

**Franchise Extension Agreement**  
**Between**  
**The Town of New Boston**  
**And**  
**Comcast of Maine/New Hampshire, Inc.**

**Comcast of Connecticut/Georgia/Massachusetts/New Hampshire/New York/North  
Carolina/Virginia/Vermont, LLC**

**WHEREAS**, Comcast of Maine/New Hampshire, Inc. and Comcast of Connecticut/Georgia/Massachusetts/New Hampshire/New York/North Carolina/Virginia/Vermont, LLC (hereinafter “Comcast” or “Franchisee”) is the duly authorized holder of two (2) franchises to operate a cable communications system in the Town of New Boston, New Hampshire,

**WHEREAS**, Comcast of Connecticut/Georgia/Massachusetts/New Hampshire/New York/North Carolina/Virginia/Vermont, LLC predecessor Adelpia Communications signed a franchise agreement with the Town of New Boston, New Hampshire expiring on June 6, 2018, considered the “main” Franchise Agreement; and

**WHEREAS**, cable television services are presently available to New Boston residents in the Riverdale Road area by Comcast of Maine/New Hampshire, Inc. as authorized by the current franchise agreement with Comcast of New Hampshire, Inc. and the Town of New Boston, New Hampshire expiring on June 6 2013, considered the “limited” Franchise Agreement; and

**WHEREAS**, the New Boston residents covered by the “main” Franchise Agreement with Comcast of Connecticut/Georgia/Massachusetts/New Hampshire/New York/North Carolina/Virginia/Vermont, LLC and residents in the Riverdale Road area served by the limited franchise agreement held by Comcast of Maine/New Hampshire, Inc. area are desirous of continuing their cable television services.

**NOW THEREFORE**, it is agreed that the “main” Franchise Agreement held by Comcast of Connecticut/Georgia/Massachusetts/New Hampshire/New York/North Carolina/Virginia/Vermont, LLC which serves the majority of the Town and the “limited” Franchise Agreement held by Comcast of Main/New Hampshire, Inc. which serves the residents of New Boston in the Riverdale Road area, shall be extended to June 5, 2023 under the same terms and conditions. In addition, Comcast agrees to expand Cable Television Service within one (1) year of execution of this extension to the following addresses, Cochran Hill Road: 88, 94 & 98.

**IN WITNESS WHEREOF**, the Town of New Boston has caused this document to be duly executed in its name by its Selectmen and Comcast of Maine/New Hampshire, Inc. and Comcast of Connecticut/Georgia/Massachusetts/New Hampshire/New York/North Carolina/Virginia/Vermont, LLC has similarly executed this document on the \_\_\_\_ of \_\_\_\_\_ 2013.

**Town of New Boston**

By: \_\_\_\_\_

Selectman

\_\_\_\_\_

Selectman

\_\_\_\_\_

Selectman

**Comcast of Maine/New Hampshire, Inc.**

**Comcast of Connecticut/Georgia/Massachusetts/New Hampshire/New York/North Carolina/Virginia/Vermont, LLC**

By: \_\_\_\_\_

Stephen Hackley  
Regional Senior Vice President  
Greater Boston Region

**Franchise Agreement**  
**Between**  
**The Town of New Boston**  
**And**  
**Comcast of Maine/New Hampshire, Inc.**

**WHEREAS**, Comcast of Maine/New Hampshire, Inc. (hereinafter “Comcast” or “Franchisee”) is the duly authorized holder of a franchise to operate a cable communications system in the Town of Weare, New Hampshire, and Comcast of New Hampshire, Inc. is the duly authorized holder of a franchise to operate a cable communication system in the Town of Goffstown, New Hampshire, which are contiguous to the Riverdale Road area in the Town of New Boston, New Hampshire; and

**WHEREAS**, cable television services are presently available to New Boston residents in the Riverdale Road area by Comcast of Maine/New Hampshire, Inc and Comcast of New Hampshire, Inc.; and

**WHEREAS**, the New Boston residents in the Riverdale Road area are desirous of continuing their cable television services; and

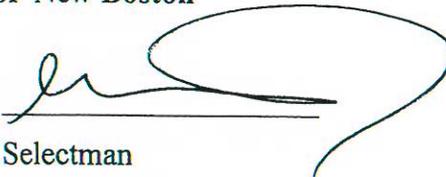
**WHEREAS**, Comcast will make yearly Franchise Fee payments equal to three percent (3%) of the Franchisees Gross Annual Revenues to the Franchising Authority or its designee, which shall have the meaning set forth in Section 622(g) of the Cable Act, 47 U.S.C. Section 542(g); and

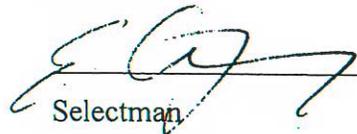
**WHEREAS**, Gross Annual Revenue means the monthly subscriber revenue received by the Franchisee from the operation of the Cable System in the Town of New Boston in the Riverdale Road Area to provide Cable Services, calculated in accordance with generally accepted accounting principles, including but not limited to monthly Basic Cable Service, premium and pay-per-view fees, installation fees, and equipment rental fees. Gross Annual Revenue shall not include advertising or home shopping revenue, refundable deposits, bad debt, late fees, investment income, nor any taxes, fees or assessments imposed or assessed by any governmental authority and collected by the Franchisee on behalf of such entity.

**NOW THEREFORE**, it is agreed that a Franchise is granted by the Town of New Boston to Comcast of Maine/New Hampshire, Inc. in accordance with Federal and State law to permit Comcast to provide cable television service to residents in the Town of New Boston on Riverdale Road who may request service and are within one hundred twenty-five (125) feet of the cable feeder line. The term of the Franchise shall commence on the date of execution hereof by the parties and ends on ~~January 31, 2019.~~  
*June 6, 2013.*

**IN WITNESS WHEREOF**, the Town of New Boston has caused this document to be duly executed in its name by its Selectmen and Comcast of Maine/New Hampshire, Inc. has similarly executed this document on the 30<sup>th</sup> of January 2009.

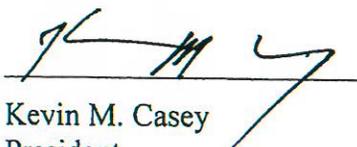
**Town of New Boston**

By:   
Selectman

  
Selectman

Christine Quirk  
Selectman

**Comcast of Maine/New Hampshire, Inc.**

By:   
Kevin M. Casey  
President  
NorthCentral Division



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/11/2013

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> MARSH USA INC. 1717 Arch Street Philadelphia, PA 19103-2797 Attn: Comcast.Certs@marsh.com Fax: 212-948-0360	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): E-MAIL ADDRESS:		<b>FAX (A/C, No):</b>
	<b>INSURER(S) AFFORDING COVERAGE</b>		
05194 -ALL-GAWU-13-14      COMCA    ANDOV    MA    NO    NO	<b>INSURER A:</b> ACE American Insurance Company	<b>NAIC #</b> 22667	
<b>INSURED</b> COMCAST OF MAINE/NEW HAMPSHIRE/OHIO INC. 676 ISLAND POND ROAD MANCHESTER, NH 03109	<b>INSURER B:</b> ACE Property And Casualty Ins Co	<b>NAIC #</b> 20699	
	<b>INSURER C:</b> Indemnity Ins Co Of North America	<b>NAIC #</b> 43575	
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
	<b>INSURER F:</b>		

**COVERAGES**      **CERTIFICATE NUMBER:** CLE-003239485-17      **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	<input checked="" type="checkbox"/> GENERAL LIABILITY			XSL G27327643	12/01/2013	12/01/2014	EACH OCCURRENCE	\$ 4,900,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 4,900,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person)	\$ 10,000
	<input checked="" type="checkbox"/> \$100,000 SIR						PERSONAL & ADV INJURY	\$ 4,900,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 25,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 6,000,000
	<input type="checkbox"/>							\$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY			ISA H08815069	12/01/2013	12/01/2014	COMBINED SINGLE LIMIT (Ea accident)	\$ 10,000,000
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/>							\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB			XOO G27372831	12/01/2013	12/01/2014	EACH OCCURRENCE	\$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB	<input checked="" type="checkbox"/> OCCUR					AGGREGATE	\$ 5,000,000
	<input type="checkbox"/> DED	<input type="checkbox"/> CLAIMS-MADE						\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WLRC47873691 (AOS)	12/01/2013	12/01/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A	WLRC47873708 (CA)	12/01/2013	12/01/2014	E.L. EACH ACCIDENT	\$ 2,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below			WLRC4787371A (MN)	12/01/2013	12/01/2014	E.L. DISEASE - EA EMPLOYEE	\$ 2,000,000
				SCFC47873721 (WI)	12/01/2013	12/01/2014	E.L. DISEASE - POLICY LIMIT	\$ 2,000,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 CERTIFICATE HOLDER IS INCLUDED AS ADDITIONAL INSURED AS RESPECTS THE GENERAL LIABILITY POLICY WHERE REQUIRED BY WRITTEN CONTRACT WITH THE NAMED INSURED. \$100,000 PER OCCURRENCE SELF INSURED RETENTION APPLIES ONLY TO THE ABOVE GENERAL LIABILITY POLICY.

<b>CERTIFICATE HOLDER</b> TOWN OF NEW BOSTON BOARD OF SELECTMEN BETTINGHOUSE HILL ROAD BOX 250 NEW BOSTON, NH 03070	<b>CANCELLATION</b> 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 of Marsh USA Inc. Manashi Mukherjee <i>Manashi Mukherjee</i>
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