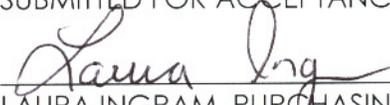


STATE OF NEW HAMPSHIRE  
BUREAU OF PURCHASE AND PROPERTY  
STATE HOUSE ANNEX - ROOM 102  
25 CAPITOL ST  
CONCORD NH 03301-6398

NOTICE OF CONTRACT

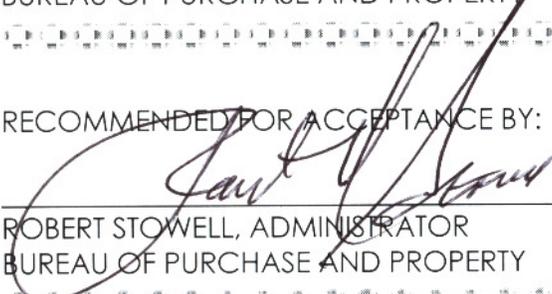
DATE: 09/16/15  
CONTRACT FOR: Snow Plowing Services  
NIGP CODE: 968-7200  
CONTRACTOR: TH Turnkey Construction LLC CONTRACTOR #226497

SUBMITTED FOR ACCEPTANCE BY:

  
\_\_\_\_\_  
LAURA INGRAM, PURCHASING AGENT  
BUREAU OF PURCHASE AND PROPERTY

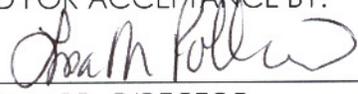
DATE 9/17/15

RECOMMENDED FOR ACCEPTANCE BY:

  
\_\_\_\_\_  
ROBERT STOWELL, ADMINISTRATOR  
BUREAU OF PURCHASE AND PROPERTY

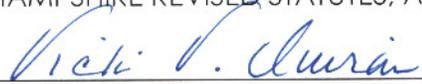
DATE 9/23/15

ENDORSED FOR ACCEPTANCE BY:

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

DATE 9-23-15

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 9/29/15

.....  
This contract is in result of NH Bid 1774-16 for Snow Plowing Services. If approved, this contract will be in effect upon approval through 07/31/18 with extensions upon mutual agreement. I have verified there are no records of debarment or exclusions.

Last 3 yr contract pricing

Liquor Store #46	\$11,700
Laconia District Court	\$17,700
Lakes Region - Laconia	\$24,400
NHES Laconia Office	\$18,636



Subject: **SNOWPLOWING SERVICES**

**Notice:** This agreement and all of its attachments shall become public upon approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

The State of New Hampshire and the Contractor hereby mutually agree as follows:

**GENERAL PROVISIONS**

**1. IDENTIFICATION.**

1.1 State Agency Name State of New Hampshire Administrative Services		1.2 State Agency Address State House Annex, Room 102 25 Capitol Street Concord, NH 03301	
1.3 Contractor Name TH Turnkey Construction LLC		1.4 Contractor Address PO Box 1612 Meredith NH 03253	
1.5 Contractor Phone Number 603-608-8236	1.6 Account Number	1.7 Completion Date 7/31/2018	1.8 Price Limitation \$74,350
1.9 Contracting Officer for State Agency  <i>Laura Ingram, Purchasing Agent</i>		1.10 State Agency Telephone Number  603-271-2009	
1.11 Contractor Signature  		1.12 Name and Title of Contractor Signatory  <i>Todd Andrews - owner</i>	
1.13 Acknowledgement: State of <i>NH</i> , County of <i>Belknap</i> On <i>9/7/2015</i> , before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
1.13.1 Signature of Notary Public or Justice of the Peace <div style="border: 1px solid black; padding: 2px; display: inline-block;">                     TAMARA L. VAN LENTEN                      * NOTARY PUBLIC - NEW HAMPSHIRE *                      [Seal] My Commission Expires August 5, 2019                 </div> 			
1.13.2 Name and Title of Notary or Justice of the Peace  <i>Tamara VanLenten Notary Public</i>			
1.14 State Agency Signature  <i>Vicki V. Quiram</i> Date: <i>9/29/15</i>		1.15 Name and Title of State Agency Signatory Vicki V. Quiram, Commissioner	
1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable)  By: _____ Director, On: _____			
1.17 Approval by the Attorney General (Form, Substance and Execution) (if applicable)  By: _____ On: _____			
1.18 Approval by the Governor and Executive Council (if applicable)  By: _____ On: _____			

**2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED.** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. This may include the requirement to utilize auxiliary aids and services to ensure that persons with communication disabilities, including vision, hearing and speech, can communicate with, receive information from, and convey information to the Contractor. In addition, the Contractor shall comply with all applicable copyright laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

**8. EVENT OF DEFAULT/REMEDIES.**

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default");

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

**9. DATA/ACCESS/CONFIDENTIALITY/ PRESERVATION.**

9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

**10. TERMINATION.** In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

**11. CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

**12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.** The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written notice and consent of the State.

**13. INDEMNIFICATION.** The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

**14. INSURANCE.**

14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate ; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.



## EXHIBIT A

### **PURPOSE**

TH Turnkey Construction LLC, (hereinafter referred to as the "Contractor") hereby agrees to provide the State of New Hampshire (hereinafter referred to as the "State"), Department of Administrative Services, with Snowplowing Services in accordance with the bid submission in response to State Bid # 1774-16 and described herein.

### **TERM**

This contract shall commence on the date approved by the Commissioner of Administrative Services, and terminates on July 31, 2018. The Contract may be extended for an additional two (2) years thereafter under the same terms, conditions and pricing structure upon the mutual agreement between the Contractor and State, and with the approval of the Commissioner of the Department of Administrative Services. The maximum term of the Contract (including all extensions) cannot exceed five (5) years.

The State of New Hampshire has the right to terminate the contract at any time by giving the Contractor thirty (30) days advance written notice.

### **DAMAGE**

The Contractor shall agree to hold the State of NH harmless from liability arising out of injuries or damage caused while performing this work. The Contractor shall agree that any damage to building(s), materials, equipment or other property during the performance of the service shall be repaired at its expense.

### **DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION LOWER TIER COVERED TRANSACTIONS**

The Contractor certifies, by submission of this contract, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or Agency.

### **CONFIDENTIALITY & CRIMINAL RECORD**

If requested by the using agency, the Contractor and their employees, and Sub-Contractors (if any), shall be required to sign and submit a Confidential Nature of Department Records Form and a Criminal Authorization Records Form. These forms shall be submitted to the individual using agency prior to the start of any work.

### **INSURANCE**

Certificate of insurance amounts must be met and maintained throughout the term of the contract and any extensions as per the P-37, section 14 (as modified in Exhibit C) and cannot be cancelled or modified until the State receives a 10 day prior written notice.

### **SCOPE OF WORK**

#### **Bare pavement policy**

Services shall include, but shall not be limited to, snow plowing, removal and disposal of snow; salting and sanding shall be accomplished as needed, or on request of the agency/location. The Contractor shall maintain a bare pavement policy; all areas shall be treated regardless of the amount of snow accumulation.

#### **Commencement of Operations:**

Contractor shall be on site providing service as follows:

- Plowing/removal operations upon the accumulation of 2" of snow or more.

TGA  
9/7/11

- Salting, Sanding and any time conditions warrant, the following are examples:
  - Freezing rain,
  - Black Ice;
  - Sleet,
  - Spring Melt off

**Snow drifts cleanup**

Contractor shall continually monitor conditions and apply resources as needed to return the pavement to bare and wet condition as soon as practical.

**Facility Conference**

Contractor shall not commence work until a conference is held with each agency, at which representatives of the Contractor and the State are present. The conference will be arranged by the requesting agency (State).

**Access to Highways/Streets**

In the event that plowing operation (contractor or city/town/state) create snow banks that impair the vision of vehicles/pedestrians entering/exiting plowed areas, these banks shall be removed to ensure safe exit/entering to facilities within 48 hours of storms end.

**Work Staff**

The work staff shall consist of qualified persons completely familiar with the products and equipment they shall use. The Contract Officer may require the contractor to dismiss from the work such employees as are deemed incompetent, careless, insubordinate, or otherwise objectionable, or whose continued employment shall be contrary to the public interest or inconsistent with the best interest of security.

**Property Inspection fall marking/damage**

Contractor shall clearly identify areas such as, but not limited to, curbing, shrubs, manholes, fencing, guardrails, electrical junction boxes or any other areas that are susceptible to damage when concealed by snowfall prior to the first snowfall.

If damage is found while "staking" your properties; you need to notify the State's contract manager in writing (preferably w/pictures). The State of New Hampshire will reject any damage claims once snow has fallen.

**Public / Private Sidewalks Roadways**

Under no circumstances shall Contractor push/plow snow onto walkways (Private or Public) or Roadways.

**Snow Drifts/ Wind Rows**

The Contractor is responsible for snow drift / Wind Row cleanup. Contractor shall be called to return to site to plow snow drifts during, after and or between storms.

**Concrete Walkways/driveways**

Concrete Walkways/driveways shall be treated with SALT FREE sand or Sand treated with Magnesium Chloride or other approved product(s) ONLY.

Snow plow blades shall be Rubber or Urethane or other approved product(s).

**Approved Snow Disposal sites.**

The State of New Hampshire does not provide or allow the removal of snow from one facility to be deposited at another state facility location. All removed snow shall be lawfully disposed of.

**Environmental impact**

A major concern in using chemicals for winter road maintenance is environmental impact. Studies show that soils, vegetation, water, highway facilities, and vehicles are all affected, so it is very important to use chemicals wisely. Most soil and vegetation damage occurs within 60 feet of the road and is greatest close to the pavement.

**Damages**

The Contractor shall be responsible for any and all damage to buildings, doors, bollard posts, taxiway lights, seen and unseen obstacles, and shall be required to repair and/or replace any damaged item at their expense. Contractor shall be required to fill out an Abbreviated Ground Accident Report that shall be supplied.

Contractor Initials TWA  
 Date 9/7/11

### **End of season signoffs**

All contractors shall have completed their spring cleanup prior to requesting a signoff for the end of season. Agencies will have supplied you with the form they desire, or such form(s) shall be provided by the Contract Officer. April payment depends upon submitting this completed form.

### **Handicap Parking**

Contractors shall not use handicap parking spots to store snow. All handicap spots shall be clean of ice, snow and treated within 48 Hours of storm's end.

### **Equipment**

All equipment used in the performance of services under the Contract, shall be foreign substance FREE on all areas to be utilizing in the plowing of the Jobsite. A foreign substance is defined as any of the following:

- Motor vehicle fluids (oil, gas, diesel, grease etc)
- Plow fluids (fluids, grease etc)
- Tobacco no form of tobacco shall be in use in the vehicles while at the facility
- Vehicle refuse (Trash in vehicle that may escape onto the plowing area)

Vehicles and/or equipment that do not meet the above criteria shall be immediately taken out of service until the problem(s) are corrected, NO EXCEPTIONS.

### **Amber Flashing lights/strobe lights**

All equipment used in the performance of services under the Contract shall have Amber Flashing lights/strobe lights. These shall be on and working at all times during operations (from startup to shutdown). Vehicles not meeting these criteria shall be taken out of service immediately, NO EXCEPTIONS.

### **Metal Chains**

Equipment shall come fitted with rubber tires, no metal chains.

### **Hazardous Waste Disposal**

In the event of a spill, any captured Hazardous Materials must be disposed of promptly and properly. This disposal shall take place within 2 working days of the incident. Contractor will be required to provide copies of all disposal records and logs.

### **On Site Stored Equipment Storage**

Requires **written pre-authorization**.

Stored equipment shall use the following equipment to prevent leaking fluids.

- 1 SPILFYTER Sorbent Berm Pillow, 28 x 42 In, PK 5 (or equivalent)
- Multiple spill berms shall be used as needed under ALL equipment, in other words, under the most vulnerable known areas (i.e. crankcase, drive seals, hydraulic housing, rear end etc), when parked.

### **Spill Kit Requirements (Minimum requirements)**

Each vehicle used performing services under the Contract shall have the following:

- 1 FAST PACK Grab Bag Spill Kit, 5 Gallon, Universal (or equivalent)  
Gallons absorbed per Pk'g 5,  
Includes(1) Heavy-Duty Water Resistant Duffel,  
(1) Quart Bag ENSORB(R) (10) Pads,  
(2) Medium Socks, (1) Pack Wipes,  
(1) Disposal Bag and Tie,  
(1) Pair Nitrile Gloves
- 1 STARDUST Vehicle Spill Kit, 2gallon (or equivalent)  
2 Gallons absorbed per Pk'g,  
Includes(1) Water Resistant Nylon Zippered Tote,  
(2) 3-lb. Stardust Dispensers,  
(1) Broom Head,  
(1) Telescoping Broom Handle,  
(1) Dustpan/Brush Combo,  
(10) Disposal Bags,  
(1) Goggles,  
(2) Nitrile Gloves

TAW  
9/2/10

**Keys/Cardkeys Policy**

The Contractor shall establish and implement methods of ensuring that all Card keys /keys issued to the Contractor by the State are not lost or misplaced and are not used by unauthorized persons. No card keys/keys issued to the Contractor by the State shall be duplicated. The Contractor shall report the loss of keys or access cards to the Contracting Officer. In the event keys are lost, the Contractor shall be required, upon direction of the Contracting Officer, to rekey or replace the affected lock or locks; however, the State, at its option, may replace the affected lock or locks or perform rekeying. When the replacement of locks or rekeying is performed by the State, the total cost of rekeying or the replacements of the lock or locks shall be deducted from the monthly payment due the Contractor. In the event a master key is lost or duplicated, all locks and keys for that system may be replaced by the State and the total cost deducted from the monthly payment due. It is the responsibility of the Contractor to prohibit the use of keys issued by the State by any persons other than the Work Staff. Replacement keys/Access Cards will be billed at a cost of \$10.00 per unit and shall be deducted from the monthly payment due the Contractor.

**Criminal Records Check Requirements**

Certain Facilities require that prior to placing an individual in a State facility the Contractor shall provide a completed (processed) "**Criminal Records Release Form**" ( ) to the Facility Contact. All Criminal Records Release Forms shall be no more than 6 months old (based upon the bid opening date). The facility contact shall review the Criminal Records Form to verify that they meet facility requirements. **Only approved individuals are allowed on state property and in state facilities at all times. Depending on the facility enhanced background checks and/or specific requirement are noted on the "maintenance frequency schedule" for the facility.**

	Day	Open	Close
	Sunday	10:00am	6:00pm
	Monday	10:00am	6:00pm
	Tuesday	10:00am	6:00pm
	Wednesday	10:00am	6:00pm
	Thursday	10:00am	8:00pm
	Friday	10:00am	8:00pm
	Saturday	9:00am	8:00pm
Liquor Store #46 (Ashland)	<ul style="list-style-type: none"> <li>Contractor shall commence operations so that 1 hour before opening the facility has been completely serviced</li> <li>Contractor shall supply snowplowing services as needed to assure that NO more than 2 inches have accumulated in travel lanes.</li> <li>Contractor will shovel, sand and/or salt/Magnesium Chloride all public and employee access areas and walkways to ensure that they are kept clear of snow and ice hazards each time parking lot is plowed during Business hours.</li> <li>Contractor Shall provide 20 - 25 pound bags of Magnesium Chloride or <b>EQUIVALENT NO LATER NOVEMBER 1ST EACH PLOW SEASON</b></li> <li>Snow must be hauled away from the premises of all locations when necessary to have complete access to dumpsters, Generators, propane tanks, HVAC units, parking areas, entrance ways, exits and loading areas.</li> <li>To eliminate ice buildup, the Contractor shall salt, sand and scrape all surfaces after every ice/snow storm</li> <li>Salt/sand barrels shall be placed at building entrances/exits each plow season; no later than November 1st and removed no later than May 15. The Contractor shall be responsible for filling them.</li> </ul>		
Laconia District Court	<ul style="list-style-type: none"> <li>Contractor shall commence snow plow operations to ensure the facility has been fully serviced including walkways/employee access areas no later than 7:00 AM Monday – Friday.</li> <li>Facility maintains walkways/employee access areas during business hours</li> <li>All parking spots shall be useable no later than 7:00 AM Monday - Friday</li> <li>Facility primary business hours are from 8:00 am until 5:00 pm Monday-Friday. During these business hours, Contractor will provide snowplowing services as needed to assure that no more than 2 inches have accumulated in travel lanes.</li> <li>Snow shall be removed &amp; all parking spots shall be useable within 24 hours of the storm's end.</li> <li>All parking spots and travel ways shall be useable within 24 hours of the storms end.</li> </ul>		
Lakes Region - Laconia	<ul style="list-style-type: none"> <li>Department of Health and Human Services Facility including Parking, Hydrant Access, Outbuilding Entrances and Roadways, located at 54/56 Green Street, Laconia, New Hampshire. Contact Joseph J. Luna 603-271-0962</li> <li>The work area is the road, approximately 1,200 feet long with a 40'x40' parking area located at the end of the road to the right and an additional "spur" off the road to an outbuilding and fire hydrant. Fire hydrant is to be kept accessible for use by emergency services at all times and must never be blocked. The work area also includes the parking area off the entry drive along side the fenced-in compound; the parking area is approximately 20 feet by 30 feet. Services to include the removal of snow as required allowing vehicular and pedestrian access to the existing mailboxes.</li> <li>Normal hours of operation of the Department of Health and Human Services' facilities are twenty-four hours a day, seven days a week. The Contractor should be aware that there might be vehicular or pedestrian traffic in the area at any time.</li> </ul>		

Contractor Initials                       
Date

NHES Laconia Office

- All parking spots shall be useable by 7AM Monday – Friday. NHES's primary business hours are from 7:00 am until 5:00 pm Monday through Friday.
- During business hours, Contractor shall provide snowplowing services as needed to assure that no more than 2 inches have accumulated in travel lanes.
- Contractor will shovel, sand and/or salt all public and employee access areas and walk ways to ensure that they are kept clear of snow and ice hazards each time parking lot is plowed throughout the day.
- Salt/sand barrels shall be placed at building entrances/exits each plow season; no later than November 1st and removed no later than May 15. The Contractor shall be responsible for filling them.
- Snow must be removed within 2 business days of storm's end
- Contractor will clear snow away from Generators, HVAC units, Dumpsters, Propane Tanks in order to provide unobstructed access to / from units each time parking lot is plowed.

The Vendor shall not commence work until a conference is held with each agency, at which representatives of the Vendor and the State are present. The conference will be arranged by the requesting agency (State).

The State shall require correction of defective work or damages to any part of a building or its appurtenances when caused by the Vendor's employees, equipment or supplies. The Vendor shall replace in satisfactory condition all defective work and damages rendered thereby or any other damages incurred. Upon failure of the Vendor to proceed promptly with the necessary corrections, the State may withhold any amount necessary to correct all defective work or damages from payments to the Vendor.

The work staff shall consist of qualified persons completely familiar with the products and equipment they shall use. The Contracting Officer may require the Vendor to dismiss from the work such employees as deems incompetent, careless, insubordinate, or otherwise objectionable, or whose continued employment on the work is deemed to be contrary to the public interest or inconsistent with the best interest of security and the State.

The vendor or their personnel shall not represent themselves as employees or agents of the State.

While on State property, employees shall be subject to the control of the State, but under no circumstances shall such persons be deemed to be employees of the State.

All personnel shall observe all regulations or special restrictions in effect at the State Agency.

The Vendor's personnel shall be allowed only in areas where services are being performed. The use of State telephones is prohibited.

If sub-contractors are to be utilized, please include information regarding the proposed sub-contractors including the name of the company, their address, contact person and three references for clients they are currently servicing.

## EXHIBIT B

### CONTRACT PRICE

The Contractor hereby agrees to provide snow plowing services in complete compliance with the terms and conditions specified in Exhibit A for an amount up to and not to exceed a price of \$74,350; this figure shall not be considered a guaranteed or minimum figure; however it shall be considered a maximum figure from the effective date of through the expiration date set as July 31, 2018.

### INVOICE

Contracted term starts upon the State of New Hampshire's acceptance of the contract and ends on July 31, 2018. All invoices shall be sent to facility address location.

All invoices require Location and the month you are billing for.

The following are the payment terms:

Bills submitted before the date(s) below shall be REJECTED and you will have to re-invoice.

- 1) or later, payment shall be n30 days upon acceptance of the work.
- 2) or later, payment shall be n30 days upon acceptance of the work.
- 3) or later, payment shall be n30 days upon acceptance of the work.
- 4) or later, payment shall be n30 days upon acceptance of the work.
- 5) or later, payment shall be net 30 upon acceptance of the work.
- 6) or later and FACILITY signoff Sheet are required for payment. The State shall use the invoice date or the Facility Signoff sheet date – whichever is later; payment shall be net 30 based upon the later date.

**EXHIBIT C**

**SPECIAL PROVISIONS**

There are no special provisions.

*TWS*  
*9/7/15*

*State of New Hampshire*

Linda M. Hodgdon  
Commissioner  
603/271-3201



Michael P. Connor  
Deputy Commissioner  
603/271-6899

Robert D. Stowell  
Administrator  
603/271-3606

Department Of Administrative Services  
Division of Plant & Property Management  
Bureau Of Purchase & Property  
State House Annex  
25 Capitol Street  
Concord, New Hampshire 03301  
603/271-2201

August 28, 2015

RE: State of N. H. – Snow Plowing

In response to the bid submitted to the State of New Hampshire for a service contract for – Snow Plowing Services, I am pleased to offer the enclosed P-37 Agreement for your execution.

Please review the Agreement and request that the duly authorized representative per the by-laws of the corporation execute one original and return to me accompanied by the following:

- A Certificate of Insurance, which provides:
  - The insurance requirements outlined in the P-37 agreement, Section 14
  - Certificate holder identified as: State of New Hampshire, Administrative Services, Purchasing Agent, Laura Ingram or his successor, Bureau of Purchase and Property, 25 Capitol Street, Room 102, Concord, NH 03301
  - The Certificate may not be cancelled until the State of New Hampshire receives 10 days prior written notice; and
- A Corporate Resolution or Certificate of Authority. (*This evidence of authority must include a corporate seal or be notarized and **must** be dated the same date as the signor signs the Form P-37 Contract.*)
- Please Initial and date all pages in the document

At your earliest convenience and no later than September 8, 2015, please return the above mentioned documents to our office. You may either E-mail, mail or drop off to 25 Capitol Street, State House Annex, Bureau of Purchase and Property, Room 102, Concord, NH 03301, addressed to me.

Feel free to call me at (603) 271-2009 with any questions. Thank you for your cooperation and we look forward to doing business with you.

Sincerely,

State of New Hampshire  
Bureau of Purchase and Property

Laura Ingram  
Purchasing Agent

Telephone: 603-271-2009  
Fax: 603-271-2700  
E-mail: [laura.ingram@nh.gov](mailto:laura.ingram@nh.gov)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/28/2015

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).

<b>PRODUCER</b> Noyes Insurance Agency Inc P.O. Box 420 63 Main Street Plymouth NH 03264	<b>CONTACT NAME:</b> Carrie DiNatale <b>PHONE (A/C, No, Ext):</b> (603) 536-1735 <b>FAX (A/C, No):</b> (603) 536-4298 <b>E-MAIL ADDRESS:</b> cdinatale@noyesins.com													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: S&amp;H Underwriters Inc</td> <td></td> </tr> <tr> <td>INSURER B: United Financial Casualty Co.</td> <td>11770</td> </tr> <tr> <td>INSURER C: Miscellaneous Insurance Co</td> <td>0006</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: S&H Underwriters Inc		INSURER B: United Financial Casualty Co.	11770	INSURER C: Miscellaneous Insurance Co	0006	INSURER D:		INSURER E:		INSURER F:
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INSURER F:														
<b>INSURED</b> Turnkey Construction LLC PO Box 1612 Meredith NH 03253														

**COVERAGES**                      **CERTIFICATE NUMBER:** CL1582804432                      **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	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		USA-4061751	10/28/2014	10/28/2015	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$												
	<input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		026110620	8/10/2015	8/10/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000												
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$												
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y N/A	TO BE ASSIGNED	8/25/2015	8/25/2016	<table border="1"> <thead> <tr> <th></th> <th>PER STATUTE</th> <th>OTH-ER</th> </tr> </thead> <tbody> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> <td>500,000</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> <td>500,000</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> <td>500,000</td> </tr> </tbody> </table>		PER STATUTE	OTH-ER	E.L. EACH ACCIDENT	\$	500,000	E.L. DISEASE - EA EMPLOYEE	\$	500,000	E.L. DISEASE - POLICY LIMIT	\$	500,000
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E.L. DISEASE - POLICY LIMIT	\$	500,000																

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Todd Andrews & Holly Andrews are listed as Excluded under Workers Compensation - Coverage State: NH

**CERTIFICATE HOLDER**

State of New Hampshire  
 State House Annex  
 Concord, NH 03301

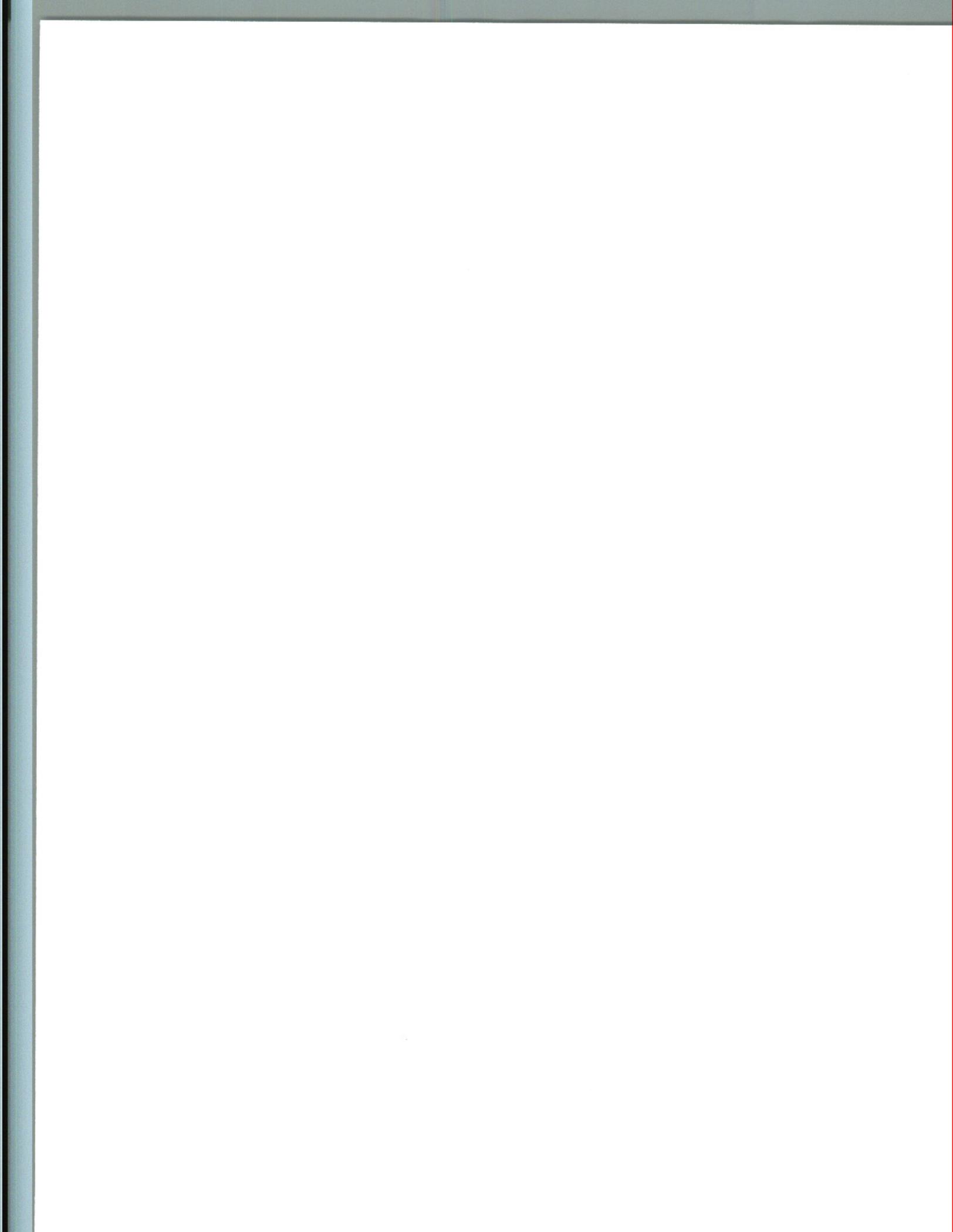
**CANCELLATION**

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

Lori Rotonelli/LAR

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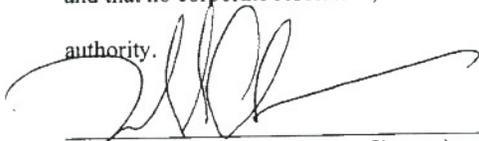
**CERTIFICATE OF AUTHORITY/VOTE**  
(Limited Liability Company)

I, Todd M. Andrews, hereby certify that:  
(Name of Sole Member/Manager of Limited Liability Company, Contract Signatory - Print Name)

1. I am the Sole Member/Manager of the Company of TH Turnkey Construction LLC.  
(Name of Limited Liability Company)

2. I hereby further certify and acknowledge that the State of New Hampshire will rely on this certification as evidence that I have full authority to bind TH Turnkey Construction LLC  
(Name of Limited Liability Company)

and that no corporate resolution, shareholder vote, or other document or action is necessary to grant me such authority.

  
(Contract Signatory - Signature)

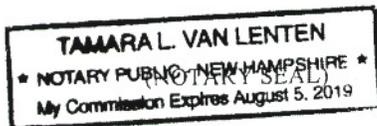
9/7/15  
(Date)

STATE OF New Hampshire  
COUNTY OF Belknap

On this the 7<sup>th</sup> day of September, 2015, before me Tamara VanLenten,  
(Day) (Month) (Yr) (Name of Notary Public / Justice of the Peace)

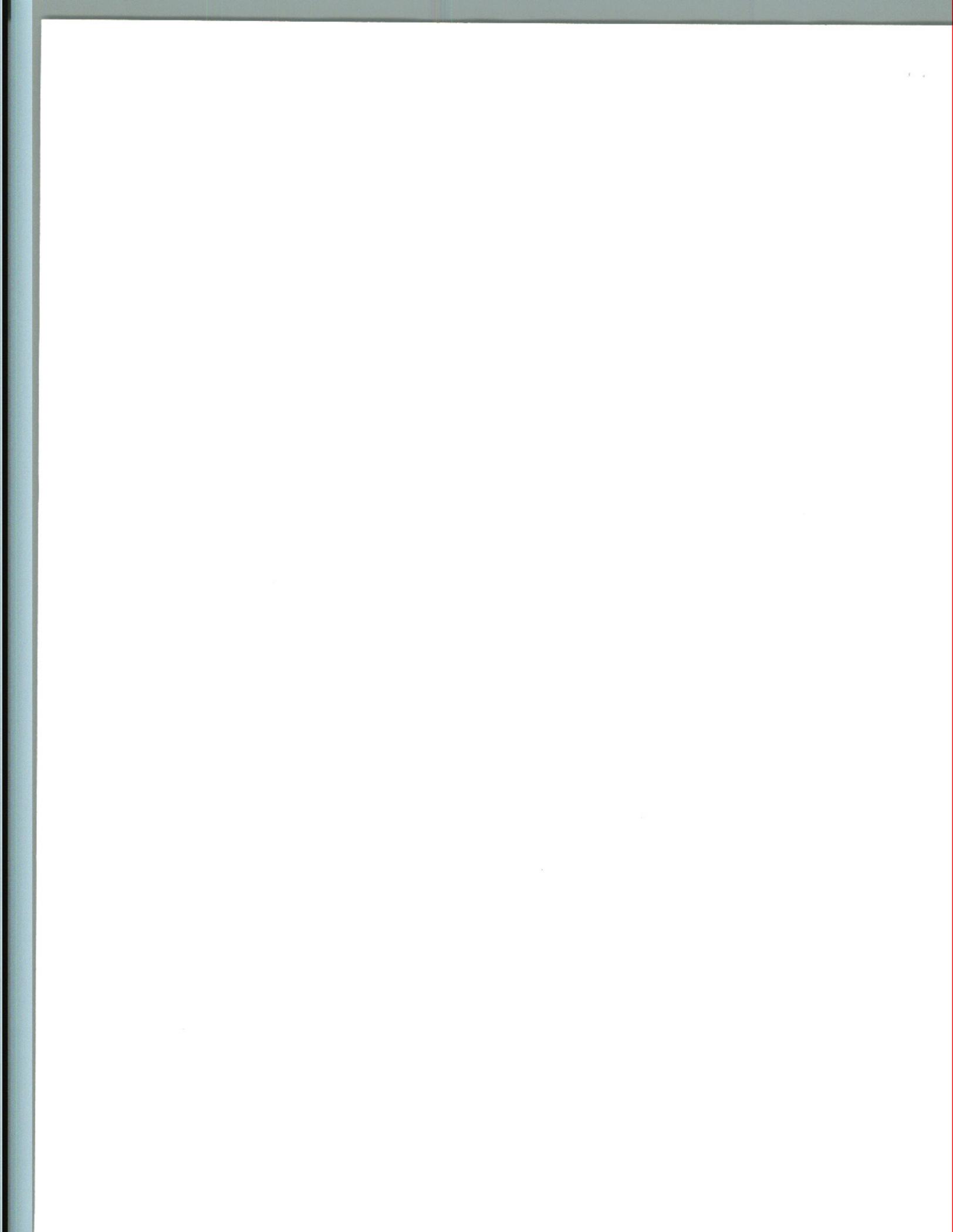
the undersigned officer, personally appeared Todd M. Andrews, known to me (or  
(Contract Signatory - Print Name)

satisfactorily proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.



  
(Notary Public / Justice of the Peace -Signature)

Commission Expires: 8/5/2019



## Corporation Division

Search  
By Business Name  
By Business ID  
By Registered Agent  
Annual Report  
File Online  
Guidelines  
Name Availability  
Name Appeal Process

**Date:** 9/11/2015 **Filed Documents**  
(Annual Report History, View Images, etc.)

### Business Name History

Name	Name Type
TH Turnkey Construction LLC	Legal

### Limited Liability Company - Domestic - Information

**Business ID:** 568688  
**Status:** Good Standing  
**Entity Creation Date:** 12/12/2006  
**State of Business.:** NH  
**Principal Office Address:** PO Box 1612  
Meredith NH 03253  
**Principal Mailing Address:** PO Box 1612  
Meredith NH 03253  
**Last Annual Report Filed Date:** 3/30/2015 11:50:35 AM  
**Last Annual Report Filed:** 2015

### Registered Agent

**Agent Name:** Andrews, Todd M.  
**Office Address:** 16 Sunset Hill Rd  
Meredith NH 03253

### 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.

THK  
9/11/15



**STATE OF NEW HAMPSHIRE**  
**Dept. Of Administrative Services**  
**Div. Of Plant And Property Management**  
**Bureau Of Purchase And Property**  
**State House Annex**  
**Concord, New Hampshire 03301**

Date: August 19, 2015

**Notice Of Contract**

For: Snow Plowing

CONTRACT NO.: 8001885

NIGP CODE: 968-7200

Vendor: TH Turnkey Construction LLC  
PO Box 1612  
Meredith NH 03253

Vendor # 226497

Tel. No.: 603-608-8236

Contact Persons: Todd Andrews

E-mail Address [1toddco@msn.com](mailto:1toddco@msn.com)

Effective From: September 1, 2015 - July 31, 2018

Locations & Prices:

Location	Cost Winter 15-16	Cost Winter 16-17	Cost Winter 17-18	Total
Liquor Store #46	\$3,750	\$3,750	\$3,750	\$11,550
Laconia District Court	\$6,800	\$6,800	\$6,800	\$20,400
Lakes Region – Laconia	\$7,650	\$7,850	\$8,050	\$23,550
NHES Laconia Office	\$6,300	\$6,300	\$6,300	\$18,900

**PAYMENTS**

All invoices must reference the Location and the month you are billing for.

The following are the payment terms:

Bills submitted before the date(s) below shall be REJECTED and you shall have to re-invoice.

- 1) November 30 or later, payment shall be n30 days upon acceptance of the work.
- 2) December 31 or later, payment shall be n30 days upon acceptance of the work.
- 3) January 31 or later, payment shall be n30 days upon acceptance of the work.
- 4) February 28 or later, payment shall be n30 days upon acceptance of the work.
- 5) March 31 or later, payment shall be net 30 upon acceptance of the work.
- 6) April 30 or later and FACILITY signoff Sheet are required for payment. The State shall use the invoice date or the Facility Signoff sheet date – whichever is later; payment shall be net 30 based upon the later date.

**Laura Ingram, Purchasing Agent**  
**Tel: 603 271-2009**  
**Email: [Laura.Ingram@NH.gov](mailto:Laura.Ingram@NH.gov)**

