SL

189

State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES
25 Capitol Street – Room 310
Concord, New Hampshire 03301
(603) 271-3201 | Office@das.nh.gov

Charles M. Arlinghaus
Commissioner

Catherine A. Keane
Deputy Commissioner

Sheri L. Rockburn
Assistant Commissioner

August 5, 2024

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

REQUESTED ACTION

1) Authorize the Division of Public Works Design and Construction to enter into a contract with D.L. King & Associates, Inc. (VC#168979), Merrimack, NH, for a total price not to exceed $929,800 for Project No. 81055 for Contract for the Bathroom Renovations in the State House located in Concord, NH. The contract is effective upon Governor and Council approval through September 30, 2026, unless extended in accordance with the contract terms. **100% Federal Funds - ARPA**

2) Further authorize that a contingency in the amount of $100,000 be approved for unanticipated site expenses. **100% Federal Funds - ARPA**

3) Further authorize the amount of $35,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC#311152), for engineering and project management services provided. **100% General Funds**

Funding is available in the following accounts:

		FY 2025
010-014-26640000 ARPA – Deferred Maint. at State		
048-500226 – Contract Repairs; Bldg. Grouds		$ 929,800
	Contract Total	$ 929,800
010-014-26640000 ARPA – Deferred Maint. at State		
048-500226 – Contract Repairs; Bldg. Grouds – Contingency		$ 100,000
010-004-86770000 – Legislative Branch Joint Expenses		
048-500226 – Contract Repairs; Bldg. Grouds – DPW Fees		$ 35,000
	Project Total	$ 1,064,800

EXPLANATION

The work of this contract includes complete renovations of four existing bathrooms in the State House in Concord. These include the women's bathrooms at the basement and second floor levels, the men's bathroom at the first floor level and the bathroom on the second floor, next to the Senate anteroom. The renovations will completely replace all existing plumbing fixtures, relocate some fixtures for better accessibility, update plumbing lines and provide new toilet partitions as well as new wall and floor finishes.

This is the first phase of a project to renovate all of the existing bathrooms in the State House to bring them up to current codes, replace outdated plumbing fixtures and replace worn and damaged finishes. The plumbing in these bathrooms, due to its age, requires frequent shutdowns and repairs, inconveniencing the occupants of the building on a regular basis.

A public bid opening was held on June 26, 2024. Two (2) bid proposals were received and the contract was awarded to the lowest qualified bidder. The low bid is 8% over the Department estimate. The difference between the low bid and the Department estimate is within industry standards.

The contract has been approved by the Attorney General as to form and execution; and the Department of Administrative Services has certified that the necessary funds are available. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Services, Division of Public Works Design and Construction.

Respectfully submitted,

Charles M. Arlinghaus,
Commissioner

Department Estimate:	$ 858,000.00
Low Base Bid (without Alternates):	$ 929,800.00
Over Estimate:	$ 71,800.00

Division of Public Works

ABC Bid Data

CONCORD
81055RB
81055R

PROJECT:	CONCORD	**Awarded To:**			
STATE PROJECT NUMBER:	81055RB				
FED. PROJECT NUMBER:	81055R				
DATE BIDS OPEN:	June 26, 2024, 2:00				
SCOPE OF WORK:	ARPA-Bathroom Renovations in the State House	**Amount:**	$0.00	**Certified by:**	_____ Director of Project Development
COMPLETION DATE:	September 30, 2026	**Award Date:**			
LOCATION:	Merrimack				

Summary of Bidders

Contractor	Bid Amount	Rank
D. L .KING & ASSOCIATES INC. 45 BATES ROAD, MERRIMACK NH 03054	$929,800.00	A
TURNSTONE CORPORATION 479 NASHUA STREET, MILFORD NH 03055-3705	$948,000.00	B

Division of Public Works

ABC Bid Data

CONCORD

81055RB

81055R

Item No.	Description	Unit	Quantity	PS&E Unit Price	PS&E Total	D. L. KING & ASSOCIATES INC. 45 BATES ROAD MERRIMACK, NH 03054 Unit Price	D. L. KING & ASSOCIATES INC. Total	TURNSTONE CORPORATION 479 NASHUA STREET MILFORD, NH 03055-3705 Unit Price	TURNSTONE CORPORATION Total
Items									
901	RENOVATION OF 3 BATHROOMS, 1 TOILET AND EXPRESSING ROOM	U	1.00	$818,000.00	$818,000.00	$889,600.00	$889,800.00	$908,000.00	$908,000.00
902	ALLOWANCE FOR OWNER'S CHANGES OR UNFORESEEN CONDITIONS	$	40,000.00	$1.00	$40,000.00	$1.00	$40,000.00	$1.00	$40,000.00
			Totals:		$858,000.00		$929,800.00		$948,000.00
			Alt. Totals:						
			Totals:		$858,000.00		$929,800.00		$948,000.00

PS&E Comparison

Division of Public Works

CONCORD
81055RB
81055R

				A-Bidder		PS&E		
Item No.	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total	A-PS&E Difference
Items								
901	RENOVATION OF 3 BATHROOMS, 1 TOILET AND EXPRESSING ROOM	U	1.00	$889,800.00	$889,800.00	$818,000.00	$818,000.00	$71,800.00
902	ALLOWANCE FOR OWNER'S CHANGES OR UNFORESEEN CONDITIONS	$	40,000.00	$1.00	$40,000.00	$1.00	$40,000.00	$0.00
			Total:		$929,800.00		$858,000.00	$71,800.00

Division of Public Works

Bid Report

The undersigned, hereinafter referred to as principal or bidder, hereby proposes to furnish all materials and perform all labor necessary to complete the work described in the caption hereof, in accordance with the plans, current Standard Specifications, and special provisions, for the prices set for in the Total Bid. Failure to complete and submit this bid in its entirety or falsification of bid documents will result in the entire proposal being considered irregular and may be rejected by the Department of Administrative Services, Division of Public Works. Plans and specifications on this project cannot be transferred to any other firm or organization for the purpose of submitting a bid as a general contractor without the knowledge and authority of the department. Those who sign (manually and electronically) and the firm for which they are authorized to sign, do so under the penalty of perjury as specified by the laws of the United States and the State of New Hampshire.

Federal Contract Number: **81055RB CONCORD**

Contractor Profile

Firm	**D. L .KING & ASSOCIATES INC.**
Contractor ID	**168979**
Address	**45 BATES ROAD** **MERRIMACK NH 03054**
Phone	**(603)883-5880**
FAX	
E-Mail	**lisa@dlkingnh.com**
Authorized Signature:	/s/ Lisa King

Bid Bond Verified

Auth Code/Check#	**SNH0618877047**

Receipt of Addenda

Sequence	Date	
1	06/04/2024	Yes
2	06/26/2024	Yes

Department of Administrative Services, Division of Public Works

Proposal

Total Bid for Award Consideration

$929,800.00

Contract Number: 81055RB

Bid Opening Date: 26-Jun-2024

Contract Name: CONCORD

Project Funding: Federal

Proposal For: 168979 - D. L .KING & ASSOCIATES INC.

Items

Seq#	Item #	Description	Unit	Quantity	Unit Price	Extended Price
1	901	RENOVATION OF 3 BATHROOMS, 1 TOILET AND EXPRESSING ROOM	U	1.000	$889,800.00	$889,800.00
2	902	ALLOWANCE FOR OWNER'S CHANGES OR UNFORESEEN CONDITIONS	$	40,000.000	$1.00	$40,000.00

Total for Category Items **$929,800.00**

Total Bid for Award Consideration **$929,800.00**

Proposal

Proposal Of

D. L .KING & ASSOCIATES INC.
45 BATES ROAD, MERRIMACK NH, 03054

to furnish and deliver all materials and to perform all work in accordance with the Contract of the State of New Hampshire, Department of Administrative Services, Division of Public Works for which proposals will be received until 2:00:00 PM, Prevailing Time on Wednesday, June 26, 2024. Said project being situated as follows:

ARPA-Bathroom Renovations in the State House

Department of Administrative Services, Division of Public Works
John O. Morton Building
P. O. Box 483
Concord, NH 03302-0483

Commissioner:

In accordance with the advertisement of the Department of Administrative Services, Division of Public Works inviting proposals for the project hereinbefore named and in conformity with the Plans and Specifications on file in the office of the Department of Administrative Services, Division of Public Works, I/WE hereby certify that I AM/WE ARE the only person, or persons, interested in this proposal as principals; that this proposal is made without collusion with any person, firm or corporation; that an examination has been made of the Plans, of the Standard Specifications, of the Standard Plans Book, of the Proposal, and applicable addendums, including but not restricted to the Special Attentions, Supplemental Specifications, and Special Provisions attached thereto, and also that an examination has been made of the site of the work; and I, or we, propose to furnish all necessary machinery, equipment, tools, labor and other means of construction, and to furnish all materials specified in the manner and at the time prescribed; and understand that the quantities of work as shown herein are approximate only and are subject to increase or decrease, and further understand that all quantities of work whether increased or decreased are to be performed at the following prices:

I acknowledge, understand, and accept these terms and conditions. ☑ Yes ☐ No

Signature /s/ Lisa King

It is further proposed:

To execute the Contract and begin work within 10 days from the date specified in the "Notice to Proceed" and to prosecute said work so as to complete the Project and its appurtenances on or before September 30, 2026.

To furnish a Contract Bond in the amount of 100 per cent of the Contract award, as security for the construction and completion of the Project and its appurtenances in accordance with the Plans, Specifications and Contract. The Contractor's attention is called to section 103.05 of the Standard Specifications which reads, in part, as follows: "Unless specifically waived in the Proposal, upon execution of the Contract, the successful Bidder shall furnish the Department a surety bond or bonds equal to the sum of the Contract amount. The form of the bonds(s) shall be acceptable to the Department and the bonding Company issuing the bond(s) shall be licensed to transact business in the State of New Hampshire, and ..."

To certify that the Bidder, in accordance with the requirements of 103.06 and 108.01, intends to sublet, assign, sell, transfer or otherwise dispose of one or more portions of the work and (1) has contacted the appropriate listed disadvantaged businesses and afforded such disadvantaged businesses equal consideration with non-disadvantaged business for all work the Bidder currently proposes to sublet, assign, sell, transfer or otherwise dispose of, (2) may contact additional appropriate disadvantage businesses and will afford such businesses equal consideration with non-disadvantaged businesses for all work the Bidder in the future proposes to sublet, assign, sell, transfer or otherwise dispose of, and (3) will complete enclosed "DISADVANTAGED BUSINESS ENTERPRISE COMMITMENT FORM" and Letters of Intent for each disadvantaged business. The name of the person in the Bidder's organization who has been designated as the liaison officer to administer the disadvantaged business enterprise program is:

WBE - D. L .KING & ASSOCIATES INC.

To guarantee all of the work performed under this Contract to be done in accordance with the Specifications and in good and workmanlike manner, and to renew or repair any work which may be rejected, due to defective materials or workmanship, prior to final completion and acceptance of the project.

Enclosed herewith find certified check or bid bond in the amount of **5% OF THE BID TOTAL** made payable to the "Treasurer, State of New Hampshire," as a proposal guarantee which it is understood will be forfeited in the event the Contract is not executed, if awarded by the Department to the undersigned.

I acknowledge, understand, and accept these terms and conditions. ☑ Yes ☐ No

Signature /s/ Lisa King

Debarment, Suspension, and Others

Certification Regarding Debarment, Suspension, and Other Responsibility Matters - Primary Covered Transactions.

(1). The prospective primary participant certifies to the best of its knowledge and belief, that it and all its principals: (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency; (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statues or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification and (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default. (2). Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

I acknowledge, understand, and accept these terms and conditions. ☑ Yes ☐ No

Signature /s/ Lisa King

Contract Affidavit

I/We declare under penalty of perjury under the laws of the United States and the State of New Hampshire that, in accordance with the provisions of Title 23 USC, Section 112(c), have not either directly or indirectly entered into any agreement, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this Proposal.

I acknowledge, understand, and accept these terms and conditions. ☑ Yes ☐ No

Signature /s/ Lisa King

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 D.L. KING & ASSOCIATES, INC. is a Illinois Profit Corporation registered to transact business in New Hampshire on December 29, 1999. 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: 332476

Certificate Number: 0006690708

IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 17th day of May A.D. 2024.

David M. Scanlan

Secretary of State

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 8/21/2024

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 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
THE ROWLEY AGENCY
45 Constitution Avenue
P.O. Box 511
Concord NH 03302-0511

CONTACT NAME: Renee Skillings
PHONE (A/C, No, Ext): (603) 224-2562 FAX (A/C, No): (603) 224-8012
E-MAIL ADDRESS: rskillings@rowleyagency.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Citizens Insurance Co.	31534
INSURER B: Allmerica Financial Benefits	41840
INSURER C: Hanover Insurance Co.	22292
INSURER D: Massachusetts Bay Ins. Co.	22306
INSURER E:	
INSURER F:	

INSURED
D.L. King & Associates, Inc.
45 Bates Rd
Merrimack NH 03054

COVERAGES

CERTIFICATE NUMBER: 24-25 All Lines

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT LOC OTHER:			ZBV J539525-01	9/3/2024	9/3/2025	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 15,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
B	AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS			AWV J539507-01	9/3/2024	9/3/2025	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
C	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION $ 10,000			UHV J539526-01	9/3/2024	9/3/2025	EACH OCCURRENCE	$ 5,000,000
							AGGREGATE	$ 5,000,000
							PRODUCTS/COMP OPS AGG	$ 5,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N Y If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WDV J539518-00 3A STATES: NH/MA Excluded Officers: Dean & Lisa King	9/3/2024	9/3/2025	X PER STATUTE OTH-ER	
							E.L. EACH ACCIDENT	$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
A	LEASED/RENTED EQUIPMENT			ZBV J539525-01	9/3/2024	9/3/2025	LIMIT	35,000

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

Re: Job #81055RB; ARPA-Bathroom Renovations in the State House, Concord, NH
The State of New Hampshire, its agencies, and its agents and employees are additional insureds for ongoing operations performed by or on behalf of D.L. King & Associates, Inc., per written contract.

CERTIFICATE HOLDER

State of New Hampshire
Department of Administrative Services
7 Hazen Drive
Room 250
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

Renee Skillings/RLS Renee Skillings

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/18/2024

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 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
THE ROWLEY AGENCY
45 Constitution Avenue
P.O. Box 511
Concord NH 03302-0511

CONTACT NAME: Renee Skillings
PHONE (A/C, No, Ext): (603)224-2562
FAX (A/C, No): (603)224-8012
E-MAIL ADDRESS: rskillings@rowleyagency.com

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

INSURED
State of New Hampshire Dept of Administrative Services
c/o D.L. King & Associates, Inc.
45 Bates Road
Merrimack NH 03054

COVERAGES **CERTIFICATE NUMBER:** OCP 81055RB ARPA **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE [ ] OCCUR [X] [X] Owners & Contractors Protective GEN'L AGGREGATE LIMIT APPLIES PER: POLICY [ ] PRO-JECT [ ] LOC OTHER:			OCP07192024	7/19/2024	7/19/2026	EACH OCCURRENCE	$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$ 4,000,000
							PRODUCTS - COMP/OP AGG	$
								$
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	$
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB [ ] OCCUR EXCESS LIAB [ ] CLAIMS-MADE DED [ ] RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N [ ] N/A If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE [ ] OTH-ER	
							E.L. EACH ACCIDENT	$
							E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project No. 81055RB; ARPA-Bathroom Renovations in the State House, 107 N Main St., Concord, NH

CERTIFICATE HOLDER

State of New Hampshire
Department of Administrative Services
7 Hazen Drive
Room 250
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
Renee Skillings/RLS

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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY): 7/18/2024

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER
THE ROWLEY AGENCY
45 Constitution Avenue
P.O. Box 511
Concord NH 03302-0511

CONTACT NAME: Renee Skillings
PHONE (A/C, No, Ext): (603)224-2562 FAX (A/C, No): (603)224-8012
E-MAIL ADDRESS: rskillings@rowleyagency.com
PRODUCER CUSTOMER ID: 00007629

INSURED
D.L. King & Associates, Inc., State Dept of Admin Svcs & all other contractors, subcontractors and others employed on the premises; 45 Bates Road
Merrimack NH 03054

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Acadia Insurance Company	31325
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

COVERAGES CERTIFICATE NUMBER: BR 81055RB ARPA REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Loc#:00001/Bldg#:00001,107 N Main St,Concord,NH,03301

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	PROPERTY CAUSES OF LOSS / DEDUCTIBLES BASIC / BUILDING BROAD / CONTENTS SPECIAL EARTHQUAKE WIND FLOOD				BUILDING PERSONAL PROPERTY BUSINESS INCOME EXTRA EXPENSE RENTAL VALUE BLANKET BUILDING BLANKET PERS PROP BLANKET BLDG & PP	$ $ $ $ $ $ $ $ $ $
A	X INLAND MARINE CAUSES OF LOSS NAMED PERILS X SPECIAL FORM	TYPE OF POLICY Builders Risk POLICY NUMBER BR07192024	7/19/2024	7/19/2026	X JOBSITE LIMIT X TEMPORARY STORAGE X IN TRANSIT LIMIT X WAIVER OF SUBROGATION	$ 929,800 $ 464,900 $ 464,900 $ INCLUDED
	CRIME TYPE OF POLICY					$ $ $
	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					$ $
						$ $

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Job #81055RB; ARPA-Bathroom Renovations in the State House, 107 N Main St., Concord, NH

CERTIFICATE HOLDER

State of New Hampshire
Department of Administrative Services
7 Hazen Drive
Room 250
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

Renee Skillings/RLS Renee R. Skillings

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Corporate Resolution

I, Lisa King, **hereby certify** that I am duly elected Clerk/Secretary/Officer
(Name)
of D.L. King & Associates, Inc. . I hereby certify the following is a true copy of a vote taken at
(Name of Corporation)

a meeting of the Board of Directors/shareholders, duly called and held on July 19th, 20 24,

at which a quorum of the Directors/shareholders were present and voting.

VOTED: That A. Dean King, CEO (may list more than one person) is
(Name and Title)

duly authorized to enter into contracts or agreements on behalf of

D.L. King & Associates, Inc. with the State of New Hampshire and any of
(Name of Corporation)

its agencies or departments and further is authorized to execute any documents

which may in his/her judgment be desirable or necessary to effect the purpose of

this vote.

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

DATED: July 19th 2024 **ATTEST:** Lisa McKee President
(Name & Title)