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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

Bureau of Public Works
 Design and Construction
 Project No. 80735 – Contract C

April 11, 2016

Her Excellency, Governor Margaret Wood Hassan
 and the Honorable Council
 State House
 Concord, New Hampshire 03301

REQUESTED ACTION

1). Authorize the Bureau of Public Works Design and Construction to enter into a contract amendment with M. E. Latulippe Construction, Inc. (VC# 157609) Ashland, NH, for a total price not to exceed \$150,000, to establish a contingency for the Glencliff Hydro Dam Repair Project in Benton, NH. This contract amendment is effective upon Governor and Council approval through August 10, 2016, which was extended in accordance with the contract terms. **100% General – Operating Funds.**

2). Further authorize pursuant to 195:12, Laws of 2013, the amount of \$1,000 be approved for payment to the Department of Administrative Services, Bureau of Public Works Design and Construction (VC# 177875), Capital Clerk for oversight and engineering services provided, bringing the total to \$151,000. **100% Capital – General Funds.**

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

05-91-91-910030--29230000	Glencliff Hydro Dam	<u>SFY16</u>
034-500162	- BPW Fees	\$ 1,000
05-91-91-910010-78920000	Maintenance	
048-500226	- Contractual Maint. – Bldg. & Grounds	<u>\$ 150,000</u>
	Grand Total	\$ 151,000

EXPLANATION

Per Chapter 195:1, VII, D, Laws of 2013, as extended by Chapter 220:23, 55, Laws of 2015, for Glenclyff Hydro Repair. Based upon conditions exposed during construction and the work completed on the North-side of the dam last year, it is anticipated that upon excavation of the left-side of the dam in May 2016, we will encounter some of the same unforeseen conditions that will require significant changes and an increase in construction costs. This contingency is to be utilized to address these changes.

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 – Glenclyff Home 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, Bureau of Public Works Design and Construction.

Respectfully submitted,

 Asst. Comm.

Wicki V. Quiram
Commissioner

for

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80735, Contract C – Hydro Dam Repair, Glenclyff Home, Benton, New Hampshire.

DESCRIPTION: Structural repair of existing dam, and dredging of the Slide Brook Impoundment, both of which are linked to the production of 30% of the Glenclyff campus power needs.

EXPLANATION: The existing Slide Brook Dam was originally constructed in 1929 to impound water for the hydro-generating waterwheel on High St. The dam was reconstructed after a fire in 1933. Since that time, limited repairs (using un-reinforced cinderblock) have been made to the dam to address only the most critical structural elements caused by erosion, storm events, and the aging of the existing concrete. Currently, the dam is in very severe condition, having aged and suffered from concrete failure and spalling. In addition, significant storm events have transported large quantities of sediment down the Slide Brook into the Impoundment, thus limiting the storage of water for power generation.

CONTINGENCY

AMENDMENT: During the initial work on the North-side of the dam last year, subsurface conditions in and around the dam varied significantly from the existing conditions design plans, requiring significant changes to the current design and increased costs to complete the work. This resulted in an extended duration of construction. An Alteration Order extended the contract completion date to August 10, 2016. Based upon the work completed on the North-side, it is anticipated that excavation of the south-side of the dam, in May, 2016, significant changes and construction an increase in construction costs. This contingency is to be utilized to address these changes.

AMOUNT: \$150,000.00

**THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF ADMINISTRATIVE SERVICES
DIVISION OF PUBLIC WORKS DESIGN & CONSTRUCTION**

PROJECT NO. 80735 **ALTERATION ORDER NO.** 1
Contract C **APPROPRIATION ACCOUNT NO.** -0000
CONTRACT NO. 7001604-1
DATE 11/16/2015 **CONTINGENCY NO.** 1044227-1
VENDOR NO. 157609B001

TO M.E. Latulippe Construction, Inc., P.O. Box 728, Ashland, NH 03217

In Connection With Your Contract Dated 6/22/2015 For Glencliff Hydro Dam Repair, Glencliff, N.H.

You are authorized to make the following changes in the Contract:

01 Delete scope of work for Alt. No. 3, Water Level Sensor, from Contract.	(\$28,000.00)
02 Increase "Allowance for Unknown, Latent or Diff. Conditions" by \$28,000.00, creating a new balance of \$78,000.00.	\$28,000.00
03 Extend Contract completion date from 10/31/15 to 08/10/16, due to unforeseen conditions as described in Change Order #2A.	\$0.00
04 All Other Terms and Conditions of the Contract Remain Unchanged	\$0.00
	<hr/> \$0.00

ACCEPTED BY: DATE: NOV 23, 2015

M.E. Latulippe PRESIDENT
M.E. Latulippe Construction, Inc.

APPROVED BY:

[Signature]
Theodore Kupper, P.E.
Administrator
Division of Public Works Design &
Construction

RECEIVED

DEC 10 2015

Bureau of Public Works



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/18/2016

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 THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Susan Gilman PHONE (A/C, No, Ext): (603) 224-2562 E-MAIL ADDRESS: sgilman@rowleyagency.com FAX (A/C, No): (603) 224-8012
INSURED M E Latulippe Construction, Inc. 61 Thompson Street P O Box 729 Ashland NH 03217	INSURER(S) AFFORDING COVERAGE INSURER A: Firemen's Ins Co of Wash. DC NAIC # 21784 INSURER B: Acadia Insurance Company NAIC # 31325 INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES **CERTIFICATE NUMBER:** 16/17 Cert **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 TR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER POLICY X PRO-JECT LOC OTHER		CPA001109132	05/01/2016	05/01/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 250,000 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 Employee Benefits \$ 1,000,000
A	X AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS X HIRED AUTOS X SCHEDULED AUTOS NON-OWNED AUTOS		CAA001108032	05/01/2016	05/01/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY Per person \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$
B	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 0		CUA00110932	05/01/2016	05/01/2017	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N N/A	WPA001106032 3A States: NH	05/01/2016	05/01/2017	X PER STATUTE OTH-ER E L EACH ACCIDENT \$ 100,000 E L DISEASE - EA EMPLOYEE \$ 100,000 E L DISEASE - POLICY LIMIT \$ 500,000
A	Leased/Rented Equipment		CNA010376021	05/01/2016	05/01/2017	\$500,000 Limit of Liability

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

Project: Glencliff Hydro Dam Repair, Project #80735, Contract C. State of NH, Dept of Administrative Services is an additional insured on general liability when required by written contract with named insured.

RECEIVED

APR 20 2016

CERTIFICATE HOLDER State of New Hampshire Dept. of Administrative Services 25 Capital Street Concord, NH 03301	CANCELLATION Bureau of Public Works 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 Susan Gilman/SJG <i>Susan Gilman</i>
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/18/2016

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PRODUCER THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511 INSURED M E Latulippe Construction, Inc. 61 Thompson Street P O Box 729 Ashland NH 03217	CONTACT NAME: Susan Gilman PHONE (A/C, No, Ext): (603) 224-2562 E-MAIL ADDRESS: sgilman@rowleyagency.com FAX (A/C, No): (603) 224-8012 INSURER(S) AFFORDING COVERAGE INSURER A Firemen's Ins Co of Wash. DC NAIC # 21784 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
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COVERAGES **CERTIFICATE NUMBER:** 16/17 WC Compliance **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

NSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE \$
	CLAIMS-MADE	OCCUR				DAMAGE TO RENTED PREMISES (Ea occurrence) \$
						MED EXP (Any one person) \$
						PERSONAL & ADV INJURY \$
	GEN'L AGGREGATE LIMIT APPLIES PER					GENERAL AGGREGATE \$
	POLICY	PROJ	LOC			PRODUCTS - COMP/OP AGG \$
	OTHER					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	ANY AUTO					BODILY INJURY (Per person) \$
	ALL OWNED AUTOS	SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	HIRED AUTOS	NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) \$
						\$
	UMBRELLA LIAB	OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB	CLAIMS-MADE				AGGREGATE \$
	DED	RETENTION \$				\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		WPA001106012	05/01/2016	05/01/2017	X PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	3A States: NH			E L EACH ACCIDENT \$ 100,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	N N/A				E L DISEASE - EA EMPLOYEE \$ 100,000
						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 #80735, Contract C, Glencliff Hydro Dam Repair, Benton, NH.

RECEIVED

APR 20 2016

CERTIFICATE HOLDER State of NH Dept. of Administrative Services 25 Capital Street Concord, NH 03301	CANCELLATION Bureau of Public Works 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 Susan Gilman/SJG <i>Susan Gilman</i>

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/28/2015

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.

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PRODUCER THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Susan Gilman PHONE (A/C No. Ext): (603) 224-2562 E-MAIL ADDRESS: sgilman@rowleyagency.com	FAX (A/C No): (603) 224-8012
	INSURER(S) AFFORDING COVERAGE	
INSURED State of NH, Dept of Administrative Services P O Box 729 Ashland NH 03217	INSURER A: Acadia Ins. Co.	NAIC # 313251
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** OCP Glencliff **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owners & Contractors GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			OCF6102015	06/10/2015	06/10/2016	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ \$
	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						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 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)
 Contract C, #80735, Glencliff Hydro Dam Repair, Benton, NH.

CERTIFICATE HOLDER State of New Hampshire Dept. of Administrative Services 25 Capital Street 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 Susan Gilman/SJG 

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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
4/28/2015

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If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Kelley Massey PHONE (A/C No, Ext): (603) 224-2562 E-MAIL ADDRESS: kmassey@rowleyagency.com PRODUCER CUSTOMER ID: 00001858	FAX (A/C, No): (603) 224-8012
	INSURER(S) AFFORDING COVERAGE	
INSURED State of NH, Dept. of Admin Services; M E Latulippe Construction, Inc., Any and All Subcontractors P O Box 729 Ashland NH 03217	INSURER A: Peerless Insurance Co. NAIC # 24198	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** BR Glencliff **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Loc#: 00001, Installation/BuildersRisk

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/> PROPERTY <input type="checkbox"/> CAUSES OF LOSS <input type="checkbox"/> DEDUCTIBLES <input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input type="checkbox"/> SPECIAL <input type="checkbox"/> EARTHQUAKE <input type="checkbox"/> WIND <input type="checkbox"/> FLOOD	<input type="checkbox"/> BUILDING <input type="checkbox"/> CONTENTS			<input type="checkbox"/> BUILDING <input type="checkbox"/> PERSONAL PROPERTY <input type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> EXTRA EXPENSE <input type="checkbox"/> RENTAL VALUE <input type="checkbox"/> BLANKET BUILDING <input type="checkbox"/> BLANKET PERS PROP <input type="checkbox"/> BLANKET BLDG & PP	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$
A	<input checked="" type="checkbox"/> INLAND MARINE <input type="checkbox"/> CAUSES OF LOSS <input type="checkbox"/> NAMED PERILS <input checked="" type="checkbox"/> Special	TYPE OF POLICY Installation/Builder POLICY NUMBER BR6102015	06/10/2015	06/10/2016	<input checked="" type="checkbox"/> Limit <input checked="" type="checkbox"/> Testing <input checked="" type="checkbox"/> Tansit <input checked="" type="checkbox"/> Temp Storage	\$ 478,785 \$ 478,785 \$ 239,393 \$ 239,393
	<input type="checkbox"/> CRIME <input type="checkbox"/> TYPE OF POLICY					\$ \$ \$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$ \$

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Project #80735, Contract C, Glencliff Hydro Dam Repair, Benton, NH.

CERTIFICATE HOLDER

CANCELLATION

State of NH
Dept. of Administrative Services
25 Capital Street
Concord, NH 03301

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

Susan Gilman/SJG

BPW



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

Bureau of Public Works
Design and Construction
Project No. 80735 – Contract C

May 20, 2015

Her Excellency, Governor Margaret Wood Hassan
and the Honorable Council
State House
Concord, New Hampshire 03301

6/24/2015

RECEIVED

JUN 02 2015

Bureau of Public Works

REQUESTED ACTION

1). Authorize the Bureau of Public Works Design and Construction to enter into a contract with M. E. Latulippe Construction, Inc. (VC# 157609) Ashland, NH, for a total price not to exceed \$478,785, for the Glenclyff Hydro Dam Repair, Benton, NH. This contract is effective upon Governor and Council approval through October 30, 2015, unless extended in accordance with the contract terms. **95% Capital - General Funds, 5% General - Operating Funds.**

2). Further authorize pursuant to 195:12, Laws of 2013, the amount of \$20,400 be approved for payment to the Department of Administrative Services, Bureau of Public Works Design and Construction (VC# 177875) Capital Clerk for oversight and engineering services provided, bringing the total to \$499,185. **100% Capital - General Funds.**

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

05-91-91-910030--29230000	Glenclyff Hydro Dam	<u>SFY15</u>
034-500162	- Repair/Renovations Bldgs	\$ 454,429
034-500162	- BPW Fees	<u>20,400</u>
	Sub-total	\$ 474,829

05-91-91-910010-78920000 Maintenance

048-500226 - Contractual Maint. - Bldg. & Grounds \$ 24,356

Grand Total **\$499,185**

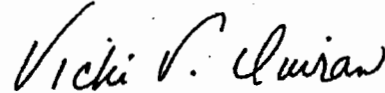
EXPLANATION

Per Chapter 195:1, VII, D, Laws of 2013, Glenclyff Hydro Repair. This project will include structural repair of existing dam, and dredging of the Slide Brook Impoundment, both of which are linked to the production of 30% of the Glenclyff campus power needs.

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, Bureau 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: \$507,595
Contract Amount: \$441,785
Under Estimate: \$ 65,810

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80735, Contract C – Hydro Dam Repair, Glenclyff Home, Benton, NH.

DESCRIPTION: Structural repair of existing dam, and dredging of the Slide Brook Impoundment, both of which are linked to the production of 30% of the Glenclyff campus power needs.

EXPLANATION: The existing Slide Brook Dam was originally constructed in 1929 to impound water for the hydro-generating waterwheel on High St. The dam was reconstructed after a fire in 1933. Over the years since then limited repairs (using un-reinforced cinderblock) have been made to the dam to address only the most critical structural elements caused by erosion, storm events, and the aging of the existing concrete. Currently, the dam is in very severe condition, having aged and suffered from concrete failure and spalling. In addition, significant storm events have transported large quantities of sediment down the Slide Brook into the Impoundment, thus limiting the storage of water for power generation.

UNDER ESTIMATE

EXPLANATION: The apparent low bid is 9% below the designer's construction cost opinion. It is expected that the long, hard, cold and snowy winter may have resulted in increased contractor interest in this specialized project, with five bids.

ALTERNATES

EXPLANATION: Glenclyff wishes to accept Alternate No. 1, Dredging (\$9,000) and Alternate No. 3, Impoundment Water Level Sensor (\$28,000).

DEPARTMENT

ESTIMATE: \$507,595 (includes alternates)
LOW BID: \$441,785

BIDDER SUMMARY

PROJECT NAME: GLENCLIFF HYDRO DAM REPAIR NON-FEDERAL 80735C
 PROJECT NUMBER: 80735C
 COUNTY: GRAFTON COUNTY 009
 BID OPENING DATE: 03/25/2015
 SCOPE OF WORK: STRUCTURAL REPAIRS TO SLIDE BROOK DAM AND DREDGING ON SLIDE BROOK IMPOUNDMENT
 LOCATION: GLENCLIFF HOME, BENTON NH
 COMPLETION DATE: 10/30/2015

BID RESULTS

A M.E. LATULIPE CONSTRUCTION, INC. - 61 THOMPSON ST., PO BOX 729, ASHLAND, NH 03217	\$ 441,785.00	ACCEPTED
B L&M SERVICE CONTRACTORS LLC (B001) - 126 NH RTE 10 ORFORD, NH 03777	\$ 447,500.00	ACCEPTED
C KINGSBURY COMPANIES, LLC - 264 MAD RIVER PARK WAITSFIELD, VT 05673	\$ 512,100.00	ACCEPTED
D NEW ENGLAND INFRASTRUCTURE INC (B001) - 13 BRENT DR HUDSON, MA 01749	\$ 649,000.00	ACCEPTED
E WINTERSET INC (B001) - PO BOX 968 LYNDONVILLE, VT 05851	\$ 798,500.00	ACCEPTED

Item 1: \$7500.
 Item 2: 125,000.
 Item 3: 231,785.
 Item 4: 7,000.
 Item 5: 10,500.
 Item 6: 10,000.
 Item 7: 50,000.
 Item 8: 9,000.
 Att 1: \$28,000.
 Att 3: \$441,785.
 Total: \$478,785.

BUREAU OF PUBLIC WORKS

Award to M.E. Latulipe Const., Inc
 Hold for Negotiation
 Cancel Contract
 User Agency: ~~M.E. Latulipe Const., Inc.~~
 Authorized by: ~~[Signature]~~
 Date: 04/24/2015

DTHS

ITEM NO.	DESCRIPTION	PS&E			A		
		UNIT QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL	TOTAL
901.00	SPPP, EMERGENCY ACTION PLAN & CONSTRUCTION PHASING PLAN	1.00	\$ 6,000.00	\$ 6,000.00	\$ 7,500.00	\$ 7,500.00	
902.00	DAM REPAIRS AND FOUNDATIONS	1.00	\$ 130,210.00	\$ 130,210.00	\$ 125,000.00	\$ 125,000.00	
903.00	SITE WORK	1.00	\$ 292,385.00	\$ 292,385.00	\$ 231,785.00	\$ 231,785.00	
904.00	CLASS 1 CONCRETE REPAIRS	10.00	\$ 660.00	\$ 6,600.00	\$ 700.00	\$ 7,000.00	
905.00	CLASS 2 CONCRETE REPAIRS	15.00	\$ 660.00	\$ 9,900.00	\$ 700.00	\$ 10,500.00	
906.00	COMPACTED DAM EMBANKMENTS FILL/CONC CLASS T FNDTN SEAL UNDER RIGHT FOOTGS	50.00	\$ 250.00	\$ 12,500.00	\$ 200.00	\$ 10,000.00	
907.00	ALLOWANCE FOR UNFORESEEN CONDITIONS OR OWNER-INIT CHANGES	\$ 50,000.00	\$ 1.00	\$ 50,000.00	\$ 1.00	\$ 50,000.00	
				\$ 507,595.00		\$ 441,785.00	

ALTERNATES

991.00	DREDGING	1.00	\$ 14,538.00	\$ 14,538.00	\$ 9,000.00	\$ 9,000.00
992.00	FLOW METERS	1.00	\$ 6,000.00	\$ 6,000.00	\$ 20,000.00	\$ 20,000.00
993.00	LEVEL SENSOR	1.00	\$ 16,000.00	\$ 16,000.00	\$ 28,000.00	\$ 28,000.00

	PS&E			B		
NO.	DESCRIPTION	UNIT QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL
901.00	SPPP, EMERGENCY ACTION PLAN & CONSTRUCTION PHASING PLAN	EA 1.00	\$ 6,000.00	\$ 6,000.00	\$ 25,000.00	\$ 25,000.00
902.00	DAM REPAIRS AND FOUNDATIONS	EA 1.00	\$ 130,210.00	\$ 130,210.00	\$ 140,000.00	\$ 140,000.00
903.00	SITE WORK	EA 1.00	\$ 292,385.00	\$ 292,385.00	\$ 195,000.00	\$ 195,000.00
904.00	CLASS 1 CONCRETE REPAIRS	SY 10.00	\$ 660.00	\$ 6,600.00	\$ 1,000.00	\$ 10,000.00
905.00	CLASS 2 CONCRETE REPAIRS	SY 15.00	\$ 660.00	\$ 9,900.00	\$ 1,000.00	\$ 15,000.00
906.00	COMPACTED DAM EMBANKMENTS FILL/CONC CLASS 1 FNDTN SEAL UNDER RIGHT FOOTGS	CY 50.00	\$ 250.00	\$ 12,500.00	\$ 250.00	\$ 12,500.00
907.00	ALLOWANCE FOR UNFORESEEN CONDITIONS OR OWNER-INIT CHANGES	\$ 50,000.00	\$ 1.00	\$ 50,000.00	\$ 1.00	\$ 50,000.00
				\$ 507,595.00		\$ 447,500.00

ALTERNATES

991.00	DREDGING	EA 1.00	\$ 14,538.00	\$ 14,538.00	\$ 50,000.00	\$ 50,000.00
992.00	FLOW METERS	EA 1.00	\$ 6,000.00	\$ 6,000.00	\$ 30,000.00	\$ 30,000.00
993.00	LEVEL SENSOR	EA 1.00	\$ 16,000.00	\$ 16,000.00	\$ 40,000.00	\$ 40,000.00

ITEM NO.	DESCRIPTION	PS&E		C	
		UNIT QUANTITY	UNIT PRICE	UNIT PRICE	TOTAL
901.00	SPPP, EMERGENCY ACTION PLAN & CONSTRUCTION PHASING PLAN	1.00	\$ 6,000.00	\$ 6,000.00	\$ 6,600.00
902.00	DAM REPAIRS AND FOUNDATIONS	1.00	\$ 130,210.00	\$ 130,210.00	\$ 173,000.00
903.00	SITE WORK	1.00	\$ 292,385.00	\$ 292,385.00	\$ 240,000.00
904.00	CLASS 1 CONCRETE REPAIRS	10.00	\$ 660.00	\$ 6,600.00	\$ 12,000.00
905.00	CLASS 2 CONCRETE REPAIRS	15.00	\$ 660.00	\$ 9,900.00	\$ 18,000.00
906.00	COMPACTED DAM EMBANKMENTS FILL/CONC CLASS T FNDTN SEAL UNDER RIGHT FOOTGS	50.00	\$ 250.00	\$ 12,500.00	\$ 12,500.00
907.00	ALLOWANCE FOR UNFORESEEN CONDITIONS OR OWNER-INIT CHANGES	\$ 50,000.00	\$ 1.00	\$ 50,000.00	\$ 50,000.00
				\$ 507,595.00	\$ 512,100.00

ALTERNATES

991.00	DREDGING	1.00	\$ 14,538.00	\$ 14,538.00	\$ 25,000.00
992.00	FLOW METERS	1.00	\$ 6,000.00	\$ 6,000.00	\$ 70,000.00
993.00	LEVEL SENSOR	1.00	\$ 16,000.00	\$ 16,000.00	\$ 35,000.00

NO.	DESCRIPTION	UNIT QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL
901.00	SPPP, EMERGENCY ACTION PLAN & CONSTRUCTION PHASING PLAN	EA 1.00	\$ 6,000.00	\$ 6,000.00	\$ 20,000.00	\$ 20,000.00
902.00	DAM REPAIRS AND FOUNDATIONS	EA 1.00	\$ 130,210.00	\$ 130,210.00	\$ 100,000.00	\$ 100,000.00
903.00	SITE WORK	EA 1.00	\$ 292,385.00	\$ 292,385.00	\$ 449,000.00	\$ 449,000.00
904.00	CLASS 1 CONCRETE REPAIRS	SY 10.00	\$ 660.00	\$ 6,600.00	\$ 500.00	\$ 5,000.00
905.00	CLASS 2 CONCRETE REPAIRS	SY 15.00	\$ 660.00	\$ 9,900.00	\$ 1,000.00	\$ 15,000.00
906.00	COMPACTED DAM EMBANKMENTS FILL/CONC CLASS 1 FNDTN SEAL UNDER RIGHT FOOTGS	CY 50.00	\$ 250.00	\$ 12,500.00	\$ 200.00	\$ 10,000.00
907.00	ALLOWANCE FOR UNFORESEEN CONDITIONS OR OWNER-INIT CHANGES	\$ 50,000.00	\$ 1.00	\$ 50,000.00	\$ 1.00	\$ 50,000.00
				\$ 507,595.00		\$ 649,000.00

ALTERNATES

991.00	DREDGING	EA 1.00	\$ 14,538.00	\$ 14,538.00	\$ 125,000.00	\$ 125,000.00
992.00	FLOW METERS	EA 1.00	\$ 6,000.00	\$ 6,000.00	\$ 40,000.00	\$ 40,000.00
993.00	LEVEL SENSOR	EA 1.00	\$ 16,000.00	\$ 16,000.00	\$ 30,000.00	\$ 30,000.00

ITEM NO.	DESCRIPTION	PS&E			E		
		UNIT QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL	TOTAL
901.00	SPPP. EMERGENCY ACTION PLAN & CONSTRUCTION PHASING PLAN	EA	1.00 \$ 6,000.00	\$ 6,000.00	\$ 24,000.00	\$ 24,000.00	
902.00	DAM REPAIRS AND FOUNDATIONS	EA	1.00 \$ 130,210.00	\$ 130,210.00	\$ 400,000.00	\$ 400,000.00	
903.00	SITE WORK	EA	1.00 \$ 292,385.00	\$ 292,385.00	\$ 265,000.00	\$ 265,000.00	
904.00	CLASS 1 CONCRETE REPAIRS	SY	10.00 \$ 660.00	\$ 6,600.00	\$ 1,000.00	\$ 10,000.00	
905.00	CLASS 2 CONCRETE REPAIRS	SY	15.00 \$ 660.00	\$ 9,900.00	\$ 1,700.00	\$ 25,500.00	
906.00	COMPACTED DAM EMBANKMENTS FILL/CONC CLASS T FNDYN SEAL UNDER RIGHT FOOTGS	CY	50.00 \$ 250.00	\$ 12,500.00	\$ 480.00	\$ 24,000.00	
907.00	ALLOWANCE FOR UNFORESEEN CONDITIONS OR OWNER-INIT CHANGES	\$	50,000.00 \$ 1.00	\$ 50,000.00	\$ 1.00	\$ 50,000.00	
				\$ 507,595.00		\$ 798,500.00	

ALTERNATES

991.00	DREDGING	EA	1.00 \$ 14,538.00	\$ 14,538.00	\$ 13,000.00	\$ 13,000.00
992.00	FLOW METERS	EA	1.00 \$ 6,000.00	\$ 6,000.00	\$ 37,000.00	\$ 37,000.00
993.00	LEVEL SENSOR	EA	1.00 \$ 16,000.00	\$ 16,000.00	\$ 36,000.00	\$ 36,000.00