

State of New Hampshire DEPARTMENT OF ADMINISTRATIVE SERVICES 25 Capitol Street - Room 120

Concord, New Hampshire 03301

Charles M. Arlinghaus Commissioner (603) 271-3201 Joseph B. Bouchard Assistant Commissioner (603) 271-3204

Catherine A. Keane Deputy Commissioner (603) 271-2059

Division of Public Works Design and Construction Project No. 81126R – Contract A

August 24, 2020

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 Northeast Earth Mechanics Inc (VC#156610), Pittsfield, NH, for a total price not to exceed \$3,909,000, for the Center Strafford Water Upgrades and Site Improvements at the Center Strafford Training Facility, Center Strafford, N. H. This contract is effective upon Governor and Council approval through November 15, 2021, unless extended in accordance with the contract terms. 100% Federal Funds

2). Further authorize that a contingency in the amount of \$200,000.00 be approved for unanticipated site expenses for the Center Strafford Water Upgrades and Site Improvements, Center Strafford, N.H., bringing the total to \$4,109,000. 100% Federal Funds

3). Further authorize the amount of \$97,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 311152), for engineering services provided, bringing the total to \$4,206,000. 100% Federal Funds Funding is available in account titled MAVS Army Guard Facilities as follows:

His Excellency, Governor Christopher T. Sununu and the Honorable Council August 24, 2020 Page 2 of 2

Funding is available in the following accounts listed below:

01-12-12-120010-22450000 Army Guard Facilities (pending availability of Federal Funds)

<u>SFY21</u>

103-500736 - Army Guard Facilities - Contract\$3,909,000103-500736 - Army Guard Facilities - Contingency\$200,000

Sub-Total \$4,109.000

01-12-12-120010-22550000 Inter-Agency Payments (pending availability of Federal Funds)

217-502682 Interagency DPW fees <u>\$ 97,000</u>

GRAND TOTAL \$4,206,000

EXPLANATION

This project is to Upgrade Water System including a new well, storage tank, and distribution network; and site improvements including expanded parking areas and repaving internal access roads at the Central Strafford facility.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Department of Justice as to form and execution; and the Dept. of Military Affairs & Veterans Services has certified that the necessary funds are pending. 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.

Respectfully submitted,

nailes M. Arlinaháu Commissioner

 Department Estimate:
 \$2,955,080

 Contract Amount:
 \$3,909,000

 Over Estimate:
 \$ 953,920

ABC Bid Data



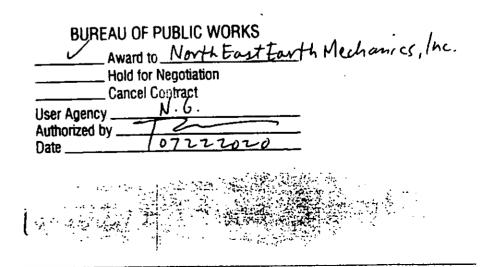
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CTR STRAFFORD \$1125RA NON-FEDERAL

PROJECT: STATE PROJECT NUMBER: FED. PROJECT NUMBER: OATE BIDS OPEN: SCOPE OF WORK: COMPLETION DATE: LOCATION:	CTR STRAFFORD 81125RA NON-FEDERAL Jay 01, 2020, 2:00 PH CENTER STRAFFORD WATER UPGRADES AND STTE IMPROVEMENTS November 15, 2021 Stafford	Certified by:		
	Summary of Bidders			
			Bid Amount	Rank
Contractor			\$3,984,000.00	<u> </u>
NORTHEAST EARTH	RECHANICS INC			
159 BARNSTEAD R	OAD, PITTSFIELD NH 03263		\$5,035,000.00	8

MERRILL F L CONSTRUCTION INC 35 VETERANS DRIVE, LOUDON NH 03307

I + em # 901.\$ 550,000. # 902.\$ 750,000. # 903:\$2,484,000. # 904:\$ 150,000. # 904:\$ 50,000. # 905.\$ 50,000.
Base Total : \$3,984,000.
Add # 991 \$ 100,000. Add # 992 \$ 25,000.
44109000.
No Alternate#5 Deduct#997:\$ 200,000.
Grand Tatul = \$3,909,000.



CTR STRAFFORD 81126RA NON-FEDERAL

				PS&E		NORTHEAST EARTH MECHANICS INC 159 BARNSTEAD ROAD PITTSFIELD, NH 03263		MERRILL F L CONSTRUCTION INC 35 VETERANS DRIVE LOUDON, NH 03307		
	Description	Unit	Quantity	Unit Price	Total	Unit Price		Unit Price	Total	
Items						-				
901	WATER PIPING	U	1.00	\$ 560,400.00	\$ 560,400.00	\$550,000.00	\$550,000.00	\$1,475,000.00	\$1,475,000.00	
902	TANK AND TREATMENT WORK, INCLUDING ALT 8	υ	1.00	\$ 515,700.00	\$ 515,700.00	\$750,000.00	\$750,000.00	\$925,000.00	\$925,000.00	
903	SITE WORK INCLUDING ALT. 3,4,5,6,7 AND 9	U	1.00	\$ 1,678,980.00	\$ 1,678,980.00	\$2,484,000.00	\$2,484,000.00	\$2,435,000.00	\$2,435,000.00	
904	ALLOWANCE FOR UNFORESEEN OR OWNER INITIATED CHANGES	\$	150,000.00	\$1.00	\$ 150,000.00	\$1.00	\$150,000.00	\$ 1.00	\$150,000.00	
905	ALLOWANCE FOR PERMIT REQUIREMENTS	\$	50,000.00	\$1.00	\$ 50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00	
	A ALTERNATES ADD ALT 1		Totals:		\$2,955,080.00		\$3,984,000.00		\$5,035,000.00	
991	ALT 1 ADD ALTERNATE 1 VCOT WORK AS SHOWN ON CONTRACT DOCUMENTS	U	1.00	\$ 127,580.00	\$ 127,580.00	\$100,000.00	\$100,000.00	\$62,000.00	\$62,000.00	
ALT 2	ADD ALT 2	•	•							
992	ALT 2 ADD ALTERNATE 2 PAVEMENT SECTION AROUND BLDG 9 AS SHOWN ON CONTRACT DOCUMENTS	U	1.00	\$ 239,000.00	\$ 239,000.00	\$25,000.00	\$25,000.00	\$25,000.00	\$25,000.00	
ALT 3	DEDUCT ALT 1	•	·			I		L		
993	ALT 3 DEDUCT ALTERNATE 1 HEAVY DUTY PAVEMENT	U	1.00	\$ 49,530.00	\$ 49,530.00	(\$40,000.00)	(\$40,000.00)	(\$58,000.00)	(\$58,000.00)	
ALT 4	ALT 4 DEDUCT ALT 2									
994	ALT 4 DEDUCT ALTERNATE 2 AMPITHEATER SEATING	υ	1.00	\$ 17,000.00	\$ 17,000.00	(\$11,000.00)	(\$11,000.00)	(\$4,500.00)	(\$4,500.00)	
ALT 5	DEDUCT ALT 3							L		
995	ALT 5 DEDUCT ALTERNATE 3 SITTING WALL AND THERMOPLASTIC SYMBOL	U	1.00	\$ 12,675.00	\$ 12,675.00	(\$40,000.00)	(\$40,000.00)	(\$36,500.00)	(\$36,500.00)	

996 ALT 6 DEDUCT ALTERNATE 4 U 1.00 \$ 13,400.00 \$ 13,400.00 (\$14,000.00) (\$14,000.00) (\$10,500.00)									 				5 DEDUCT ALT 4	ALT 6
	(\$10,500.00)	\$10,500.((\$10	\$10,500.00)	1	,	, ,	13,400.00	\$ 13,400.00	\$ 1.00	U	=	ALT 6 DEDUCT	996

ALT 7 DEDUCT ALT 5

997	ALT 7 DEDUCT ALTERNATE 5 LIGHTING INCLUDING PROPOSED BOLLARDS, POLES, LIGHTS AND	U	1.00	\$	168,000.00	\$	168,000.00	(\$200,000.00)	(\$200,000.00)	(\$183,700.00)	(\$183,700.00)
ALT	8 DEDUCT ALT 6										
998	ALT 8 DEDUCT ALTERNATE 6 TANK FENCING	U	1.00	\$	7,500.00	\$	7,500.00	(\$10,000.00)	(\$10,000.00)	(\$9,000.00)	(\$9,000.00)
ALT	9 DEDUCT ALT 7						_				
999	ALT 9 DEDUCT ALTERNATE 7 NORTHERN PARKING LOT AS SHOWN ON CONTRACT DOCUMENTS	υ	1.00	\$	224,215.00	\$	224,215.00	(\$100,000.00)	(\$100,000.00)	(\$145,500.00)	(\$145,500.00)
			Alt. Totals:				·····				
			AIL TOTAIS:	_	<u>.</u>						
			Totals:			1	2,955,080.00		\$3,984,000.00		\$5,035,000.00

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IMPORTANT: If the certificate holde If SUBROGATION IS WAIVED, subjet this certificate does not confer rights t	ct to) the	terms and conditions of	the po	licy, certain	policies may				
PRODUCER			·	NAME	CT Kathy P			<u></u>		
The Davis Agency, LLC 28 Commercial Street Suite 5					_{5, Ext):} (603) 8 _{SS:} kathy@t			(603) 7	715-1911	
Concord, NH 03301								NAIC#		
INSURED					RA:Acadia		Company lus Lines Insurance (
NorthEast Earth Mechanics	Inc						oyd's, London			
159 Barnstead Road	, 1110-			INSURE						
Pittsfield, NH 03263				INSURE	R.E.;					
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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.										
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		1					MED EXP (Any one person)	\$	10,000	
		1					PERSONAL & ADV INJURY	\$	1,000,000	
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POLICY X Prof. X LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000	
		<u> </u>					COMBINED SINGLE LIMIT	<u>ــــــــــــــــــــــــــــــــــــ</u>	1.000.000	
					4/00/0000	40010004	(Ea accident)	\$	1,000,000	
			CAA5198635-15		4/23/2020	4/23/2021	BODILY INJURY (Per person)	\$	<u> </u>	
AUTOS ONLY AUTOS X AUTOS ONLY X AUTOS ONLY							BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$		
	}	-					EACH OCCURRENCE		10,000,000	
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DED X RETENTION \$ 0	4						Prod/Comp. Ops	5	10,000,000	
A WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		—					X PER OTH-			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMORE EXCLUDED?	N/A	j	WPA5198638-16		4/23/2020	4/23/2021	E.L. EACH ACCIDENT	5	1,000,000	
(Mandatory In NH)	"	i					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000	
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE · POLICY LIMIT	\$	1,080,000	
B Pollution Liability C Prof. Liability		ł	G27584573 006 ANE4316797-19		4/23/2020 11/4/2019		Each Occurrence Each Occurrence		5,000,000 3,000,000	
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				CANC	ELLATION					
State of New Hampshire c/o Department of Administr	ative	Serv	lices	THE	EXPIRATION	DATE TH	ESCRIBED POLICIES BE C EREOF, NOTICE WILL Y PROVISIONS.			
7 Hazen Drive, Room 250 Concord, NH 03302										

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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

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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 holds If SUBROGATION (S WAIVED, subjection of the serviciate does not confer rights to the serviciate does not confer rights)	ct to the	terms and conditions of	the po uch and	licy, certain lorsement(s)	policies may	NAL INSURED pro	sement. A s	e endorsed. statement on		
PRODUCER			SONE	CT Kathy Pe	əttit					
The Davis Agency, LLC 28 Commercial Street				o, Ext): (603) 8			AX VC, Noj:(603)	715-1911		
Suite 5 Concord, NH 03301	ADDRE	ss: kathy@t		DING COVERAGE		NAIC #				
	INSURE	RA:Acadia								
INSURED			INSURE							
State of New Hampshire c/o Department of Administ	rative Ser	vices	INSURE	RC:						
7 Hazen Drive, Room 250			INSURE							
Concord, NH 03302			INSURE							
		ENUMBER:	REVISION NUMBER:							
THIS IS TO CERTIFY THAT THE POLICI INDICATED. NOTWITHSTANDING ANY F	ES OF INS	SURANCE LISTED BELOW		EEN ISSUED	TO THE INSUR	RED NAMED ABOVE	FOR THE PO	LICY PERIOD		
CERTIFICATE MAY BE ISSUED OR MAY	PERTAIN	THE INSURANCE AFFOR	DED BY	THE POLICI	ES DESCRIB	ed herein is sub	JECT TO ALL	THE TERMS,		
EXCLUSIONS AND CONDITIONS OF SUCH	POLICIES.	LIMITS SHOWN MAY HAVE POLICY NUMBER	BEENI	DOLICY EEE	DOLICY EXD		LIMITS			
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WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N										
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	1			
If yes, describe under						E.L. DISEASE - DA EM		,,		
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CERTIFICATE HOLDER				ELLATION	<u> </u>					
State of New Hampshire c/o Department of Administrative Services			THE	EXPIRATIO	N DATE TH	ESCRIBED POLICIE IEREOF, NOTICE CY PROVISIONS.	IS BE CANCE! WILL BE D	LED BEFORE ELIVERED IN		
7 Hazen Drive, Room 250 Concord, NH 03302			AUTHO		NTATIVE					
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