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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

VICKI V. QUIRAM
Commissioner
(603)-271-3201

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

Division of Public Works
Design and Construction
Project No. 80865 – Contract B

February 27, 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 Surveillance Specialties, LTD (Securadyne Systems Northeast) (VC# 161810) Wilmington, MA, for a total price not to exceed \$313,532, for the Glenclyff Home Campus Security Upgrades, Benton, NH. This contract is effective upon Governor and Council approval through August 31, 2017, unless extended in accordance with the contract terms. **100% Capital - General Funds.**

2). Further authorize that a contingency in the amount of \$45,000 be approved for unanticipated expense for the Glenclyff Home Campus Security Upgrades, bringing the total to \$358,532. **100% Capital - General Funds.**

3). Further authorize pursuant to 195:12, Laws of 2013, the amount of \$20,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), Capital Clerk for oversight and engineering services provided, bringing the total to \$378,532. **100% Capital - General Funds.**

Funding is available in account titled Department of Health and Human Services- Glenclyff Home as follows:

05-91-91-910030-52630000 Campus Security Glenclyff	<u>SFY17</u>
034-500162 – Repair/Renovations Bldgs.	\$ 313,532
034-500162 – Contingency	\$ 45,000
034-500162 – Interagency DPW Fees	<u>20,000</u>
Grand Total	\$ 378,532

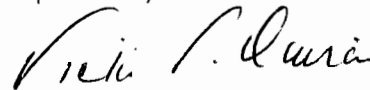
EXPLANATION

Per Chapter 220:1, VII, B, Laws of 2015, Campus Security Glencliff. This project consists of furnishing all construction services necessary and required to complete the construction and installation of the Glencliff Home Campus Security Upgrade Project at the Glencliff Home located in Benton, NH in accordance with the contract documents and specifications. This includes but is not limited to the installation of additional Access Control and Security Camera System devices, as well as the removal and replacement of the Patient Wandering System at the Brown and Lamott Buildings

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and execution; and the Department of Health and Human Services 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,



Vicki V. Quiram
Commissioner

Department Estimate:	\$390,000
Contract Amount:	<u>\$313,532</u>
Under Estimate:	\$ 76,468

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 80865, Contract B – Glencliff Home Campus Security Upgrades, Benton, New Hampshire.

DESCRIPTION: This project consists of furnishing all construction services necessary and required to complete the construction and installation of the Glencliff Home Campus Security Upgrade Project at the Glencliff Home located in Benton, New Hampshire in accordance with the contract documents and specifications. This includes but is not limited to the installation of additional Access Control and Security Camera System devices, as well as the removal and replacement of the Patient Wandering System at the Brown and Lamott Buildings.

EXPLANATION: This project will expand the base security system installed as part of a previous project that will increase campus wide monitoring and make the facility safer for residents and employees. The security system will also prevent residents from accessing staff only areas, such as offices and drug storages areas. And finally, this project is replacing the patient wandering system that will provide a high level of security for those patients with special needs.

This company submitted their bid with Surveillance Specialties, LTD, d/b/a Securadyne Systems Northeast; however the prequalification name was Securadyne Systems Northeast only. The Secretary of State Certificates indicates the legal name as Surveillance Specialties, LTD; thus the difference between the bid tab and the G & C submitted documents.

An addendum posted changed the completion date from July 31, 2017 to August 31, 2017; but the bid system did not physically adjust the date.

UNDER ESTIMATE
EXPLANATION:

There were two bidders; the low bid was 19 percent lower than the estimate, and the other matched the estimate. The low bidder is new to the State, and is also located close to the site, so it is assumed that there would be a lower cost included for travel to complete the project.

DEPARTMENT

ESTIMATE: \$390,000

LOW BID: \$313,532



Division of Public Works

ABC Bid Data

BENTON
80865, Contract B
NON-FEDERAL

PROJECT: BENTON
STATE PROJECT NUMBER: 80865, Contract B
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: December 14, 2016, 02:00 PM
SCOPE OF WORK: Glenduff Home Campus Security Upgrades
COMPLETION DATE: Aug 31, 2017
LOCATION: Grafton

Summary of Bidders

Contractor	Bid Amount	Rank
SECURADYNE SYSTEMS NORTHEAST 600 RESEARCH DRIVE, WILMINGTON MA 01887 LAFLAMME, INC. GERARD A. 100 HARVEY ROAD, PO BOX 5706, MANCHESTER NH 03108	\$313,532.00	A
	\$370,000.00	B

901... \$185,483.-
\$113,049.-
\$15,000.
\$313,532- ✓

BUREAU OF PUBLIC WORKS

✓ Award to Securadyne Sys NE

Hold for Negotiation

Cancel Contract

User Agency HHHS - Glenduff

Authorized by [Signature]

Date 12/22/2016

1pd ✓

error log # 3605408

Item No.	Description	Unit	Quantity	PS&E		SECURADYNE SYSTEMS NORTHEAST 600 RESEARCH DRIVE WILMINGTON, MA 01887		LAFLAMME, INC. GERARD A. 100 HARVEY ROAD MANCHESTER, NH 03108	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

Items

901	SECURITY AND ACCESS CONTROL SYSTEM UPGRADES	U	1.000	\$227,800.00	\$227,800.00	\$185,483.00	\$185,483.00	\$177,500.00	\$177,500.00
902	PATIENT WANDERING SYSTEM	U	1.000	\$147,200.00	\$147,200.00	\$113,049.00	\$113,049.00	\$177,500.00	\$177,500.00
903	ALLOWANCE #1	\$	15,000.000	\$1.00	\$15,000.00	\$1.00	\$15,000.00	\$1.00	\$15,000.00

Totals:					\$390,000.00	\$313,532.00	\$370,000.00
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Client#: 1696423

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ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/16/2017

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).

PRODUCER BB&T Insurance Services, Inc. 1071 Founders Blvd. Suite B Athens, GA 30606	CONTACT NAME: GA Certificate Team PHONE (A/C, No, Ext): 706 354-3893 FAX (A/C, No): 877-657-1559 E-MAIL ADDRESS: Certificatesga@bbandt.com														
INSURED Securadyne Systems LLC Surveillance Specialties Ltd 14900 Landmark Blvd Suite 350 Dallas, TX 75254	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Atlantic Specialty Insurance Co</td> <td>27154</td> </tr> <tr> <td>INSURER B: Technology Insurance Company</td> <td>42376</td> </tr> <tr> <td>INSURER C: Philadelphia Indemnity Insurance</td> <td>18058</td> </tr> <tr> <td>INSURER D: Indian Harbor Insurance Company</td> <td>36940</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: Atlantic Specialty Insurance Co	27154	INSURER B: Technology Insurance Company	42376	INSURER C: Philadelphia Indemnity Insurance	18058	INSURER D: Indian Harbor Insurance Company	36940	INSURER E:		INSURER F:	
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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 SUBR INSR 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"/> BI/PD Ded:1,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X	7110147980001	05/22/2016	05/22/2017	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <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		3900013740001	05/22/2016	05/22/2017	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10000		7110147980001	05/22/2016	05/22/2017	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y/N <input checked="" type="checkbox"/> N/A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		TWC3556137	05/22/2016	05/22/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
C	Crime		PHSD1169678	08/14/2016	08/14/2017	\$2,000,000
D	E&O / Cyber		MTP903225001	05/22/2016	05/22/2017	\$10,000,000

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

Supplemental Named Insureds - Securadyne Systems Texas LLC, Securadyne Systems Holdings LLC, Surveillance Specialties Ltd dba Securadyne Systems NE, Securadyne Systems Southeast LLC, Securadyne Systems Intermediate LLC, Intelligent Access Systems of North Carolina LLC dba Securadyne Systems Mid-Atlantic.

Project: 80865 Contract B - Glenciff Home Campus Security Upgrade
 (See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

The State of New Hampshire Department of Administrative Services John O Morton Building 7 Hazen Drive P O Box 483 Concord, NH 03302-0483	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> <p><i>Debbie P...</i></p>
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DESCRIPTIONS (Continued from Page 1)

The State of New Hampshire is included as additional insured as respects General Liability when required by written contract with named insured. 30 Day (10 days for non-payment) notice of cancellation applies as respects General Liability and Umbrella Liability.

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/22/2017

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PRODUCER BB&T Insurance Services, Inc. 1071 Founders Blvd. Suite B Athens, GA 30606	CONTACT NAME:	
	PHONE (A/C, No, Ext): 706 354-3893	FAX (A/C, No): 8663172202
INSURED The State of NH; Dept. of Admin Svcs John O. Morton Building 7 Hazen Drive; P.O. Box 483 Concord, NH 03302	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Atlantic Specialty Insurance Co	NAIC # 27154
	INSURER B:	
	INSURER C:	
	INSURER D:	
INSURER E:		
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	AUTOMOBILE LIABILITY <input 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					PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
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A	Installation Floater		7110147980001	05/22/2016	05/22/2017	\$500,000 limit \$2,500 deductible

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Project: 80865 Contract B - Glenciff Home Campus Security Upgrade

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AUTHORIZED REPRESENTATIVE

Debbie P. Priddy