



*William Cass, P.E.*  
Commissioner

**THE STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF TRANSPORTATION**

28



*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 Right-of-Way  
July 20, 2023

**REQUESTED ACTION**

Authorize the Department of Transportation to amend an item approved on April 17, 2019 (item #44A) for the addition of Fahey Appraisals (Vendor # 459471) of Manchester, NH to prepare appraisals for property needed for transportation projects, effective upon Governor and Council approval through April 17, 2024.

The addition would increase the number of available appraisal firms from eleven to twelve. No new funding is required.

**EXPLANATION**

The purpose of this request is to enter a contract with one additional appraisal firm to expand the pool of contracted appraisers in the Statewide Acquisition Program. A previously approved Governor and Council item authorized eight appraisal firms, for a total cost of \$1,500,000 dollars (approved by the Governor and Council on April 17, 2019, item #44A). An amendment to that item was approved on May 20, 2020 (item #5A) to add one additional firm bringing the total of firms to nine. A second amendment was approved on October 21, 2020 (item #5A) to add one firm, bringing the number of firms to ten. Another amendment was approved on September 21, 2022 (Item #32) to add one firm, bringing the total number of appraisal firms to eleven.

This request will authorize one additional firm that has since expressed interest, expanding the scope of available firms to a total of twelve firms that can be engaged on short notice to complete appraisal assignments associated with transportation improvement projects. This will not increase the monetary amount previously approved or the terms of the previously approved contracts.

The Department of Transportation utilizes contract appraisers as needed to complete appraisal assignments associated with property acquisitions for transportation projects. Appraisals are required to establish values for purchasing property and property rights affected by transportation improvements. In addition, a second appraisal is required for a property with an acquisition cost of over \$1,000,000 due to Federal requirements. Requests for second appraisals may also come from the Department's Review Appraiser, the Governor and Council, or the Layout Commissions. Occasionally, due to a lack of comparable sales data, there are requests for third appraisals.

Individual appraisal assignments are allocated through a low-bid process as described below. The process allows the Department to respond quickly and efficiently to project schedules, as well as to the needs of affected property owners anxious to see the resolution of individual property issues. The process has been in place for several years and has been successful.

With Governor and Council approval, Fahey Appraisals will serve in a pool of appraisers to provide services on an "as needed" basis. When an appraisal is required, the approved firms will be considered relative to the scope of the assignment, their capacity to perform in a timely fashion, quality of work, experience, and their overall suitability for the assignment. The firms thought to be best qualified for the assignment will be sent a copy of the scope of work and asked to submit a fee quotation. They will be informed of the required completion details and date, and the firm submitting the lowest fee quotation meeting the completion date will be notified to proceed. The selection process is in keeping with the Department's established procedures.

Should the Department require a second appraisal of a parcel previously awarded under this program, the assignment will be offered to the firm that previously submitted the second lowest quotation. If they are unable to accept, the third firm would be engaged. The contracting officer will be the final judge as to assignments and this will be on a case-by-case basis.

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. 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.

Authorization is respectfully requested to enter a contract with the additional firm listed above to complete appraisal assignments for the statewide acquisition program to expire on April 17, 2024, as outlined above.

Respectfully,



William J. Cass, P.E.  
Commissioner

WJC/pfc  
Attachments

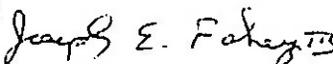
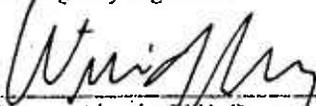
**Notice:** This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

The State of New Hampshire and the Contractor hereby mutually agree as follows:

**GENERAL PROVISIONS**

**1. IDENTIFICATION.**

1.1 State Agency Name Department of Transportation		1.2 State Agency Address 7 Hazen Drive Concord, NH 03301	
1.3 Contractor Name Fahey Appraisals		1.4 Contractor Address PO Box 273 Manchester, NH 03105	
1.5 Contractor Phone Number 603-703-4143	1.6 Account Unit and Class 15-96-30540000- 500464-5013	1.7 Completion Date 4/17/2024	1.8 Price Limitation \$1,500,000.00*
1.9 Contracting Officer for State Agency William Oldenburg		1.10 State Agency Telephone Number 603-271-3222	
1.11 Contractor Signature  Date: 5/23/2023		1.12 Name and Title of Contractor Signatory Joseph Fahey, Principal	
1.13 State Agency Signature  Date: 7/24/23		1.14 Name and Title of State Agency Signatory William Oldenburg, Director Division of Project Development	
1.15 Approval by the NH Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.16 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By:  On: 8/15/23			
1.17 Approval by the Governor and Executive Council (if applicable) G&C Item number: _____ G&C Meeting Date: _____			

**2. SERVICES TO BE PERFORMED.** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT B which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.13 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed.

3.3 Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds. In no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds by any state or federal legislative or executive action that reduces, eliminates or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope for Services provided in EXHIBIT B, in whole or in part, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT C which is incorporated herein by reference.

5.2 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8. The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance

hereof, and shall be the only and the complete compensation to the Contractor for the Services.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 The State's liability under this Agreement shall be limited to monetary damages not to exceed the total fees paid. The Contractor agrees that it has an adequate remedy at law for any breach of this Agreement by the State and hereby waives any right to specific performance or other equitable remedies against the State.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal employment opportunity laws and the Governor's order on Respect and Civility in the Workplace, Executive order 2020-01. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of age, sex, sexual orientation, race, color, marital status, physical or mental disability, religious creed, national origin, gender identity, or gender expression, and will take affirmative action to prevent such discrimination, unless exempt by state or federal law. The Contractor shall ensure any subcontractors comply with these nondiscrimination requirements.

6.3 No payments or transfers of value by Contractor or its representatives in connection with this Agreement have or shall be made which have the purpose or effect of public or commercial bribery, or acceptance of or acquiescence in extortion, kickbacks, or other unlawful or improper means of obtaining business.

6.4 The Contractor agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with this Agreement and all rules, regulations and orders pertaining to the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 The Contracting Officer specified in block 1.9, or any successor, shall be the State's point of contact pertaining to this Agreement.

## 8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

- 8.1.1 failure to perform the Services satisfactorily or on schedule;
- 8.1.2 failure to submit any report required hereunder; and/or
- 8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) calendar days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) calendar days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 give the Contractor a written notice specifying the Event of Default and set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both.

## 9. TERMINATION.

9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) calendar days written notice to the Contractor that the State is exercising its option to terminate the Agreement.

9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State's discretion, deliver to the Contracting Officer, not later than fifteen (15) calendar days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. In addition, at the State's discretion, the Contractor shall, within fifteen (15) calendar days of notice of early termination, develop and submit to the State a transition plan for Services under the Agreement.

## 10. PROPERTY OWNERSHIP/DISCLOSURE.

10.1 As used in this Agreement, the word "Property" shall mean all data, information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

10.2 All data and any Property which has been received from the State, or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

10.3 Disclosure of data, information and other records shall be governed by N.H. RSA chapter 91-A and/or other applicable law. Disclosure requires prior written approval of the State.

11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

## 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

12.1 Contractor shall provide the State written notice at least fifteen (15) calendar days before any proposed assignment, delegation, or other transfer of any interest in this Agreement. No such assignment, delegation, or other transfer shall be effective without the written consent of the State.

12.2 For purposes of paragraph 12, a Change of Control shall constitute assignment. "Change of Control" means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.

12.3 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State.

12.4 The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

13. INDEMNIFICATION. The Contractor shall indemnify, defend, and hold harmless the State, its officers, and employees from and against all actions, claims, damages, demands, judgments, fines, liabilities, losses, and other expenses, including, without limitation, reasonable attorneys' fees, arising out of or relating to this Agreement directly or indirectly arising from death, personal injury, property damage, intellectual property infringement, or other claims asserted against the State, its officers, or employees caused by the acts or omissions of negligence, reckless or willful misconduct, or fraud by the Contractor, its employees, agents, or subcontractors. The State shall not be liable for any costs incurred by the Contractor arising under this paragraph 13. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the State's sovereign immunity, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

**14. INSURANCE.**

14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate or excess; and

14.1.2 special cause of loss coverage form covering all Property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the Property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or any successor, a certificate(s) of insurance for all insurance required under this Agreement. At the request of the Contracting Officer, or any successor, the Contractor shall provide certificate(s) of insurance for all renewal(s) of insurance required under this Agreement. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

**15. WORKERS' COMPENSATION.**

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("*Workers' Compensation*").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. The Contractor shall furnish the Contracting Officer identified in block 1.9, or any successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

**16. WAIVER OF BREACH.** A State's failure to enforce its rights with respect to any single or continuing breach of this Agreement shall not act as a waiver of the right of the State to later enforce any such rights or to enforce any other or any subsequent breach.

**17. NOTICE.** Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

**18. AMENDMENT.** This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no such approval is required under the circumstances pursuant to State law, rule or policy.

**19. CHOICE OF LAW AND FORUM.**

19.1 This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire except where the Federal supremacy clause requires otherwise. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

19.2 Any actions arising out of this Agreement, including the breach or alleged breach thereof, may not be submitted to binding arbitration, but must, instead, be brought and maintained in the Merrimack County Superior Court of New Hampshire which shall have exclusive jurisdiction thereof.

**20. CONFLICTING TERMS.** In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and any other portion of this Agreement including any attachments thereto, the terms of the P-37 (as modified in EXHIBIT A) shall control.

**21. THIRD PARTIES.** This Agreement is being entered into for the sole benefit of the parties hereto, and nothing herein, express or implied, is intended to or will confer any legal or equitable right, benefit, or remedy of any nature upon any other person.

**22. HEADINGS.** The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

**23. SPECIAL PROVISIONS.** Additional or modifying provisions set forth in the attached EXHIBIT A are incorporated herein by reference.

**24. FURTHER ASSURANCES.** The Contractor, along with its agents and affiliates, shall, at its own cost and expense, execute any additional documents and take such further actions as may be reasonably required to carry out the provisions of this Agreement and give effect to the transactions contemplated hereby.

**25. SEVERABILITY.** In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

**26. ENTIRE AGREEMENT.** This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings with respect to the subject matter hereof.

Contractor Initials *JG III*  
Date *5/23/2021*

## EXHIBIT A - SPECIAL PROVISIONS

### AMEND THE CONTRACT TO READ:

12. Notwithstanding the provisions of paragraph 12 of the contract, the Contractor may hire a subcontractor to perform services under this contract with the prior written consent of the state including persons who have contractual agreements with the State.

14.1.1 Commercial or comprehensive general liability insurance against all claims of bodily injury, death, or property damage, in policy amounts of not less than \$250,000 per claim and \$1,000,000 per aggregate; (State to be named as an additional insured); and

14.1.2 Comprehensive automobile liability insurance covering all motor vehicles, including owned, hired, borrowed, and non-owned vehicles, for all claims of bodily injury, death, or property damage, in policy amounts of not less than \$100,000 combined single limit; and

14.1.3 Professional liability (errors and omissions) insurance coverage of not less than \$500,000 per occurrence and \$500,000 per aggregate. If coverage is "claims made," the period to report claims shall extend for not less than three years from the date of substantial completion of the construction contract. No retention (deductible) shall be more than \$25,000; and

14.1.4 Workers' compensation and employer's liability insurance as required by law.

Contractor Initials Jef III  
Date: 5/23/2023

## EXHIBIT B - SCOPE OF WORK AND SERVICES:

1. The Appraiser covenants and agrees to create and update written appraisal(s) of certain parcel(s) of property and under "The New Hampshire Department of Transportation Right-of-Way Manual, Appraisal Standards and Reports Section" on file with the Department of Transportation, ("NHDOT") and any amendments thereto, and made a part hereof. All appraisals shall meet the requirements of the New Hampshire Appraisal Board, the Uniform Appraisal Standards for Federal Land Acquisitions, and the Uniform Standards of Professional Appraisal Practice promulgated by The Appraisal Foundation. All appraisals will be submitted in both written and PDF format. The appraiser agrees to respond to any written review of their appraisal by the State's reviewer within 10 working days of receipt. The response will consist of a letter addressing each question the State's reviewer asks, any corrected pages of the appraisal with the changes highlighted, and the revised written appraisal.
2. The measure of damage to the condemnee(s) is to be estimated using all applicable approaches to the value necessary to support the final estimate of the appraiser under RSA 498-A and the approaches as outlined in the "Appraisal Standards and Reports", above referenced. The use of or the omission of any approach shall be justified as part of the Appraisal Report by the Appraiser. The Appraiser further covenants and agrees that the measure of damage to the condemnee(s) is to be determined by appraising the "Market Value" of the property and/or property interest(s) taken including improvements, if any, before the taking; and the "Market Value" of the remaining property, including improvements and/or property interest(s), if any, after the taking, in light of any environmental contamination, liens, leases, easements, or other encumbrances affecting the market value of the property in the before and after scenarios. The difference, if any, between the two values represents the measure of damages.
3. If required by the NHDOT, the Appraiser will appear before any board or court to justify, testify, and defend their appraisal.
4. The Appraiser will refer to the NHDOT Contracting Officer or assignees of the NHDOT Contracting Officer all matters or questions of fact relative to or connected with the appraisal which give rise to dispute, dilemma or ambiguity and which are not spelled out, described, and determined by this contract or the standard practices of the profession; and the NHDOT Contracting Officer or assignee shall resolve the question or dispute by written instruction to the Appraiser.
5. The report(s) shall not include damages for items generally non-compensable under established State law. Requirements relative to consideration of benefits as outlined in the "Handbook for Highway Land Damage Commissions" revised February 18, 1964, prepared by the Office of the Attorney General, shall be followed. A copy is available for inspection at NHDOT ROW Section.
6. The Appraiser will neither perform any appraisal service nor assist in the same, for the owner of any land or interest therein which has been in any way affected pecuniarily by this project, without prior approval of the NHDOT. This prohibition shall remain in effect until final disposition of all claims arising from the project.
7. Appraisal assignment, title, and date signed by are hereby incorporated herein. The policy is available for inspection at NHDOT ROW Section.
8. NHDOT fee appraiser selection procedures are hereby incorporated herein. The policy is available for inspection at NH DOT ROW Section.

Contractor initials Jack III  
Date: 5/23/2023

## EXHIBIT C - METHOD AND AMOUNT OF PAYMENT

1. The NHDOT agrees to pay the Appraiser the quoted and accepted appraisal fee under the terms of the appraisal assignment. The Appraiser agrees to receive said sum as full compensation for furnishing all materials and labor which may be required in the preparation of the appraisal under this Contract and the attachments hereto. Payment is to be made by the State on the following basis for all contracts:

- (a) Fifty (50%) percent of the quoted fee for each appraisal report upon the delivery of an acceptable appraisal and submission of a bill for the total amount. At the NHDOT's discretion, unacceptable appraisal reports may be returned, and no individual payment made until the appraisal report is re-submitted in an acceptable form.
- (b) Fifty (50%) percent of the total following review and acceptance by the State Reviewer and concurrence in the acceptance of an adequately documented appraisal report by the U.S. Department of Transportation, or within sixty (60) days after completion of State review, whichever is sooner.
- (c) For each late appraisal report, the appraiser will be assessed a penalty of twenty-five (25%) percent of the approved day rate for each workday beyond the agreed-upon appraisal completion date until the appraisal report is received.
- (d) For appraisal review responses that are late, the appraiser will be assessed a penalty of twenty-five (25%) percent of the approved day rate for each workday beyond the calculated appraisal review response completion date. This date, to be determined by the Chief Right-of-Way Appraiser and identified in each appraisal review sent to the Appraiser, is established by the Appraisal Report Requirements identified in Exhibit A paragraph (1) of this Contract.

2. The NHDOT agrees to pay the Appraiser for all expenses incurred for each day or part of a day\* that the Appraiser spends at a hearing, pre-trial conference, trial, or drafting appraisal update called for by the Attorney General's Office. For any appraisal update that is not completed and submitted within sixty (60) days of when it is requested by the Attorney General's Office, the Appraiser shall be assessed a penalty of twenty-five (25%) percent of the approved day rate for each workday the update is late.

The NHDOT and the Appraiser mutually agree that in case there may be major changes in the scope or character of the work to be performed under this contract, such changes shall be made in the individual amounts as stated under the "Schedule of Appraisals" by negotiated increases or decreases in said amounts. Or if work is added, such additional amounts as may be required shall be determined by negotiation and payment made at the agreed-upon amounts.

\*day or part of a day shall include the duration of a hearing, pre-trial conference, or trial day.

Contractor Initials Jet II  
Date: 5/23/2023

# 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 FAHEY APPRAISALS is a New Hampshire Trade Name registered to transact business in New Hampshire on June 10, 2021. 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: 873588

Certificate Number: 0006228729



IN TESTIMONY WHEREOF,  
I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 12th day of May A.D. 2023.

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

David M. Scanlan  
Secretary of State

# FAHEY APPRAISALS

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P.O. Box 273  
Manchester, NH 03105  
Telephone (603) 703-4143

May 16, 2023

Paul F. Coddington, JD  
Chief of Administration  
Bureau of Right-of-Way  
NH Department of Transportation  
John O. Morton Building  
7 Hazen Drive, Room 100  
Concord, NH 03302-0483

[Paul.Coddington@dot.nh.gov](mailto:Paul.Coddington@dot.nh.gov)

Re: Joseph E. Fahey III  
DBA Fahey Appraisals

Dear Paul,

Please accept this as my letter of interest in becoming a vendor for the State of New Hampshire in my capacity as a real estate appraiser under the name Fahey Appraisals.

Per your request, I am sending to you via email the following documents:

- Secretary of State - Certificate of Good Standing
- Comprehensive General Liability Policy - Declaration showing State of NH as additional insured
- Current declaration page for automobile insurance
- It is my understanding that, as a sole proprietor, the Workmen's Comp insurance is not required.
- Professional Liability (E&O) declaration
- Sole Proprietor letter re: waiver of vote

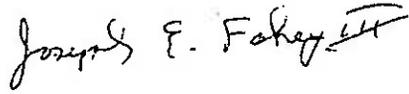
In addition, following are statements in fulfillment of information requirements:

1. "I am not currently under suspension, debarment, voluntary exclusion or determination of ineligibility by any Federal Agency. I have not been suspended, debarred, voluntarily excluded or determined ineligible by any Federal Agency within the last three (3) years. Neither do I have a proposed debarment pending, and have not been indicted, convicted, or have had a civil judgement rendered against me by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three (3) years." My signature below serves as my attestation to this statement.
  2. Per diem rate for Joseph E. Fahey III is \$2,000.
-

Please let me know if there are any questions or concerns.

I look forward to receiving a signed contract with the State.

Regards,

A handwritten signature in black ink that reads "Joseph E. Fahey III". The signature is written in a cursive style with a prominent flourish at the end.

Joseph E. Fahey III  
NHCG-103  
Fahey Appraisals, Owner



LIA Administrators & Insurance Services



APPRAISAL, VALUATION AND PROPERTY SERVICES
PROFESSIONAL LIABILITY INSURANCE POLICY

DECLARATIONS - NEW HAMPSHIRE

Aspen American Insurance Company

(Referred to below as the "Company")
590 Madison Avenue, 7th Floor
New York, NY 10022
877-245-3510

Date Issued

Policy Number

Previous Policy Number

5/12/2023

AAI011336-01

THIS IS A CLAIMS MADE AND REPORTED POLICY. COVERAGE IS LIMITED TO LIABILITY FOR ONLY THOSE CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD AND THEN REPORTED TO THE COMPANY IN WRITING NO LATER THAN SIXTY (60) DAYS AFTER EXPIRATION OR TERMINATION OF THIS POLICY, OR DURING THE EXTENDED REPORTING PERIOD, IF APPLICABLE, FOR A WRONGFUL ACT COMMITTED ON OR AFTER THE RETROACTIVE DATE AND BEFORE THE END OF THE POLICY PERIOD. PLEASE READ THE POLICY CAREFULLY.

1. Customer ID: 172291
Named Insured:
FAHEY APPRAISALS
Joseph E. Fahey, III
PO Box 273
Manchester, NH 03105

2. Policy Period: From: 05/11/2023 To: 05/11/2024
12:01 A.M. Standard Time at the address stated in 1 above.

3. Deductible: \$1000 Each Claim

4. Retroactive Date: 05/11/2023

5. Inception Date: 05/11/2023

6. Limits of Liability: A. \$500,000 Each Claim
B. \$500,000 Aggregate
Subpoena Response: \$5,000 Supplemental Payment Coverage
Pre-Claim Assistance: \$5,000 Supplemental Payment Coverage
Disciplinary Proceeding: \$7,500 Supplemental Payment Coverage
Loss of Earnings: \$500 per day Supplemental Payment Coverage

7. Covered Professional Services (as defined in the Policy and/or by Endorsement):

Real Estate Appraisal and Valuation: Yes [X] No [ ]
Residential Property: Yes [X] No [ ]
Commercial Property: Yes [X] No [ ]
Bodily Injury and Property Damage Caused
During Appraisal Inspection (\$100,000 Sub-Limit): Yes [X] No [ ] (If "yes", added by endorsement)
Right of Way Agent and Relocation: Yes [ ] No [X]
Machinery and Equipment Valuation: Yes [ ] No [X]
Personal Property Appraisal: Yes [ ] No [X] (If "yes", added by endorsement)
Real Estate Sales/Brokerage: Yes [ ] No [X] (If "yes", added by endorsement)

8.	Report Claims to: LIA Administrators & Insurance Services, 800-334-0652, P.O. Box 1319, 1600 Anacapa St. Santa Barbara, California 93101
9.	Annual Premium: \$833.00
10.	Forms attached at issue: LIA002 (04/19); LIA N11 (09/19); LIA012 (05/19); LIA122 (05/19); LIA164 (05/19)

This Declarations Page, together with the completed and signed Policy Application including all attachments and exhibits thereto, and the Policy shall constitute the contract between the Named Insured and the Company.

05/12/2023

Date



By

Authorized Representative

Producer Information

LIA Administrators & Insurance Services

Name of Authorized Agent/Broker: Robert C. Wiley

Address: 1600 Anacapa Street Santa Barbara, CA 93101

# Appraisal, Valuation and Property Services Professional Liability Insurance Policy

Named Insured: FAHEY APPRAISALS  
Joseph E. Fahey, III

Policy Number: AAI011336-01  
Effective Date: 05/11/2023  
Customer ID: 172291

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## ADDITIONAL COVERED PROFESSIONALS ENDORSEMENT

In consideration of the premium charged, it is agreed that Section IV, **DEFINITIONS (I)** "Insured" is amended to include:

"Insured" means:

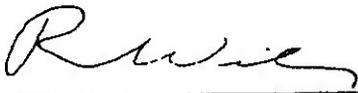
The persons identified below, but only while acting on behalf of the Named Insured:

Name	Coverage Effective Date
Joseph E. Fahey, III	05/11/2023

All other terms, conditions, and exclusions of this Policy remain unchanged.

## CERTIFICATE OF INSURANCE

<b>Producer:</b>  LIA ADMINISTRATORS & INSURANCE SERVICES P.O. Box 1319 Santa Barbara, CA 93102-1319	Issue Date: 05/13/2023 This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policy below.
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<b>Insured:</b> 172291 FAHEY APPRAISALS Joseph E. Fahey, III PO Box 273 Manchester, NH 03105	<p><b><u>COMPANY AFFORDING COVERAGE</u></b></p> <p>Aspen American Insurance Company</p>  <p>_____                  Authorized Representative</p>
--	--

This is to certify that the policy of insurance listed below has been issued to the Insured named above for the policy period indicated. Notwithstanding any requirement, term of condition of any contract or other document with respect to which this Certificate may be issued or may pertain, the insurance afforded by the policy described herein is subject to all the terms, exclusions and conditions of such policy. Limits shown may have been reduced by paid claims.

**DISCLAIMER:** This certificate of insurance does not affirmatively or negatively amend, extend, or alter the coverage afforded by the insurance policy.

TYPE OF INSURANCE	POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	LIMITS	
Professional Liability	AA1011336-01	05/11/2023	05/11/2024	Each Claim	\$ 500,000
				General Aggregate	\$ 500,000

**Description of Operations/Locations/Special Items:**  
 Professional Services as defined in the policy

<b>Certificate Holder:</b> FAHEY APPRAISALS Joseph E. Fahey, III PO Box 273 Manchester, NH 03105	<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.
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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
05/15/2023

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 LIA ADMINISTRATORS & INSURANCE SERVICES PO BOX 1319 SANTA BARBARA, CA 93102-1319	CONTACT NAME: DANA DAMICO
	PHONE (A/C, No, Ext): 805-963-6624 FAX (A/C, No): 805-962-0652
INSURED FAHEY APPRAISALS JOSEPH E. FAHEY, III PO BOX 273 MANCHESTER, NH 03105 ID# 172291	E-MAIL ADDRESS: DANA@LIABILITY.COM
	INSURER(S) AFFORDING COVERAGE
	INSURER A: HARTFORD UNDERWRITERS INS, CO. NAIC # 30104
	INSURER B: ASPEN AMERICAN INSURANCE COMPANY 43460
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

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	ADOL 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  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		72SBMAX6FWX	05/11/2023	05/11/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
	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 <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	PROFESSIONAL LIABILITY			AAI011336-01	05/11/2023	05/11/2024	\$500,000 EACH CLAIM \$500,000 AGGREGATE

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
REAL ESTATE APPRAISERS PROFESSIONAL AND COMMERCIAL GENERAL LIABILITY POLICY.  
THE BELOW CERTIFICATE HOLDER IS NAMED AS ADDITIONAL INSURED WITH REGARDS TO THE COMMERCIAL GENERAL LIABILITY POLICY.

CERTIFICATE HOLDER NEW HAMPSHIRE DEPARTMENT OF TRANSPORTATION 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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**Qualifications**  
**Joseph E. Fahey III**  
P.O. Box 273  
Manchester, NH 03104

**Experience**

December 1994 to Present

Fahey Appraisals, Manchester, New Hampshire  
Commercial and industrial real estate appraising

April 1986 to December 1994

Bredice Appraisal Associates, Manchester, New Hampshire  
Commercial and industrial real estate appraising

February 1986 to April 1986

R.E.I. Associates, Inc., Manchester, New Hampshire  
Commercial and industrial real estate appraising

March 1981 to February 1986

Joseph E. Fahey, III Real Estate Company, Manchester, NH  
Broker in commercial and industrial real estate

August 1980 to March 1981

Baldwin Investments, Inc., Derry, New Hampshire  
Broker in commercial and industrial real estate

January 1980 to August 1980

Duffley Gallery of Homes, Manchester, New Hampshire  
Salesman in residential and industrial real estate

**Education and Training**

St. Anselm's College - Bachelor of Science, Business Administration/Economics

Participated in the following real estate related courses:

- o St. Anselm's College - Course - Business Law, 1970
- o Society of Real Estate Appraisers
  - o Course 101 - An Introduction to Appraising Real Property
- o American Institute of Real Estate Appraisers
  - o Courses 1B-A and 1B-B – Capitalization/Theory and Techniques-Parts A & B
  - o Case Studies in Real Estate Valuation
  - o Report Writing and Valuation Analysis
  - o Standards of Professional Practice
- o Marshall Valuation Service
  - o Commercial Cost Approach, Basic & Advanced Seminars

**Licenses**

State of New Hampshire - Certified General Real Estate Appraiser #NHCG-103  
- Expires August 31, 2024.

# State of New Hampshire



Real Estate Appraisers Board

*Authorized as*  
Certified General Appraiser

*Issued To*

JOSEPH E FAHEY, III

License Number: NHCG-103  
Active

Issue Date: 01/01/1992

Expiration Date: 08/31/2024

## FAHEY APPRAISALS

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P.O. Box 273  
Manchester, NH 03105  
Telephone (603) 703-4143

May 17, 2023

Paul F. Coddington, JD  
Chief of Administration  
Bureau of Right-of-Way  
NH Department of Transportation  
John O. Morton Building  
7 Hazen Drive, Room 100  
Concord, NH 03302-0483

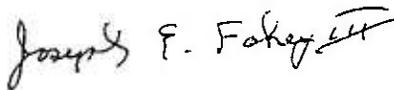
[Paul.Coddington@dot.nh.gov](mailto:Paul.Coddington@dot.nh.gov)

Re: Joseph E. Fahey III  
DBA Fahey Appraisals

Dear Paul,

Per your request, I am submitting this letter identifying my business as a sole proprietorship and therefore it is not necessary for me to submit a Certificate of Vote authorizing the company to bid on contracts with the state.

Regards,



Joseph E. Fahey III  
NHCG-103  
Fahey Appraisals, Owner

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*Victoria F. Sheehan*  
Commissioner

**THE STATE OF NEW HAMPSHIRE**  
DEPARTMENT OF TRANSPORTATION



*William Cass, P.E.*  
Assistant Commissioner

Sam  
32

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

Bureau of Right-of-Way  
September 7, 2022

**REQUESTED ACTION**

The Department of Transportation wishes to place this item on the Consent Calendar.

Authorize the Department of Transportation to amend an item approved on April 17, 2019 (item #44A) for the addition of CBRE, Inc. (Vendor #227927) of Boston, MA, to prepare appraisals for property needed for transportation projects, effective upon Governor and Council approval through April 17, 2024.

The addition would increase the number of available appraisal firms from ten to eleven. No new funding is required.

**EXPLANATION**

The purpose of this request is to enter into a contract with one additional appraisal firm to expand the pool of contracted appraisers in the Statewide Acquisition Program. A previously approved Governor and Council item authorized eight appraisal firms, for a total cost of \$1,500,000.00 dollars (approved by Governor and Council on April 17, 2019, item #44A). An amendment to that item was approved on May 20, 2020 (item #5A) to add one additional firm bringing the total of firms to nine. A second amendment was approved on October 21, 2020 (item #5A) to add one firm, bringing the total number of firms to ten.

This request will authorize one additional firm that has since expressed interest, expanding the scope of available firms to a total of ten firms that could be engaged on short notice to complete appraisal assignments associated with transportation improvement projects. This will not increase the monetary amount previously approved or the terms of the previously approved contracts.

The Department of Transportation utilizes contract appraisers as needed to complete appraisal assignments associated with property acquisitions for transportation projects. Appraisals are required to establish values for purchasing property and property rights affected by transportation improvements. In addition, a second appraisal is required for a property with an acquisition cost of over \$1,000,000 due to Federal requirements. Requests for second appraisals may also come from the Department's Review Appraiser, the Governor and Council, or the Layout Commissions. Occasionally, due to a lack of comparable sales data, there are requests for third appraisals.

Individual appraisal assignments are allocated through a low bid process as described below. The process allows the Department to respond quickly and efficiently to project schedules, as well as to the needs of affected property owners anxious to see the resolution of individual property issues. The process has been in place for several years and has been successful.

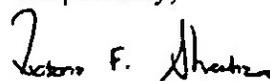
With Governor and Council approval, Appraisal and Advisory Consultants will serve in a pool of appraisers to provide appraisal services on an "as needed" basis. When an appraisal is required, the approved firms will be considered relative to the scope of the assignment, their capacity to perform in a timely fashion, quality of work, experience, and their overall suitability for the assignment. The firms thought to be best qualified for the assignment will be sent a copy of the scope of work and asked to submit a fee quotation. They will be informed of the required completion details and date, and the firm submitting the lowest fee quotation meeting the completion date will be notified to proceed. The selection process is in keeping with the Department's established procedures.

Should the Department require a second appraisal of a parcel previously awarded under this program, the assignment will be offered to the firm that previously submitted the second lowest quotation. If they are unable to accept, the third firm would be engaged. The contracting officer will be the final judge as to assignments and this will be on a case-by-case basis.

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. 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.

Authorization is respectfully requested to enter into a contract with the additional firm listed above to complete appraisal assignments for the statewide acquisition program to expire on April 17, 2024, as outlined above.

Respectfully,



Victoria F. Sheehan  
Commissioner

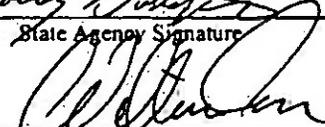
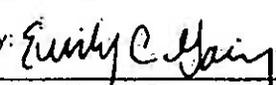
VFS/pfc  
Attachments

**AGREEMENT**

The State of New Hampshire and the Contractor hereby mutually agree as follows:

**GENERAL PROVISIONS**

**1. IDENTIFICATION.**

1.1 State Agency Name <b>Department of Transportation</b>		1.2 State Agency Address <b>7 Hazen Drive Concord, NH 03301</b>	
1.3 Contractor Name <b>CBRE, Inc.</b>		1.4 Contractor Address <b>33 Arch Street, 28<sup>th</sup> Floor Boston, MA 02110</b>	
1.5 Contractor Phone Number <b>617-912-6904</b>	1.6 Account Number <b>04-096-096-963515-3054 046-500464</b>	1.7 Completion Date <b>April 17, 2024</b>	1.8 Price Limitation <b>\$1,500,000.00*</b>
1.9 Contracting Officer for State Agency <b>William Cass, Assistant Commissioner</b>		1.10 State Agency Telephone Number <b>603-271-1484</b>	
1.11 Contractor Signature  Date: <b>7/26/22</b>		1.12 Name and Title of Contractor Signatory <b>Corey Gustafson, Managing Director</b>	
1.13 State Agency Signature  Date: <b>8/5/22</b>		1.14 Name and Title of State Agency Signatory <b>William Cass, Assistant Commissioner</b>	
1.15 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.16 Approval by the Attorney General (Form, Substance, and Execution) (if applicable) By:  On: <b>4/7/2022</b>			
1.17 Approval by the Governor and Executive Council (if applicable) G&C Item number: _____ G&C Meeting Date: _____			

\*Appropriation is in the aggregate, to be shared by all firms that are part of the statewide Appraisal Contract.

**2. SERVICES TO BE PERFORMED.** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT B which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.17, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.13 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds affected by any state or federal legislative or executive action that reduces, eliminates or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope for Services provided in EXHIBIT B, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT C which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete

compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal employment opportunity laws. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 The Contractor agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

## 8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term, or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 give the Contractor a written notice specifying the Event of Default and set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both.

8.3. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

## 9. TERMINATION.

9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) days written notice to the Contractor that the State is exercising its option to terminate the Agreement.

9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State's discretion, deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and the number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State's discretion, the Contractor shall, within 15 days of notice of early termination,

develop and submit to the State a Transition Plan for services under the Agreement:

## 10. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

10.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulac, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

10.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

10.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

11. **CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

## 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

12.1 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and written consent of the State. For purposes of this paragraph, a Change of Control shall constitute an assignment. "Change of Control" means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

13. **INDEMNIFICATION.** Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omission of the

Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. The State shall not be liable for any costs incurred by the Contractor arising under this paragraph 13. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

#### 14. INSURANCE:

14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate or excess; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. The contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

#### 15. WORKERS' COMPENSATION:

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("*Workers' Compensation*").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. The Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

17. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no such approval is required under the circumstances pursuant to State law, rule or policy.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted, and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

22. SPECIAL PROVISIONS. Additional or modifying provisions set forth in the attached EXHIBIT A are incorporated herein by reference.

23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties and supersedes all prior agreements and understandings with respect to the subject matter hereof.

**EXHIBIT A**

**SPECIAL PROVISIONS**

**AMEND TO READ:**

12. Notwithstanding the provisions of paragraph 12. of the P37 the Contractor may hire a subcontractor to perform services under this contract with the prior written consent of the state including persons who have contractual agreements with the State.
- 14.1.1 Commercial or comprehensive general liability insurance against all claims of bodily injury, death, or property damage, in policy amounts of not less than \$250,000 per claim and \$1,000,000 per aggregate; (State to be named as an additional insured); and
- 14.1.2 Comprehensive automobile liability insurance covering all motor vehicles, including owned, hired, borrowed, and non-owned vehicles, for all claims of bodily injury, death, or property damage, in policy amounts of not less than \$100,000 combined single limit; and
- 14.1.3 Professional liability (errors and omissions) insurance coverage of not less than \$500,000 per occurrence and \$500,000 per aggregate. If coverage is claims made, the period to report claims shall extend for not less than three years from the date of substantial completion of the construction contract. No retention (deductible) shall be more than \$25,000; and
- 14.1.4 Workers' compensation and employer's liability insurance as required by law.

EXHIBIT B  
SCOPE OF SERVICES

THE EXACT SERVICES REQUIRED BY THE CONTRACTOR (APPRAISER) ARE:

2.1. The Appraiser covenants and agrees to create and update written appraisal(s) of certain parcel(s) of property and following "The New Hampshire Department of Transportation Right-of-Way Manual, Appraisal Standards and Reports Section" on file with the Department of Transportation, ("NHDOT") and any amendments thereto, and made a part hereof. All appraisals shall meet the requirements of the New Hampshire Appraisal Board, the Uniform Appraisal Standards for Federal Land Acquisitions, and the Uniform Standards of Professional Appraisal Practice promulgated by The Appraisal Foundation. All appraisals will be submitted in both written and PDF format. The appraiser agrees to respond to any written review of their appraisal by the State's reviewer within 10 working days of receipt. The response will consist of a letter addressing each question asked by the State's reviewer, any corrected pages of the appraisal with the changes highlighted, plus the revised written appraisal.

2.2. The measure of damage to the condemnee(s) is to be estimated by the use of all applicable approaches to value necessary to support the final estimate of the appraiser per RSA 498-A and the approaches as outlined in the "Appraisal Standards and Reports", above referenced. The use of or the omission of any approach shall be justified as part of the Appraisal Report by the Appraiser. The Appraiser further covenants and agrees that the measure of damage to the condemnee(s) is to be determined by appraising the "Market Value" of the property and/or property interest(s) taken including improvements, if any, before the taking; and the "Market Value" of the remaining property, including improvements and/or property interest(s), if any, after the taking; in light of any environmental contamination, liens, leases, easements, or other encumbrances affecting the market value of the property in the before and after scenarios. The difference, if any, between the two values represents the measure of damages.

2.3. The Appraiser will, if required by the NHDOT, appear before any board or court to justify, testify, and defend their appraisal.

2.4. The Appraiser will refer to the NHDOT Contracting Officer or assignees of the NHDOT Contracting Officer for all matters or questions of fact relative to or connected with the appraisal which give rise to a dispute, dilemma, or ambiguity and which are not spelled out, described and determined by this contract or the standard practices of the profession; and the NHDOT Contracting Officer or assignee shall resolve the question or dispute by written instruction to the Appraiser.

2.5. The report(s) shall not include damages for items generally non-compensable under established State law. Requirements relative to consideration of benefits as outlined in the "Handbook For Highway Land Damage Commissions" revised February 18, 1964, prepared by the Office of the Attorney General, shall be followed. A copy is available for inspection at NHDOT ROW Section.

2.6. The Appraiser will neither perform any appraisal service nor assist in the same, for the owner of any land or interest therein which has been in any way affected pecuniarily by this project, without prior approval of the NHDOT. This prohibition shall remain in effect until the final disposition of all claims arising from the project.

2.7. Appraisal assignment, title, and date signed by, are hereby incorporated herein. The policy is available for inspection at NHDOT ROW Section.

**EXHIBIT B (CONT'D.)**

2.8. NHDOT fee appraiser selection procedures are hereby incorporated herein. The policy is available for inspection at NHDOT ROW Section.

I do hereby agree to submit to the NHDOT complete appraisal reports by the "Appraisal Standards and Reports", for the following parcels of property for the individual amounts as indicated:

**SCHEDULE OF APPRAISALS**

<u>Parcel No.</u>	<u>Name of Owner</u>	<u>Type of Taking</u> (Partial or Complete)	<u>Type of Property</u>	<u>Before &amp; After Fee</u>
-------------------	----------------------	--	-------------------------	-------------------------------

N/A

THIS CONTRACT IS FOR THE PREPARATION OF APPRAISAL REPORTS AND RELATED EFFORTS WITHIN THE TIME FRAME SPECIFIED FOR INDIVIDUAL ASSIGNMENTS.

## EXHIBIT C

### METHOD AND AMOUNT OF PAYMENT:

5.1.1. The NHDOT agrees to pay the Appraiser the quoted and accepted appraisal fee under the terms of the appraisal assignment. The Appraiser agrees to receive said sum as full compensation for furnishing all materials and labor which may be required in the preparation of the appraisal under this Contract and the attachments hereto. Payment is to be made by the State on the following basis for all contracts:

(a) Fifty (50%) percent of the quoted fee for each appraisal report upon the delivery of an acceptable appraisal and submission of a bill for the total amount. At the NHDOT discretion, unacceptable appraisal reports may be returned and no individual payment is made until the appraisal report is re-submitted in an acceptable form.

(b) Fifty (50%) percent of the total following review and acceptance by the State Reviewer and concurrence in the acceptance of an adequately documented appraisal report by the U. S. Department of Transportation, or within sixty (60) days after completion of State Review, whichever is sooner.

(c) For each late appraisal report, the appraiser will be assessed a penalty of twenty-five (25%) percent of the approved day rate for each work day beyond the agreed upon appraisal completion date until the appraisal report is received.

(d) For appraisal review responses that are late, the appraiser will be assessed a penalty of twenty-five (25%) percent of the approved day rate for each workday beyond the calculated appraisal review response completion date. This date, to be determined by the Chief Right-of-Way Appraiser and identified in each appraisal review sent to the Appraiser, is established under the Appraisal Report Requirements identified in Exhibit A paragraph (1) of this Contract.

5.1.2. The NHDOT agrees to pay the Appraiser for all expenses incurred for each day or part of a day (\*) that the Appraiser spends at a hearing, pre-trial conference, trial, or drafting appraisal update called for by the Attorney General's Office. For any appraisal update that is not completed and submitted within sixty (60) days of when it is requested by the Attorney General's Office, the Appraiser shall be assessed a penalty of twenty-five (25%) percent of the approved day rate for each work day the update is late.

The NHDOT and the Appraiser mutually agree that in case there may be major changes in the scope or character of the work to be performed under this contract, such changes shall be made in the individual amounts as stated under the "Schedule of Appraisals" by negotiated increases or decreases in said amounts. Or if work is added, such additional amounts as may be required shall be determined by negotiation and payment made at the agreed upon amounts.

(\*) day or part of day shall include the duration of a hearing, pre-trial conference, or trial day.

**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 CBRE, INC. is a Delaware Profit Corporation registered to transact business in New Hampshire on June 02, 1980. 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: 1308

Certificate Number: 0005836208



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire;  
this 27th day of July A.D. 2022.

A handwritten signature in black ink, appearing to read "David M. Scanlan", is written over a circular embossed mark.

David M. Scanlan  
Secretary of State

**ASSISTANT SECRETARY'S CERTIFICATE  
AND  
INCUMBENCY CERTIFICATE  
OF  
CBRE, INC.**

**July 26, 2022**

The undersigned hereby certifies, in her capacity as an Assistant Secretary and not in her individual capacity of CBRE, Inc., a Delaware corporation (the "Company") that:

1. Attached hereto as Exhibit A is a true and complete copy of the resolutions adopted by the board of directors of the Company on May 8, 2019 (the "MD and Designee Resolutions"), which resolutions have not been modified, rescinded or amended since their adoption and execution and remain in full force and effect on the date hereof.

2. Corey Gustafson is a Managing Director, Valuation & Advisory Services of the Company and presently holds such title. In such capacity, Mr. Gustafson is authorized to sign on behalf of the Company all agreements to which the Company is or will be a party (such as commission, listing, representation, services, management or co-brokerage agreements) and all transactional documents drafted, prepared, revised or signed by a real estate licensee for which a real estate license is required, as permitted or required by the laws, rules and regulations of the jurisdiction in which the office is located, subject to receipt of any prior approvals required under the internal policies of the Company.

IN WITNESS WHEREOF, the undersigned has executed this certificate as of the date first written above.

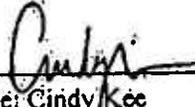
By:   
Name: Cindy Kee  
Title: Assistant Secretary

Exhibit A

Managing Director and Designee authority resolutions  
adopted on May 8, 2019

*(attached)*

**UNANIMOUS WRITTEN CONSENT  
OF THE  
BOARD OF DIRECTORS  
OF  
CBRE, INC.**

**May 8, 2019**

The undersigned, being all of the members of the Board of Directors (the "Board") of CBRE, Inc., a Delaware corporation (the "Company"), acting without a meeting pursuant to Section 141(f) of the Delaware General Corporation Law and in accordance with the Company's by-laws, hereby take the following actions as of the date set forth above:

**RESOLVED**, that all Managing Directors and their designees are hereby authorized to execute all agreements to which the Company is or will be a party (such as commission, listing, representation, services, management or co-brokerage agreements) and all transactional documents drafted, prepared, revised or signed by a real estate licensee for any transaction for which a real estate license is required, as permitted or required by the laws, rules and regulations of the jurisdiction in which the office is located, subject to receipt of any prior approvals required under the internal policies of the Company.

**IN WITNESS WHEREOF**, the undersigned have signed this consent as of the date first set forth above.

DocuSigned by:  
*Dara Bazzano*  
#12725081A6342E  
\_\_\_\_\_  
Dara A. Bazzano  
*Pasha Zargarof*  
\_\_\_\_\_  
Pasha Zargarof



# CERTIFICATE OF LIABILITY INSURANCE

DATE: 07/26/2022

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 SUDROGATION 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> Aon Risk Services Northeast, Inc. Stamford CT office 1600 Summer Street Stamford CT 06907-4907, USA	<b>CONTACT NAME:</b> PHONE (856) 283-7122 FAX (800) 363-0105 (AC, PA, EC) EMAIL ADDRESS:													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Zurich American Ins Co.</td> <td>16535</td> </tr> <tr> <td>INSURER B: American Zurich Ins Co.</td> <td>40142</td> </tr> <tr> <td>INSURER C: ACE Property &amp; Casualty Insurance Co.</td> <td>20699</td> </tr> <tr> <td>INSURER D: Navigators Insurance Co.</td> <td>42307</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Zurich American Ins Co.	16535	INSURER B: American Zurich Ins Co.	40142	INSURER C: ACE Property & Casualty Insurance Co.	20699	INSURER D: Navigators Insurance Co.	42307	INSURER E:		INSURER F:
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INSURER E:														
INSURER F:														
<b>INSURED</b> CBRE Group, Inc. and Subsidiaries 2100 McKinney Avenue Suite 1250 Dallas TX 75201 USA														

Holder Identifier:

COVERAGES: CERTIFICATE NUMBER: 670094703713 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

LINE	TYPE OF INSURANCE	ADDITIONAL CODE	CLASS CODE	POLICY NUMBER	POLICY EFF. DATE	POLICY EXP. DATE	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. ACC. <input checked="" type="checkbox"/> A-100 <input type="checkbox"/> OTHER:			GLO838419920	03/01/2022	03/01/2023	EACH OCCURRENCE \$5,000,000 DAMAGE TO RELATED PROPERTY (EA. OCCURRENCE) \$50,000 MED EXP. (Any one person) \$10,000 PERSONAL & ADV INJURY \$5,000,000 GENERAL AGGREGATE \$5,000,000 PRODUCTS - COM/OP ADD \$5,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>			BAP 8384200 20	03/01/2022	03/01/2023	COMBINED SINGLE LIMIT (EA. ACCIDENT) \$5,000,000 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 <input checked="" type="checkbox"/> RETENTION \$10,000			G27952501007	03/01/2022	03/01/2023	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS LIABILITY <input checked="" type="checkbox"/> ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	YLB	N/A	WC838419523 All other States WC914173616 Wisconsin	03/01/2022	03/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH EL EACH ACCIDENT \$1,000,000 EL DISEASE-EA EMPLOYEE \$1,000,000 EL DISEASE-POLICY LIMIT \$1,000,000

Certificate No: 670094703713

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 New Hampshire Department of Transportation and State of New Hampshire are included as Additional Insured in accordance with the policy provisions of the General Liability policy.

<b>CERTIFICATE HOLDER</b>  New Hampshire Department of Transportation 7 Hazen Drive PO Box 483 Concord NH 03302-0483 USA	<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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# CERTIFICATE OF LIABILITY INSURANCE

DATE: 01/28/2022

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> Aon Risk Services Northeast, Inc. Stamford CT Office 1600 Summer Street Stamford CT 06907-4907 USA	<b>CONTACT NAME:</b> PHONE (866) 283-7122		<b>FAX:</b> 8003630105
	<b>EMAIL ADDRESS:</b>		
<b>INSURED</b> CORE Group, Inc. and Subsidiaries 2100 McKinney Avenue Suite 1250 Dallas TX 75201 USA	<b>INSURER A:</b> American International Group-UK Ltd		<b>NAIC #:</b> AA1120187
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
	<b>INSURER F:</b>		

COVERAGES      CERTIFICATE NUMBER: 570094703719      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

CODE	TYPE OF INSURANCE	ADDL. POLY.	CLASS CODE	POLICY NUMBER	POLICY EFF. DATE/TERMINATION	POLICY EXP. DATE/TERMINATION	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLASS-MADE <input type="checkbox"/> OCCUR  <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-ACC <input type="checkbox"/> LOC <input type="checkbox"/> OTHER						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (As specified) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMPROP ADD
	AUTOMOBILE LIABILITY  <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 (As specified) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per person) (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLASS-MADE  <input type="checkbox"/> DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <small>If yes, describe under DESCRIPTION OF OPERATIONS below</small>						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH \$1 EACH ACCIDENT \$1,000,000 PER EMPLOYEE \$1,000,000 POLICY LIMIT
A	E&O-PL-Primary			PSDEF2100558 Errors & Omissions	11/01/2021	11/01/2022	Per Claim/Aggregate \$1R    \$10,000,000 \$20,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 99). Additional Remarks Schedule, may be attached if more space is required.  
Evidence of Insurance.

<b>CERTIFICATE HOLDER</b>  New Hampshire Department of Transportation 7 Hazen Drive PO Box 483 Concord NH 03302-0483 USA	<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  <i>Aon Risk Services Northeast, Inc.</i>
--	--

Holder Identifier: 570094703719      Certificate No: 570094703719



# CERTIFICATE OF LIABILITY INSURANCE

DATE: 06/01/2022  
07/29/2022

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.

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<b>PRODUCER</b> Aon Risk Services Northeast, Inc. Stamford CT Office 1600 Summer Street Stamford CT 06907-4907 USA	<b>CONTACT INFO:</b> PHONE (866) 283-7122      FAX (860) 630-1050 E-MAIL ADDRESS:	
	<b>INSURER(S) AFFORDING COVERAGE:</b>	
<b>INSURED:</b> CBRE Group, Inc. and Subsidiaries 2100 McKinney Avenue Suite 1250 Dallas TX 75201 USA	<b>INSURER A:</b> American International Group UK Ltd      NAIC # A1120187	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	
	<b>INSURER G:</b>	

COVERAGES      CERTIFICATE NUMBER: 570084703719      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.*

TYPE	TYPE OF INSURANCE	ADOL	SUBR	POLICY NUMBER	POLICY EFF DATE	POLICY EXP DATE	LIMITS
<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  <input type="checkbox"/> SOA AGGREGATE LIMIT APPLIES FOR: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:							<input type="checkbox"/> EACH OCCURRENCE <input type="checkbox"/> DAMAGE TO RENTED PREMISES (EA ADDITIONAL) <input type="checkbox"/> MED EXP (Any one person) <input type="checkbox"/> PERSONAL & ADV INJURY <input type="checkbox"/> GENERAL AGGREGATE <input type="checkbox"/> PRODUCTS - COMPROP ADD
	<input type="checkbox"/> AUTOMOBILE LIABILITY <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						
<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION							<input type="checkbox"/> EACH OCCURRENCE <input type="checkbox"/> AGGREGATE
<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PARTNER/ PARTNER / EMPLOYEE OFFICER/DIRECTOR EXCLUDED (Standard in US) <input type="checkbox"/> If yes, describe under DEFINITION OF OPERATIONS below							<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH <input type="checkbox"/> E.L. EACH ACCIDENT <input type="checkbox"/> E.L. DISEASE-EA EMPLOYEE <input type="checkbox"/> E.L. DISEASE-POLICY LIMIT
A	EAO-PL-Primary			PSDEF2100558 Errors & Omissions	11/01/2021	11/01/2022	Per Claim/Aggregate \$10,000,000 \$20,000,000

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

<b>CERTIFICATE HOLDER</b>  New Hampshire Department of Transportation 7 Hazen Drive PO Box 483 Concord NH 03302-0483 USA	<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  <i>Aon Risk Services Northeast Inc</i>

Holder Identifier:

570084703719

Certificate No:





# CERTIFICATE OF LIABILITY INSURANCE

DATE: 01/28/2022

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> Aon Risk Services Northeast, Inc. Stamford CT Office 1600 Summer Street Stamford CT 06907-4907 USA	<b>CONTACT NAME:</b> PHONE (AC No. F. No.): (866) 283-7322      FAX (800) 363-0105	
	<b>EMAIL ADDRESS:</b>	
<b>INSURED</b> CBRE Group, Inc. and Subsidiaries 2100 McKinney Avenue Suite 1250 Dallas TX 75201 USA	<b>INSURER A:</b> Zurich American Ins Co      16535	
	<b>INSURER B:</b> American Zurich Ins Co      40142	
	<b>INSURER C:</b> ACE Property & Casualty Insurance Co.      20699	
	<b>INSURER D:</b> Navigators Insurance Co.      42307	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

COVERAGES      CERTIFICATE NUMBER: 570064703713      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)

CLASS CODE	TYPE OF INSURANCE	ADDL. POLY.	CLASS CODE	POLICY NUMBER	POLICY EFF. DATE	POLICY EXP. DATE	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLASSIS-MADE <input checked="" type="checkbox"/> OCCUR  OTHER AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. ACCT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER			GL0838419920	03/01/2022	03/01/2023	EACH OCCURRENCE: \$5,000,000 DAMAGE TO RENTED PREMISES (Per occurrence): \$50,000 MED EXP (Any one person): \$10,000 PERSONAL & ADV INJURY: \$5,000,000 GENERAL AGGREGATE: \$5,000,000 PRODUCTS - COMP/OP AGG: \$5,000,000
A	AUTOMOBILE LIABILITY <input checked="" 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			EAP 8384200 20	03/01/2022	03/01/2023	COMBINED SINGLE LIMIT (Per accident): \$5,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per occurrence)
C	<input checked="" type="checkbox"/> UMBRELLA LMB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LMB <input type="checkbox"/> CLASSIS-MADE <input checked="" type="checkbox"/> DCD <input checked="" type="checkbox"/> RETENTION \$10,000			G27952501007	03/01/2022	03/01/2023	EACH OCCURRENCE: \$5,000,000 AGGREGATE: \$5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input checked="" type="checkbox"/> ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/DIRECTOR (Mandatory in MO) If yes, describe under DESCRIPTION OF OPERATIONS			WC838419523 All other States WC914173616 Wisconsin	03/01/2022	03/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH EL EACH ACCIDENT: \$1,000,000 EL DISEASE-EMPLOYEE: \$1,000,000 EL DISEASE-POLICY LIMIT: \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 91, Additional Remarks Schedule, may be attached if more space is required)  
New Hampshire Department of Transportation and State of New Hampshire are included as Additional Insured in accordance with the policy provisions of the General Liability policy.

<b>CERTIFICATE HOLDER</b>  New Hampshire Department of Transportation 7 Hazen Drive PO Box 483 Concord NH 03302-0483 USA	<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  <i>Aon Risk Services Northeast, Inc.</i>



VALUATION & ADVISORY SERVICES / NEW ENGLAND

## Corey Gustafson MAI, CRE

Managing Director, 33 Arch Street, 28<sup>th</sup> Floor, Boston, MA 02110

T +1 617 912 6904

M +1 617 582 3131

E corey.gustafson@cbre.com

### Pro Affiliations / Accreditations

- MAI
- CRE
- MLV
- REFA
- Certified General Appraiser:
  - Massachusetts
  - Rhode Island
  - Connecticut
  - New Hampshire
  - Maine
  - Vermont
  - New York
  - New Jersey
  - Pennsylvania
  - Delaware
  - Maryland
  - Virginia
  - District of Columbia
  - West Virginia

### Professional Experience

Corey Gustafson is Managing Director and New England Market Leader of CBRE Valuation and Advisory Services while based in Boston, MA. As one of the most experienced valuation professionals in the market, Mr. Gustafson focuses on leadership, management, professional development, strategic decision-making, and recruitment. In addition to team building and business development, his expertise incorporates all types of real estate valuation services including appraisals, feasibility studies, real estate portfolios, financial reporting, estate planning, litigation support, property tax consulting, and sale-leasebacks.

Prior to joining CBRE, Gustafson served as the Northeast Regional Managing Director for Apprise by Walker & Dunlop with responsibilities over a 14 States. In this capacity, he was responsible for the leadership, management, recruitment, and business development and product development. Before his tenure with Walker & Dunlop, he was a Managing Director for Colliers International where he oversaw the firm's New England Region operations. During this time, he was responsible for the growing the production of the office threefold in the first 18 months of his tenure. In addition, Mr. Gustafson was the #1 producing appraiser at the company two years in a row (2018 and 2019).

### Education

- Bachelors of Science in Aeronautical Science from Embry-Riddle Aeronautical University in Florida

# State of New Hampshire

REAL ESTATE APPRAISER BOARD

APPROVED TO PRACTICE AS A

CERTIFIED GENERAL APPRAISER

ISSUED TO: COREY GUSTAFSON



Certificate No: NHCG-892

EXPIRATION DATE: 10/31/2022

# State of New Hampshire

REAL ESTATE APPRAISER BOARD

APPROVED TO PRACTICE AS A

Certified General Appraiser

ISSUED TO: COREY GUSTAFSON



Certificate No:  
NHCG-892

EXPIRATION DATE:  
10/31/2022

For additional information please contact the Board office at [dawn.couture@nplc.nh.gov](mailto:dawn.couture@nplc.nh.gov) or visit our web site at <http://www.nplc.nh.gov/real-estate-appraisers/index.htm>

## Fee Proposal by Team Member Role

### Section 1 – Appraisal Services

The hourly rates below apply to Groups 1, 2 and 3.

### Section 2 – Fees for Other Available Services

The hourly rates below apply to Section 2 Categories – Fees for Other Available Services. CBRE typically bids appraisal and appraisal review assignments on a fixed fee, lump sum basis. Expert witness services are typically provided on a time and material per hour basis and negotiated specific to the assignment.

Condemnation/Litigation, Testimony	\$550/hr.
MD / Director / Principal Appraiser	\$450/hr.
MAI Appraiser	\$350/hr.
Appraiser	\$275/hr.
Senior Valuation Associate	\$200/hr.
Valuation Associate	\$150/hr.
Administrative Support	\$150/hr.



VALUATION & ADVISORY SERVICES /NEW ENGLAND

## Corey Gustafson MAI, CRE

Managing Director, 33 Arch Street, 28<sup>th</sup> Floor, Boston, MA 02110

T +1 617.912.6904

M +1 617.582.3131

E [corey.gustafson@cbre.com](mailto:corey.gustafson@cbre.com)

### Statement Regarding Suspension & Debarment

I am not currently under suspension, debarment, voluntary exclusion or determination of Ineligibility by any Federal Agency. I have not been suspended, debarred, voluntarily excluded or determined ineligible by any Federal Agency within the last three (3) years. Neither do I have a proposed debarment pending, and have not been indicted, convicted, or have had a civil judgement rendered against any of us by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three (3) years.

Sincerely,



Corey Gustafson

CBRE

Valuation & Advisory Services



Victoria F. Sheehan  
Commissioner

THE STATE OF NEW HAMPSHIRE  
DEPARTMENT OF TRANSPORTATION

G+C # 5A  
date 10/21/20



William Cass, P.E.  
Assistant Commissioner

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

Bureau of Right-of-Way  
September 10, 2020

REQUESTED ACTION

The Department of Transportation wishes to place this item on the Consent Calendar.

Authorize the Department of Transportation to amend an item approved on April 17, 2019 (item #44A). That item was previously amended by an approval on May 20, 2020 (item #5A), increasing the number of appraisal firms from eight to nine.

This request is for authorization for the addition of Donald S. Welinsky dba Appraisal and Advisory Consultants (Vendor #333113) of Marshfield, MA, to prepare appraisals for property needed for transportation projects, effective upon Governor and Council approval through April 17, 2024. The addition would increase the number of appraisal firms from nine to ten. No new funding is required.

EXPLANATION

The purpose of this request is to enter into contract with one additional appraisal firm to expand the pool of contracted appraisers in the Statewide Acquisition Program. A previously approved Governor and Council item authorized eight appraisal firms, for a total cost of \$1,500,000.00 dollars (approved by Governor and Council on April 17, 2019, item #44A). An amendment to that item was approved on May 20, 2020 (item #5A) to add one additional firm bringing the total of firms to nine.

This request will authorize one additional firm that has since expressed interest, expanding the scope of available firms to a total of ten firms that could be engaged on short notice to complete appraisal assignments associated with transportation improvement projects. This will not increase the monetary amount previously approved or the terms of the previously approved contracts.

The Department of Transportation utilizes contract appraisers as needed to complete appraisal assignments associated with property acquisitions for transportation projects. Appraisals are required to establish values for purchasing property and property rights affected by transportation improvements. In addition, a second appraisal is required for a property with an acquisition cost of over \$1,000,000 due to Federal requirements. Requests for second appraisals may also come from the Department's Review

Appraiser, the Governor and Council, or the Layout Commissions. Occasionally, due to lack of comparable sales data, there are requests for third appraisals.

Individual appraisal assignments are allocated through a low bid process as described below. The process allows the Department to respond quickly and efficiently to project schedules, as well as to the needs of affected property owners anxious to see resolution of individual property issues. The process has been in place for several years and has been successful.

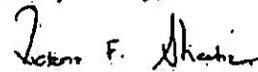
With Governor and Council approval, Appraisal and Advisory Consultants will serve in a pool of appraisers to provide appraisal services on an "as needed" basis. When an appraisal is required, the approved firms will be considered relative to the scope of the assignment, their capacity to perform in a timely fashion, quality of work, experience, and their overall suitability for the assignment. The firms thought to be best qualified for the assignment will be sent a copy of the scope of work and asked to submit a fee quotation. They will be informed of the required completion details and date, and the firm submitting the lowest fee quotation meeting the completion date will be notified to proceed. The selection process is in keeping with the Department's established procedures.

Should the Department require a second appraisal of a parcel previously awarded under this program, the assignment will be offered to the firm that previously submitted the second-lowest quotation. If they are unable to accept, the third firm would be engaged. The contracting officer will be the final judge as to assignments and this will be on a case-by-case basis.

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. 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.

Authorization is respectfully requested to enter into contract with the additional firm listed above to complete appraisal assignments for the statewide acquisition program to expire April 17, 2024 as outlined above.

Respectfully,



Victoria F. Sheehan  
Commissioner

VFS/pfc  
Attachments

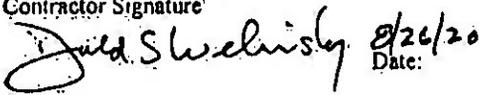
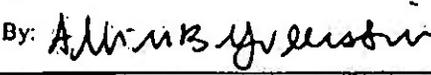
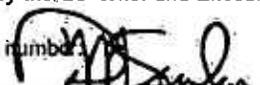
**Notice:** This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

The State of New Hampshire and the Contractor hereby mutually agree as follows:

**GENERAL PROVISIONS**

**1. IDENTIFICATION.**

1.1 State Agency Name <b>Department of Transportation</b>		1.2 State Agency Address <b>7 Hazen Drive Concord, NH 03301</b>	
1.3 Contractor Name <b>DONALD S. WELINSKY, MAI d.b.a. APPRAISAL AND ADVISORY CONSULTANTS</b>		1.4 Contractor Address <b>PO Box 708 Marshfield, MA 02050</b>	
1.5 Contractor Phone Number <b>617-633-3335</b>	1.6 Account Number <b>333113</b>	1.7 Completion Date <b>April 17, 2024</b>	1.8 Price Limitation <b>\$1,500,000.00*</b>
1.9 Contracting Officer for State Agency <b>Victoria F. Sheehan, Commissioner</b>		1.10 State Agency Telephone Number <b>603-271-1484</b>	
1.11 Contractor Signature  Date: <b>8/26/20</b>		1.12 Name and Title of Contractor Signatory <b>Donald S. Welinsky, Principal</b>	
1.13 State Agency Signature  Date: <b>9/15/20</b>		1.14 Name and Title of State Agency Signatory <b>William Cass, Assistant Commissioner</b>	
1.15 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ On: _____ Director, Oh:			
1.16 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By:  On: <b>10/9/2020</b>			
1.17 Approval by the Governor and Executive Council (if applicable) G&C Item number:  <b>DEPUTY SECRETARY OF STATE</b> <b>OCT 21 2020</b>			

\*Appropriation is in the aggregate, to be shared by all firms that are part of the Statewide Appraisal Contract.

**2. SERVICES TO BE PERFORMED.** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT B which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.17, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.13 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds affected by any state or federal legislative or executive action that reduces, eliminates or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope for Services provided in EXHIBIT B, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT C, which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete

compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80: through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal employment opportunity laws. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 The Contractor agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

## 8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 give the Contractor a written notice specifying the Event of Default and set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both.

8.3 No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

## 9. TERMINATION.

9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) days written notice to the Contractor that the State is exercising its option to terminate the Agreement.

9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State's discretion, deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State's discretion, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement.

## 10. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

10.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

10.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

10.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

## 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

12.1 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, a Change of Control shall constitute assignment. "Change of Control" means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

13. INDEMNIFICATION. Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omission of the Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. The State shall not

be liable for any costs incurred by the Contractor arising under this paragraph 13. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

#### 14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate or excess; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

#### 15. WORKERS' COMPENSATION.

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A: ("Workers' Compensation").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. The Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

17. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no such approval is required under the circumstances pursuant to State law, rule or policy.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

22. SPECIAL PROVISIONS. Additional or modifying provisions set forth in the attached EXHIBIT A are incorporated herein by reference.

23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be, contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings with respect to the subject matter hereof.

EXHIBIT A

EXACT SERVICES REQUIRED BY THE CONTRACTOR (APPRAISER) ARE:

2.1. The Appraiser covenants and agrees to create and update written appraisal(s) of certain parcel(s) of property and in accordance with "The New Hampshire Department of Transportation Right-of-Way Manual; Appraisal Standards and Reports Section" on file with the Department of Transportation, ("NHDOT") and any amendments thereto, and made a part hereof. All appraisals shall meet the requirements of the New Hampshire Appraisal Board, the Uniform Appraisal Standards for Federal Land Acquisitions, and the Uniform Standards of Professional Appraisal Practice promulgated by The Appraisal Foundation. All appraisals will be submitted in both written and PDF format. The appraiser agrees to respond to any written review of their appraisal by the State's reviewer within 10 working days of receipt. The response will consist of a letter addressing each question asked by the State's reviewer, any corrected pages of the appraisal with the changes highlighted, plus the revised written appraisal.

2.2. The measure of damage to the condemnee(s) is to be estimated by the use of all applicable approaches to value necessary to support the final estimate of the appraiser in accordance with RSA 498-A and the approaches as set forth in the "Appraisal Standards and Reports", above referenced. The use of or the omission of any approach shall be justified as part of the Appraisal Report by the Appraiser. The Appraiser further covenants and agrees that the measure of damage to the condemnee(s) is to be determined by appraising the "Market Value" of the property and/or property interest(s) taken including improvements, if any, before the taking; and the "Market Value" of the remaining property, including improvements and/or property interest(s), if any, after the taking, in light of any environmental contamination, liens, leases, easements, or other encumbrances affecting the market value of the property in the before and after scenarios. The difference, if any, between the two values represents the measure of damages.

2.3. The Appraiser will, if required by the NHDOT, appear before any board or court to justify, testify, and defend their appraisal.

2.4. The Appraiser will refer to the NHDOT Contracting Officer or assignees of the NHDOT Contracting Officer all matters or questions of fact relative to or connected with the appraisal which give rise to dispute, dilemma or ambiguity and which are not clearly spelled out, described and determined by this contract or the standard practices of the profession; and the NHDOT Contracting Officer or assignee shall resolve the question or dispute by written instruction to the Appraiser.

2.5. The report(s) shall not include damages for items generally non-compensable under established State law. Requirements relative to consideration of benefits as outlined in the "Handbook for Highway Land Damage Commissions" revised February 18, 1964, prepared by the Office of the Attorney General, shall be followed. A copy is available for inspection at NHDOT ROW Section.

EXHIBIT A (CONT'D)

2.6. The Appraiser will neither perform any appraisal service, nor assist in the same, for the owner of any land or interest therein which has been in any way affected pecuniarily by this project, without prior approval of the NHDOT. This prohibition shall remain in effect until final disposition of all claims arising from the project.

2.7. Appraisal assignment, title, date signed by, are hereby incorporated herein. The policy is available for inspection at NHDOT ROW Section.

2.8. NHDOT fee appraiser selection procedures are hereby incorporated herein. The policy is available for inspection at NHDOT ROW Section.

EXHIBIT B

METHOD AND AMOUNT OF PAYMENT:

5.1.1. The NHDOT agrees to pay the Appraiser the quoted and accepted appraisal fee in accordance with the terms of the appraisal assignment. The Appraiser agrees to receive said sum as full compensation for furnishing all materials and labor which may be required in the preparation of the appraisal under this Contract and the attachments hereto. Payment is to be made by the State on the following basis for all contracts:

(a) Fifty (50%) percent of the quoted fee for each appraisal report upon the delivery of an acceptable appraisal and submission of a bill for the total amount. At the NHDOT's

discretion, unacceptable appraisal reports may be returned and no individual payment made until the appraisal report is re-submitted in an acceptable form.

(b) Fifty (50%) percent of the total following review and acceptance by the State Reviewer and concurrence in the acceptance of an adequately documented appraisal report by the U. S. Department of Transportation, or within sixty (60) days after completion of State Review, whichever is sooner.

(c) For each appraisal report which is late, the appraiser will be assessed a penalty of twenty-five (25%) percent of the approved day rate for each work day beyond the agreed upon appraisal completion date until the appraisal report is received.

(d) For appraisal review responses which are late, the appraiser will be assessed a penalty of twenty-five (25%) percent of the approved day rate for each workday beyond the calculated appraisal review response completion date. This date, to be determined by the Chief Right-of-Way Appraiser and identified in each appraisal review sent to the Appraiser, is established in accordance with the Appraisal Report Requirements identified in Exhibit A paragraph (1) of this Contract.

5.1.2. The NHDOT agrees to pay the Appraiser for all expenses incurred for each day or part of a day (\*) that the Appraiser spends at a hearing, pre-trial conference, trial or drafting appraisal update called for by the Attorney General's Office. For any appraisal update that is not completed and submitted within sixty (60) days of when it is requested by the Attorney General's Office, the Appraiser shall be assessed a penalty of twenty-five (25%) percent of the approved day rate for each work day the update is late.

The NHDOT and the Appraiser mutually agree that in case there may be major changes in the scope or character of the work to be performed under this contract, such changes shall be made in the individual amounts, as stated under the "Schedule of Appraisals" by negotiated increases or decreases in said amounts. Or if work is added, such additional amounts as may be required shall be determined by negotiation and payment made at the agreed upon amounts.

(\*) day or part of day shall include the duration of a hearing, pre-trial conference or trial day.

EXHIBIT B (CONT'D.)

I do hereby agree to submit to the NHDOT complete appraisal reports in accordance with the "Appraisal Standards and Reports", for the following parcels of property for the individual amounts as indicated:

SCHEDULE OF APPRAISALS

<u>Parcel No.</u>	<u>Name of Owner</u>	<u>Type of Taking</u>	<u>Type of Property</u>	<u>Before &amp; After Fee</u>
-------------------	----------------------	-----------------------	-------------------------	-------------------------------

(Partial or Complete)

N/A

THIS CONTRACT IS FOR THE PREPARATION OF APPRAISAL REPORTS AND RELATED EFFORTS WITHIN THE TIME FRAME SPECIFIED FOR INDIVIDUAL ASSIGNMENTS.

EXHIBIT C

SPECIAL PROVISIONS

**AMEND TO READ:**

12. Notwithstanding the provisions of paragraph 12. of the P37 the Contractor may hire a subcontractor to perform services under this contract with the prior written consent of the state including persons who have contractual agreements with the State.
- 14.1.1 Commercial or comprehensive general liability insurance against all claims of bodily injury, death or property damage, in policy amounts of not less than \$250,000 per claim and \$1,000,000 per aggregate; (State to be named as an additional insured); and
- 14.1.2 Comprehensive automobile liability insurance covering all motor vehicles, including owned, hired, borrowed and non-owned vehicles, for all claims of bodily injury, death or property damage, in policy amounts of not less than \$100,000 combined single limit; and
- 14.1.3 Professional liability (errors and omissions) insurance coverage of not less than \$500,000 per occurrence and \$500,000 per aggregate. If coverage is claims made, the period to report claims shall extend for not less than three years from the date of substantial completion of the construction contract. No retention (deductible) shall be more than \$25,000; and
- 14.1.4 Workers' compensation and employer's liability insurance as required by law.

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# State of New Hampshire

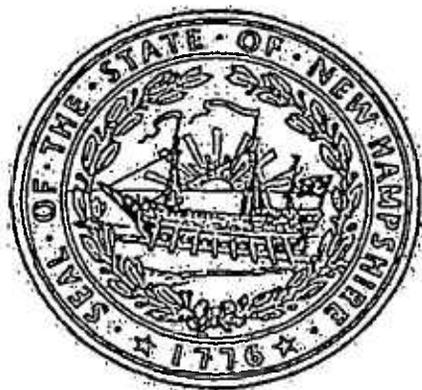
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that APPRAISAL AND ADVISORY CONSULTANTS is a New Hampshire Trade Name registered to transact business in New Hampshire on August 25, 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: 849767

Certificate Number: 0004985251



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 25th day of August A.D. 2020.

A handwritten signature in cursive script, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State

# Donald S. Welinsky, MAI

APPRAISAL & ADVISORY CONSULTANTS

August 25, 2020

Paul Coddington, JD  
Chief of Administration  
Bureau of Right-of-Way  
NH Department of Transportation  
John O. Morton Building  
7 Hazen Drive, Room 100  
Concord, NH 03302

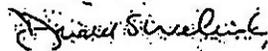
Dear Attorney Coddington,

Attached are the requested documents:

- | "Certificate of Good Standing" (attached)
- | Operate as a sole proprietor
- | Insurance certificates (attached)
  - Errors and Omissions
  - General Liability
  - Automobile
- | NH Certified General Appraisal License NHCG-825 (attached)
  - Expires 8/31/2022
- | There has never been a disbarment of Donald S. Welinsky in any category anywhere
- | Expert testimony is charged at \$250 per hour
- | Business Name: Donald S. Welinsky, MAI d.b.a. Appraisal and Advisory Consultants
- | Physical Address: 15 Cross Street, Marshfield, MA 02050
- | Mailing Address: Post Office Box 708, Marshfield, MA 02050

Please advise if additional information is required.

Very truly yours,



Donald S. Welinsky, MAI  
New Hampshire Certified General  
Appraiser NHCG-825

Laura Davies, Chief Appraiser  
NH Department of Transportation  
Bureau of Right-of-Way  
7 Hazen Drive  
PO Box 483  
Concord, NH 03302-0483

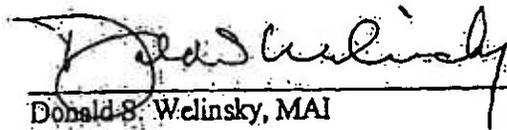
August 26, 2020

Dear Laura:

I am not currently under suspension, debarment, voluntary exclusion or determination of ineligibility by any Federal Agency. I have not been suspended, debarred, voluntarily excluded or determined ineligible by any Federal Agency within the last three (3) years. Neither do I have a proposed debarment pending, and have not been indicted, convicted, or have had a civil judgment rendered against me by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three (3) years.

A copy of a Certificate of Good Standing from the NH Secretary of State is attached. A Certificate of Vote is not required as this is not a corporation.

My signature below serves as my attestation to these statements.



Donald S. Welinsky, MAI

11 This Spectrum Policy consists of the Declarations, Coverage Forms, Common Policy Conditions and any  
42 other Forms and Endorsements issued to be a part of the Policy. This Insurance is provided by the stock  
NX Insurance company of The Hartford Insurance Group shown below.  
SBM

INSURER: SENTINEL INSURANCE COMPANY, LIMITED.  
ONE HARTFORD PLAZA, HARTFORD, CT 06155  
COMPANY CODE: A



Policy Number: 08 SBM NX4211 SB

### SPECTRUM POLICY DECLARATIONS

Named Insured and Mailing Address: DONALD WELINSKY  
(No., Street, Town, State, Zip Code)  
PO BOX 707  
MARSHFIELD MA 02050

Policy Period: From 03/18/20 To 03/18/21 1 YEAR  
12:01 a.m., Standard time at your mailing address shown above. Exception: 12 noon in New Hampshire.

Name of Agent/Broker: CLIPPERSHIP INSURANCE AGENCY  
Code: 088704

Previous Policy Number: 08 SBM NX4211

Named Insured is: INDIVIDUAL

Audit Period: NON-AUDITABLE

Type of Property Coverage: NONE

Insurance Provided: In return for the payment of the premium and subject to all of the terms of this policy, we agree with you to provide insurance as stated in this policy.

---

TOTAL ANNUAL PREMIUM IS: \$544 MP  
IN RECOGNITION OF THE MULTIPLE COVERAGES INSURED WITH THE HARTFORD, YOUR  
POLICY PREMIUM INCLUDES AN ACCOUNT CREDIT.

---

Countersigned by

*Susan L. Castaneda*

Authorized Representative

01/07/20  
Date

**SPECTRUM POLICY DECLARATIONS (Continued)**

**POLICY NUMBER: 08 SBM NX4211**

Location(s); Building(s), Business of Named Insured and Schedule of Coverages for Premises as designated by Number below.

**Location: 001      Building: 001**

**15 CROSS ST  
MARSHFIELD      MA 02050**

**Description of Business:  
Appraisers**

**Deductible: NO COVERAGE**

**BUILDING AND BUSINESS PERSONAL PROPERTY    LIMITS OF INSURANCE**

**BUILDING**

**NO COVERAGE**

**BUSINESS PERSONAL PROPERTY**

**REPLACEMENT COST**

**NO COVERAGE**

**PERSONAL PROPERTY OF OTHERS**

**REPLACEMENT COST**

**NO COVERAGE**

**MONEY AND SECURITIES**

**INSIDE THE PREMISES  
OUTSIDE THE PREMISES**

**NO COVERAGE  
NO COVERAGE**

**SPECTRUM POLICY DECLARATIONS (Continued)**  
**POLICY NUMBER: 08-SBM NX4211**

<b>BUSINESS LIABILITY</b>	<b>LIMITS OF INSURANCE</b>
<b>LIABILITY AND MEDICAL EXPENSES</b>	<b>\$1,000,000</b>
<b>MEDICAL EXPENSES - ANY ONE PERSON</b>	<b>\$ 10,000</b>
<b>PERSONAL AND ADVERTISING INJURY</b>	<b>\$1,000,000</b>
<b>DAMAGES TO PREMISES RENTED TO YOU ANY ONE PREMISES</b>	<b>\$1,000,000</b>
<b>AGGREGATE LIMITS</b>	
<b>PRODUCTS-COMPLETED OPERATIONS</b>	<b>\$2,000,000</b>
<b>GENERAL AGGREGATE</b>	<b>\$2,000,000</b>
<b>EMPLOYMENT PRACTICES LIABILITY COVERAGE: FORM SS 09 01</b>	
<b>EACH CLAIM LIMIT</b>	<b>\$ 10,000</b>
<b>DEDUCTIBLE - EACH CLAIM LIMIT NOT APPLICABLE</b>	
<b>AGGREGATE LIMIT</b>	<b>\$ 10,000</b>
<b>RETROACTIVE DATE: 03182016</b>	

This Employment Practices Liability Coverage contains claims made coverage. Except as may be otherwise provided herein, specified coverages of this insurance are limited generally to liability for injuries for which claims are first made against the insured while the insurance is in force. Please read and review the insurance carefully and discuss the coverage with your Hartford Agent or Broker.

The Limits of Insurance stated in this Declarations will be reduced, and may be completely exhausted, by the payment of "defense expense" and, in such event, The Company will not be obligated to pay any further "defense expense" or sums which the insured is or may become legally obligated to pay as "damages".

**BUSINESS LIABILITY OPTIONAL  
COVERAGES**

<b>HIRED/NON-OWNED AUTO LIABILITY</b>	<b>\$1,000,000</b>
<b>CYBERFLEX COVERAGE FORM SS 40 26</b>	

**SPECTRUM POLICY DECLARATIONS (Continued)**

**POLICY NUMBER: 08 SBM NX4211**

**BUSINESS LIABILITY OPTIONAL COVERAGES  
(Continued)**

**LIMITS OF INSURANCE**

**UNMANNED AIRCRAFT LIABILITY  
IS EXCLUDED  
SEE FORM: SB 42 '06**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
08/26/2020

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> CLIPPERSHIP INSURANCE AGENCY 08088704 62 MAIN STREET KINGSTON MA 02364	<b>CONTACT NAME:</b> PHONE (781) 585-2522 FAX (781) 585-9415 (A/C, No, Ext): (A/C, No):	
	<b>E-MAIL ADDRESS:</b> INSURER(S) AFFORDING COVERAGE: NAICS# INSURER A: Sentinel Insurance Company Ltd. 11000	
<b>INSURED</b> DONALD WELINSKY PO BOX 708 MARSHFIELD MA 02050-0708	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	
	<b>INSURER G:</b>	

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	ADOL INSR	SUBR WVO	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"/> General Liability	X		08 SBM NX4211	03/18/2020	03/18/2021	EACH OCCURRENCE	\$1,000,000
	<input type="checkbox"/> GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER						DAMAGE TO RENTED PREMISES (Per occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COM/OP AGG	\$1,000,000 \$10,000 \$1,000,000 \$2,000,000 \$2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRER AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			08 SBM NX4211	03/18/2020	03/18/2021	COMBINED SINGLE LIMIT (Per accident)	\$1,000,000
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> RETENTION \$						BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$1,000,000 \$1,000,000 \$1,000,000
A	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	08 SBM NX4211	03/18/2020	03/18/2021	<input type="checkbox"/> PER-STATUTE <input type="checkbox"/> OTHER	E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
	<input type="checkbox"/> EMPLOYMENT PRACTICES LIABILITY						Each Claim Limit Aggregate Limit	\$10,000 \$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Those Usual to the Insured's Operations. State of New Hampshire Department of Transportation is an additional insured per the Business Liability Coverage Form SS0008 attached to this policy.

<b>CERTIFICATE HOLDER</b> State of New Hampshire, Department of Transportation 7 Hazen Drive 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 <i>Susan J. Castaruda</i>
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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
08/17/2020

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> CLIPPERSHIP INSURANCE AGENCY 08088704 62 MAIN STREET KINGSTON MA 02364	<b>CONTACT NAME:</b> PHONE: (781) 585-2622 (A/C, No, Ext): FAX: (781) 585-8416 (A/C, No): E-MAIL ADDRESS:	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> DONALD WELINSKY PO BOX 708 MARSHFIELD MA 02050-0708	<b>INSURER A:</b> Hartford Fire Insurance Company NAIC# 19682	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

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. INSR.	SUBR. WVD.	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GENL. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Per occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMPROP AGG
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE UNIT (Per accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB. EXCESS LIAB. <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED. RETENTION \$						EACH OCCURRENCE AGGREGATE
A	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	08 WEC ACSR2J	12/20/2019	12/20/2020	<input checked="" type="checkbox"/> PER STATE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 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)

Those usual to the Insured's Operations.

### CERTIFICATE HOLDER

Donald S. Welnsky  
15 Cross St  
Marshfield, MA 02050

### 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

*Susan D. Castorides*

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**MAFFRE INSURANCE**

The Commerce Insurance Company  
Citation Insurance Company  
11 Gore Road, Webster, Massachusetts 01570

Issued by Citation Insurance Company  
**ITEM ONE - Named Insured and Address**

**KAREN I WELINSKY**  
15 CROSS ST  
MARSHFIELD MA 02050-3101

**BUSINESS AUTO COVERAGE FORM**

RENEWAL 12/20/19

Office/Agent: 93V1  
Policy No: 19MMDCP388

Producer Name and Address

CLIPPERSHIP INSURANCE AGCY  
(781) 585-2522  
62 MAIN STREET  
KINGSTON MA 02364

POLICY PERIOD: Policy covers FROM 12/20/19 TO 12/20/20 12:01 A.M. Standard Time at the Named Insured's Address stated above

NAMED INSURED'S BUSINESS:

FORM OF BUSINESS: OTHER

DIRECT-BILLED

COMMERCIAL

**IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.**

**ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS**

This policy provides only those coverages where a change is shown in the premium column below. Each of these coverages will apply only to those "Autos" shown as covered "Autos". "Autos" are shown as covered "Autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form next to the name of the coverage:

**LIABILITY INSURANCE**

COVERAGES	COVERED AUTOS <small>(Entry of Covered Autos Symbol from the Business Auto Coverage Form shows which autos are covered under)</small>	LIMIT The most we will pay for any one accident or loss:	PREMIUM
Compulsory Bodily Injury	7	\$ 20,000 Each Person \$ 40,000 Each Accident	144.00
Personal Injury Protection	7	\$ 8,000 Each Person	21.00
Optional Bodily Injury	7	Combined Single Limit SEE SCHEDULE Each Occurrence	521.00
Property Damage (COMPULSORY LIMIT \$5,000)	7	Combined Single Limit Each Occurrence	INCLUDED
Auto Medical Payments Insurance		Each Person	0.00
Uninsured Motorists (COMPULSORY LIMITS \$20,000/\$40,000)	7	SEE SCHEDULE Each Person SEE SCHEDULE Each Accident	6.00
Underinsured Motorists	7	SEE SCHEDULE Each Person SEE SCHEDULE Each Accident	32.00

**PHYSICAL DAMAGE INSURANCE**

Actual Cash Value or cost of repair, whichever is less, minus the deductible for each Covered Auto.

Comprehensive Coverage	7	SEE SCHEDULE Deductible	138.00
Specified Causes of Loss		Deductible	
Collision Coverage	7	SEE SCHEDULE Deductible	412.00
Limited Collision Coverage		Deductible	0.00
Loss of Use - Rental Reimbursement			0.00
Towing and Labor			0.00

Forms and Endorsements attached to this Coverage Form:

CA 00 01 03 06 IL 00 21 04 98  
IL 00 17 11 98 MM 99 11 10 11

PREMIUM FOR ENDORSEMENTS	
*ESTIMATED TOTAL PREMIUM	1,274.00

\* This policy may be subject to final audit.

SEE ADDITIONAL INFORMATION

Countersigned by:

Authorized Representative

BATCH	SEQ.	REP	CURR DATE	AGENT	RUN SEQ.	END NO.	F	LAST DATE	CDT
Z30	B02	W	308	1	002313	001	V	290	

BRANCH

BUSINESS AUTO COVERAGE FORM  
 SCHEDULE  
 RENEWAL 12/20/19

Office/Agent: 93V1  
 Policy No: 19MMDCP388

Experience Modifications:	Liability 1.00%	Comprehensive 1.00%	Collision 1.00%	Rating ID 7
All Other Modifications:	Liability 0.90%	Comprehensive 0.90%	Collision 0.90%	
Company Use Fields:	A -	B -	C - 8999	D - 0
	E -		F -	T -
	G -			

Additional Information:

C 111 10 08	PASSIVE RESTR APPLIED
MM 99 23 09 98	MM 99 54 09 98
CA 23 86 01 06	MM 99 17 09 98
	CIC 957 10 06

POLICY ASSEMBLY ENDORSEMENTS ATTACHED:

CA 00 01 03 06	IL 00 17 11 98	IL 00 21 04 98	C 111 10 08
MM 99 54 09 98	MM 99 11 10 11	MM 99 23 09 98	MM 99 17 09 98
CA 23 86 01 06	CIC 957 10 06		

Driver Information	Driver Name	Date of Birth	License Number	State
1	WELINSKY DONALD S	**/**/42	*****3862	MA
2	WELINSKY KAREN I	**/**/44	*****9545	MA

BATCH	SEQ.	REP	CURR DATE	AGENT	RUN SEQ.	END NO.	F	LAST DATE	CDT
Z30	802	W	308	1	002313	001	V	290	

MM 00 97 11 17

BRANCH

Office/Agent: 93V1  
 Policy No: 19MM0CP388

ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN

VEHICLE INFORMATION  
 DESCRIPTION

Auto No.	Year	Make	Model	Cost New	Size GWW, GCW or Vehicle Seating Capacity	Territory Town and State Where the Covered Auto will be Garaged Territory/Premium: Town/Zip
1	15	INFI	Q40	35550	/	MARSHFIELD 07/039
VIN: JN1CV6AR2FM520896						

Auto No.	Use	Symbol	Age	Class	CLASSIFICATION Radius	Mobile Equipment	Inspect Code	Limit Per Disablement	Loss of Use Amount/Days
1		8	06	739100			9		

LIABILITY LIMITS (\* Limit(s) in Thousands)

Auto No.	Compulsory Bodily Injury (\$20,000/\$40,000)		Personal Injury Protection \$8,000 Each Person		Optional Bodily Injury		Property Damage (Compulsory Limit \$5,000)		Auto Medical Payments		Uninsured Motorists (Compulsory Limits \$20,000/\$40,000)		Underinsured Motorists	
	Premium	Premium	*Limit	Premium	*Limit	Ded.	Premium	Limit	Premium	*Limit	Premium	*Limit	Premium	
1	144	21	CSL 1,000	521	CSL		INCL			100 300	6	100 300	32	

PHYSICAL DAMAGE

Auto No.	Value Type and Limit	** Specified Causes of Loss			Comprehensive		Collision		Limited Collision		Waiver of Ded.	Loss of Use	Towing and Labor
		Cov.	Ded.	Premium	Ded.	Premium	Ded.	Premium	Ded.	Premium			
1	ACV				500	138	500	412			9 YES		

\*\* F - Fire Coverage, T - Theft Coverage, F & T - Fire and Theft Coverage, CAC - Combined Additional Coverage  
 \*\*\* YES Designates Waiver of Deductible/Loss of Use/Towing and Labor applies.  
 ## Designates Policy Level Additional Insured-Lessor applies.  
 @ Designate whether Actual Cash Value, Stated Amount or Agreed Value and, except for ACV, the Limit of Liability.

Except for towing all physical damage loss is payable to you and the loss payee named below as interests may appear at the time of loss.

ETAT CODES

AUTO NO.	CAR ID.	TYPE RISK	PIP		LIABILITY LIMITS						PHYSICAL DAMAGE						P R	
			COV.	DED.	BI	PD	MED	U1	U2	BCC	COLL	LOSS OF USE	O.T.C.	AGE	SYM	ATD		EXP.
1	0	1	1	01	18	0	0	08	08	0	016		037	6	8	0	12	1

BATCH	SEQ.	REP	CURR DATE	AGENT	RUN SEQ.	END NO.	F	LAST DATE	COT
Z30	802	W	308	1	002313	001	V	290	



**LIA Administrators & Insurance Services**  
**APPRAISAL AND VALUATION**  
**PROFESSIONAL LIABILITY INSURANCE POLICY**



**DECLARATIONS**

**ASPEN AMERICAN INSURANCE COMPANY**  
 (A stock insurance company herein called the "Company")  
 175 Capitol Blvd. Suite 100  
 Rocky Hill, CT 06067

Date Issued	Policy Number	Previous Policy Number
06/02/2020	AAI001302-06	AAI001302-05

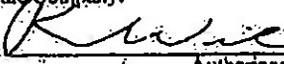
THIS IS A CLAIMS MADE AND REPORTED POLICY. COVERAGE IS LIMITED TO LIABILITY FOR ONLY THOSE CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD AND THEN REPORTED TO THE COMPANY IN WRITING NO LATER THAN SIXTY (60) DAYS AFTER EXPIRATION OR TERMINATION OF THIS POLICY, OR DURING THE EXTENDED REPORTING PERIOD, IF APPLICABLE, FOR A WRONGFUL ACT COMMITTED ON OR AFTER THE RETROACTIVE DATE AND BEFORE THE END OF THE POLICY PERIOD. PLEASE READ THE POLICY CAREFULLY.

Item

1. Customer ID: 122432 Named Insured: APPRAISAL & ADVISORY CONSULTANTS Donald S. Welinsky, MAI 15 Cross St. Marshfield, MA 02050	
2. Policy Period: From: 06/04/2020 To: 06/04/2021 12:01 A.M. Standard Time at the address stated in 1 above.	
3. Deductible: \$1,000 Each Claim	
4. Retroactive Date: 06/04/2010	
5. Inception Date: 06/04/2015	
6. Limits of Liability: A. \$1,000,000 Each Claim B. \$2,000,000 Aggregate	
7. Mail all notices, including notice of Claim, to: LIA Administrators & Insurance Services 1600 Anacapa Street Santa Barbara, California 93101 (800) 334-0652; Fax: (805) 962-0652	
8. Annual Premium: \$916.00	
9. Forms attached at issue: LIA002 (12/14) LIA MA (03/15) LIA012 (12/14) LIA013 (10/14) LIA018 (10/14)	

This Declarations Page, together with the completed and signed Policy Application including all attachments and exhibits thereto, and the Policy shall constitute the contract between the Named Insured and the Company.

06/02/2020  
 Date  
 LIA-001 (12/14)

By:   
 Authorized Signature  
 Aspen American Insurance Company

**Appraisal and Valuation  
Professional Liability Insurance Policy**



Named Insured: APPRAISAL & ADVISORY CONSULTANTS  
Donald S. Welinsky, MAJ

Policy Number: AAI001302-06  
Effective Date: 06/04/2020  
Customer ID: 122432

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**COMMERCIAL APPRAISAL ENDORSEMENT**

In consideration of the premium charged, it is agreed that the Insureds identified below have been approved by the Company to perform Professional Services involving Commercial Property.

Insured

Donald S. Welinsky

Effective Date of Approval

06/04/2020

Exclusion (N) remains unchanged and effective, however, unless the Insured identified is approved for Professional Services involving undeveloped or vacant land whose proposed use is for multiple unit single-family housing developments, condominium developments, co-operative housing developments or apartment developments consisting of 10 units or more.

All other terms, conditions, and exclusions of this Policy remain unchanged.

**Appraisal and Valuation  
Professional Liability Insurance Policy**



**Named Insured:** APPRAISAL & ADVISORY CONSULTANTS  
Donald S. Welinsky, MAI

**Policy Number:** AAI001302-06  
**Effective Date:** 06/04/2020  
**Customer ID:** 122432

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL COVERED APPRAISERS ENDORSEMENT**

In consideration of the premium charged, it is agreed that Section IV. DEFINITIONS (I) "Insured" is amended to include:

"Insured" means:

The persons identified below, but only while acting on behalf of the Named Insured:

Name	Coverage Effective Date	Principal/Owner, Appraiser or Trainee
Donald S. Welinsky	06/04/2020	Principal/Owner

All other terms, conditions, and exclusions of this Policy remain unchanged.

QUALIFICATIONS OF  
DONALD S. WELINSKY, MAI

EDUCATION

The Citadel, Charleston, South Carolina, Lincoln College of Northeastern University, Boston, Massachusetts; Appraisal Institute required courses and specialized seminars, as follows:

EDUCARE computer courses at the University of Wisconsin; Investment Analysis, sponsored by Wharton School of Business; Computer Symposium sponsored by The University of Georgia; Basic Money Market and Economic Analysis; Business Valuations; Real Estate Risk Analysis; Federal Home Loan Bank Board Regulations, and Money Markets; New Model for Tax Administration by Lincoln Institute; advanced appraisal methodology and practices courses sponsored by the Appraisal Institute.

The Appraisal Institute conducts a certification program for its members and am currently certified.

PERSONAL AFFILIATIONS

Certified General Appraiser - Commonwealth of Massachusetts, License No. 877, certified through August 31, 2021; Certified General Appraiser - State of New Hampshire, License No. NHGC-825, certified through August 31, 2020

Member Appraisal Institute (MAI), Certificate # 5313, New England Chapter, Boston, Massachusetts

Past member of Board of Directors, New England Chapter

Appointed to Regional Ethics and Counseling Panel

Commonwealth of Massachusetts, Department of Public Work list of appraisers qualified to appraise contaminated properties

BACKGROUND

Actively engaged full time in real estate appraisal and consulting; self employed for the past 40 years excepting a period of 2 years where I was affiliated with the R.M. Bradley Company of Boston, Massachusetts as a senior staff appraiser. Independently, I have served various clients throughout the New England Area.

A partial list of clients follows:

Appraisal Surveys  
Boston Edison

Brockton Redevelopment Authority  
Massachusetts Electric

Town of Plymouth, MA  
Massachusetts Bay Transportation Authority  
Duxbury Housing Authority  
Ford Motor Company  
O.R. Colan LLC  
Leggat, McCall Appraisal  
Dighton Industries  
R.M. Bradley & Company  
Texaco  
Power Test  
Atlantic Richfield  
Salvation Army  
Town of Plymouth, MA  
Mack Truck  
Bank of Boston  
Mass. Housing Finance Agency  
Town of Abington, MA  
Bechtel/Parson Brinckerhoff  
Central Artery/Tunnel  
Tyco, International  
Fay, Spofford & Thorndike  
Worcester Regional Transit Authority (WRTA)  
CDM Smith, Inc.

Town of Marshfield, MA  
TeleCom City Project  
Halifax Housing Authority  
State of Rhode Island  
Department of Transportation  
Midas Realty Corporation  
International Paper  
Commonwealth of Massachusetts  
Exec. Office of Transportation  
Department of Agriculture  
Department of Transportation  
Office of Attorney General  
Town of Pembroke  
U.S. Department of Interior  
Fleet National Bank  
Town of Bedford, MA  
City of Worcester, MA  
Nature Conservancy  
VHB (Vanasse Hangen Brustlin)  
Malden Redevelopment Authority  
TranSystems Inc.  
BETA Group, Inc.  
Malden Redevelopment Authority

Appraisal and Consulting Assignments Include:

Appraisals:

Acquisitions for Urban Renewal - Fall River, New Bedford, Marlboro, Malden,  
Revere, Everett, MA

Easements (Encumbrance Valuations)

Electric Transmission  
Archeological  
Gas Transmission  
Railroad  
Agricultural Preservation Restrictions  
Highway Right-of-Way  
Avigation

Eminent Domain  
Contaminated Properties  
Leasehold Valuations  
Multi-family and Condominium Projects  
Low Income and Affordable Multi-family Housing

Shopping Centers  
Mixed Use (Office Towers, Shopping Mall, & Garage)  
Office Buildings  
Sports Facilities  
    Railroad Terminal & Arena  
    NFL Stadium  
    Jai Alai Fronton  
    Tennis & Health Clubs  
Warehouse & Industrial  
    Mini Warehouses  
    Processing Plants  
    Manufacturing Plants  
    Research & Development  
Marina & Waterfront Development  
Banking Facilities  
Major Military Installation  
Cranberry Bogs  
Residential Subdivisions  
Automobile Dealerships  
Automobile Car Washes  
Truck Sales Distribution and Repair  
Nursing Homes  
Hotels and Motels  
Gasoline Service Stations  
National Seashore Park Acquisitions

Consulting:

Land Utilization and Marketability Studies (LUM)  
Buyer Origination Study  
Highest and Best Use  
Financial Optimization  
Ad Valorem and Equalization Analysis  
FNMA Condominium Analysis  
Appraisal Review

**EXPERT TESTIMONY**

Appeared as an expert witness before the Appellate Tax Board of the Commonwealth of Massachusetts, the Federal Court District of Massachusetts, Federal Bankruptcy Court, Plymouth Superior Court and District Court.

# State of New Hampshire

REAL ESTATE APPRAISER BOARD

APPROVED TO PRACTICE AS A

CERTIFIED GENERAL APPRAISER

ISSUED TO: DONALD S. WELINSKY



Certificate No: NHCG-825

EXPIRATION DATE: 08/31/2022

# State of New Hampshire

REAL ESTATE APPRAISER BOARD

APPROVED TO PRACTICE AS A

Certified General Appraiser

ISSUED TO: DONALD S. WELINSKY



Certificate No:  
NHCG-825

EXPIRATION DATE:  
08/31/2022

For additional information please contact the Board office at [colleen.giffin@oplc.nh.gov](mailto:colleen.giffin@oplc.nh.gov) or visit our web site at <http://www.oplc.nh.gov/real-estate-appraisers/index.htm>

# Donald S. Welinsky, MAI

APPRAISAL & ADVISORY CONSULTANTS

August 25, 2020

Paul Coddington, JD  
Chief of Administration  
Bureau of Right-of-Way  
NH Department of Transportation  
John O. Morton Building  
7 Hazen Drive, Room 100  
Concord, NH 03302

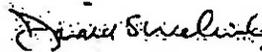
Dear Attorney Coddington,

Attached are the requested documents:

- ! "Certificate of Good Standing" (attached)
- ! Operate as a sole proprietor
- ! Insurance certificates (attached)
  - Errors and Omissions
  - General Liability
  - Automobile
- ! NH Certified General Appraisal License NHCG-825 (attached)
  - Expires 8/31/2022
- ! There has never been a disbarment of Donald S. Welinsky in any category anywhere
- ! Expert testimony is charged at \$250 per hour
- ! Business Name: Donald S. Welinsky, MAI d.b.a. Appraisal and Advisory Consultants
- ! Physical Address: 15 Cross Street, Marshfield, MA 02050
- ! Mailing Address: Post Office Box 708, Marshfield, MA 02050

Please advise if additional information is required.

Very truly yours,



Donald S. Welinsky, MAI  
New Hampshire Certified General  
Appraiser NHCG-825



Victoria F. Sheehan  
Commissioner

THE STATE OF NEW HAMPSHIRE  
DEPARTMENT OF TRANSPORTATION

MAY 05 '20 12:41 PM



William Cass, P.E.  
Assistant Commissioner

5A Jam

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

Bureau of Right-of-Way  
April 14, 2020

REQUESTED ACTION

The Department of Transportation wishes to place this item on the Consent Calendar.

Authorize the Department of Transportation to amend an item approved on April 17, 2019, item #44A, by increasing the number of appraisal firms from eight to nine with the addition of Marsha M. Campaniello dba MMC Appraisal Services (Vendor #317195) of Concord, NH, to prepare appraisals for property needed for transportation projects effective upon Governor and Council approval through April 17, 2024. No new funding is required.

EXPLANATION

The purpose of this request is to enter into contract with one additional appraisal firm to expand the pool of contracted appraisers in the Statewide Acquisition Program. A previously approved Governor and Council item authorized eight appraisal firms, for a total cost of \$1,500,000.00 dollars (approved by Governor and Council on April 17, 2019, item #44A). This request will authorize one additional firm that has since expressed interest, expanding the scope of available firms to a total of nine firms that could be engaged on short notice to complete appraisal assignments associated with transportation improvement projects. This will not increase the monetary amount previously approved or the terms of the previously approved contracts.

The Department of Transportation utilizes contract appraisers as needed to complete appraisal assignments associated with property acquisitions for transportation projects. Appraisals are typically required to establish values for purchasing property and property rights affected by transportation improvements. In addition, a second appraisal is required for a property with an acquisition cost of over \$1,000,000 due to Federal requirements. Requests for second appraisals may also come from the Department's Review Appraiser, the Governor and Council, or the Layout Commissions. Occasionally, due to lack of comparable sales data, there are requests for third appraisals.

Individual approval assignments are allocated through a low bid process as described below. The process allows the Department to respond quickly and efficiently to project schedules, as well as to the needs of affected property owners anxious to see resolution of individual property issues. The process has been in place for several years and has been successful.

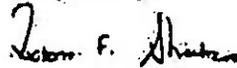
With Governor and Council approval, MMC Appraisal Services will serve in a pool of appraisers to provide appraisal services on an "as needed" basis. When an appraisal is required, the approved firms will be considered relative to the scope of the assignment, their capacity to perform in a timely fashion, quality of work, experience, and their overall suitability for the assignment. The firms thought to be best qualified for the assignment will be contacted and asked for a fee quotation. They will be informed of the required completion details and date, and the firm submitting the lowest fee quotation meeting the completion date will be notified to proceed. The selection process is in keeping with the Department's established procedures.

Should the Department require a second appraisal of a parcel previously awarded under this program, the assignment will be offered to the firm that previously submitted the second lowest quotation. If they are unable to accept, the third firm would be engaged. The contracting officer will be the final judge as to assignments and this will be on a case-by-case basis.

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. 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.

Authorization is respectfully requested to enter into contract with the additional firm listed above to complete appraisal assignments for the statewide acquisition program to expire April 17, 2024 as outlined above.

Respectfully,



Victoria F. Sheehan  
Commissioner

VFS/SGL/pfc  
Attachments

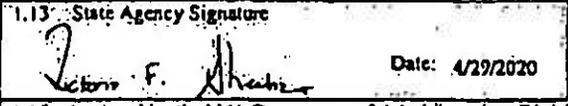
**Notice:** This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

The State of New Hampshire and the Contractor hereby mutually agree as follows:

**GENERAL PROVISIONS**

**I. IDENTIFICATION.**

1.1 State Agency Name <b>DEPARTMENT OF TRANSPORTATION</b>		1.2 State Agency Address <b>PO BOX 483 7 HAZEN DRIVE CONCORD NH 03302</b>	
1.3 Contractor Name <b>MARSHA M. CAMPANELLO dba MMC APPRAISAL SERVICES</b>		1.4 Contractor Address <b>5 PARTRIDGE ROAD CONCORD NH 03301</b>	
1.5 Contractor Phone Number <b>(603) 490-1427</b>	1.6 Account Number <b>317195</b>	1.7 Completion Date <b>April 17, 2024</b>	1.8 Price Limitation <b>\$1,500,000.00*</b>
1.9 Contracting Officer for State Agency <b>VICTORIA F. SHEEHAN, Commissioner</b>		1.10 State Agency Telephone Number <b>603-271-1484</b>	
1.11 Contractor Signature 		1.12 Name and Title of Contractor Signatory <b>Marsha M. Campanello, Principal</b>	
1.13 State Agency Signature  Date: <b>4/29/2020</b>		1.14 Name and Title of State Agency Signatory <b>Victoria Sheehan, Commissioner</b>	
1.15 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.16 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By: <b>Ann B. Jefferson</b> On: <b>4/30/20</b>			
1.17 Approval by the Governor and Executive Council (if applicable) G&C Item number: _____ G&C Meeting Date: _____			

\*Appropriation is in the aggregate, to be shared by all appraisal firms that are part of the Statewide Appraisal Contract.

Contractor Initials **MMC**  
Date **4/1/2020**

**2. SERVICES TO BE PERFORMED.** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform; the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT B which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.17, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.13 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds affected by any state or federal legislative or executive action that reduces, eliminates or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope for Services provided in EXHIBIT B, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT C which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete

compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all applicable statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal employment opportunity laws. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 The Contractor agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

## 8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely cured, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 give the Contractor a written notice specifying the Event of Default and set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both;

8.3. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

## 9. TERMINATION.

9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) days written notice to the Contractor that the State is exercising its option to terminate the Agreement.

9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State's discretion, deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT B. In addition, at the State's discretion, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement.

## 10. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

10.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

10.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

10.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

11. **CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

## 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

12.1 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, a Change of Control shall constitute assignment. "Change of Control" means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

13. **INDEMNIFICATION.** Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omission of the Contractor, or subcontractors; including but not limited to the negligence, reckless or intentional conduct. The State shall not

be liable for any costs incurred by the Contractor arising under this paragraph 13. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

#### 14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 commercial general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate or excess; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 10.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than ten (10) days prior to the expiration date of each insurance policy. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

#### 15. WORKERS' COMPENSATION.

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from the requirements of N.H. RSA chapter 281-A ("*Workers' Compensation*").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. The Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

17. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no such approval is required under the circumstances pursuant to State law, rule or policy.

18. CHOICE OF LAW AND FORUM. This Agreement shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

19. CONFLICTING TERMS. In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

22. SPECIAL PROVISIONS. Additional or modifying provisions set forth in the attached EXHIBIT A are incorporated herein by reference.

23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings with respect to the subject matter hereof.

EXHIBIT A

FACT SERVICES REQUIRED BY THE CONTRACTOR (APPRAISER) ARE:

2.1. The Appraiser covenants and agrees to create and update written appraisal(s) of certain parcel(s) of property and in accordance with "The New Hampshire Department of Transportation Right-of-Way Manual, Appraisal Standards and Reports Section" on file with the Department of Transportation, ("NHDOT") and any amendments thereto, and made a part hereof. All appraisals shall meet the requirements of the New Hampshire Appraisal Board, the Uniform Appraisal Standards for Federal Land Acquisitions, and the Uniform Standards of Professional Appraisal Practice promulgated by The Appraisal Foundation. All appraisals will be submitted in both written and PDF format. The appraiser agrees to respond to any written review of their appraisal by the State's reviewer within 10 working days of receipt. The response will consist of a letter addressing each question asked by the State's reviewer, any corrected pages of the appraisal with the changes highlighted, plus the revised written appraisal.

2.2. The measure of damage to the condemnee(s) is to be estimated by the use of all applicable approaches to value necessary to support the final estimate of the appraiser in accordance with RSA 498-A and the approaches as set forth in the "Appraisal Standards and Reports", above referenced. The use of or the omission of any approach shall be justified as part of the Appraisal Report by the Appraiser. The Appraiser further covenants and agrees that the measure of damage to the condemnee(s) is to be determined by appraising the "Market Value" of the property and/or property interest(s) taken including improvements, if any, before the taking; and the "Market Value" of the remaining property, including improvements and/or property interest(s), if any, after the taking, in light of any environmental contamination, liens, leases, easements, or other encumbrances affecting the market value of the property in the before and after scenarios. The difference, if any, between the two values represents the measure of damages.

2.3. The Appraiser will, if required by the NHDOT, appear before any board or court to justify, testify, and defend their appraisal.

2.4. The Appraiser will refer to the NHDOT Contracting Officer or assignees of the NHDOT Contracting Officer all matters or questions of fact relative to or connected with the appraisal which give rise to dispute, dilemma or ambiguity and which are not clearly spelled out, described and determined by this contract or the standard practices of the profession; and the NHDOT Contracting Officer or assignee shall resolve the question or dispute by written instruction to the Appraiser.

2.5. The report(s) shall not include damages for items generally non-compensable under established State law. Requirements relative to consideration of benefits as outlined in the "Handbook for Highway Land Damage Commissions" revised February 18, 1964, prepared by the Office of the Attorney General, shall be followed. A copy is available for inspection at NHDOT ROW Section.

2.6. The Appraiser will neither perform any appraisal service, nor assist in the same, for the owner of any land or interest therein which has been in any way affected pecuniarily by this project, without prior approval of the NHDOT. This prohibition shall remain in effect until final disposition of all claims arising from the project.

2.7. Appraisal assignment, title, date signed by, are hereby incorporated herein. The policy is available for inspection at NHDOT ROW Section.

2.8. NHDOT fee appraiser selection procedures are hereby incorporated herein. The policy is available for inspection at NHDOT ROW Section.

EXHIBIT B

METHOD AND AMOUNT OF PAYMENT:

5.1.1. The NHDOT agrees to pay the Appraiser the quoted and accepted appraisal fee in accordance with the terms of the appraisal assignment. The Appraiser agrees to receive said sum as full compensation for furnishing all materials and labor which may be required in the preparation of the appraisal under this Contract and the attachments hereto. Payment is to be made by the State on the following basis for all contracts:

(a) Fifty (50%) percent of the quoted fee for each appraisal report upon the delivery of an acceptable appraisal and submission of a bill for the total amount. At the NHDOT's discretion, unacceptable appraisal reports may be returned and no individual payment made until the appraisal report is re-submitted in an acceptable form.

(b) Fifty (50%) percent of the total following review and acceptance by the State Reviewer and concurrence in the acceptance of an adequately documented appraisal report by the U. S. Department of Transportation, or within sixty (60) days after completion of State Review, whichever is sooner.

(c) For each appraisal report which is late, the appraiser will be assessed a penalty of twenty-five (25%) percent of the approved day rate for each work day beyond the agreed upon appraisal completion date until the appraisal report is received.

(d) For appraisal review responses which are late, the appraiser will be assessed a penalty of twenty-five (25%) percent of the approved day rate for each workday beyond the calculated appraisal review response completion date. This date, to be determined by the Chief Right-of-Way Appraiser and identified in each appraisal review sent to the Appraiser, is established in accordance with the Appraisal Report Requirements identified in Exhibit A paragraph (1) of this Contract.

5.1.2. The NHDOT agrees to pay the Appraiser for all expenses incurred for each day or part of a day (\*) that the Appraiser spends at a hearing, pre-trial conference, trial or drafting appraisal update called for by the Attorney General's Office. For any appraisal update that is not completed and submitted within sixty (60) days of when it is

requested by the Attorney General's Office, the Appraiser shall be assessed a penalty of twenty-five (25%) percent of the approved day rate for each work day the update is late.

The NHDOT and the Appraiser mutually agree that in case there may be major changes in the scope or character of the work to be performed under this contract, such changes shall be made in the individual amounts as stated under the "Schedule of Appraisals" by negotiated increases or decreases in said amounts. Or if work is added, such additional amounts as may be required shall be determined by negotiation and payment made at the agreed upon amounts.

(\* ) day or part of day shall include the duration of a hearing, pre-trial conference or trial day.

EXHIBIT B (CONTD.)

(I)/(WE) do hereby agree to submit to the NHDOT complete appraisal reports in accordance with the "Appraisal Standards and Reports", for the following parcels of property for the individual amounts as indicated:

SCHEDULE OF APPRAISALS

<u>Parcel No.</u>	<u>Name of Owner</u>	<u>Type of Taking</u> (Partial or Complete)	<u>Type of Property</u>	<u>Before &amp; After Fee</u>
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N/A

THIS CONTRACT IS FOR THE PREPARATION OF APPRAISAL REPORTS AND RELATED EFFORTS WITHIN THE TIME FRAME SPECIFIED FOR INDIVIDUAL ASSIGNMENTS.

EXHIBIT C

SPECIAL PROVISIONS

**AMEND TO READ:**

12. Notwithstanding the provisions of paragraph 12. of the P37 the Contractor may hire a subcontractor to perform services under this contract with the prior written consent of the state including persons who have contractual agreements with the State.
- 14.1.1 Commercial or comprehensive general liability insurance against all claims of bodily injury, death or property damage, in policy amounts of not less than \$250,000 per claim and \$1,000,000 per aggregate; (State to be named as an additional insured); and
- 14.1.2 Comprehensive automobile liability insurance covering all motor vehicles, including owned, hired, borrowed and non-owned vehicles, for all claims of bodily injury, death or property damage, in policy amounts of not less than \$100,000 combined single limit; and
- 14.1.3 Professional liability (errors and omissions) insurance coverage of not less than \$500,000 per occurrence and \$500,000 per aggregate. If coverage is claims made, the period to report claims shall extend for not less than three years from the date of substantial completion of the construction contract. No retention (deductible) shall be more than \$25,000; and
- 14.1.4 Workers' compensation and employer's liability insurance as required by law.

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 MMC APPRAISAL SERVICES is a New Hampshire Trade Name registered to transact business in New Hampshire on April 24, 2019. 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: 818629

Certificate Number: 0004877649



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 1st day of April A.D. 2020.

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner  
Secretary of State

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## MMC APPRAISAL SERVICES

5 Partridge Road  
Concord, NH 03301  
Telephone (603) 490-1427

March 27, 2020

Paul F. Coddington, JD  
Chief of Administration  
Bureau of Right-of-Way  
NH Department of Transportation  
John O. Morton Building  
7 Hazen Drive, Room 100  
Concord, NH 03302-0483

Re: Marsha M. Campaniello  
DBA MMC Appraisal Services

Dear Paul,

Per your request, I am submitting this letter identifying my business as a sole proprietorship and therefore it is not necessary for me to submit a Certificate of Vote authorizing the company to bid on contracts with the state.

Regards,



Marsha Campaniello  
Owner  
MMC Appraisal Services

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Policy Number: MWH00001020508  
 Billing Type: 4 Pay

More Than Just Insurance.  
**Plymouth Rock**  
 Insurance

Homeowners Policy Declarations Page  
 Form 6288 (02-08)

Amendment Declarations Page for policy number: MWH00001020508  
 Reason: effective 06/26/2019.

Policy Period: 05/23/2019 to 05/23/2020 12:01 a.m. standard time at the insured property location.

Named Insured(s) Mailing Address	Insured Property Location	Broker/Agent
MARSHA CAMPANELLO 5 PARTRIDGE RD CONCORD, NH 03301	5 PARTRIDGE RD CONCORD, NH 03301	BELLOWS-NICHOLS AGENCY, INC. PO BOX 299 PETERBOROUGH, NH 03458 (603) 924-7155

Deductible: \$1,000.00 In case of Loss under Section I, we cover only that part of the loss over the deductible stated.

Credits: You qualify for the discounts listed below:

LOSS FREE CREDIT	DEDUCTIBLE ADJUSTMENT
PREMISES ALARM/FIRE PROTECTION - PROTECTIVE DEVICES	
*These discounts are included in your policy premium	

Coverage	Coverage Limit	Premium
<b>Section I - Property</b>		
COVERAGE A - DWELLING	\$293,000	\$630.00
COVERAGE B - OTHER STRUCTURES	\$28,224	Included
COVERAGE C - PERSONAL PROPERTY	\$205,000	Included
COVERAGE D - LOSS OF USE	\$59,000	\$2.00
<b>Section II - Liability</b>		
COVERAGE E - PERSONAL LIABILITY	\$500,000	Included
COVERAGE F - MEDICAL PAYMENTS COVERAGE	\$5,000	Included
<b>Additional Coverages</b>		
IDENTITY THEFT RESOLUTION SERVICE, MW-06 11/2009		Included
LIMITED FUNGI, WET OR DRY ROT, OR BACTERIA COVERAGE, HO-04 31 04/2002		Included
IDENTITY FRAUD, HO-04 55 03/2003		\$35.00
INFLATION GUARD, MW-243 04/1984		Included
ADDITIONAL INSURED: RESIDENCE PREMISES, MW-41 04/1984		Included
WORKERS COMPENSATION AND EMPLOYERS LIABILITY COVERAGE, MW-90 04/1984		\$3.00
<b>Total Annual Premium</b>		<b>\$670.00</b>

Date Processed: 07/02/2018

NH Home 501 12 14



# CERTIFICATE OF LIABILITY INSURANCE

DATE (mm/dd/yyyy)  
04/01/2020

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> LIA ADMINISTRATORS & INS SERVICES 72255332 PO BOX 1319 SANTA BARBARA CA 931021319	<b>CONTACT NAME:</b> PHONE (800) 334-0652 <small>(A/C, No. Ext.)</small>		FAX (805) 962-0652 <small>(A/C, No.)</small>
	<b>E-MAIL ADDRESS:</b> INSURER(S) AFFORDING COVERAGE: Hartford Underwriters Insurance Company RACR 30104		
<b>INSURED:</b> MARSHA M. CAMPANELLO DBA MMC APPRAISAL SERVICES 5 PARTRIDGE RD CONCORD NH 03301-7886	INSURER A:		
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

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.

LINE LTR	TYPE OF INSURANCE	ADDL RLS	SUMM PAID	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"/> General Liability GENTL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	X		72 SBM AF9NJT	03/27/2020	03/27/2021	EACH OCCURRENCE \$500,000 DAMAGE TO RENTED PREMISES (if a contract) MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$500,000 GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMPROP ADD \$1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HOLED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (if a contract) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE 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						PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
A	Data Breach - Defense & Lib Covg			72 SBM AF9NJT	03/27/2020	03/27/2021	Limit \$50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Those usual to the Insured's Operations.

<b>CERTIFICATE HOLDER</b> State of New Hampshire 7 HAZEN DR CONCORD NH 03301-6502	<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 <i>Susan S. Costaroda</i>
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THE HARTFORD  
BUSINESS SERVICE CENTER  
3600 WISEMAN BLVD  
SAN ANTONIO TX 78251

April 1, 2020

MARSHA M. CAMPANELLO  
5 PARTRIDGE RD  
CONCORD NH 03301

**Policy Information:**

<b>Policy Number:</b>	72 SBM AF9NJT
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**Contact Us**

Business Service Center  
Business Hours: Monday - Friday  
(7AM - 7PM Central Standard Time)  
Phone: (866) 467-8730  
Fax: (888) 443-6112  
Email: [agency.services@thehartford.com](mailto:agency.services@thehartford.com)  
Website: <https://business.thehartford.com>

Enclosed please find information pertaining to your policy. Please contact us if you have any questions or concerns.

Thank you for selecting The Hartford for your business insurance needs.

Sincerely,

Your Hartford Service Team

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.



## ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:  
**BUSINESS LIABILITY COVERAGE FORM**

Except as otherwise stated in this endorsement, the terms and conditions of the Policy apply.

**A. The following is added to Section C. WHO IS AN INSURED:**

**Designated Person Or Organization**

- a. The person(s) or organization(s) shown in the Declarations as Additional Insured – Designated Person Or Organization is also an additional insured, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
  - (1) In the performance of your ongoing operations; or
  - (2) In connection with your premises owned by or rented to you.
- b. If coverage provided to these additional insureds is required by a written contract or written agreement, or when required by a written permit issued by a state or governmental agency or subdivision or political subdivision, the insurance afforded to these additional insureds will not be broader than that which you are required by the contract, agreement, or permit to provide for these additional insureds.
- c. The insurance afforded to these additional insureds only applies to the extent permitted by law.

**B. With respect to the insurance afforded such additional insured(s) by this endorsement, the following additional exclusion is added to Section B. EXCLUSIONS:**

This insurance does not apply to "bodily injury" or "property damage" included within the "products-completed operations hazard".



# Policy Change: Business Owner's Policy

Policy Number: 72 SBM AF9NJT

Policy Period: 03/27/2020 to 03/27/2021

**Named Insured and Mailing Address:**

Marsha M. Campaniello,  
MMC APPRAISAL SERVICES,  
5 PARTRIDGE RD,  
CONCORD, NH 03301-7886

Policy Change Number: 1

Policy Change Effective Date: 04/14/2020,  
Effective hour is the same as stated in the  
Declarations Page of the Policy.

**Coverage Parts Affected:**

Common  
Liability

**Insurer:**

Hartford Underwriters Insurance Company, a  
property and casualty company of The  
Hartford

One Hartford Plaza, Hartford, CT 06155

**Name of Agent/Broker:**

LIA ADMINISTRATORS & INS SERVICES  
PO BOX 1319  
SANTA BARBARA, CA 931021319

Code: 72255332

This is NOT a bill. However, any changes in your premium will be reflected in your next billing statement. You will receive a separate bill from The Hartford. If you are enrolled in repetitive EFT draws from your bank account, changes in premium will change future draw amounts.

As a result of the changes described herein, there is an additional premium in the amount of **\$22**.

\*Price is subject to fees and surcharges

Countersigned by:

*Susan O. Castaneda*

04/14/2020

Authorized Representative

Date



# Policy Change: Business Owner's Policy

Policy is amended to add the following Endorsement Forms reflecting the changes made to your policy.

FORM NUMBER	FORM NAME	COVERAGE PART
SC 00 06 10 18	POLICY CHANGE	Common
SL 30 42 10 18	ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION	Liability

The following Additional Insured has been added as an Additional Insured - Designated Person or Organization.

Additional Insured Name
State of New Hampshire Department of Transportation ..

Premium associated with this Policy Change has pro rate factor 0.950.



**LIA Administrators & Insurance Services**



**APPRAISAL, VALUATION AND PROPERTY SERVICES -  
PROFESSIONAL LIABILITY INSURANCE POLICY**

**DECLARATIONS - NEW HAMPSHIRE**

**Aspen American Insurance Company**

(Referred to below as the "Company")

590 Madison Avenue, 7th Floor  
New York, NY 10022  
877-245-3510

Date Issued	Policy Number	Previous Policy Number
3/31/2020	AAJ010071-01	

THIS IS A CLAIMS MADE AND REPORTED POLICY. COVERAGE IS LIMITED TO LIABILITY FOR ONLY THOSE CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD AND THEN REPORTED TO THE COMPANY IN WRITING NO LATER THAN SIXTY (60) DAYS AFTER EXPIRATION OR TERMINATION OF THIS POLICY, OR DURING THE EXTENDED REPORTING PERIOD, IF APPLICABLE, FOR A WRONGFUL ACT COMMITTED ON OR AFTER THE RETROACTIVE DATE AND BEFORE THE END OF THE POLICY PERIOD. PLEASE READ THE POLICY CAREFULLY.

1.	Customer ID: 170611 Named Insured: NMC APPRAISAL SERVICES Martha M. Campaieldo 5 Partridge Rd Concord, NH 03301	
2.	Policy Period: From: 03/27/2020 To: 03/27/2021 12:01 A.M. Standard Time at the address stated in 1. above.	
3.	Deductible: \$1000 Each Claim	
4.	Retroactive Date: 03/27/2020	
5.	Inception Date: 03/27/2020	
6.	Limits of Liability: A. \$500,000 Each Claim B. \$500,000 Aggregate  Subpoena Response: \$5,000 Supplemental Payment Coverage Pre-Claim Assistance: \$5,000 Supplemental Payment Coverage Disciplinary Proceeding: \$7,500 Supplemental Payment Coverage Loss of Earnings: \$500 per day Supplemental Payment Coverage	

7. Covered Professional Services (as defined in the Policy and/or by Endorsement):		
Real Estate Appraisal and Valuation:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Residential Property:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Commercial Property:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Bodily Injury and Property Damage Caused During Appraisal Inspection (\$100,000 Sub-Limit):	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/> (if "yes", added by endorsement)
Right of Way Agent and Relocation:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Machinery and Equipment Valuation:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Personal Property Appraisal:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/> (if "yes", added by endorsement)
Real Estate Sales/Brokerage:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/> (if "yes", added by endorsement)

8.	Report Claims to: LIA Administrators & Insurance Services, 800-334-0652, P.O. Box 1319, 1600 Anacapa St, Santa Barbara, California 93101
9.	Annual Premium: \$871.00
10.	Forms attached at issue: LIA002 (04/19) LIA NH (09/19) LIA012 (05/19) LIA122 (05/19) LIA164 (05/19)

This Declaration Page, together with the completed and signed Policy Application including all attachments and exhibits thereto, and the Policy shall constitute the contract between the Named Insured and the Company.

03/31/2020

Date



By

Authorized Representative

Product Information

LIA Administrators & Insurance Services

Name of Authorized Agent/Broker: Robert C. Wilky

Address: 1600 Anacapa Street Santa Barbara, CA 93101

**Appraisal, Valuation and Property  
Services Professional Liability Insurance Policy**

Named Insured: MMC APPRAISAL SERVICES  
Martha M. Campanello

Policy Number: AA1010071-01  
Effective Date: 03/27/2020  
Customer ID: 170611

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL COVERED PROFESSIONALS ENDORSEMENT**

In consideration of the premium charged, it is agreed that Section IV. DEFINITIONS (1) "Insured" is amended to include:

"Insured" means:

The persons identified below, but only while acting on behalf of the Named Insured:

Name	Coverage Effective Date
Martha M. Campanello	03/27/2020

All other terms, conditions, and exclusions of this Policy remain unchanged.

BELLOWS-NICHOLS AGCY  
 PO BOX 299  
 PETERBOROUGH, NH 03458

**PROGRESSIVE**  
 AUTO

MARSHA CAMPANELLO  
 S PARTRIDGE RD  
 CONCORD, NH 03301

Policy Number: 31626851  
 Underwritten by:  
 Progressive Northern Insurance Co  
 March 27, 2020  
 Policy Period: Dec 16, 2019 - Dec 16, 2020  
 Page 1 of 2

1-603-924-7155  
 BELLOWS-NICHOLS AGCY  
 Contact your agent for personalized service.

progressiveagent.com  
 Online Service  
 Make payments, check billing activity, update  
 policy information or check status of a claim.

1-800-274-4499  
 To report a claim.

## Auto Insurance Coverage Summary

This is a copy of your  
 Declarations Page

Your coverage began on December 16, 2019 at 12:01 a.m. This policy expires on December 16, 2020 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy contract is form 9611A NH (12/15). The contract is modified by form A233 NH (03/17).

### Drivers and resident relatives

	Date of birth	Gender	Marital status
Marsha Campanello	May 12, 1952	Female	Single
Additional Information:	Named Insured, rated		

### Outline of coverage

2017 TOYOTA PRIUS 4 DOOR SEDAN  
 VIN: JTDKARFUJH3535273  
 Garaging ZIP Code: 03301 Territory: 28  
 Primary use of the vehicle: Commute  
 Length of vehicle ownership when policy started or vehicle added: At least 1 month but less than 1 year  
 This vehicle is currently enrolled in the Snapshot<sup>SM</sup> Program.

	Units	Deductible	Premium
Liability To Others:			\$199
Bodily Injury and Property Damage Liability	\$500,000 combined single limit each accident		
Uninsured/Underinsured Motorist	\$500,000 combined single limit each accident		18
Medical Payments:	\$10,000 each person		20
Comprehensive	Actual Cash Value	\$100	33
Collision	Actual Cash Value	\$500	206
Rental Reimbursement	up to \$40 each day/maximum 30 days		18
Roadside Assistance			10
<b>Total 12 month policy premium</b>			<b>\$504.00</b>

### Premium discounts

Policy	
31626851	Five-Year Accident Free, Five-Year Claim Free, Home Owner, Continuous Insurance: Diamond, Paperless, Paid In Full and Three-Year Safe Driving

Vehicle  
2017 TOYOTA Smart Technology Discount and Snapshot Driving  
PRIUS

Smart Technology Discount<sup>SM</sup> is a service mark of Progressive Casualty Ins. Co.

**Company officers**



Secretary

**For company use only**

Year	Make	Model	VIN	Make	Model	Style	Auxiliary
2017	TOYOTA	PRIUS	JTDKARFU3H3535273	TY	PR	44	XX

REAL ESTATE APPRAISAL QUALIFICATIONS  
OF  
MARSHA M. CAMPANIELLO

License

State of New Hampshire

Certified General Appraiser  
(#NHCG-675)

Education:

Real Estate Appraisal courses completed and exams passed:

Basics of Real Estate Appraisal (AC 110)  
Appraisal Procedures (AC 120)  
Uniform Standards of Professional Appraisal Practice  
Appraising Income Properties  
Advanced Income Property Appraising  
Advanced Issues in Appraising  
GIS Applications for Real Estate Appraisers  
Analyzing Operating Expenses  
Federal Land Acquisition Appraising  
Subdivision Valuation

As of the date of this report, I, Marsha M. Campaniello, have completed the requirements under the continuing education program as required for NH Certified General Appraiser.

University of New Hampshire  
Durham, New Hampshire  
Field of Study: Social Psychology

Keene State College  
Keene, New Hampshire  
Field of Study: Microeconomics

Professional Experience:

2020 - Present	MMC APPRAISAL SERVICES Concord, NH
2002 - 2020	MMC APPRAISAL SERVICES, affiliated with FREMEAU APPRAISAL, INC. Manchester, New Hampshire
1994 - 2002	EASTPOINT TECHNOLOGIES, LLC Bedford, New Hampshire
1991 - 1994	CHITTENDEN BANK Putney, Vermont
1990 - 1991	COMPUTER & NETWORK SERVICES and DESKTOP EXPRESSIONS Peterborough, New Hampshire
1990	JOHN BROWN LIMITED, INC. Peterborough, New Hampshire

Professional Experience (Cont'd):

1983 - 1990

GRANITE BANK  
Peterborough, New Hampshire

1975 - 1977

KIEL AND FREEMAN, ATTORNEYS AT LAW  
Springfield, Vermont

Affiliations

2006 - Present

Investment Real Estate Roundtable - Member

Qualified Expert Witness (Testimony & Depositions)

- Hillsborough County Superior Court
  - o Roberts, et al v. Roberts, et al - Mediation Expert Witness
- Merrimack County Family Court
  - o Sanborn and Bart - Court Testimony
- Merrimack County Superior Court
  - o So. NH University v. Altenburg, et al - Mediation Expert Witness
  - o Mulligan v. Town of Henniker - Court Testimony
- Middlesex County (Mass.) Superior Court
  - o Levesque, et al v. Dram Cup Hill, Inc. et al - Court Testimony
- Mediation re: Tax Abatement
  - o Smokestack Realty LLC v. City of Concord - Expert Witness
  - o American Fences, Inc. v. Town of Hooksett - Expert Witness
- Rockingham County Probate Court - Petition to Partition
  - o Dawson v. Dawson - Settlement Proceedings; Expert Witness
- Zoning Board of Adjustment - Hearing Testimony
  - o Aquarion Water Co/Eversource v. Town of Hampton
  - o US Cellular v. Town of North Hampton
  - o Industrial Communications v. Town of Epping
  - o Industrial Communications v. Town of East Kingston
- NH Board of Tax and Land Appeals
  - o KGI Gorham, LLC v. Town of Gorham - Hearing Testimony
  - o Palm Square, LLC v. State of NH DOT - Hearing Testimony
  - o Hinsdale Real Estate Development Inc. v. Town of Hinsdale - Hearing Testimony
  - o State of NH v. Rosewood Estates Assoc., Inc., et al - Hearing Testimony
  - o State of NH v. Labonte Revocable Trust of 2011, et al - Hearing Testimony & Expert Witness
  - o State of NH v. Labonte Investment Realty, LLC - Hearing Testimony & Expert Witness
- Deposition Re: Tax Abatement
  - o NH Sportsplex v. Town of Bedford
- US District Court (NH)
  - o US Cellular v. Town of Bow - Declaration for Plaintiff

# State of New Hampshire

REAL ESTATE APPRAISER BOARD

APPROVED TO PRACTICE AS A

CERTIFIED GENERAL APPRAISER

ISSUED TO: MARSHA M CAMPANIELLO



Certificate No: NHCG-675

EXPIRATION DATE: 05/31/2021

# State of New Hampshire

REAL ESTATE APPRAISER BOARD

APPROVED TO PRACTICE AS A

Certified General Appraiser

ISSUED TO: MARSHA M CAMPANIELLO



Certificate No:  
NHCG-675

EXPIRATION DATE:  
05/31/2021

For additional information please contact the Board office at [calleen.giffin@opic.nh.gov](mailto:calleen.giffin@opic.nh.gov) or visit our web site at <http://www.opic.nh.gov/real-estate-appraisers/index.htm>

## MMC APPRAISAL SERVICES

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5 Partridge Road  
Concord, NH 03301  
Telephone (603) 490-1427

April 1, 2020

Paul F. Coddington, JD  
Chief of Administration  
Bureau of Right-of-Way  
NH Department of Transportation  
John O. Morton Building  
7 Hazen Drive, Room 100  
Concord, NH 03302-0483

Re: Marsha M. Campaniello  
DBA MMC Appraisal Services

Dear Paul,

Please accept this as my letter of interest in becoming a vendor for the State of New Hampshire in my capacity as a real estate appraiser under the name MMC Appraisal Services.

Per your request, I am sending to you via email the following documents:

- Secretary of State - Certificate of Good Standing
- Comprehensive General Liability Policy - Declaration showing State of NH as additional insured
- Current declaration page for automobile insurance
- Homeowner's insurance policy showing Workmen's Comp endorsement
  - Although, it is my understanding that, as a sole proprietor, the Workmen's Comp insurance is not required
- Professional Liability (E&O) declaration
- Sole Proprietor letter re: waiver of vote

In addition, following are statements in fulfillment of information requirements:

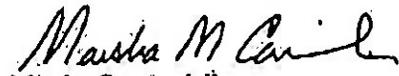
1. "I am not currently under suspension, debarment, voluntary exclusion or determination of ineligibility by any Federal Agency. I have not been suspended, debarred, voluntarily excluded or determined ineligible by any Federal Agency within the last three (3) years. Neither do I have a proposed debarment pending, and have not been indicted, convicted, or have had a civil judgement rendered against me by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three (3) years." My signature below serves as my attestation to this statement.
-

2. Per diem rate for Marsha M. Campaniello is \$1,600;

Please let me know if there are any questions or concerns.

I look forward to receiving a signed contract with the State.

Regards,



Marsha Campaniello

NHCO-675

MMC Appraisal Services, Owner



Victoria P. Sheehan  
Commissioner

THE STATE OF NEW HAMPSHIRE  
DEPARTMENT OF TRANSPORTATION

APR08'19 PM 1:30 DRS



William Cass, P.E.  
Assistant Commissioner

44A

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

Bureau of Right-of-Way  
March 14, 2019

REQUESTED ACTION

The New Hampshire Department of Transportation requests authorization to enter into contracts with eight appraisal firms to prepare appraisals for property needed for transportation projects, for a total contract cost not to exceed \$1,500,000.00 over a period of five years. The contracts will become effective from the date of Governor and Council approval through April 17, 2024. Proposed funding is 91.7% Federal Funds, 7.3% Turnpike Funds, 1.0% Highway Funds.

These contracts will be funded from monies allocated to specific transportation projects from one of the accounts indicated below.

Funding is available as follows for FY 2019 and is contingent upon the availability and continued appropriation of FY 2020 through FY 2024, with the ability to adjust encumbrances through the Budget Office between State Fiscal Years if needed and justified:

	2019	2020	2021	2022	2023	2024
04-096-096-963515-3054 Consolidated Federal Aid 046-500464 General Consultants Non-Benefit	\$125,000	\$375,000	\$275,000	\$225,000	\$225,000	\$150,000
04-096-096-961017-7507 Central NH Turnpikes 046-500464 General Consultants Non-Benefit	\$5,000	\$20,000	\$25,000	\$25,000	\$25,000	\$10,000
04-096-096-963015-3049 Non-Participating 046-500464 General Consultants Non-Benefit	\$2,000	\$3,000	\$3,000	\$3,000	\$2,000	\$2,000

## EXPLANATION

The purpose of this request is the authorization of the Department of Transportation entrance into contracts with eight appraisal firms to be available to complete appraisal assignments associated with property acquisitions needed for transportation projects. Appraisals are typically required to establish values for purchasing property and property rights affected by transportation improvements. In addition, second appraisals are needed for properties with an acquisition cost of over \$1,000,000.00 due to Federal requirements. Requests for second appraisals may also come from the Department's Review Appraiser, the Governor and Council or the Highway Layout Commissions. Occasionally, due to the lack of comparable sales data, there are requests for third appraisals.

If contract approval of the firms proposed is forthcoming, individual approval assignments will be allocated through a low bid process as described below. The process allows the Department to respond quickly and efficiently to project schedules, as well as to the needs of affected property owners who are usually anxious to see the resolution of individual property issues. The process has been in place for the past fifteen years and has worked well.

The Department solicited proposals for this contract on November 16, 2018 and eight firms indicated an interest in this program, and submitted information regarding their experience and qualifications. The Bureau's Pre-Qualification Committee reviewed the information and recommended the eight firms to be participants. They are:

- Bergeon Commercial Appraisal Co. of Portsmouth, New Hampshire  
Vendor #150493
- Capital Appraisal Associates, Inc. of Concord, New Hampshire,  
Vendor #156083
- Colliers International Valuation and Advisory Services, LLC of Boston, MA  
Vendor #265746
- Fremson Appraisal, Inc. of Manchester, New Hampshire  
Vendor #156812
- J. Chel Rogers, LLC of Hollis, New Hampshire  
Vendor #259227
- Leidinger Appraisals of Canterbury, New Hampshire  
Vendor #160125
- McManus & Nault Appraisal Co, Inc. of Bow, New Hampshire  
Vendor #164307
- Shurtlett Appraisal Assoc., Inc. of Hampstead, New Hampshire  
Vendor #155924

With Governor and Council approval, these eight firms will serve as a pool of appraisers to provide appraisal services on an as-needed basis. When an appraisal is required, the firms listed above will be reviewed relative to the scope of the assignment, their capacity to perform in a timely fashion, quality of work, experience, and their overall suitability for the assignment. The firms felt to be best qualified for the assignment will be contacted and asked for a fee quotation. They will be informed of the required completion details and date, and the firm submitting the lowest fee quotation meeting the completion date will be notified to proceed. The selection process is in keeping with the Department's established procedures.

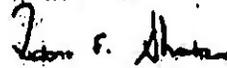
Should the Department require a second appraisal of a parcel for which appraisal services were previously utilized under this program, the assignment will be offered to the firm that previously submitted the second lowest quotation. If they are unable to accept, the third firm would be engaged.

For the Federal Funds portion, funding is 80% Federal Funds with 20% state match. Tumpike toll credit is being utilized for match requirements, effectively using 100% Federal Funds.

The agreements were approved by the Attorney General as to form and execution, and the Department has certified that the necessary funds are available. Copies of the fully executed contracts are on file at the Secretary of State's Office and the Department of Administrative Services. Subsequent to Governor and Council approval the contracts will be on file at the Department of Transportation.

Authorization is respectfully requested to enter into multi-vendor appraisal contracts with the proposed eight appraisal firms listed above.

Respectfully,



Victoria F. Shoehan  
Commissioner

VFS/SGL/pfc  
Attachments

**Notice:** This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

The State of New Hampshire and the Contractor hereby mutually agree as follows:

**GENERAL PROVISIONS**

<b>1. IDENTIFICATION:</b>			
1.1 State Agency Name <b>DEPARTMENT OF TRANSPORTATION</b>		1.2 State Agency Address <b>P.O. BOX 483, 7 HAZEN DRIVE, CONCORD NH 03301</b>	
1.3 Contractor Name <b>Bergson Commercial Appraisal (Vendor #150493)</b>		1.4 Contractor Address <b>487 State Street Portsmouth NH 03801</b>	
1.5 Contractor Phone Number <b>603-436-3009</b>	1.6 Account Number <b>015-096-3654-046-0464 or 017-096-7507-046-0464</b>	1.7 Completion Date <b>5 YEARS AFTER G&amp;C APPROVAL</b>	1.8 Price Limitation <b>\$1,500,000.00*</b>
1.9 Contracting Officer for State Agency <b>VICTORIA F. SHEEHAN, Commissioner</b>		1.10 State Agency Telephone Number <b>603-271-1484</b>	
1.11 Contractor Signature 		1.12 Name and Title of Contractor Signatory <b>Steven J. Bergson Principal</b>	
1.13 Acknowledgement: State of <u><b>NH</b></u> , County of <u><b>Dorchester</b></u> On <u><b>Dec 19, 2017</b></u> , before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
1.13.1 Signature of Notary Public or Justice of the Peace  (Seal)		<div style="border: 1px solid black; padding: 5px;"> <b>Brandon J. Sheldon</b>                      Notary Public, State of New Hampshire                      My Commission Expires Dec 03, 2019                 </div>	
1.13.2 Name and Title of Notary Public or Justice of the Peace <b>Brandon Sheldon Notary</b>			
1.14 State Agency Signature  Date: <b>2/26/19</b>		1.15 Name and Title of State Agency Signatory <b>William Cass, Asst. Commissioner</b>	
1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.17 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By: <b>Dr. Emily C. Haug</b> On: <b>4/1/19</b>			
1.18 Approval by the Governor and Executive Council (if applicable) By: _____ On: _____			

Appropriation is in the aggregate, to be shared by all appraisal firms that are part of the Statewide Appraisal Contract.

**2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED:** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**  
3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.4, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**  
Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.  
5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. This may include the requirements to utilize auxiliary aids and services to ensure that persons with communication disabilities, including vision, hearing and speech, can communicate with, receive information from, and convey information to the Contractor. In addition, the Contractor shall comply with all applicable copyright laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this

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Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

#### 8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

#### 9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulas, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

10. **TERMINATION.** In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, so and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

11. **CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

12. **ASSIGNMENT/DELEGATION/SUBCONTRACTS.** The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written notice and consent of the State.

13. **INDEMNIFICATION.** The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

#### 14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

Contractor Initials 

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14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9; or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than thirty (30) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than thirty (30) days prior written notice of cancellation or modification of the policy.

**15. WORKERS' COMPENSATION:**

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with and exempts from, the requirements of N.H. RSA chapter 281-A (*Workers' Compensation*).

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

**16. WAIVER OF BREACH.** No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

**17. NOTICE.** Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

**18. AMENDMENT.** This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no

such approval is required under the circumstances pursuant to State law, rule or policy.

**19. CONSTRUCTION OF AGREEMENT AND TERMS.**

This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

**20. THIRD PARTIES.** The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

**21. HEADINGS.** The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

**22. SPECIAL PROVISIONS.** Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.

**23. SEVERABILITY.** In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

**24. ENTIRE AGREEMENT.** This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.

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