



Town of Newcastle
C/O Kevin Sutherland
PO Box 386
Newcastle, ME 04553

January 15, 2024

Dear Mr. Sutherland,

Thank you for the opportunity to bid on your upcoming Fire Truck purchase. It is the intention of Bulldog Fire Apparatus and KME to submit a proposal for your new truck.

I look forward to working with you and the Fire Department.

Best regards,

A handwritten signature in black ink, appearing to read "Russell J. Smith".
Russell Smith



REFERENCES

Newcastle ME
Chief Casey Stevens
207-563-3441

Unity ME
Chief Dave Smith
207-692-3986

Dixfield ME
Chief Scott Dennett
207-562-7629

Kittery ME
Chief David O'Brien
207-439-2262

Kingston NH
Chief Geaham Pellerin
603-642-3626

Seabrook NH
Chief William Edwards
603-474-3880

Newington NH
Chief EJ Hoyt
603-436-9441



CERTIFICATE OF LIABILITY INSURANCE

7/1/2024

DATE (MM/DD/YYYY)

6/28/2023

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 Lockton Companies Three City Place Drive, Suite 900 St. Louis MO 63141-7081 (314) 432-0500	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
INSURED 1356298 Kovatch Mobile Equipment Corp. One Industrial Complex Nesquehoning PA 18240	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Great American E & S Insurance Company	NAIC # 37532
	INSURER B: Travelers Property Casualty Company of America	25674
	INSURER C: The Travelers Indemnity Company of Connecticut	25682
	INSURER D: AXIS Surplus Insurance Company	26620
	INSURER E: Mercer Insurance Company	14478
	INSURER F:	

COVERAGES ALLSP CERTIFICATE NUMBER: 19699382 REVISION NUMBER: XXXXXXXX

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"/> COMMERCIAL GENERAL LIABILITY <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 <input type="checkbox"/> OTHER: 0	N	N	PL3403401-03	7/1/2023	7/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ XXXXXXXX PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 S
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	N	N	HC2E-CAP-4296L08A-TCT-23	7/1/2023	7/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX S
D	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTIONS	N	N	P-001-000123735-05 20000000174	7/1/2023 7/1/2023	7/1/2024 7/1/2024	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 S
B	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	UB-8W34286A-23-NC-T (AOS) UB8W34286A23NCT(AZ, WI) HWXJUB4296L109TIL23(OH)	7/1/2023 7/1/2023 7/1/2023	7/1/2024 7/1/2024 7/1/2024	<input checked="" type="checkbox"/> PER STATUTE <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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER	CANCELLATION See Attachment
19699382 Evidence of Insurance	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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Evidence of Insurance

To whom it may concern:

In our continuing effort to provide timely certificate delivery, Lockton Companies is transitioning to paperless delivery of Certificates of Insurance.

To ensure electronic delivery for future renewals of this certificate, we need your email address. Please contact us via one of the methods below, referencing Certificate ID **19699382**.

- Email: STL-edelivery@lockton.com
- Phone: (866) 728-5657 (toll-free)

If you received this certificate through an internet link where the current certificate is viewable, we have your email and no further action is needed.

In the event your mailing address has changed, will change in the future, or you no longer require this certificate, please let us know using one of the methods above.

The above inbox is for providing e-Delivery email addresses for next year's renewal certificates ONLY. Your information will be input within 90 days.

Thank you for your cooperation and willingness in reducing our environmental footprint.

Lockton Companies



®

F A M A

Certificate of Membership

In accordance with its bylaws,
FAMA affirms that

KME Fire Apparatus

meets the membership qualifications
and is a member in good standing through

2022

A handwritten signature in black ink, appearing to read 'Oran McNabb', is written over a horizontal line.

Oran McNabb
FAMA Board President





EAGLE Registrations Inc.
SERVICE • INTEGRITY • VALUE



Certificate No. 5163 (Recertified September 2, 2021)
September 9, 2021 through September 8, 2024

Certificate of Registration

This is to certify that the Quality Management System of



Kovatch Mobile Equipment Corporation


- A. One Industrial Complex, Nesquehoning, Pennsylvania 18240 USA
44 Mountain Avenue, Nesquehoning, Pennsylvania 18240 USA
(Central Function)
- B. 1708 Seibel Drive NE, Roanoke, Virginia 24012 USA

Has been assessed by **EAGLE Registrations Inc.** and
conforms to the following standard:

ISO 9001:2015

Scope of Registration

- A. The Design, Manufacture, Sales & Service of Customized Specialty Trucks and Vehicles to the Fire-Rescue, Aviation, Petro-Chemical, Industrial, Energy and Military Industries.
- B. The Design and Manufacture of Customized Specialty Trucks and Vehicles to the Fire-Rescue, Aviation, Petro-Chemical, Industrial, Energy, and Military Industries.



President





EAGLE Registrations Inc.
SERVICE • INTEGRITY • VALUE



Certificate No. 5163

Additional Addresses	Processes
One Industrial Complex, Nesquehoning, PA	Management/Support, Sales, Engineering Purchasing, Inventory Control, Operations, Quality, Customer Service/Warranty
44 Mountain Avenue, Nesquehoning, PA	Management/Support, Sales, Engineering Purchasing, Inventory Control, Operations, Quality, Customer Service/Warranty
1708 Seibel Drive – NE, Roanoke, VA	Management/Support, Sales, Engineering Purchasing, Inventory Control, Operations, Quality





EAGLE Registrations Inc.
SERVICE • INTEGRITY • VALUE



40 N. Main Street, Suite 1880 | Dayton, OH 45423 | USA | 937.293.2000 or 800.795.3641
www.eaglecertificationgroup.com







January 2013

Re: NFPA Tread plate certification

To whom it may concern:

The slip resistance of aluminum diamondette tread plate material in use on all KME fire apparatus meets or exceeds the requirements of NFPA 1901-2009 paragraph 15.7.4.

The average slip resistance of the tread plate, in a dry condition, obtained from eight tests taken every 45 degrees on a random 360 degree circle is a factor of .73 which exceeds the minimum requirement of .58.

The average slip resistance of the tread plate, in a wet condition, obtained from eight tests taken every 45 degrees on a random 360 degree circle is a factor of .77 which exceeds the minimum requirement of .68.

Sincerely,

A handwritten signature in black ink, appearing to read "Jack Terefinko", is written over a horizontal line.

Jack Terefinko
Chief Engineer

KME-Kovatch Organization

One Industrial Complex, Nesquehoning, PA 18240 USA

(800) 235-3928 Toll Free ▪ (570) 669-9461 Ph ▪ kme@kovatch.com ▪ www.kovatch.com

