



State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES

25 Capitol Street

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 31, 2026

Her Excellency, Governor Kelly A. Ayotte
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), 3 Mound Court Unit 1, Merrimack, NH 03054, for a total price not to exceed \$186,300, for Project Number 81341R-C EOC Facility Mechanical Replacement and Repairs-Tank Renovations. This contract is effective upon Governor and Council approval through the completion estimated to be April 30, 2027, unless extended in accordance with the contract terms. **100% Capital Funds.**

2) Further authorize that a contingency in the amount of \$11,000 be approved for unanticipated site expenses. **100% Capital Funds.**

3) Further authorize the amount of \$12,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC#311152), for project management and engineering services. **100% Capital Funds.**

Funding is available in account title Department of Administrative Services as follows:

FY 2027

030-014-15950000-034-500161 CAPITAL PROJECTS

034-500161 – Contract	\$ 186,300
034-500161 – Contingency	\$ 11,000
034-500161 – DPW Fees	<u>\$ 12,000</u>

Project Total \$ 209,300

EXPLANATION

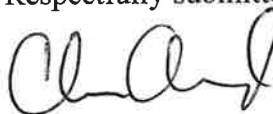
Replacement of one obsolete air handling unit, associated outside air condenser, and associated electrical and controls components.

The existing unit has reached the end of its useful life and uses refrigerant that is no longer commercially available. The unit needs to be replaced to provide cooling for the correction officers' office space.

A public bid opening was held on June 24, 2026. Two (2) bid proposals were received and the contract was awarded to the lowest qualified bidder. The low bid is 44% over the Department estimate. The estimate was made using a prior bid for this project, labor and material costs have escalated more than expected resulting in a higher bid.

The agreement 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 agreement 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:	\$ 129,300.00
Low Base Bid (without Alternates):	<u>\$ 186,300.00</u>
Over Estimate:	\$ 57,000.00



Division of Public Works

ABC Bid Data

CONCORD
81341RC
NON-FEDERAL

PROJECT: CONCORD
STATE PROJECT NUMBER: 81341RC
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: June 24, 2026, 2:00 PM
SCOPE OF WORK: EOC FACILITY MECHANICAL REPLACEMENT AND REPAIRS - TANK RENOVATIONS
COMPLETION DATE: April 30, 2027
LOCATION: Merrimack

Awarded To:

Amount: \$0.00
Award Date:
Certified by: _____
Director of Project Development

Summary of Bidders

Contractor	Bid Amount	Rank
D. L. KING & ASSOCIATES INC.	\$186,300.00	A
3 MOUND COURT, UNIT 1, MERRIMACK NH 03054		
SCHROEDER CONSTRUCTION MGMT INC	\$262,250.00	B
2 TOWNSEND WEST, UNIT 3, NASHUA NH 03063		

BID AWARD

Award To: DL King and Associates, Inc
Contract Award: \$ 186,300.00
Negotiated: Yes/No?: NO
Alternates: Yes/No?: NO
Using Agency: NHDAS
Authorized By: TZ
Date: 07092026

Item 901: \$ 100,000.00	Item 906: \$ _____
Item 902: \$ 71,000.00	Item 907: \$ _____
Item 903: \$ 15,300.00	Item 908: \$ _____
Item 904: \$ _____	Item 909: \$ _____
Item 905: \$ _____	Item 910: \$ _____

BASE BID TOTAL: \$ 186,300.00

Alternate #1: \$ _____	Alternate #6: \$ _____
Alternate #2: \$ _____	Alternate #7: \$ _____
Alternate #3: \$ _____	Alternate #8: \$ _____
Alternate #4: \$ _____	Alternate #9: \$ _____
Alternate #5: \$ _____	Alternate #10: \$ _____

GRAND TOTAL: \$ 186,300.00



Division of Public Works

ABC Bid Data

CONCORD
81341RC
NON-FEDERAL

Item No.		Description	Unit	Quantity	P&E		D. L. WING & ASSOCIATES INC. 1 BROAD COURT MERRIMACK, NH 03044		SCHROEDER CONSTRUCTION GROUP INC 2 TOWNSEND WEST, UNIT 3 NASHUA, NH 03083	
					Unit Price	Total	Unit Price	Total	Unit Price	Total
901		EXISTING WATER STORAGE TANKS REPAIRS PER THE CONTRACT DOCUMENTS.	U	1.00			\$100,000.00	\$100,000.00	\$183,693.00	\$183,693.00
902		EXISTING FUEL OIL VAULT REPAIRS PER THE CONTRACT DOCUMENTS.	U	1.00			\$71,000.00	\$71,000.00	\$63,257.00	\$63,257.00
903		ALLOWANCE FOR UNFORSEEN CONDITIONS OR OWNER INITIATED CHANGES.	\$	15,300.00			\$1.00	\$15,300.00	\$1.00	\$15,300.00
Totals:						\$129,300.00		\$185,300.00		\$262,250.00
Alt. Totals:										
Totals:						\$129,300.00		\$185,300.00		\$262,250.00

PS&E Comparison

CONCORD
 81341RC
 NON-FEDERAL

				A-Bidder		PS&E		
Item No.	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total	A-PS&E Difference
Items								
901	EXISTING WATER STORAGE TANKS REPAIRS PER THE CONTRACT DOCUMENTS.	U	1.00	\$100,000.00	\$100,000.00	\$73,000.00	\$73,000.00	\$27,000.00
902	EXISTING FUEL OIL VAULT REPAIRS PER THE CONTRACT DOCUMENTS.	U	1.00	\$71,000.00	\$71,000.00	\$41,000.00	\$41,000.00	\$30,000.00
903	ALLOWANCE FOR UNFORSEEN CONDITIONS OR OWNER INITIATED CHANGES.	\$	15,300.00	\$1.00	\$15,300.00	\$1.00	\$15,300.00	\$0.00
Total:					\$186,300.00		\$129,300.00	\$57,000.00

New Hampshire Department Of Transportation

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 New Hampshire Department of Transportation. 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.

State Contract Number: 81341RC CONCORD

Contractor Profile

Firm

D. L. KING & ASSOCIATES INC.

Contractor ID

168979

Address

3 MOUND COURT
MERRIMACK, New Hampshire 03054

Phone

(603)883-5880

FAX

E-Mail

lisa@dlkingnh.com

Signature

/s/ Lisa King

Bid Bond

Auth Code/Check#

SNH0622821051

Verified

Receipt of Addenda

Sequence

Date

New Hampshire Department of Transportation

Proposal for Highway Construction

Total Bid for Award Consideration

\$186,300.00

Contract Number:

81341RC

Contract Name:

CONCORD

Proposal For:

168979 - D. L. KING & ASSOCIATES INC.

Bid Opening Date:

June 24, 2026

Project Funding:

State

Items			Seq#	Item #	Description	Unit	Quantity	Unit Price	Extended Price
1	901	EXISTING WATER STORAGE TANKS REPAIRS PER THE CONTRACT DOCUMENTS.			UNIT	1.000	\$100,000.00		\$100,000.00
2	902	EXISTING FUEL OIL VAULT REPAIRS PER THE CONTRACT DOCUMENTS.			UNIT	1.000	\$71,000.00		\$71,000.00
3	903	ALLOWANCE FOR UNFORSEEN CONDITIONS OR OWNER INITIATED CHANGES.			DOLLAR	15,300.000	\$1.00		\$15,300.00
Total for Category Items									\$186,300.00

Total Bid for Award Consideration

\$186,300.00

Proposal

Proposal of

D. L. KING & ASSOCIATES INC.
3 MOUND COURT, 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 Transportation for EOC FACILITY MECHANICAL REPLACEMENT AND REPAIRS - TANK RENOVATIONS for which proposals will be received until 2:00:00 PM, Prevailing Time on Wednesday, June 24, 2026. Said project being situated as follows:

EOC FACILITY MECHANICAL REPLACEMENT AND REPAIRS - TANK RENOVATIONS

N.H. Department of Transportation
John O. Morton Building
Room 130, Contract Section
P. O. Box 483
Concord, NH 03302-0483

Commissioner:

In accordance with the advertisement of the Department of Transportation inviting proposals for the project hereinbefore named and in conformity with the Plans and Specifications on file in the office of the Department of Transportation, 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

SIGN-STATE

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 April 30, 2027.

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 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

Bid Priority

In any situation where an electronic bid and paper bid are submitted for the same contract, the electronic bid will be accepted for consideration and the paper bid will be considered an Irregular Bid and will be rejected.

I acknowledge, understand, and accept these terms and conditions.

☒ Yes ☐ No

Signature /s/ Lisa King



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/31/2026

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 Arthur J. Gallagher Risk Management Services, LLC 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Renee Skillings PHONE (A/C, No, Ext): 800-238-3840 FAX (A/C, No): 603-224-8012 E-MAIL: renee_skillings@ajg.com ADDRESS: renee_skillings@ajg.com	
License#: 0D69293 DLKING&-01	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED D.L. King & Associates, Inc. 3-1 Mound Court Merrimack NH 03054	INSURER A: Citizens Insurance Company of America	31534
	INSURER B: Allmerica Financial Benefit Insurance Co	41840
	INSURER C: Hanover Insurance Companies	22292
	INSURER D: Massachusetts Bay Insurance Company	22306
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 445477177

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	ADD'L SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR ☒ Contractual per ☐ CG0001 GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PROJECT ☐ LOC OTHER:		ZBVJ539525-03	9/3/2026	9/3/2027	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 ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS ONLY		AWVJ539507-03	9/3/2026	9/3/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☒ RETENTION \$ 0		UHVJ539526-03	9/3/2026	9/3/2027	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 Prod/Comp Ops Agg \$ 5,000,000
D	☒ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	☐ Y ☒ N / A	WHVJ539518-03	9/3/2026	9/3/2027	☒ PER STATUTE ☐ OTH-ER 3A: NH/MA 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 Equip		ZBVJ539525-03	9/3/2026	9/3/2027	Limit \$35,000

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

Excluded Officers: Lisa and Dean King
Re: Project #81341RC, EOC Facility Mechanical Replacements and Repairs - Tank Renovations, 110 Smokey Bear Boulevard, Concord, NH
The State of New Hampshire, its agencies, and its agents and employees are additional insured with respect to general liability, automobile liability, and umbrella/excess liability on a primary non-contributory basis for both ongoing and completed operations per attached forms. Waiver of subrogation applies in favor of the additional insureds on the general liability, automobile liability, umbrella/excess liability, and workers compensation as permitted by state statute, per attached forms. 30 days' notice of cancellation shall be provided on all policies to the certificate holder (except 10 days for nonpayment of premium).

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire Department of Administrative Services 7 Hazen Drive Room 250 Concord NH 03301 United States	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 Arthur J. Gallagher Risk Management Services, LLC
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EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

8/24/2026

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY Arthur J. Gallagher Risk Management Services, LLC 45 Constitution Ave P.O. Box 511 Concord, NH 03301		PHONE (A/C, No, Ext): 800-238-3840	COMPANY Acadia Insurance Company P.O. Box 9010 Westbrook, ME 04098-5010	
FAX (A/C, No): 603-224-8012		E-MAIL ADDRESS:	License#: 0D69293	
CODE:	SUB CODE:			
AGENCY CUSTOMER ID #: DLKING&-01				
INSURED D.L. King & Associates, Inc; State of NH Dept of Administrative Services; all other contractors, subcontractors and others employed on the premises 3-1 Mound Court Merrimack NH 03054		LOAN NUMBER		POLICY NUMBER CIM5699647
		EFFECTIVE DATE 07/22/2026	EXPIRATION DATE 07/22/2027	☐ CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION
Loc # 1, Bldg # 1, 110 Smokey Bear Blvd, Concord, NH 03301

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION	PERILS INSURED	BASIC	X	BROAD	SPECIAL	AMOUNT OF INSURANCE	DEDUCTIBLE
	COVERAGE / PERILS / FORMS						
	Builders Risk - Jobsite Limit					\$186,300	\$1,000
	Builders Risk - Temporary Storage Locations Limit					\$93,150	\$1,000
	Builders Risk - Transit Limit					\$93,150	\$1,000
	Waiver of Subrogation - included						

REMARKS (Including Special Conditions)

EOC Facility Mechanical Replacements and Repairs - Tank Renovations; Job #81341RC
30 days' notice of cancellation shall be provided on all policies to the certificate holder (except 10 days for nonpayment of premium).

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.

ADDITIONAL INTEREST

NAME AND ADDRESS State of New Hampshire Department of Administrative Services 7 Hazen Drive Room 250 Concord, NH 03301 United States	☐	ADDITIONAL INSURED	☐	LENDER'S LOSS PAYABLE	☐	LOSS PAYEE
	☐	MORTGAGEE				
	LOAN #					
	AUTHORIZED REPRESENTATIVE Arthur J. Gallagher Risk Management Services, LLC					



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/24/2026

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PRODUCER
Arthur J. Gallagher Risk Management Services, LLC
45 Constitution Ave P.O. Box 511
Concord NH 03301

License#: 0D69293
DLKING&01

INSURED
State of NH Dept of Administrative Services
C/O D.L. King & Associates, Inc.
3-1 Mound Court
Merrimack NH 03054

CONTACT NAME: Renee Skillings
PHONE (A/C, No, Ext): 800-238-3840
FAX (A/C, No): 603-224-8012
E-MAIL ADDRESS: renee_skillings@ajg.com

INSURER(S) AFFORDING COVERAGE
INSURER A: Mid-Continent Assurance Company
INSURER B:
INSURER C:
INSURER D:
INSURER E:
INSURER F:

NAIC #

15380

COVERAGES**CERTIFICATE NUMBER:** 1073064506**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	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR ☒ Owners & ☐ Contractors Prot GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:		04OCP002009950	7/22/2026	7/22/2027	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 \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS ONLY					
	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) 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 \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project #81341RC - EOC Facility Mechanical Replacements and Repairs - Tank Renovations, 110 Smokey Bear Boulevard, Concord, NH
30 days' notice of cancellation shall be provided on all policies to the certificate holder (except 10 days for nonpayment of premium).

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire
Department of Administrative Services
7 Hazen Drive
Room 250
Concord NH 03301
United States

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
Arthur J. Gallagher Risk Management Services, LLC

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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 22nd, 2026,
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. 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 22, 2026

ATTEST:

Yopa mKub President
(Name & Title)

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: **0007898922**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 3rd day of April A.D. 2026.

A handwritten signature in black ink, appearing to read "David M. Scanlan", is written over a circular stamp that partially overlaps the seal of the State of New Hampshire.

David M. Scanlan
Secretary of State