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State of New Hampshire  
DEPARTMENT OF ADMINISTRATIVE SERVICES  
OFFICE OF THE COMMISSIONER  
25 Capitol Street – Room 120  
Concord, New Hampshire 03301

CHARLES M. ARLINGHAUS  
Commissioner  
(603)-271-3201

JOSEPH B. BOUCHARD  
Assistant Commissioner  
(603)-271-3204

Division of Public Works  
Design and Construction  
Project No. 80908R – Contract C

October 24, 2017

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

- 1). Authorize the Division of Public Works Design and Construction to enter into a contract with North Branch Construction, Inc. (VC# 154264) Concord, NH, for a total price not to exceed \$6,357,000, for the Portsmouth Liquor Store in Portsmouth, NH. This contract is effective upon Governor and Council approval through December 14, 2018, unless extended in accordance with the contract terms. **100% Other Funds (Liquor Commission Funds).**
- 2). Further authorize that a contingency in the amount of \$222,500 be approved for latent conditions or unanticipated structural expenses for the Portsmouth Liquor Store, bringing the total to \$6,579,500. **100% Other Funds (Liquor Commission Funds).**
- 3). Further authorize the amount of \$144,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), for engineering services provided, bringing the total to \$6,723,500. **100% Other Funds (Liquor Commission Funds).**

Funding is available in account titled Liquor Commission as follows:

Funding is available in account titled Liquor Commission as follows:

02-77-77-770030-17120000	Concord Warehouse	<u>SFY18</u>
034-500162	– Contract Repairs/Bldgs. & Grounds	\$6,357,000
034-500162	– Contingency	\$ 222,500
034-500162	– BPW Fees Interagency	<u>\$ 144,000</u>
<b>Grand Total</b>		<b>\$6,723,500</b>

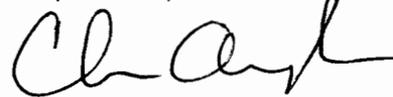
**EXPLANATION**

The New Hampshire State Liquor Commission ("NHSLC") owns the Portsmouth Liquor Store building currently located at the Portsmouth Traffic Circle. Per Chapter 228:1, XV, B, Laws of 2017 for the new Portsmouth Liquor Store, this project will replace the existing 12,000 square building with a new 23,000 square foot building owned by NHSLC that will have the NHSLC brand appearance.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and substance, and the Liquor Commission has certified that the necessary funds are available. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Services, Division of Public Works Design and Construction.

Attached please find a copy of the tabulation of bids for this project along with the contract supplemental information sheet.

Respectfully submitted,



Charles M. Arlinghaus  
Commissioner

Department Estimate:	\$7,230,000
Contract Amount:	<u>\$6,357,000</u>
Under Estimate:	\$ 873,000

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 80908R, Contract C – Portsmouth Liquor Store #38, Portsmouth, New Hampshire

DESCRIPTION: This project will replace the existing 12000 square foot liquor store with one that is 23,000 square feet and will have the new NHLC brand look.

EXPLANATION: This is one of the NHLC busiest stores and this project will improve the customer flow through the store, reducing wait times and will allow for more variety of product to be on display. It will increase revenue and bring the appearance of the facility in line with the NHLC Brand.

UNDER ESTIMATE

EXPLANATION: The two higher bids were very close to the estimate so it can be assumed that the two lower bidders needed the additional work for the winter.

DEPARTMENT

ESTIMATE: \$7,230,000

LOW BID: \$6,357,000



ABC Bid Data

PORTSMOUTH  
80908RC  
NON-FEDERAL

Division of Public Works

PROJECT: PORTSMOUTH

STATE PROJECT NUMBER: 80908RC  
 FED. PROJECT: NON-FEDERAL  
 DATE BIDS OPEN: October 04, 2017, 02:00 PM  
 SCOPE OF WORK: PORTSMOUTH LIQUOR STORE #38  
 COMPLETION DATE: December 14, 2018  
 LOCATION: Rockingham

Certified  
 \_\_\_\_\_  
 Administrator

Summary of Bidders

Contractor	Bid Amount	Rank
<del>NORTH BRANCH CONSTRUCTION, INC. 76 OLD TURNPIKE ROAD, CONCORD NH 03301-5392</del>	<del>\$5,773,000.00</del>	<del>A</del>
HARVEY CONSTRUCTION CORP 10 HARVEY ROAD, BEDFORD NH 03110-8805	\$6,464,000.00	B
<del>BOKAL CONSTRUCTION, INC. 3000 WILSON ROAD, TURNER ME 04882</del>	<del>\$7,287,000.00</del>	<del>C</del>
TURNSTONE CORPORATION 479 NASHUA STREET, MILFORD NH 03055-3705	\$7,287,000.00	D

Item No. Items	Description	Unit	Quantity	PS&E		NORTH BRANCH CONSTRUCTION INC. 76 OLD TURNPIKE ROAD		HARVEY CONSTRUCTION CORP 10 HARVEY ROAD	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
901	NEW LIQUOR STORE AND THE ASSOCIATED WORK PER PLANS AND SPECS	U	1.00	\$6,516,000.00	\$6,516,000.00	\$5,773,000.00	\$5,773,000.00	\$5,844,000.00	\$5,844,000.00
902	DEMOLITION AND REMOVAL OF THE EXISTING STORE AND THE ASSOCIATED WORK PER PLANS AND SPECS	U	1.00	\$194,000.00	\$194,000.00	\$84,000.00	\$84,000.00	\$100,000.00	\$100,000.00
903	ALLOWANCE 1 SEE SPECIFICATION SECTION 01200	\$	520,000.00	\$1.00	\$520,000.00	\$1.00	\$520,000.00	\$1.00	\$520,000.00
Totals:				\$7,230,000.00	\$7,230,000.00	\$6,357,000.00	\$6,357,000.00	\$6,464,000.00	\$6,464,000.00

BUREAU OF PUBLIC WORKS

Award to North Branch Const, Inc.  
 Hold for Negotiation  
 Cancel Contract

User Agency: Liquor  
 Authorized by: [Signature]  
 Date: 10.06.2017

**\$6,357,000.**

Item No.	Description	Unit	Quantity	PS&E		BUCK, T. CONSTRUCTION, INC.		TURNSTONE CORPORATION	
				Unit Price	Total	Unit Price	Total	Unit Price	Total
901	NEW LIQUOR STORE AND THE ASSOCIATED WORK PER PLANS AND SPECS	U	1.00	\$6,516,000.00	\$6,516,000.00	\$6,582,044.00	\$6,582,044.00	\$6,686,900.00	\$6,686,800.00
902	DEMOLITION AND REMOVAL OF THE EXISTING STORE AND THE ASSOCIATED WORK PER PLANS AND SPECS	U	1.00	\$194,000.00	\$194,000.00	\$140,000.00	\$140,000.00	\$80,100.00	\$80,100.00
903	ALLOWANCE 1 SEE SPECIFICATION SECTION 01200	\$	520,000.00	\$1.00	\$520,000.00	\$1.00	\$520,000.00	\$1.00	\$520,000.00
			Totals:		\$7,230,000.00		\$7,242,044.00		\$7,287,000.00
			Totals:		\$7,230,000.00		\$7,242,044.00		\$7,287,000.00



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/5/2017

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> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101	<b>CONTACT NAME:</b> Andrea Nicklin <b>PHONE (A/C, No, Ext):</b> (603) 669-3218 <b>E-MAIL ADDRESS:</b> anicklin@crossagency.com	<b>FAX (A/C, No):</b> (603) 645-4331
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> North Branch Construction, Inc. 76 Old Turnpike Road  Concord NH 03301	<b>INSURER A:</b> Citizens Ins Co of America	<b>NAIC #</b> 31534
	<b>INSURER B:</b> Allmerica Financial Benefit	<b>NAIC #</b> 41840
	<b>INSURER C:</b> Hanover Ins Co.	<b>NAIC #</b> 22292
	<b>INSURER D:</b> Massachusetts Bay Ins Co	<b>NAIC #</b> 22306
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** 17-18 All w/16-17 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 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 <input checked="" type="checkbox"/> Lmted Jobsite Poll 100K  GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER		ZBVA58652402	3/1/2017	3/1/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		AWVA55166102	3/1/2017	3/1/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist combined \$ 1,000,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		UHVA56348702	3/1/2017	3/1/2018	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
D	<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 <input type="checkbox"/> N/A	WDVA779856 (3a.) MA & VT B. Blazon; J. Campbell & C. Galbraith excluded	11/9/2016	11/9/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L EACH ACCIDENT \$ 500,000 E.L DISEASE - EA EMPLOYEE \$ 500,000 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)  
 Project #80908R (Portsmouth Liquor Store #38). State of New Hampshire, Department of Administrative Services is included as an additional insured on a primary & non-contributory basis, including waiver of subrogation on the general liability, automobile and umbrella policies when required by written contract.

**CERTIFICATE HOLDER****CANCELLATION**

State of New Hampshire  
 c/o Department of Administrative Services  
 7 Hazen Drive, Room 250  
 Concord, NH 03302

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

Jeff Schroeder/JSC

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/5/2017

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**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> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101	<b>CONTACT NAME:</b> Andrea Nicklin <b>PHONE (A/C, No. Ext):</b> (603) 669-3218 <b>E-MAIL ADDRESS:</b> anicklin@crossagency.com	<b>FAX (A/C, No.):</b> (603) 645-4331
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> The State of NH, Dept of Administrative Svcs c/o North Branch Construction, Inc. 76 Old Turnpike Road Concord NH 03301	<b>INSURER A:</b> Hanover Ins Group	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** OCP Portsmouth Liqu                      **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	COMMERCIAL GENERAL LIABILITY		LHVD39158400	10/10/2017	10/10/2018	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input checked="" type="checkbox"/> Owners & Contractors					MED EXP (Any one person) \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					PERSONAL & ADV INJURY \$
						GENERAL AGGREGATE \$ 3,000,000
						PRODUCTS - COMP/OP AGG \$
						Occurrence \$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<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) \$
						\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$
	DED	RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	<input type="checkbox"/> Y/N				PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> N/A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$

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

Re: Project #80908R, Contract C, Portsmouth Liquor Store #38

**CERTIFICATE HOLDER****CANCELLATION**

State of New Hampshire  
 Department of Administrative Services  
 PO Box 483  
 7 Hazen Drive  
 Concord, NH 03302

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

Jeff Schroeder/ANI

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# EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

10/5/2017

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101		PHONE (A/C. No. Ext): (603) 669-3218	COMPANY Acadia Ins Co. One Acadia Commons P.O. Box 9010 Westbrook ME 04098-5010	
FAX (A/C. No.): (603) 645-4331	E-MAIL ADDRESS: jschroeder@crossagency.c			
CODE: 3081	SUB CODE:			
AGENCY CUSTOMER ID #: 00309879		LOAN NUMBER		POLICY NUMBER CIM5323331
INSURED North Branch Construction, Inc., State of New Hampshire, Dept of Admin Svcs 76 Old Turnpike Road Concord NH 03301		EFFECTIVE DATE 10/10/2017	EXPIRATION DATE 10/10/2018	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

## PROPERTY INFORMATION

LOCATION/DESCRIPTION Project #80908R, Contract C, Portsmouth Liquor Store #38 Portsmouth Circle, 605 US Interstate By-Pass Portsmouth, NH
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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 EVIDENCE OF PROPERTY INSURANCE 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.

## COVERAGE INFORMATION

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Job Specific Builders Risk	6,357,000	
Job Specific Special form		5,000
Includes Equipment Breakdown & Testing		
Job Specific Flood	6,357,000	25,000
Job Specific Earthquake	6,357,000	25,000

## REMARKS (Including Special Conditions)

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## 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.

## ADDITIONAL INTEREST

State of New Hampshire Department of Administrative Services PO Box 483 7 Hazen Drive Concord, NH 03302	MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
	LOAN #	
AUTHORIZED REPRESENTATIVE		
Jeff Schroeder/ANI		