THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION

50

William Cass, P.E.
Commissioner

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

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

Bureau of Construction
June 24, 2024

REQUESTED ACTION

1. Authorize the Department of Transportation to enter into a contract with K5 Corporation (Vendor 162024) of Rockland, MA, on the basis of a low bid of $1,554,500.25 for the construction of permanent grooved pavement markings on three (3) sections of Tier 1 and 2 roadways in Woodstock-Lincoln, Hooksett-Manchester, Hillsborough and Hopkinton (Project: Statewide Durables 2024 #44755), from the date of Governor and Council approval through July 25, 2025, unless amended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Funding is available in State Fiscal Year 2025 as follows:

Funding is available as follows:	FY 2025
04-96-96-963515-3054	
Consolidated Federal Aid	
400-500870 Highway Contract Payments	$1,554,500.25

2. Further authorize that a contingency in the amount of $77,725.01 be approved for payment of latent conditions, which may appear during the construction of the project. The contingency requested is 5% of the contract amount.

Funding is available as follows:	FY 2025
04-96-96-963515-3054	
Consolidated Federal Aid	
400-500870 Highway Contract Payments	$77,725.01

EXPLANATION

This project is part of the State's Ten-Year Transportation Improvement Plan, under the Highway Safety Improvement Program (HSIP). The project constructs permanent grooved pavement markings (durable polyurea) along Tier 1 and 2 roadways within three (3) sections; I-93 in Woodstock-Lincoln, I-93 Southbound in Hooksett-Manchester between the I-293 junctions, and US 202 from Hillsborough at NH 31 to Hopkinton at the I-89 SB on ramp. Ramps are included on each section. This project has a total length of 50.2 miles located within Districts 1, 3, 4, and 5.

This project will install polyurea pavement makings along 50.2 miles of Tier 1 and 2 roadways, providing improved visibility under nighttime and wet conditions. These markings will also reduce the number of annual pavement striping efforts that are typically necessary by the NHDOT Bureau of Traffic to maintain the markings on these facilities, thereby reducing the temporary impact to traffic and improving public safety.

The proposed contingency amount is 5% of the contract amount. This is to account for quantity calculations that are based on aerial and street view photography as well as risk associated with the unknown extent of unanticipated traffic control needs.

The Contractor has been prequalified by this Department. The Contract has been approved by the Attorney General as to form and execution, and the Department has certified that the necessary funds are available and the bid reasonably conforms to the engineer's estimate in accordance with State procedure. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Service's Office, and subsequent to Governor and Council approval will be on file at the Department of Transportation.

This project funding is: 100% Federal funds (Highway Safety Improvement Program (HSIP)).

A copy of the Tabulation of Bids received for this project is attached along with the Contract Supplemental Sheet and a map indicating the location of the project.

Your approval of this resolution is respectfully requested.

Sincerely,

William J. Cass, P.E.
Commissioner

WJC/pcj

Department Estimate:	$2,167,140.00
Contract Amount:	$1,554,500.25
Under Estimate:	$ 612,639.75

Attachments

New Hampshire DOT
Department of Transportation

ABC Bid Data

STATEWIDE DURABLES 2024
44755
X-A005(567)

PROJECT:	STATEWIDE DURABLES 2024	**Awarded To:**	K5 CORPORATION 9 ROCKVIEW WAY ROCKLAND, MA 02370		
STATE PROJECT NUMBER:	44755				
FED. PROJECT NUMBER:	X-A005(567)				
DATE BIDS OPEN:	June 13, 2024, 2:00				
SCOPE OF WORK:	Durable pavement markings	**Amount:**	$1,554,500.25	**Certified by:**	WILLIAM.J.OLDENBURG Director of Project Development
COMPLETION DATE:	July 25, 2025	**Award Date:**			
LOCATION:	Grafton, Merrimack, District 1, Hillsborough, District 3, District 5, District 4				

Summary of Bidders

Contractor	Bid Amount	Rank
K5 CORPORATION 9 ROCKVIEW WAY, ROCKLAND MA 02370	$1,554,500.25	A
L & D SAFETY MARKING CORP 304 EAST MONTPELIER RD, BARRE VT 05641-8373	$1,899,914.75	B
ROADSAFE TRAFFIC SYSTEMS INC 55 Bodwell St., AVON MA 02322	$2,385,184.50	C

ABC Bid Data

STATEWIDE DURABLES 2024

44755

X-A005(567)

Item No.	Description	Unit	Quantity	PSAE Unit Price	PSAE Total	K5 CORPORATION 8 ROCKVIEW WAY ROCKLAND, MA 02370 Unit Price	K5 CORPORATION Total	L & D SAFETY MARKING CORP 304 EAST MONTPELIER RD BARRE, VT 05641-8373 Unit Price	L & D SAFETY MARKING CORP Total
Items									
618.61	UNIFORMED OFFICERS WITH VEHICLE	$	40,000.00	$1.00	$40,000.00	$1.00	$40,000.00	$1.00	$40,000.00
618.7	FLAGGERS	HR	500.00	$53.47	$26,735.00	$18.00	$9,000.00	$30.00	$15,000.00
619.1	MAINTENANCE OF TRAFFIC	U	1.00	$215,000.00	$215,000.00	$38,500.00	$38,500.00	$140,000.00	$140,000.00
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.00	$2,000.00	$4,000.00	$1,000.00	$2,000.00	$2,000.00	$4,000.00
619.279	AUTOMATED TRAILER-MOUNTED SPEED LIMIT SIGN	U	4.00	$2,000.00	$8,000.00	$1,000.00	$4,000.00	$3,000.00	$12,000.00
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.00	$4,000.00	$8,000.00	$1,000.00	$2,000.00	$1,500.00	$3,000.00
632.71204	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 4" LINE	LF	245.00	$1.60	$392.00	$1.45	$355.25	$1.55	$379.75
632.71206	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 6" LINE	LF	656,100.00	$1.70	$1,132,370.00	$1.45	$965,845.00	$1.65	$1,099,065.00
632.71208	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 8" LINE	LF	240.00	$3.60	$864.00	$2.00	$480.00	$3.00	$720.00
632.71212	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 12" LINE	LF	31,430.00	$3.30	$103,719.00	$3.00	$94,290.00	$4.00	$125,720.00
692.	MOBILIZATION	U	1.00	$243,030.00	$243,030.00	$13,000.00	$13,000.00	$75,000.00	$75,000.00
1008.61	ALTER. AND ADD. AS NEEDED - RETROREFLECTOMETER (SALVAGE TO DEPT.)	$	366,030.00	$1.00	$366,030.00	$1.00	$366,030.00	$1.00	$366,030.00
1010.15	FUEL ADJUSTMENT	$	19,000.00	$1.00	$19,000.00	$1.00	$19,000.00	$1.00	$19,000.00
			Totals:		$2,187,140.00		$1,554,500.25		$1,899,914.75
			Alt. Totals:						
			Totals:		$2,187,140.00		$1,554,500.25		$1,899,914.75

ABC Bid Data

STATEWIDE DURABLES 2024

44755

X-A005(567)

Item No.	Description	Unit	Quantity	PS&E Unit Price	PS&E Total	ROADSAFE TRAFFIC SYSTEMS INC 55 Bodwell St. Avon, MA 02322 Unit Price	ROADSAFE TRAFFIC SYSTEMS INC Total	Unit Price	Total
Items									
618.61	UNIFORMED OFFICERS WITH VEHICLE	$	40,000.00	$1.00	$40,000.00	$1.00	$40,000.00		
618.7	FLAGGERS	HR	500.00	$53.47	$26,735.00	$120.00	$60,000.00		
619.1	MAINTENANCE OF TRAFFIC	U	1.00	$215,000.00	$215,000.00	$45,000.00	$45,000.00		
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.00	$2,000.00	$4,000.00	$9,000.00	$18,000.00		
619.279	AUTOMATED TRAILER-MOUNTED SPEED LIMIT SIGN	U	4.00	$2,000.00	$8,000.00	$9,000.00	$36,000.00		
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.00	$4,000.00	$8,000.00	$115,000.00	$230,000.00		
632.71204	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 4" LINE	LF	245.00	$1.60	$392.00	$1.90	$465.50		
632.71206	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 6" LINE	LF	666,100.00	$1.70	$1,132,370.00	$2.00	$1,332,200.00		
632.71208	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 8" LINE	LF	240.00	$3.60	$864.00	$2.00	$480.00		
632.71212	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 12" LINE	LF	31,430.00	$3.30	$103,719.00	$6.30	$198,009.00		
692.	MOBILIZATION	U	1.00	$243,030.00	$243,030.00	$40,000.00	$40,000.00		
1008.61	ALTER. AND ADD. AS NEEDED - RETROREFLECTOMETER (SALVAGE TO DEPT.)	$	366,030.00	$1.00	$366,030.00	$1.00	$366,030.00		
1010.15	FUEL ADJUSTMENT	$	19,000.00	$1.00	$19,000.00	$1.00	$19,000.00		
			Totals:		$2,167,140.00		$2,385,184.50		
			Alt. Totals:						
			Totals:		$2,167,140.00		$2,385,184.50		

PS&E Comparison

STATEWIDE DURABLES 2024
44755
X-A005(567)

				A-Bidder		PS&E		
Item No.	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total	A-PS&E Difference
Items								
618.61	UNIFORMED OFFICERS WITH VEHICLE	$	40,000.00	$1.00	$40,000.00	$1.00	$40,000.00	$0.00
618.7	FLAGGERS	HR	500.00	$18.00	$9,000.00	$53.47	$26,735.00	($17,735.00)
619.1	MAINTENANCE OF TRAFFIC	U	1.00	$38,500.00	$38,500.00	$215,000.00	$215,000.00	($176,500.00)
619.25	PORTABLE CHANGEABLE MESSAGE SIGN	U	2.00	$1,000.00	$2,000.00	$2,000.00	$4,000.00	($2,000.00)
619.279	AUTOMATED TRAILER-MOUNTED SPEED LIMIT SIGN	U	4.00	$1,000.00	$4,000.00	$2,000.00	$8,000.00	($4,000.00)
619.63	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	U	2.00	$1,000.00	$2,000.00	$4,000.00	$8,000.00	($6,000.00)
632.71204	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 4" LINE	LF	245.00	$1.45	$355.25	$1.60	$392.00	($36.75)
632.71206	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 6" LINE	LF	666,100.00	$1.45	$965,845.00	$1.70	$1,132,370.00	($166,525.00)
632.71208	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 8" LINE	LF	240.00	$2.00	$480.00	$3.60	$864.00	($384.00)
632.71212	GROOVED RETROREFLECTIVE POLYUREA PAVEMENT MARKING, 12" LINE	LF	31,430.00	$3.00	$94,290.00	$3.30	$103,719.00	($9,429.00)
692.	MOBILIZATION	U	1.00	$13,000.00	$13,000.00	$243,030.00	$243,030.00	($230,030.00)
1008.61	ALTER. AND ADD. AS NEEDED - RETROREFLECTOMETER (SALVAGE TO DEPT.)	$	366,030.00	$1.00	$366,030.00	$1.00	$366,030.00	$0.00
1010.15	FUEL ADJUSTMENT	$	19,000.00	$1.00	$19,000.00	$1.00	$19,000.00	$0.00

Total:	$1,554,500.25	$2,167,140.00	($612,639.75)

May 13, 2023

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION: The project constructs permanent grooved pavement markings (durable polyurea) along Tier 1 and 2 roadways within three (3) sections; I-93 in Woodstock-Lincoln, I-93 Southbound in Hooksett-Manchester between the I-293 junctions, and US 202 from Hillsborough at NH 31 to Hopkinton at the I-89 SB on ramp. Ramps are included on each section. This project has a total length of 50.2 miles located within Districts 1, 3, 4, and 5.

This project will include purchase of two (2) mobile Retroreflectometer systems to be installed by on NHDOT vehicles; one belonging to the Bureau of Materials and Research, the other to the Bureau of Traffic. These systems will be used to evaluate the contracted retroreflectivity minimums of the new pavement markings and meet Federal program requirements for existing pavement markings.

FEDERAL FUNDING: 100% Highway Safety Improvement Program (HSIP)

PROJECT INITIATED: This project was initiated through HSIP.

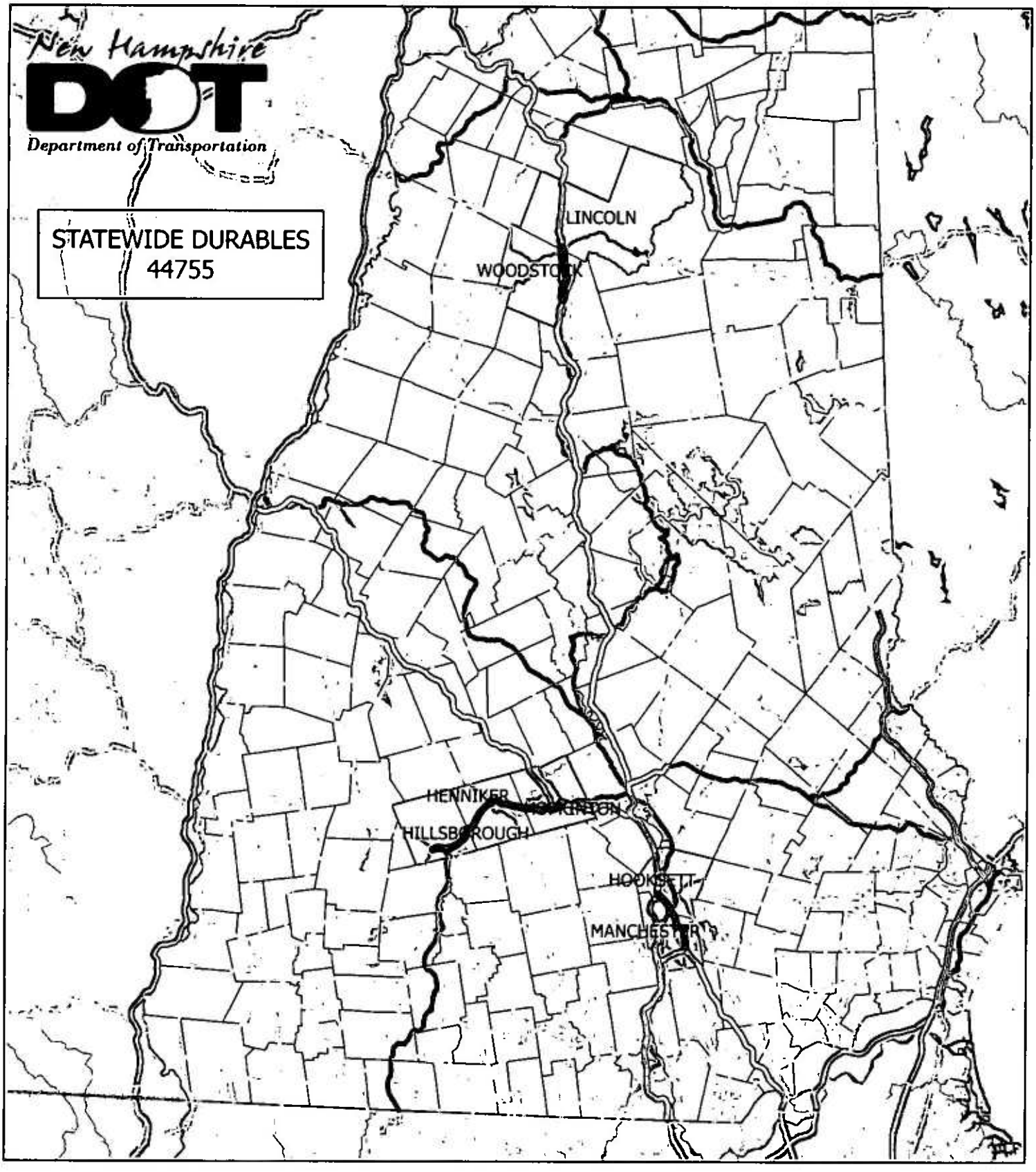
CONTINGENCY: The proposed contingency amount is 5% of the contract amount. This is to account for quantity calculations that are based on aerial and street view photography as well as risk associated with the unknown extent of unanticipated traffic control needs.

PROJECT EXPLANATION: This project will install polyurea pavement makings along 50.2 miles of Tier 1 and 2 roadways, providing improved visibility under nighttime and wet conditions. These markings will also reduce the number of annual pavement striping efforts that are typically necessary by the NHDOT Bureau of Traffic to maintain the markings on these facilities, thereby reducing the temporary impact to traffic and improving public safety.

TRAFFIC IMPLICATION: Lane closures and shoulder closures are anticipated on this contract. Nightwork is required on the Hooksett-Manchester section of I-93, including ramps. One lane of traffic shall be maintained on I-93 at all times during operations. Ramps will be closed, and traffic will be detoured to the next exit.

ADVERTISING DATE: May 21, 2024

COMPLETION DATE: July 25, 2025



NOTE:	STATE OF NEW HAMPSHIRE DEPARTMENT OF TRANSPORTATION - BUREAU OF TRAFFIC	
	PROJECT: DURABLE MARKINGS	STATE NO: 44755
	LOCATION: I-93 AND US 202	

2/13/2024

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 K5 CORPORATION is a Massachusetts Profit Corporation registered to transact business in New Hampshire on April 02, 1998. 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: **290326**

Certificate Number: **0006660088**

IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 5th day of April A.D. 2024.

David M. Scanlan
Secretary of State

SOLE OFFICER CERTIFICATE OF AUTHORITY

I, Kathy DeLong, President, hereby certify that I am the Sole
(Name and Title)
Officer of K5 Corporation, which is a corporation registered
(Name of Corporation)

with the Secretary of State under RSA 349.

I further certify that it is understood that the State of New Hampshire may rely on this certificate as evidence that I currently occupy the position indicated and that I have full authority to bind the corporation. This authority remains in full force and effect for thirty (30) days from the date of this Certificate.

DATED: 6/27/2024

ATTESTED: _____
(Name and Title)

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/24/2024

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
Alliant Insurance Services, Inc.
40 Stanford Drive, 2nd Floor
Farmington CT 06032

License#: 0C36861
HI-WSAF-02

CONTACT NAME: Brenda Santerre
PHONE (A/C, No, Ext): 860-269-2157 FAX (A/C, No):
E-MAIL ADDRESS: bsanterre@alliant.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Arch Indemnity Insurance Compa	30830
INSURER B : Arch Insurance Company	11150
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
K5 Corporation
9 Rockview Way
Rockland, MA 02370

COVERAGES **CERTIFICATE NUMBER:** 1675450011 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY			11PKG1997800	12/31/2023	12/31/2024	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
	X Contractual Liab						MED EXP (Any one person)	$ 5,000
	X XCU						PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	POLICY X PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY			11CAB1997800	12/31/2023	12/31/2024	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
B	UMBRELLA LIAB X OCCUR			11UFP1997800	12/31/2023	12/31/2024	EACH OCCURRENCE	$ 5,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 5,000,000
	DED X RETENTION $ 0							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			14WCI1197800	12/31/2023	12/31/2024	X PER STATUTE / OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: N	N/A					E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: K5 Work Order #239842, Job #44755, Seabrook NH - 2024 Durable Pavement Marking Statewide

Workers' Compensation applies in the State in which work is performed (NH).
30 days' notice of cancellation or non-renewal will be provided to Certificate Holder, except 10 days' notice for cancellation for non-payment of premium.

CERTIFICATE HOLDER

239842 - State of New Hampshire
Department of Transportation
7 Hazen Drive, PO Box 483
Concord NH 03302

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Woodrow M. Baird

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/11/2024

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
Alliant Insurance Services, Inc.
40 Stanford Dr 2nd Fl
Farmington CT 06032

License#: 0C36861
HI-WSAF-02

CONTACT NAME:
PHONE (A/C, No, Ext): 860-269-2157 **FAX (A/C, No):**
E-MAIL ADDRESS: bsanterre@alliant.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Hudson Insurance Company	25054
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
CSX, their affiliates, successors and assigns
CSX Transportation Inc, Insurance Dept.
500 Water St, C-907
Jacksonville FL 32202

COVERAGES **CERTIFICATE NUMBER:** 1046161983 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	CLAIMS-MADE / OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY / PRO-JECT / LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Railroad Protective Liability			RRP017342015641	7/8/2024	7/25/2025	Each Occurrence General Aggregate	$2,000,000 $6,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: K5 Work Order #239842, Job #44755, Seabrook NH - 2024 Durable Pavement Marking Statewide

Designated Contractor: K5 Corporation, 9 Rockview Way, Rockland, MA 02370

CERTIFICATE HOLDER

State of New Hampshire
Department of Transportation
7 Hazen Drive, PO Box 483
Concord NH 03302

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Woodrow M Baird

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/11/2024

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
Alliant Insurance Services, Inc.
40 Stanford Dr 2nd Fl
Farmington CT 06032

License#: 0C36861

CONTACT NAME:
PHONE (A/C, No, Ext): 860-269-2157 **FAX (A/C, No):**
E-MAIL ADDRESS: bsanterre@alliant.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Hudson Insurance Company	25054
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
HI-WSAF-02
State of New Hampshire Railroad, Plymouth and Lincoln Railroad
Their affiliates, successors and assigns
64 Railroad Street
Lincoln NH 03251

COVERAGES **CERTIFICATE NUMBER:** 212913057 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	CLAIMS-MADE / OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY / PRO-JECT / LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Railroad Protective Liability			RRP017359815640	7/8/2024	7/25/2025	Each Occurrence General Aggregate	$2,000,000 $6,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: K5 Work Order #239842, Job #44755, Seabrook NH - 2024 Durable Pavement Marking Statewide

Designated Contractor: K5 Corporation, 9 Rockview Way, Rockland, MA 02370

CERTIFICATE HOLDER

State of New Hampshire
Department of Transportation
7 Hazen Drive, PO Box 483
Concord NH 03302

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Woodrow M Baird

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40 Stanford Dr 2nd Fl
Farmington CT 06032

License#: 0C36861
HI-WSAF-02

CONTACT NAME:
PHONE (A/C, No, Ext): 860-269-2157 FAX (A/C, No):
E-MAIL ADDRESS: bsanterre@alliant.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Markel American Insurance Co	28932
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
The State of New Hampshire
Department of Transportation
7 Hazen Drive
Concord NH 03302

COVERAGES **CERTIFICATE NUMBER:** 2069977014 **REVISION NUMBER:**

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							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Owners & Contractors Protective Liability			OCP-MAR-0000694	7/8/2024	7/25/2025	Each Occurrence Aggregate	$2,000,000 $4,000,000

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