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Victoria F. Sheehan
Commissioner

THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



William Cass, P.E.
Assistant Commissioner

Bureau of Highway Maintenance
(Well Section)
March 25, 2019

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

REQUESTED ACTION

Authorize the Department of Transportation to enter into a contract with N.A. Manosh, Inc. of Morrisville, VT (Vendor 290595) in the amount of \$21,740.00 for a 6-inch drilled well and pump on the property of Don Rogers, 285 Deering Road, (NH 149), Weare, NH, from the date of Governor and Council approval through July 26, 2019, unless extended by the Department in accordance with the Standard Specifications. 100% Highway Funds.

Funding is available in State Fiscal Year 2019 as follows:

	<u>FY 2019</u>
04-96-96-960515-3066	
Salted Wells Account	
400-500870 Highway Contract Payments	\$21,740.00

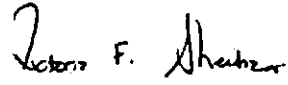
EXPLANATION

Results of investigations and water analysis has been evaluated, and it has been determined that the existing water supply has been contaminated by highway chlorides. The Department is therefore obligated to obtain a new water supply for the owner. This proposal is in conformity with RSA 228:34.

This contract was advertised and four bids were received and publicly opened on March 21, 2019. N.A. Manosh, Inc. of Morrisville, VT was the low bidder at \$21,740.00 and the Department considers this bid to be reasonable.

The Contractor has been prequalified by this Department. The Contract has been approved by the Attorney General as to form and execution and the Department 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' Office and subsequent to Governor and Council approval will be on file at the Department of Transportation.

Sincerely,



Victoria F. Sheehan
Commissioner

VFS/pcj
Attachment:

Department Estimate:	\$24,475.00
Contract Amount:	<u>\$21,740.00</u>
Under Estimate:	\$ 2,735.00



ABC Bid Data

WEARE
42227I
NON-FEDERAL

PROJECT: WEARE
STATE PROJECT NUMBER: 42227I
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: March 21, 2019, 2:00
SCOPE OF WORK: Replace Rogers Salted Well
COMPLETION DATE: July 26, 2019
LOCATION:

Awarded To: N.A. MANOSH INC
120NORTHGATE PLAZA
MORRISVILLE, VT 05661

Amount: \$21,740.00
Award Date:

Certified by: PETER E. STAMNAS
Director of Project Development

Summary of Bidders

Contractor	Bid Amount	Rank
N.A. MANOSH INC 120NORTHGATE PLAZA, MORRISVILLE VT 05661	\$21,740.00	A
CAPITAL WELL COMPANY INC 150 CONCORD STAGE ROAD, DUNBARTON NH 03046	\$22,050.00	B
WRAGG BROS OF VERMONT INC ROUTE 5, PO. BOX 110, ASCUTNEY VT 05030	\$22,148.00	C
SKILLINGS & SONS INC 9 COLUMBIA DRIVE, AMHERST NH 03031	\$23,699.25	D

Item No.	Description	Unit	Quantity	P&E		M.A. MANOSH INC 129NORTHGATE PLAZA MORRISVILLE, VT 05661		CAPITAL WELL COMPANY INC 150 CONCORD STAGE ROAD DUNBARTON, NH 03046	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

Items

662.1626	6" DRILLED WELL	LF	800.00	\$12.00	\$9,600.00	\$10.50	\$8,400.00	\$10.00	\$8,000.00
662.166	PILOT HOLE FOR 6" WELL (INCLUDES 6" CASING)	LF	200.00	\$25.00	\$5,000.00	\$18.00	\$3,600.00	\$26.00	\$5,200.00
662.244	4" WELL CASING (INCLUDING JASWELL SEALS & GROUT)	LF	500.00	\$8.00	\$3,000.00	\$4.00	\$2,000.00	\$5.00	\$2,500.00
662.41	TRENCH AND PIPE	LF	65.00	\$15.00	\$975.00	\$8.00	\$520.00	\$10.00	\$650.00
662.421	1" PE FLEXIBLE TUBING	LF	400.00	\$0.50	\$200.00	\$1.00	\$400.00	\$0.25	\$100.00
662.52050	SUBMERSIBLE PUMP (1/2 HP) AND ACCESSORIES	EA	1.00	\$2,500.00	\$2,500.00	\$3,620.00	\$3,620.00	\$2,400.00	\$2,400.00
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00
1008.18	ALTERATIONS AND ADDITIONS AS NEEDED - PUMPING TEST	\$	200.00	\$1.00	\$200.00	\$1.00	\$200.00	\$1.00	\$200.00
Totals:					\$24,475.00		\$21,740.00		\$22,050.00
Alt. Totals:									
Totals:					\$24,475.00		\$21,740.00		\$22,050.00

Item No.	Description	Unit	Quantity	P&E		WRAGO BROS OF VERMONT INC ROUTE 1 ASCUTNEY, VT 05030		SKILLINGS & SONS INC 9 COLUMBIA DRIVE AMHERST, NH 03031	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

Items

662.1626	6" DRILLED WELL	LF	800.00	\$12.00	\$9,600.00	\$10.00	\$8,000.00	\$11.00	\$8,800.00
662.166	PILOT HOLE FOR 6" WELL (INCLUDES 6" CASING)	LF	200.00	\$25.00	\$5,000.00	\$22.00	\$4,400.00	\$24.00	\$4,800.00
662.244	4" WELL CASING (INCLUDING JASWELL SEALS & GROUT)	LF	500.00	\$6.00	\$3,000.00	\$6.00	\$3,000.00	\$6.00	\$3,000.00
662.41	TRENCH AND PIPE	LF	65.00	\$15.00	\$975.00	\$10.00	\$650.00	\$18.45	\$1,199.25
662.421	1" PE FLEXIBLE TUBING	LF	400.00	\$0.50	\$200.00	\$0.37	\$148.00	\$0.50	\$200.00
662.52050	SUBMERSIBLE PUMP (1/2 HP) AND ACCESSORIES	EA	1.00	\$2,500.00	\$2,500.00	\$2,750.00	\$2,750.00	\$2,500.00	\$2,500.00
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00
1008.18	ALTERATIONS AND ADDITIONS AS NEEDED - PUMPING TEST	\$	200.00	\$1.00	\$200.00	\$1.00	\$200.00	\$1.00	\$200.00
Totals:					\$24,475.00		\$22,148.00		\$23,699.25
Alt. Totals:									
Totals:					\$24,475.00		\$22,148.00		\$23,699.25



PS&E Comparison

WEARE
422271
NON-FEDERAL

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
Items								
662.1626	6" DRILLED WELL	LF	800.00	\$10.50	\$8,400.00	\$12.00	\$9,600.00	(\$1,200.00)
662.166	PILOT HOLE FOR 6" WELL (INCLUDES 6" CASING)	LF	200.00	\$18.00	\$3,600.00	\$25.00	\$5,000.00	(\$1,400.00)
662.244	4" WELL CASING (INCLUDING JASWELL SEALS & GROUT)	LF	500.00	\$4.00	\$2,000.00	\$6.00	\$3,000.00	(\$1,000.00)
662.41	TRENCH AND PIPE	LF	65.00	\$8.00	\$520.00	\$15.00	\$975.00	(\$455.00)
662.421	1" PE FLEXIBLE TUBING	LF	400.00	\$1.00	\$400.00	\$0.50	\$200.00	\$200.00
662.52050	SUBMERSIBLE PUMP (1/2 HP) AND ACCESSORIES	EA	1.00	\$3,620.00	\$3,620.00	\$2,500.00	\$2,500.00	\$1,120.00
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00	\$0.00
1008.18	ALTERATIONS AND ADDITIONS AS NEEDED - PUMPING TEST	\$	200.00	\$1.00	\$200.00	\$1.00	\$200.00	\$0.00
Total:					\$21,740.00		\$24,475.00	(\$2,735.00)



NAMANOS-01

PLENAHAN

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/3/2019

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.

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.

PRODUCER: Denis, Ricker & Brown - MTP
INSURED: N A Manosh, Inc.
CONTACT: Linda Mercy
INSURER(S): Continental Western Insurance, Acadia Insurance Company

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.

Table with columns: INSR LTR, TYPE OF INSURANCE, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Rows include Commercial General Liability, Automobile Liability, and Umbrella Liability.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Nick Manosh, President, is an excluded officer on the Work Comp

Project No. is 422271, Don Rogers, 285 Deering Rd. (NH 149), Weare, NH 03281
Additional insured status applies for general liability per terms and conditions of attached form CLCG2077(12/77) and auto liability per terms and conditions of attached form AICA59(1/15). Umbrella is follow form.

CERTIFICATE HOLDER CANCELLATION

Certificate holder: State of New Hampshire Dept of Transportation. 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.



NAMANOS-01

PLENAHAN

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/3/2019

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 Denis, Ricker & Brown - MTP PO Box 565 Montpelier, VT 05601-0565	CONTACT NAME: Linda Mercy	
	PHONE (A/C, No, Ext): (802) 262-1439	FAX (A/C, No): (802) 229-6770
E-MAIL Address: lmercy@hbinsurance.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Union Ins Co		25844
INSURED N A Manosh, Inc. 120 Northgate Plaza Morrisville, VT 05661	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

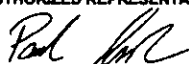
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE	\$
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
						MED EXP (Any one person)	\$
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$
						PRODUCTS - COMP/OP AGG	\$
							\$
	AUTOMOBILE LIABILITY <input 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					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"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N <input checked="" type="checkbox"/> Y N/A If yes, describe under DESCRIPTION OF OPERATIONS below		WCA5274898-12	1/1/2019	1/1/2020	<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)
Nick Manosh, President, is an excluded officer on the Work Comp

Project No. is 422271, Don Rogers, 285 Deering Rd. (NH 149), Weare, NH 03281

CERTIFICATE HOLDER **CANCELLATION**

State of New Hampshire Dept of Transportation Office of Federal Compliance 7 Hazen Dr PO Box 483 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 
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