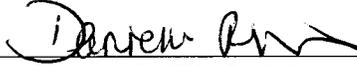


STATE OF NEW HAMPSHIRE
BUREAU OF PURCHASE AND PROPERTY
STATE HOUSE ANNEX - ROOM 102
25 CAPITOL ST
CONCORD NH 03301-6398

DATE: 8/25/15
CONTRACT #: 8001852
CONTRACT FOR: FUEL, #2 Fuel & Heating Kerosene
NIGP CODE: 405-1200
CONTRACTOR: Irving Energy/Highland Fuel Delivery VENDOR CODE #: 177127

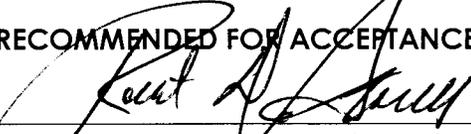
SUBMITTED FOR ACCEPTANCE BY:



DANIELLE RUEST, PURCHASING AGENT
BUREAU OF PURCHASE AND PROPERTY

DATE 8/26/15

RECOMMENDED FOR ACCEPTANCE BY:



ROBERT STOWELL, ADMINISTRATOR
BUREAU OF PURCHASE AND PROPERTY

DATE 8/26/15

ENDORSED FOR ACCEPTANCE BY:



LISA M. POLLARD, DIRECTOR
DIVISION OF PROCUREMENT & SUPPORT SERVICES

DATE 8/26/15

ACCEPTED FOR THE STATE OF NEW HAMPSHIRE UNDER THE AUTHORITY GRANTED TO ME BY NEW HAMPSHIRE REVISED STATUTES, ANNOTATED 21-I:14, XII.



VICKI QUIRAM, COMMISSIONER
DEPARTMENT OF ADMINISTRATIVE SERVICES

DATE 8/26/15

NOTE: Contract for #2 Fuel and Heating Kerosene for multiple State locations based on low bid per location per Bid# 1793-16. Pricing is variable, as it is a markup per gallon over the OPIS Oil Price Daily K-1 or #2 Fuel rack pricing. Over the last two years, approximately \$277,000 was spent on #2 Fuel with Highlands Fuel Delivery/Irving Energy. Contractor was not found on the debarred parties list, nor do they have any exclusions or delinquency on SAM website.

State of New Hampshire
Division of Procurement and Support Services
Bureau of Purchase and Property
25 Capitol Street, State House Annex
Concord, NH 03301-6398

Date: 8/3/15
Bid No.: 1793-16
Date of Bid Opening: 8/12/15
Time of Bid Opening: 11:00 AM (EST)

YOU MAY EMAIL YOUR BID TO DANIELLE RUEST AT: EMAIL PRCHWEB@NH.GOV

BID INVITATION FOR CONTRACT: #2 HEATING OIL & KEROSENE

[Insert name of signor] Tara Frost, on behalf of Highlands Fuel Delivery LLC [insert name of entity submitting bid (collectively referred to as "Vendor")] hereby submits an offer as contained in the written bid submitted herewith ("Bid") to the State of New Hampshire in response to BID # 1793-16 at the price(s) quoted herein in complete accordance with the bid.

Vendor attests to the fact that:

1. The Vendor has reviewed and agreed to be bound by the Bid.
2. The Vendor has not altered any of the language or other provisions contained in the Bid document.
3. The Bid is effective for a period of 180 days from the Bid Opening date as indicated above.
4. The prices Vendor has quoted in the Bid were established without collusion with other vendors.
5. The Vendor has read and fully understands this Bid.
6. Further, in accordance with RSA 21-I:11-c, the undersigned Vendor certifies that neither the Vendor nor any of its subsidiaries, affiliates or principal officers (principal officers refers to individuals with management responsibility for the entity or association):
 - a. Has, within the past 2 years, been convicted of, or pleaded guilty to, a violation of RSA 356:2, RSA 356:4, or any state or federal law or county or municipal ordinance prohibiting specified bidding practices, or involving antitrust violations, which has not been annulled;
 - b. Has been prohibited, either permanently or temporarily, from participating in any public works project pursuant to RSA 638:20;
 - c. Has previously provided false, deceptive, or fraudulent information on a vendor code number application form, or any other document submitted to the state of New Hampshire, which information was not corrected as of the time of the filing a bid, proposal, or quotation;
 - d. Is currently debarred from performing work on any project of the federal government or the government of any state;
 - e. Has, within the past 2 years, failed to cure a default on any contract with the federal government or the government of any state;
 - f. Is presently subject to any order of the department of labor, the department of employment security, or any other state department, agency, board, or commission, finding that the applicant is not in compliance with the requirements of the laws or rules that the department, agency, board, or commission is charged with implementing;
 - g. Is presently subject to any sanction or penalty finally issued by the department of labor, the department of employment security, or any other state department, agency, board, or commission, which sanction or penalty has not been fully discharged or fulfilled;
 - n. Is currently serving a sentence or is subject to a continuing or unfulfilled penalty for any crime or violation noted in this section;
 - i. Has failed or neglected to advise the division of any conviction, plea of guilty, or finding relative to any crime or violation noted in this section, or of any debarment, within 30 days of such conviction, plea, finding, or debarment; or
 - j. Has been placed on the debarred parties list described in RSA 21-I:11-c within the past year.

This document must be signed by a person who is authorized to legally obligate the responding vendor. A signature on this document indicates that all State of New Hampshire terms and conditions are accepted by the responding vendor and that any and all other terms and conditions submitted by the responding vendor are null and void, even if such terms and conditions have terminology to the contrary. The responding vendor shall also be subject to State of New Hampshire terms and conditions as stated on the reverse of the purchase order.

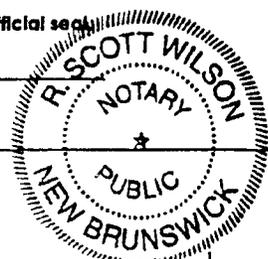
Authorized Signor's Signature Tara Frost Authorized Signor's Title Government Account Manager, Highlands Fuel Delivery LLC

NOTARY PUBLIC/JUSTICE OF THE PEACE

COUNTY: Saint John STATE: NB ZIP: 02241

On the 12 day of August, 2015, personally appeared before me, the above named Tara Frost in his/her capacity as authorized representative of Highlands Fuel Delivery LLC known to me or satisfactorily proven, and took oath that the foregoing is true and accurate to the best of his/her knowledge and belief.

In witness thereof, I hereunto set my hand and official seal:
Scott Wilson
(Notary Public/Justice of the Peace)



My commission expires: n/a (Date)

INFORMATIONAL PURPOSES ONLY

The bidder may make available to the State twenty-four (24) hour oil burner service at prices not to exceed the lowest price charged to any other customer in the respective areas.

The bidder shall be responsible for the billing of both fuel and burner service even though a third party may be performing the burner service.

A copy of the oil burner service work order shall be left at the site upon each service call, preferably with onsite State personnel.

Please indicate if you offer burner service and repair services:

Yes

No

VENDOR CONTACT INFORMATION:

The following information is for this office to be able to contact a person knowledgeable of your bid response, and who can answer questions regarding it:

Tara Frost 603-559-8834 888-620-1234
Contact Person Local Telephone Number Toll Free Telephone Number
888-242-1181 tara.frost@irvingoil.com www.irvingenergy.com
Fax Number E-mail Address Company Website
Highlands Fuel Delivery DBA Irving Energy 01-901-0529
Vendor Company Name DUNS #
190 Commerce Way Portsmouth, NH 03801
Vendor Address

ATTACHMENTS:

The following attachments are an integral part of this bid invitation:

- Agency Locations and Offer Sheet - #2 Fuel & Kerosene
- NH District Map
- OPIS Oil Price Daily Example

Note: To be considered, bid must be signed and notarized on front cover sheet in the space provided.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/19/2015

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 Marsh USA Inc., Multinational Incoming Unit a service of Seabury and Smith, Inc. 9830 Colonnade Boulevard, Suite 400 PO Box 659520 San Antonio, TX 78265-9520	CONTACT NAME: _____ PHONE (A/C, No, Ext): 210-691-4100	FAX (A/C, No): 210-737-3584
	E-MAIL ADDRESS: _____	
INSURED Irving Oil Corporation 190 Commerce Way Portsmouth, NH 03801	INSURER(S) AFFORDING COVERAGE	
	INSURER A: ACE American Insurance Co	
	INSURER B: ACE Property & Casualty Ins Co	
	INSURER C: *See Global Excess Carriers Below	
	INSURER D:	
	INSURER E:	

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$1,900,000 SIR <input checked="" type="checkbox"/> \$100,000 Deductible GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			XSLG27239559	03/31/2015	03/31/2016	EACH OCCURRENCE \$100,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$0 MED EXP (Any one person) \$0 PERSONAL & ADV INJURY \$100,000 GENERAL AGGREGATE \$100,000 PRODUCTS - COMPOP AGG \$100,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			MCCH08138382	03/31/2015	03/31/2016	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$			XOOG27238555 SIR \$2,000,000	03/31/2015	03/31/2016	EACH OCCURRENCE \$3,000,000 AGGREGATE \$3,000,000 \$
	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 <input type="checkbox"/> N/A				WC STATUTORY LIMITS: \$ OTHER: \$ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	Global Excess Liability *limits in CDN funds			policies listed in Description section	03/31/2015	03/31/2016	Aggregate 55,000,000 Each Occurrence 55,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 RE: Evidence of Insurance # 2 Fuel and Heating Kerosene, RFB 1793-16
 1. ACE INA Insurance, XBC602796, \$5,000,000. 2. Ironshore Canada 50%, C444979915/Temple Insurance Company 50%, EXC107527, \$3,000,000. 3. Zurich Global Energy, B0509E1149315, \$10,000,000. 4. Mitsui Sumitomo Syndicate 75%/AEGIS Syndicate 25%, B0509E1149415 \$10,000,000. 5. Temple Insurance Company, EXC107713, \$10,000,000. 6. Mitsui Sumitomo Syndicate 83.33%/AEGIS Syndicate 16.67%, B0509E1250415, \$10,000,000.
 The above XBC602796, C444979915, EXC107527, B0509E1149315, B0509E1149415, EXC107713 and B0509E1250415 policies were placed by Marsh Canada Limited.
 Seabury & Smith, Inc. has only acted in the role of a consultant to these placements, which are indicated here for your convenience.

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services Bureau of Purchase and Property 25 Capitol Street RM 102 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 <i>Katherine Dyer</i>



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/10/2014

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 MARSH USA INC. 6500 SHERIDAN DRIVE, SUITE 114 WILLIAMSVILLE, NY U.S.A. 14221	CONTACT NAME: PHONE (A/C, No, Ext): 1-866-616-0088 FAX (A/C, No): 416-349-4564 EMAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED Irving Oil Limited; Highlands Fuel Delivery LLC DBA: Irving Energy Distribution & Marketing; Irving Oil Terminals, Inc.; Irving Oil Marketing, Inc.; Ocean Investments Corporation 1 Germain Street, Suite 1100 Saint John, NB E2L 4V1	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D: Liberty Mutual Fire Insurance Company 23035	
INSURER E:		INSURER F:

COVERAGES **CERTIFICATE NUMBER: 14/15-076-WC** **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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/PO/ AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? NO (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WA2-B7D-072905-044	11/16/2014	11/16/2015	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> 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

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Evidence of U.S. Workers' Compensation & Employer's Liability Coverage.

CERTIFICATE HOLDER State of New Hampshire Division of Plant and Property Management Bureau of Purchase and Property 25 Capitol St., State House Annex 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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Corporation Division

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- [By Registered Agent](#)
- [Annual Report](#)
- [File Online](#)
- [Guidelines](#)
- [Name Availability](#)
- [Name Appeal Process](#)

Filed Documents

Date: 8/25/2015 (Annual Report History, View Images, etc.)

Business Name History

Name	Name Type
Irving Oil Marketing, Inc.	Legal
Irving Oil Marketing, Inc.	Home State

Corporation - Foreign - Information

Business ID: 604977
Status: Good Standing
Entity Creation Date: 11/12/2008
State of Business.: ME
Principal Office Address: 190 Commerce Way
 Portsmouth NH 03801
Principal Mailing Address: No Address
Last Annual Report Filed Date: 3/27/2015 1:39:44 PM
Last Annual Report Filed: 2015

Registered Agent

Agent Name: C T Corporation System
Office Address: 9 Capitol Street
 Concord NH 03301
Mailing Address:

Important Note: The status reflected for each entity on this website only refers to the status of the entity's filing requirements with this office. It does not necessarily reflect the disciplinary status of the entity with any state agency. Requests for disciplinary information should be directed to agencies with licensing or other regulatory authority over the entity.