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# State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES

25 Capitol Street – Room 310  
Concord, New Hampshire 03301  
(603) 271-3201 | [Office@das.nh.gov](mailto:Office@das.nh.gov)

Charles M. Arlinghaus  
Commissioner

Catherine A. Keane  
Deputy Commissioner

Sheri L. Rockburn  
Assistant Commissioner

September 11, 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 Meridian Construction Corp. (VC#157328), Gilford, New Hampshire, for a total price not to exceed \$7,545,424 for Project No. 81336 for Legislative Office Building HVAC Upgrades and Parking Garage located in Concord, NH. The contract is effective upon Governor and Council approval through October 2, 2026, unless extended in accordance with the contract terms. **100% Federal Funds - ARPA**
- 2) Further authorize that an escalation contingency in the amount of \$100,000 be approved for increase in material cost for mechanical equipment from bid opening to 30 days after the notice to proceed. **100% Federal Funds – ARPA**
- 3) Further authorize that a contingency in the amount of \$200,000 be approved for unanticipated site expenses. **100% Federal Funds – ARPA**
- 4) Further authorize the amount of \$91,974 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% Federal Funds - ARPA**

Funding is available in the following accounts:

FY 2025

014-014-28430000 ARPA LOB HVAC Improvements	
048-500226 – Contract Repairs; Bldg. Grounds	\$ 7,290,424
014-014-26640000 ARPA Deferred Maint. at State Facility	
048-500226 – Contract Repairs; Bldg. Grounds	<u>\$ 255,000</u>
	Contract Total \$ 7,545,424
014-014-28430000 ARPA LOB HVAC Improvements	
048-500226 – Contract Repairs; Bldg. Grounds – Escalation Contingency	\$ 100,000
048-500226 – Contract Repairs; Bldg. Grounds – DPW Fees	\$ 91,974
014-014-26640000 ARPA Deferred Maint. at State Facility	
048-500226 – Contract Repairs; Bldg. Grounds – Contingency	<u>\$ 200,000</u>
	Project Total \$ 7,937,398

**EXPLANATION**

This project will include Legislative Office Building (LOB) HVAC upgrades. Per a General Court of New Hampshire (GCNH) request, Department of Administrative Services (DAS) contracted with an engineering firm to evaluate the mechanical systems in the LOB, which is the most densely populated State building during legislative sessions. The evaluation found multiple deficiencies with the existing air handling system. The existing air handling system did not have the heating/reheat coils needed to allow fresh air introduction into the building when temperatures fall below freezing, which requires that the existing air handling system be shut down during the winter months. This results in minimum air quality standards not being met. It was also noted that outdoor air introduction minimums are not being met during the cooling season due to limited chiller capacity.

This project will also include parking garage repairs. H.L. Turner Group, Inc. performed a structural assessment of the LOB's parking garage structure on June 21, 2023. The assessment found deficiencies in the concrete entrance/exit ramps, parapet railing systems, concrete parking decks, parapet coatings, exterior stairways, floor drains, trench drains, and structural concrete columns. Deficiencies include concrete coating damage, spalling concrete, corroded drains, oil stains on the concrete coating, delaminated concrete at several support column bases, corroded gate operator conduit, large cracks in the floor, efflorescence, rust staining and other miscellaneous cracks, and concrete coating damage.

A public bid opening was held on July 24, 2024. Two (2) bid proposals were received and the contract was awarded to the lowest qualified bidder. The low bid is 6% over the Department estimate.

This contract also includes an escalation clause. We have experimented, in limited circumstances, with escalation clauses. The possibility of escalation is limited only to the large equipment purchase in part because escalation is clearest on such items and in part because it is the clearest way to maintain equity among bidders while reducing a significant obstacle to bidding. In this item, the amount reserved for escalation is called out as a contingency but one only to be used in those limited circumstances.

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:	\$ 7,060,021
Low Base Bid (without Alternates):	\$ 7,545,424
Over Estimate:	\$ 484,403



Division of Public Works

# ABC Bid Data

CONCORD  
81336RB  
81336R B

<b>PROJECT:</b>	CONCORD	<b>Awarded To:</b>	
<b>STATE PROJECT NUMBER:</b>	81336RB		
<b>FED. PROJECT NUMBER:</b>	81336R B		
<b>DATE BIDS OPEN:</b>	July 24, 2024, 2:00 PM		
<b>SCOPE OF WORK:</b>	ARPA- LEGISLATIVE OFFICE BUILDING HVAC UPGRADES AND PARKING GARAGE REPAIRS	<b>Amount:</b>	\$0.00
		<b>Certified by:</b>	_____
			Director of Project Development
<b>COMPLETION DATE:</b>	October 02, 2026	<b>Award Date:</b>	
<b>LOCATION:</b>	Merrimack		

## Summary of Bidders

Contractor	Bid Amount	Rank
MERIDIAN CONSTRUCTION CORP. 32 ARTISAN COURT #4, GILFORD NH 03249-6603	\$7,545,424.00	A
TURNSTONE CORPORATION 479 NASHUA STREET, MILFORD NH 03055-3705	\$7,714,590.00	B



Division of Public Works

# ABC Bid Data

CONCORD

81336RB

81336R B

Item No.	Description	Unit	Quantity	PS&E		MERIDIAN CONSTRUCTION CORP. 32 ARTISAN COURT #4 MILFORD, NH 03248-0003		TURNSTONE CORPORATION 478 NASHUA STREET MILFORD, NH 03055-3705	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
901	UPGRADE HVAC SYSTEM LEGISLATIVE OFFICE BUILDING.	U	1.00	\$6,000,000.00	\$6,000,000.00	\$5,611,576.00	\$5,611,576.00	\$5,640,000.00	\$5,640,000.00
902	REMOVE AND REPLACE THE SPLINE CEILING WITH ACOUSTICAL CEILING	U	1.00	\$150,000.00	\$150,000.00	\$146,140.00	\$146,140.00	\$123,200.00	\$123,200.00
903	PARKING GARAGE REPAIRS.	U	1.00	\$194,000.00	\$194,000.00	\$1,009,284.00	\$1,009,284.00	\$1,160,000.00	\$1,160,000.00
904	REMOVE AND REPLACE ELECTRICAL OPERATORS.	U	1.00	\$70,000.00	\$70,000.00	\$93,224.00	\$93,224.00	\$90,140.00	\$90,140.00
905	CONCRETE CRACK REPAIRS	LF	6,250.00	\$15.20	\$95,000.00	\$14.00	\$87,500.00	\$12.00	\$75,000.00
906	CONCRETE COATING AND MEMBRANE REPAIRS	SF	4,750.00	\$41.90	\$199,025.00	\$32.00	\$152,000.00	\$35.00	\$166,250.00
907	CONCRETE SPALL REPAIRS	SF	1,300.00	\$66.92	\$86,996.00	\$139.00	\$180,700.00	\$150.00	\$195,000.00
908	ALLOWANCE #1 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 901.	\$	200,000.00	\$1.00	\$200,000.00	\$1.00	\$200,000.00	\$1.00	\$200,000.00
909	ALLOWANCE #2 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 902.	\$	10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00
910	ALLOWANCE #3 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING CONDITIONS FOR BID ITEMS 903-907.	\$	\$5,000.00	\$1.00	\$55,000.00	\$1.00	\$55,000.00	\$1.00	\$55,000.00
<b>Totals:</b>					<b>\$7,080,021.00</b>		<b>\$7,645,424.00</b>		<b>\$7,714,590.00</b>
<b>Alt. Totals:</b>									
<b>Totals:</b>					<b>\$7,080,021.00</b>		<b>\$7,645,424.00</b>		<b>\$7,714,590.00</b>



Division of Public Works

# PS&E Comparison

CONCORD  
81336RB  
81336R B

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
<b>Items</b>								
901	UPGRADE HVAC SYSTEM LEGISLATIVE OFFICE BUILDING.	U	1.00	\$5,611,576.00	\$5,611,576.00	\$6,000,000.00	\$6,000,000.00	(\$388,424.00)
902	REMOVE AND REPLACE THE SPLINE CEILING WITH ACOUSTICAL CEILING	U	1.00	\$146,140.00	\$146,140.00	\$150,000.00	\$150,000.00	(\$3,860.00)
903	PARKING GARGE REPAIRS.	U	1.00	\$1,009,284.00	\$1,009,284.00	\$194,000.00	\$194,000.00	\$815,284.00
904	REMOVE AND REPLACE ELECTRICAL OPERATORS.	U	1.00	\$93,224.00	\$93,224.00	\$70,000.00	\$70,000.00	\$23,224.00
905	CONCRETE CRACK REPAIRS	LF	6,250.00	\$14.00	\$87,500.00	\$15.20	\$95,000.00	(\$7,500.00)
906	CONCRETE COATING AND MEMBRANE REPAIRS	SF	4,750.00	\$32.00	\$152,000.00	\$41.90	\$199,025.00	(\$47,025.00)
907	CONCRETE SPALL REPAIRS	SF	1,300.00	\$139.00	\$180,700.00	\$66.92	\$86,996.00	\$93,704.00
908	ALLOWANCE #1 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 901.	\$	200,000.00	\$1.00	\$200,000.00	\$1.00	\$200,000.00	\$0.00
909	ALLOWANCE #2 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 902.	\$	10,000.00	\$1.00	\$10,000.00	\$1.00	\$10,000.00	\$0.00
910	ALLOWANCE #3 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING CONDITIONS FOR BID ITEMS 903-907.	\$	55,000.00	\$1.00	\$55,000.00	\$1.00	\$55,000.00	\$0.00

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**Total:**

\$7,545,424.00

\$7,060,021.00

\$485,403.00



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: 81336RB CONCORD

### Contractor Profile

Firm	<b>MERIDIAN CONSTRUCTION CORP.</b>
Contractor ID	<b>157328</b>
Address	<b>32 ARTISAN COURT #4 GILFORD NH 03249-6603</b>
Phone	<b>(603)527-0101</b>
FAX	
E-Mail	<b>tlm@meridlannh.com</b>
Authorized Signature:	<i>Is/Timothy Long</i>

### Bid Bond

### Verified

Auth Code/Check#	<b>SNH0710413098</b>
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### Receipt of Addenda

Sequence	Date	
1	06/21/2024	Yes
2	06/28/2024	Yes
3	07/12/2024	Yes
4	07/19/2024	Yes

**Department of Administrative Services, Division  
of Public Works**

Total Bid for Award Consideration

Proposal

**\$7,545,424.00**

**Contract Number:** 81336RB

**Bid Opening Date:** 24-Jul-2024

**Contract Name:** CONCORD

**Project Funding:**

Federal

**Proposal For:** 157328 - MERIDIAN CONSTRUCTION CORP.

**Items**

Seq#	Item #	Description	Unit	Quantity	Unit Price	Extended Price
1	901	UPGRADE HVAC SYSTEM LEGISLATIVE OFFICE BUILDING.	U	1.000	\$5,611,576.00	\$5,611,576.00
2	902	REMOVE AND REPLACE THE SPLINE CEILING WITH ACOUSTICAL CEILING	U	1.000	\$146,140.00	\$146,140.00
3	903	PARKING GARAGE REPAIRS.	U	1.000	\$1,009,284.00	\$1,009,284.00
4	904	REMOVE AND REPLACE ELECTRICAL OPERATORS.	U	1.000	\$93,224.00	\$93,224.00
5	905	CONCRETE CRACK REPAIRS	LF	6,250.000	\$14.00	\$87,500.00
6	906	CONCRETE COATING AND MEMBRANE REPAIRS	SF	4,750.000	\$32.00	\$152,000.00
7	907	CONCRETE SPALL REPAIRS	SF	1,300.000	\$139.00	\$180,700.00
8	908	ALLOWANCE #1 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 901.	\$	200,000.000	\$1.00	\$200,000.00
9	909	ALLOWANCE #2 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 902.	\$	10,000.000	\$1.00	\$10,000.00
10	910	ALLOWANCE #3 OWNER'S CHANGES FOR UNKNOWN, LATENT OR DIFFERING CONDITIONS FOR BID ITEMS 903 -907.	\$	55,000.000	\$1.00	\$55,000.00

**Total for Category Items**

**\$7,545,424.00**

**Total Bid for Award  
Consideration**

**\$7,545,424.00**

## Proposal

Proposal Of

MERIDIAN CONSTRUCTION CORP.  
32 ARTISAN COURT #4, GILFORD NH, 03249-6603

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, July 24, 2024. Said project being situated as follows:

ARPA- LEGISLATIVE OFFICE BUILDING HVAC UPGRADES AND PARKING GARAGE REPAIRS

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/ Timothy Long

## SIGN-FED

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 October 02, 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:

MERIDIAN CONSTRUCTION CORP.

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 Isl Timothy Long

## 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 statutes 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 Is/ Timothy Long

## 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/ Timothy Long



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
09/05/2024

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 Cross Insurance-Laconia 155 Court Street  Laconia NH 03248	CONTACT NAME: Sarah Cullen, AINS, ACSR
	PHONE (A/C, No, Ext): (603) 524-2425 FAX (A/C, No): (603) 524-3668 E-MAIL ADDRESS: sarah.cullen@crossagency.com
INSURED  MERIDIAN CONSTRUCTION CORP. 32 ARTISAN COURT UNIT #4 GILFORD NH 03249	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A: Firemen's Ins. Co. of Washington D.C. 21784
	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:

COVERAGES CERTIFICATE NUMBER: CL23103152101 REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	Y	CPA5221144-18	10/31/2023	10/31/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Crisis Event \$ 100,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY	Y	Y	CAA5221145-18	10/31/2023	10/31/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	CUA5221146-18	10/31/2023	10/31/2024	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 Products Comp/Op Agg \$ 10,000,000
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	WCA5368721-15	10/31/2023	10/31/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 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)

Project: State of NH Legislative Office Building & parking Garage repairs  
Project#81336RB

State of New Hampshire, its agencies, and its agents and employees are an additional insured on a primary and non-contributory basis on General Liability, Automobile and Umbrella when required by written contract. General Liability additional insured provision applies to ongoing and completed operations when required by written contract. Waiver of Subrogation is included on General Liability, Automobile, Umbrella and Workers Compensation (where permitted by law) when required by written contract.

CERTIFICATE HOLDER  State of New Hampshire c/o 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  <i>Sarah Cullen</i>



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
09/05/2024

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.

<b>PRODUCER</b> Cross Insurance-Laconia 155 Court Street  Laconia NH 03246	<b>CONTACT NAME:</b> Sarah Cullen, AINS, ACSR	
	<b>PHONE (A/C, No, Ext):</b> (603) 524-2425	<b>FAX (A/C, No):</b> (603) 524-3666
	<b>E-MAIL ADDRESS:</b> sarah.cullen@crossagency.com	
	<b>PRODUCER CUSTOMER ID:</b> 00177919	
<b>INSURED</b> Meridian Construction Corp, State of NH Department of Administrative Services, Any and all Subcontractors and others employed on the premises as insureds C/O Meridian Construction Corp. 32 Artisan Court, Unit #4 Gifford NH 03249	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Acadia Ins Co.	<b>NAIC #</b> 31325
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** CP249583229                      **REVISION NUMBER:**

**LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)**  
33 North State Street Concord NH

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

INSR LTR	TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	PROPERTY	DEDUCTIBLES				BUILDING	\$
	CAUSES OF LOSS	BUILDING				PERSONAL PROPERTY	\$
	BASIC	CONTENTS				BUSINESS INCOME	\$
	BROAD					EXTRA EXPENSE	\$
	SPECIAL					RENTAL VALUE	\$
	EARTHQUAKE					BLANKET BUILDING	\$
	WIND					BLANKET PERS PROP	\$
	FLOOD					BLANKET BLDG & PP	\$
							\$
A	<input checked="" type="checkbox"/> INLAND MARINE		TYPE OF POLICY			Completed Value	\$ 7,545,424
	CAUSES OF LOSS		Installation/Builder Risk			Temp Storage Limit	\$ 500,000
	<input type="checkbox"/> NAMED PERILS		POLICY NUMBER	09/05/2024	09/05/2026	In Transit Limit	\$ 500,000
	<input checked="" type="checkbox"/> Special Form		CIM5605709			Waiver of subrogati	\$ Included
	<input type="checkbox"/> CRIME						\$
	TYPE OF POLICY						\$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN						\$
							\$
							\$

**SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
Project: Legislative Office Building & Parking Garage Repairs Project#81336 RB

<b>CERTIFICATE HOLDER</b>  State of New Hampshire Department of Administrative Services 7 Hazen Drive Room 250  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.
	<b>AUTHORIZED REPRESENTATIVE</b>  



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
09/05/2024

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).

<b>PRODUCER</b> Cross Insurance-Laconia 155 Court Street  Laconia NH 03248	<b>CONTACT NAME:</b> Sarah Cullen, AINS, ACSR <b>PHONE (A/C, No, Ext):</b> (603) 524-2425 <b>E-MAIL ADDRESS:</b> sarah.cullen@crossagency.com	<b>FAX (A/C, No):</b> (603) 524-3866
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> State of New Hampshire Department of Administrative Services C/O Meridian Construction Corp. 32 Artisan Court, Unit #4 Gilford NH 03249	<b>INSURER A:</b> Acadia Ins Co.	<b>NAIC #</b> 31325
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**      **CERTIFICATE NUMBER:** CL249588890      **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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owners & Contractors Protective		OCP5813239-10	09/05/2024	09/05/2026	EACH OCCURRENCE \$ 2,000,000
	<input checked="" type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<b>AUTOMOBILE LIABILITY</b> <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					MED EXP (Any one person) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$					PERSONAL & ADV INJURY \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/EMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				GENERAL AGGREGATE \$ 3,000,000
						PRODUCTS - COMPROP AGG \$
						AUDIT NON COMPL \$
						COMBINED SINGLE LIMIT (Ea accident) \$
						BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
						EACH OCCURRENCE \$
						AGGREGATE \$
						\$
						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: State of NH Legislative office building & parking garage repairs  
Project#81338RB

<b>CERTIFICATE HOLDER</b>  State of New Hampshire Department of Administrative Services 7 Hazen Drive Room 250  Concord NH 03302	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  
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- ❖ General Contractors
- ❖ Construction Managers
- ❖ Design/Builders



**SOLE OFFICER CERTIFICATE OF AUTHORITY**

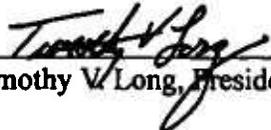
I, Timothy V. Long, President, hereby certify that I am the Sole  
(Name and Title)  
Officer of Meridian Construction Corporation, which is a corporation registered  
(Name of Corporation)

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: 9/5/2024

ATTESTED:

  
\_\_\_\_\_  
Timothy V. Long, President

# 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 MERIDIAN CONSTRUCTION CORPORATION is a New Hampshire Profit Corporation registered to transact business in New Hampshire on March 09, 1993. 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: 186699

Certificate Number : 0006663284



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 8th day of April A.D. 2024.

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

David M. Scanlan  
Secretary of State