84 - 11/10/26

State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES
25 Capitol Street – Room 100
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

October 7, 2026

Her Excellency, Governor Kelly A. Ayotte
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Administrative Services, Division of Public Works Design and Construction to enter into a **SOLE SOURCE** amendment to a contract with JSA. Inc. (VC#272728) of 273 Corporate Drive, Ste 100, Portsmouth, NH 03801 for Professional Architectural Services required for planning, design and construction of various Public Works' Projects as necessary and required by the Department, by increasing the contract by $150,000 for a revised not to exceed amount of $900,000. The contract is effective upon Governor and Council approval through June 30, 2027. The original contract was approved by Governor and Council on December 20, 2023, Item # 200.

EXPLANATION

The Department retains private architectural and engineering firms to provide appropriate technical expertise to support various construction projects on an on-call basis. These agreements enable the Department to support the anticipated project workload, as well as to respond quickly to unscheduled project requests and emergencies. Due to an increase in the number of projects and unforeseen requests, the current contract has been substantially depleted ahead of the June 30, 2027, expiration date.

While the Department is in the process of soliciting and selecting firms for new professional services contracts, there is an immediate need to bridge the gap until those contracts can be brought forward for Governor and Council approval over the next few months. This amendment is labeled **sole source** since the increase is more than 10% of the contract value. This contract amendment will provide additional services to support high-priority projects until the new contracts are in place.

Funding is provided by state agencies from monies appropriated for their respective project(s). The majority of projects needing this type of Architectural Services consultant work are maintenance and capital funded projects.

The agreement has been approved by the Attorney General as to form and execution.

Respectfully submitted,

Charles M. Arlinghaus,
Commissioner

AMENDMENT

This AMENDMENT TO THE CONTRACT ("Amendment") is entered into on October 7, 2026, by and between the State of New Hampshire, acting by and through the Commissioner, Department of Administrative Services (hereinafter "State," "Commissioner," "Department" respectively) and JSA, Inc (hereinafter "Consultant") (the State and the Consultant may hereinafter singularly and/or collectively be referred to as "Party" or "Parties").

WHEREAS, on December 20, 2023, New Hampshire Governor and Executive Council approved the original Contract for Professional Architectural Services ("Contract") with JSA, Inc (Item # 200) in the amount of $750,000, effective upon Governor and Council approval through June 30, 2027.

NOW THEREFORE, the Parties mutually agree to amend Contract as follows:

1. Increase the Contract not-to-exceed value by $150,000 for an amended not-to-exceed value of $900,000, with no changes to scope or the expiration date.

2. Except to the extent specifically set forth herein, this Amendment does not alter the terms of the Contract. All terms of the Contract remain in full force and effect.

IN WITNESS WHEREOF, the Parties hereto have set their hands the date first-written above.

CONSULTANT:
JSA, Inc.

By: _____ Date: 10/13/26
Name: WOL NORTH SULPEVANT
Title: PRESIDENT, CEO

THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF ADMINISTRATIVE SERVICES

By: _____ Date: 10/13/26
Name: Charles M. Arlinghaus
Title: Commissioner

The foregoing Amendment, having been reviewed by this office, is approved as to form and execution on October 19, 20 26.

OFFICE OF THE ATTORNEY GENERAL

By: _____
Assistant Attorney General

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 JSA INC. is a New Hampshire Profit Corporation registered to transact business in New Hampshire on July 24, 1980. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: **19188**

Certificate Number: **0008039820**

IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 13th day of October A.D. 2026.

David M. Scanlan

Secretary of State

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/13/2026

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	CONTACT NAME: Marsh Affinity	
Marsh Affinity a division of Marsh USA LLC. PO BOX 14404 Des Moines, IA 50306-9686	PHONE (A/C, No, Ext): 800-743-8130	FAX (A/C, No):
	E-MAIL ADDRESS: ADPTotalSource@marsh.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: New Hampshire Insurance Co.	23841
INSURED	INSURER B:	
ADP TotalSource MI VI, LLC 5800 Windward Parkway Alpharetta, GA 30005 Alternate Employer: JSA Inc. 273 CORPORATE DR. STE 100 Portsmouth, NH 038016863	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

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

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

INSR LTR	TYPE OF INSURANCE	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 $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WC 051656063 NH	07/01/2026	07/01/2027	X PER STATUTE ☐ OTH-ER	
							E.L. EACH ACCIDENT	$ 2,000,000
							E.L. DISEASE - EA EMPLOYEE	$ 2,000,000
							E.L. DISEASE - POLICY LIMIT	$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
All worksite employees working for JSA Inc. paid under ADP TOTALSOURCE, INC.'s payroll, are covered under the above stated policy. JSA Inc. is an alternate employer under this policy.
Proprietor/Partner/Executive Officer/Member are not excluded as long as they are in the ADPTS payroll or have completed the SEI Participation Addendum. 273 Corporate Drive

CERTIFICATE HOLDER

State of New Hampshire Department of Administrative Services
25 Capitol St., Suite 120
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 Jo Phillips

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ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 10/19/2026

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	CONTACT NAME: House Account	
Brown & Brown Insurance Services, Inc. 520 Cromwell Ave. Rocky Hill CT 06067	PHONE (A/C, No, Ext): (781) 245-5400	FAX (A/C, No): (781) 245-5463
	E-MAIL ADDRESS:	

INSURED	INSURER(S) AFFORDING COVERAGE	NAIC #
JSA, Inc. Architects & Planners 273 Corporate Drive Suite 100 Portsmouth NH 03801	INSURER A : The Travelers Indemnity Company of Connecticut	25682
	INSURER B : Travelers Property Casualty Company of America	25674
	INSURER C : XL Specialty Insurance Company	37885
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 2026 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. *LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. LIMITS SHOWN ARE INCLUSIVE OF AMOUNTS REQUESTED BY THE CERTIFICATE HOLDER AND MAY NOT REFLECT POLICY LIMIT AMOUNTS IN EXCESS OF THOSE REQUESTED. ***Not Applicable in WY**

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 GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PRO-JECT ☐ LOC ☐ OTHER:	Y		6805H97977A	01/01/2026	01/01/2027	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG $	$ 1,000,000 $ 1,000,000 $ 5,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY	Y		BA3R256796	01/01/2026	01/01/2027	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) XNUCL	$ 1,000,000 $ $ $ $
B	☒ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☒ RETENTION $ 10,000	Y		CUP4P902868	01/01/2026	01/01/2027	EACH OCCURRENCE AGGREGATE $	$ 10,000,000 $ 10,000,000 $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					☐ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ $ $
C	Arch/Eng/Prof Liab Incl Pollution			DPR5061251	08/15/2026	08/15/2027	Per Claim Aggregate	5,000,000 5,000,000

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

The State, its agencies, and its agents and employees and all others required are included as additional insured to the extent allowed on the blanket additional insured endorsements included on the above listed policies.

CERTIFICATE HOLDER

State of New Hampshire; Dept of Administrative Services
25 Capitol St, Suite 120
Concord NH 03301

CANCELLATION

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

AUTHORIZED REPRESENTATIVE



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CORPORATE RESOLUTION

JSA INC

OCTOBER 13, 2026

Wm. North Sturtevant, President and CEO is authorized as a contractual authority to enter the Firm in Contracts ands Amendments relating to the State of New Hampshire Contract for Professional Architectural Services with JSA Inc. dated December 23, 2023.

Wm, North Sturtevant, President and CEO

Sandra Hodge, Member

Richard Martz, Member

Caleb Sloan, Member

Renee Dunn, Member