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THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



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William Cass, P.E.
Commissioner

David Rodrigue, P.E.
Assistant Commissioner
Andre Briere, Colonel, USAF (RET)
Deputy Commissioner

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

Bureau of Construction
July 13, 2023

REQUESTED ACTION

1. Authorize the Department of Transportation to enter into a contract with Spears Bros. Building Salvage & Wrecking, Inc. (Vendor 400212) of Laconia, NH, on the basis of a low bid of \$294,700 for demolition of commercial buildings and ancillary structures on three (3) State owned properties in the Town of Derry (Project: Derry-Londonderry #13065E), from the date of Governor and Council approval through April 12, 2024, unless amended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Funding is available in State Fiscal Year 2024 as follows:

Funding is available as follows:	<u>FY 2024</u>
04-96-96-963515-3054	
Consolidated Federal Aid	
400-500870 Highway Contract Payments	\$294,700

2. Further authorize that a contingency in the amount of \$29,470 be approved for payment of latent conditions, which may appear during the construction of the project. The contingency requested is 10% of the contract amount.

Funding is available as follows:	<u>FY 2024</u>
04-96-96-963515-3054	
Consolidated Federal Aid	
400-500870 Highway Contract Payments	\$29,470

EXPLANATION

This project is part of the State's Ten-Year Transportation Improvement Plan. The Contract provides for the demolition of commercial buildings and ancillary structures, including retaining walls, concrete foundation removal, and site restoration on three (3) state owned properties. The properties are located on Folsom Road, North High Street and Madden Road in the Town of Derry, NH.

Building demolitions are needed to facilitate construction of the future Derry-Londonderry 13065B reconstruction project from Old Rum Trail to Folsom Road. This is part of the I-93 Exit 4A and connector road projects.

The proposed contingency amount is 10% of the contract amount. The contingency amount is requested to include any cost elements related to differing site conditions that may be encountered (surface and subsurface) during demolition of these structures.

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 the bid reasonably conforms to the engineer's estimate in accordance with State procedure. The underestimation was accounted for in two of the building demolition items and is probably the result of our underestimation of the value of recyclable/salvage materials from the buildings. 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 (Other Federal Aid), with anticipated utilization of Turnpike Toll Credits for the State's 20% match, 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.

Your approval of this resolution is respectfully requested.

Sincerely,



William J. Cass, P.E.
Commissioner

WC/pcj

Department Estimate:	\$401,090
Contract Amount:	<u>\$294,700</u>
Under Estimate:	\$106,390
Attachments	



ABC Bid Data

DERRY-LONDONDERRY

13065E

X-A005(210)

PROJECT: DERRY-LONDONDERRY
STATE PROJECT NUMBER: 13065E
FED. PROJECT NUMBER: X-A005(210)
DATE BIDS OPEN: June 29, 2023, 2:00
SCOPE OF WORK: I-93 Exit 4A, Building Demolitions for construction of Exit 4A.
COMPLETION DATE: April 12, 2024
LOCATION: Rockingham

Awarded To: SPEARS BROS BUILDING
SALVAGE & WRECKING INC
PO BOX 818
LACONIA, NH 03247-0818

Amount: \$294,700.00

Award Date:

Certified by: WILLIAM J. OLDENBURG
Director of Project Development

Summary of Bidders

Contractor	Bid Amount	Rank
SPEARS BROS BUILDING SALVAGE & WRECKING INC PO BOX 818, LACONIA NH 03247-0818	\$294,700.00	A
RITTER AND PARATORE CONTRACTING INC 2435 STATE ROUTE 5, UTICA NY 13502	\$397,000.00	B

Item No.	Description	Unit	Quantity	PS&E		SPEARS BROS BUILDING SALVAGE & WRECKING INC PO BOX 818 LACONIA, NH 03247-0818		RITTER AND PARATORE CONTRACTING INC 2435 STATE ROUTE 5 UTICA, NY 13502	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

Items

201.881	INVASIVE SPECIES CONTROL TYPE I	SY	160.00	\$4.00	\$640.00	\$3.00	\$480.00	\$3.00	\$480.00
202.201	DEMOLISHING BUILDINGS	U	1.00	\$86,950.00	\$86,950.00	\$61,700.00	\$61,700.00	\$79,000.00	\$79,000.00
202.202	DEMOLISHING BUILDINGS	U	1.00	\$143,540.00	\$143,540.00	\$73,200.00	\$73,200.00	\$112,000.00	\$112,000.00
202.203	DEMOLISHING BUILDINGS	U	1.00	\$54,860.00	\$54,860.00	\$64,800.00	\$64,800.00	\$104,555.00	\$104,555.00
202.302	BUILDING ASBESTOS ABATEMENT	U	1.00	\$1,000.00	\$1,000.00	\$1,500.00	\$1,500.00	\$200.00	\$200.00
202.303	BUILDING ASBESTOS ABATEMENT	U	1.00	\$12,000.00	\$12,000.00	\$13,500.00	\$13,500.00	\$12,000.00	\$12,000.00
203.1	COMMON EXCAVATION	CY	160.00	\$17.50	\$2,800.00	\$20.00	\$3,200.00	\$21.00	\$3,360.00
618.7	FLAGGERS	HR	400.00	\$45.00	\$18,000.00	\$15.00	\$6,000.00	\$45.00	\$18,000.00
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$8,000.00	\$8,000.00	\$3,500.00	\$3,500.00	\$4,700.00	\$4,700.00
645.512	COMPOST SOCK FOR PERIMETER BERM	LF	1,500.00	\$5.50	\$8,250.00	\$5.00	\$7,500.00	\$5.00	\$7,500.00
645.631	SILT FENCE	LF	1,500.00	\$3.50	\$5,250.00	\$3.00	\$4,500.00	\$3.00	\$4,500.00
646.3	TURF ESTABLISHMENT WITH MULCH AND TACKIFIERS	A	1.40	\$4,000.00	\$5,600.00	\$3,500.00	\$4,900.00	\$12,075.00	\$16,905.00
647.1	HUMUS	CY	650.00	\$28.00	\$18,200.00	\$24.00	\$15,600.00	\$22.00	\$14,300.00
692.	MOBILIZATION	U	1.00	\$30,000.00	\$30,000.00	\$29,220.00	\$29,220.00	\$14,000.00	\$14,000.00
697.11	INVASIVE SPECIES CONTROL AND MANAGEMENT PLAN	U	1.00	\$3,000.00	\$3,000.00	\$2,100.00	\$2,100.00	\$2,500.00	\$2,500.00
699.	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	\$	1,000.00	\$1.00	\$1,000.00	\$1.00	\$1,000.00	\$1.00	\$1,000.00
1010.15	FUEL ADJUSTMENT	\$	2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00

Totals:	\$401,090.00	\$294,700.00	\$397,000.00
Alt. Totals:			
Totals:	\$401,090.00	\$294,700.00	\$397,000.00

PS&E Comparison

DERRY-LONDONDERRY

13065E

X-A005(210)

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
Items								
201.881	INVASIVE SPECIES CONTROL TYPE I	SY	160.00	\$3.00	\$480.00	\$4.00	\$640.00	(\$160.00)
202.201	DEMOLISHING BUILDINGS	U	1.00	\$61,700.00	\$61,700.00	\$86,950.00	\$86,950.00	(\$25,250.00)
202.202	DEMOLISHING BUILDINGS	U	1.00	\$73,200.00	\$73,200.00	\$143,540.00	\$143,540.00	(\$70,340.00)
202.203	DEMOLISHING BUILDINGS	U	1.00	\$64,800.00	\$64,800.00	\$54,860.00	\$54,860.00	\$9,940.00
202.302	BUILDING ASBESTOS ABATEMENT	U	1.00	\$1,500.00	\$1,500.00	\$1,000.00	\$1,000.00	\$500.00
202.303	BUILDING ASBESTOS ABATEMENT	U	1.00	\$13,500.00	\$13,500.00	\$12,000.00	\$12,000.00	\$1,500.00
203.1	COMMON EXCAVATION	CY	160.00	\$20.00	\$3,200.00	\$17.50	\$2,800.00	\$400.00
618.7	FLAGGERS	HR	400.00	\$15.00	\$6,000.00	\$45.00	\$18,000.00	(\$12,000.00)
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$3,500.00	\$3,500.00	\$8,000.00	\$8,000.00	(\$4,500.00)
645.512	COMPOST SOCK FOR PERIMETER BERM	LF	1,500.00	\$5.00	\$7,500.00	\$5.50	\$8,250.00	(\$750.00)
645.531	SILT FENCE	LF	1,500.00	\$3.00	\$4,500.00	\$3.50	\$5,250.00	(\$750.00)
646.3	TURF ESTABLISHMENT WITH MULCH AND TACKIFIERS	A	1.40	\$3,500.00	\$4,900.00	\$4,000.00	\$5,600.00	(\$700.00)
647.1	HUMUS	CY	650.00	\$24.00	\$15,600.00	\$28.00	\$18,200.00	(\$2,600.00)
692.	MOBILIZATION	U	1.00	\$29,220.00	\$29,220.00	\$30,000.00	\$30,000.00	(\$780.00)



PS&E Comparison

DERRY-LONDONDERRY

13065E

X-A005(210)

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
697.11	INVASIVE SPECIES CONTROL AND MANAGEMENT PLAN	U	1.00	\$2,100.00	\$2,100.00	\$3,000.00	\$3,000.00	(\$900.00)
699.	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	\$	1,000.00	\$1.00	\$1,000.00	\$1.00	\$1,000.00	\$0.00
1010.15	FUEL ADJUSTMENT	\$	2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00	\$0.00
Total:					\$294,700.00		\$401,090.00	(\$106,390.00)

May 3, 2023

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION: The Contract provides for the demolition of commercial buildings and ancillary structures, including retaining walls, concrete foundation removal, and site restoration on three (3) state owned properties. The properties are located on Folsom Road, North High Street and Madden Road in the Town of Derry, NH.

FEDERAL FUNDING: 80% (Other Federal Aid) with 20% Turnpike Toll Credits

CONTINGENCY: The proposed contingency amount is 10% of the contract amount. The contingency amount is requested to include any cost elements related to differing site conditions that may be encountered (surface and subsurface) during demolition of these structures.

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

PROJECT EXPLANATION: Building demolitions are needed to facilitate construction of the future Derry-Londonderry 13065B reconstruction project from Old Rum Trail to Folsom Road. This is part of the I-93 Exit 4A and connector road projects.

TRAFFIC IMPLICATION: Construction activities may require flagging for construction vehicle access along Folsom Road, North High Street and Madden Road for hauling operations. No significant impacts to traffic on State roads is anticipated. Lane closures may be required on Folsom Road for equipment to access Parcel 72.

COMPLETION DATE: Friday, April 12, 2024

May 3, 2023

DERRY-LONDONDERRY EXHIBIT 4A



LEGEND

- Streams
- ▭ Water Bodies
- US Routes
- State Routes
- Interstates
- Local Roads
- - - Town Boundary
- Demo Parcel

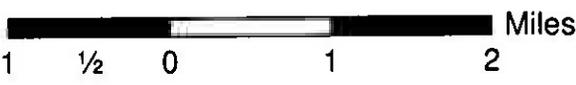
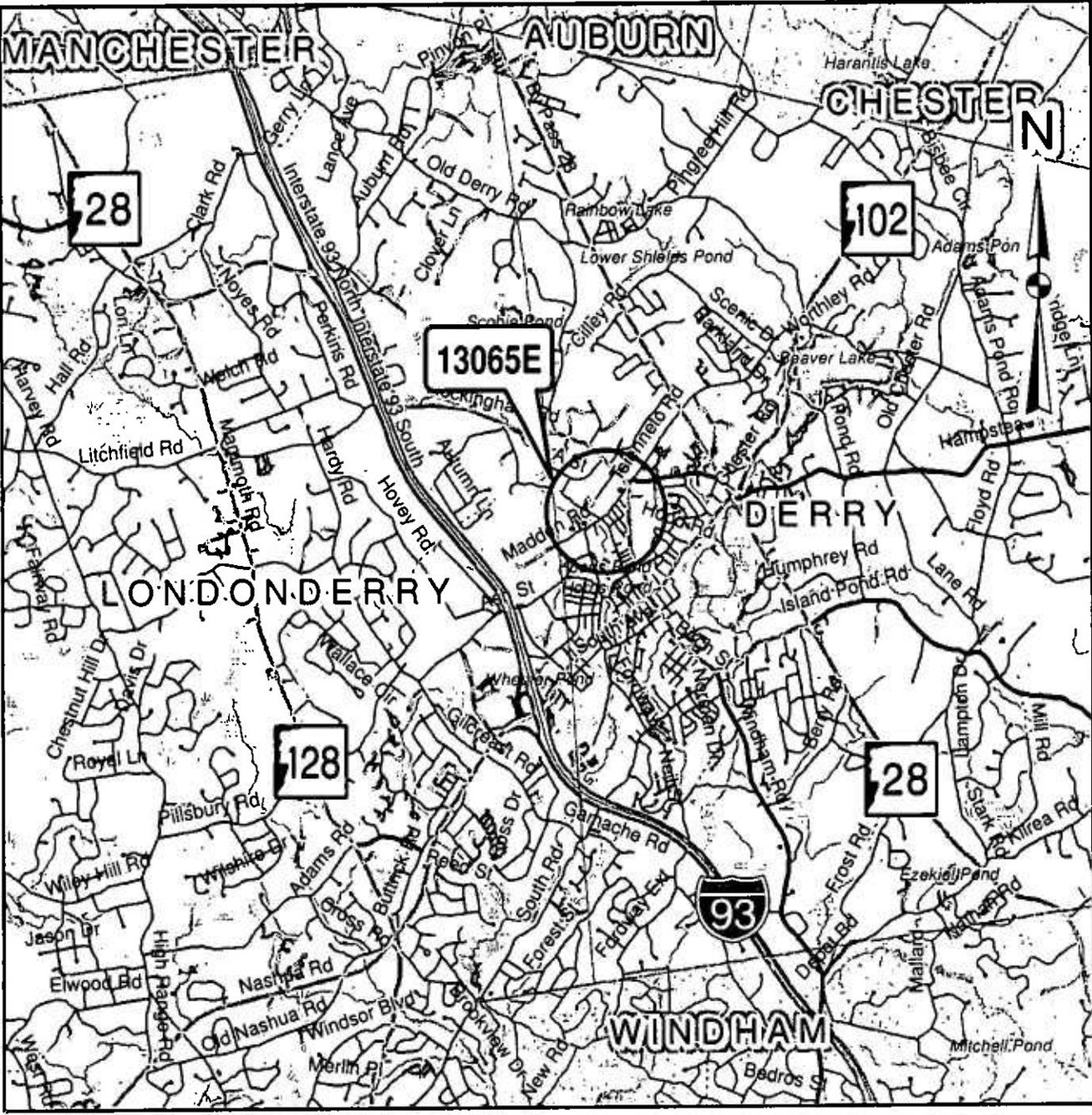
New Hampshire
DOT
Department of Transportation

State #: 13065E
Federal #: X-A005(210)

LOCATION MAP



DERRY-LONDONDERRY EXIT 4A

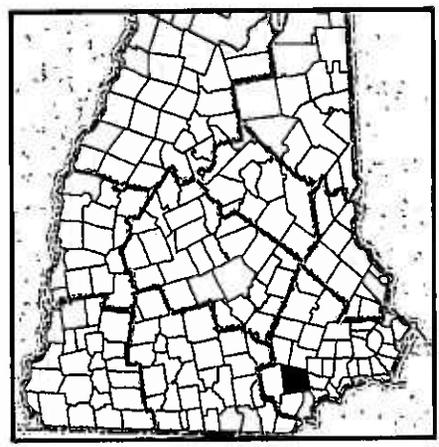


LEGEND

- Streams
- Water Bodies
- US Routes
- State Routes
- Interstates
- Local Roads
- Town Boundary
- Demo Parcel

New Hampshire
DOT
 Department of Transportation

State #: 13065E
 Federal #: X-A005(210)
LOCATION MAP



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 SPEARS BROS. BUILDING SALVAGE & WRECKING, INC. is a New Hampshire Profit Corporation registered to transact business in New Hampshire on December 29, 2020. 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: 858947

Certificate Number: 0006283117



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 20th day of July A.D. 2023.

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

David M. Scanlan
Secretary of State

Certificate of Authority #1

CORPORATE RESOLUTION

I, Deven Spears, hereby certify that I am the duly elected President of Spears Bros Building Salvage & Wrecking, Inc. I hereby certify the following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on July 19, 2023 at which a quorum of the Directors/shareholders were present and voting.

VOTED: That Deven Spears – President, Scott Spears – Secretary, & Derek Spears – Treasurer, duly authorized to enter into contracts or agreements on behalf of Spears Bros Building Salvage & Wrecking, Inc with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any documents which may in his/her judgement 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 state herein.

DATED: July 19, 2023

ATTEST  Deven Spears, President
(Name & Title)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/19/2023

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 Cross Insurance-Laconia 155 Court Street Laconia NH 03246	CONTACT NAME: Jessica Maurais, ACSR PHONE (A.C. No. Excl): (803) 524-2425 E-MAIL ADDRESS: jessica.maurais@crossagency.com	FAX (A.C. No.): (803) 524-3866
	INSURER(S) AFFORDING COVERAGE	
INSURED Spears Brothers Building Salvage & Wrecking Inc Po Box 818 Laconia NH 03247	INSURER A: Tudor Insurance Co.	NAIC # 37982J
	INSURER B: Allmerica Financial Benefit	41840
	INSURER C: Evanston Insurance Company	35378J
	INSURER D: Travelers Property Casualty Co of America	25874
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL2342732449 **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	ADDSUBR INSD 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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		NPP1599692	09/30/2022	09/30/2023	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY		AWVH984241	04/01/2023	04/01/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		XOBW9443822	09/30/2022	09/30/2023	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 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 N/A	6JUB-4N82658-5-22	09/30/2022	09/30/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

It is agreed and understood that the State of New Hampshire, Department of Transportation is included as additional insured on a primary and non-contributory basis on General Liability and Automobile policies when required by written contract. General Liability additional insured provision applies to ongoing operations when required by written contract. Waiver of Subrogation is included on General Liability and Automobile (where permitted by law) when required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire, D.O.T.
 P.O. Box 483
 7 Hazen Drive
 Concord NH 03301

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

Sarah Cullen

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/21/2023

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 Cross Insurance-Laconia 155 Court Street Laconia NH 03246	CONTACT NAME: Jessica Maurais, ACSR PHONE (A/C, No, Ext): (803) 524-2425 FAX (A/C, No): (803) 524-3866 E-MAIL ADDRESS: jessica.maurais@crossagency.com
	INSURER(S) AFFORDING COVERAGE INSURER A: Atain Specialty Ins Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
NAIC # 17159	

COVERAGES **CERTIFICATE NUMBER:** CL2372141436 **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 YWYD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owners & Contractors Protective GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CIP461167	07/20/2023	04/20/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <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"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 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"/> OTHER 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)
Job Reference: Derry-Londonderry X-A005(210), 13065E

CERTIFICATE HOLDER State of New Hampshire, D.O.T. P.O. Box 483 7 Hazen Drive Concord NH 03301	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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