <b>INSURER C:</b> Hanover Insurance Co. 22292 <b>INSURER D:</b> A.I.M. Mutual Insurance Co. <b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES**

CERTIFICATE NUMBER: 22-23 MASTER

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 WVR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			ZBV 8662788-01	7/1/2022	7/1/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS			AMV 8662777-01	7/1/2022	7/1/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			UVV 8662789-01	7/1/2022	7/1/2023	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 PROD-COM/POP AGG \$ 2,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	3A: MA, NH, ME, RI WAZ80080078872022A	7/1/2022	7/1/2023	<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
A	Leased or Rented Equipment			ZBV 8662788-01	7/1/2022	7/1/2023	LIMIT: \$100,000
A	Installation Floater			ZBV 8662788-01	7/1/2022	7/1/2023	LIMIT: \$100,000

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

81227B: Lebanon Circuit Court, 38 Centerra Pkwy, Lebanon, NH.

The State of New Hampshire, its agencies, and its agents and employees is included as additional insured with respects to the CGL policy as required by executed written contract with the above named insured.

**CERTIFICATE HOLDER****CANCELLATION**

State of New Hampshire Dept of Administrative Services 7 Hazen Drive Room 250 Concord, NH 03302	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 Lauren Hilton/LPH <i>Lauren Hilton</i>
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ACORD 25 (2014/01)

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INS025 (201401)



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

8/12/2022

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> THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	<b>CONTACT NAME:</b> Laureen Hilton <b>PHONE (A/C, No. Ext):</b> (603) 224-2562 <b>E-MAIL ADDRESS:</b> lhilton@rowleyagency.com <b>PRODUCER CUSTOMER ID:</b> 00005906	<b>FAX (A/C, No):</b> (603) 224-6012
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Stephens-Marquis Associates, Inc., State of NH Dept of Admin Svcs, any and all subs, and all others employed on the premises; 717 Daniel Webster Hwy Merrimack NH 03054	<b>INSURER A:</b> Hanover Insurance Co. NAIC # 22292	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES** CERTIFICATE NUMBER: BR Lebanon 81227B REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 81227B: Lebanon Circuit Court, 38 Centerra Pkwy, Lebanon, NH

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 CAUSES OF LOSS 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"/> 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	<input checked="" type="checkbox"/> INLAND MARINE CAUSES OF LOSS <input type="checkbox"/> NAMED PERILS CRIME TYPE OF POLICY	TYPE OF POLICY <b>Builders Risk</b> POLICY NUMBER IHV J120939 00	9/7/2022	9/7/2023	<input checked="" type="checkbox"/> JOBSITE LIMIT <input checked="" type="checkbox"/> TEMPORARY STORAGE <input checked="" type="checkbox"/> IN TRANSIT <input checked="" type="checkbox"/> WAIVER OF SUBROGATION	\$ 258,900 \$ 129,450 \$ 129,450 \$ INCLUDED
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

<b>CERTIFICATE HOLDER</b>  State of New Hampshire Dept. of Administrative Services PO Box 483 Room 250 Concord, NH 03302	<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  Renee Skillings/RLS <i>Renee L. Skillings, CRIS</i>
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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/12/2022

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> THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	<b>CONTACT NAME:</b> Laureen Hilton <b>PHONE (A.C. No. Ext):</b> (603) 224-2562 <b>E-MAIL ADDRESS:</b> lhilton@rowleyagency.com	<b>FAX (A.C. No):</b> (603) 224-8012
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Mid-Continent Casualty Company	<b>NAIC #</b> 23418
<b>INSURED</b> State of NH Dept of Admin Svcs c/o Stephens-Marquis Associates, Inc. 717 Daniel Webster Hwy Merrimack NH 03054	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES** CERTIFICATE NUMBER: OCP Lebanon 81227B 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"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> OCP GENTL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			04OCP002003658	09/07/2022	09/07/2023	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COM/PROP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <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"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$						<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH). If yes, describe under DESCRIPTION OF OPERATIONS below		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 \$

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

81227B Lebanon Circuit Court, 38 Centerra Pkwy., Lebanon, NH. Remove and Replace Underground Fuel Tank.

<b>CERTIFICATE HOLDER</b> State of New Hampshire Dept. of Administrative Services PO Box 483 Room 250 Concord NH 03302	<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 
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