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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. 80888 – Contract B

December 6, 2016

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 D. L. King & Associates, Inc. (VC# 168979) Nashua, NH, for a total price not to exceed \$324,000, for the Elevator Upgrades at the Philbrook Building in Concord, NH and Monadnock Mill in Claremont, NH, This contract is effective through June 27, 2017 unless extended in accordance with the contract terms. **82% Capital - General Funds, 18% Operating – General Funds.**

2). Further authorize that a contingency in the amount of \$10,000 be approved for unanticipated structural or mechanical expenses for the Elevator Upgrades at the Philbrook Building, bringing the total to \$334,000. **100% Capital - General Funds.**

3). Further authorize pursuant to Chapter 220:13, Laws of 2015, the amount of \$13,500 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 \$347,500. **86% Capital – General Funds, 14% Transfer Funds.**

Funding is available in account titled Department of Administrative Services as follows:

01-14-14-146030-49780000	Justice and Philbrook Elevator	<u>SFY17</u>
	034-500162 – Repair/Renovations Bldgs.	\$ 88,000
	034-500162 – Contingency	\$ 10,000
	034-500162 – Interagency Fees - DPW	<u>\$ 5,000</u>
	Sub-Total	\$103,000

01-14-14-146030-24230000	Monadnock Mill - Elevator Upgrade	
034-500162	– Repair/Renovations Bldgs.	\$178,602
034-500162	– Interagency Fees - DPW	<u>\$ 6,630</u>
	Sub-Total	\$185,232
01-14-14-141510-21670000	Old Mill #1	
048-500226	– Contractual Maint. Bldg.-Grnds	\$ 19,130
048-500226	– Interagency Fees - DPW	<u>\$ 1,870</u>
	Sub-Total	\$ 21,000
01-14-14-141510-29500000	General Services Maint. Bldg. - Grnds	
048-500226	– Contractual Maint. Bldg.-Grnds	<u>\$ 38,268</u>
	Grand Total	\$347,500

EXPLANATION

Per Chapter 220:1, II, B, 11, Laws of 2015 for the Department of Justice and Philbrook Elevator and Code Issues, Chapter 220:1, II, B, 5, Laws of 2015 for the Monadnock Mill Elevator Upgrade. The project will remove the existing hydraulic cylinder for the Elevator at the Anna Philbrook Center and replace it with a double wall hydraulic cylinder. In addition, this project also includes renovations to the elevator at a state owned building called the Monadnock Mill in Claremont.

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 Administrative 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.

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
December 6, 2016
Page 3 of 3

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

Respectfully submitted,

A handwritten signature in cursive script that reads "Vicki V. Quiram".

Vicki V. Quiram,
Commissioner

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80888, Contract B Elevator Upgrade at the Anna Philbrook Center and the Monadnock Mill

DESCRIPTION: Anna Philbrook Elevator: Remove the existing hydraulic cylinder and replace with a double wall cylinder. Test the soil around the cylinder. Install a sump pump pit to add a new pump. Dewater the hole if necessary through the DES permit.

Monadnock Mill Elevator: Upgrade the elevator in the machine room and the car. Install a sump pump pit to add a new pump. Install fire rated ductwork in the attic. Remove a window in the attic and replace it with a louver.

EXPLANATION: The elevator at the Anna Philbrook Center is a hydraulic piston elevator with a single wall cylinder. The Department of Labor requires that this single wall cylinder be replaced with a double wall cylinder. The Monadnock Mill elevator has had many issues breaking down and needs an upgrade.

OVER ESTIMATE
EXPLANATION: Travel to Claremont for the Monadnock Elevator increased the price for that bid item.

DEPARTMENT
ESTIMATE: \$295,000.00
LOW BID: \$324,000.00



ABC Bid Data

CONCORD - CLAREMONT
80888, Contract B
NON-FEDERAL

PROJECT: CONCORD - CLAREMONT
STATE PROJECT NUMBER: 80888, Contract B
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: October 26, 2016, 02:00 PM
SCOPE OF WORK: ELEVATOR UPGRADES at PHILBROOK AND MOMADNOCK MILL
COMPLETION DATE: June 27, 2017
LOCATION: Sullivan, Merrimack

Summary of Bidders

Contractor	Bid Amount	Rank
D. L. KING & ASSOCIATES INC 27 TANGLEWOOD DRIVE, NASHUA NH 03062-1044	\$324,000.00	A

BUREAU OF PUBLIC WORKS

Award to Di King + Assoc, Inc
 Hold for Negotiation
 Cancel Contract
 User Agency DAS
 Authorized by [Signature]
 Date 11/5/2016

Item No.	Description	Unit	Quantity	PS&E		D. L. KING & ASSOCIATES INC. 27 TANGLEWOOD DRIVE NASHUA, NH 03062-1044	
				Unit Price	Total		Unit Price
901	ELEVATOR UPGRADE FOR PHILBROOK	U	1.000	\$100,000.00	\$100,000.00	\$83,000.00	\$83,000.00
902	ALLOWANCE #1 - OWNER INITIATED CHANGES FOR UNKNOWN CONDITIONS FOR BID ITEM #1	\$	5,000.000	\$1.00	\$5,000.00	\$1.00	\$5,000.00
903	ELEVATOR UPGRADE FOR MONADNOCK	U	1.000	\$185,000.00	\$185,000.00	\$231,000.00	\$231,000.00
904	ALLOWANCE #2 - OWNER INITIATED CHANGES FOR UNKNOWN CONDITIONS FOR BID ITEM #2	\$	5,000.000	\$1.00	\$5,000.00	\$1.00	\$5,000.00

Totals: **\$295,000.00** **\$324,000.00**



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/30/2016

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: Renee Skillings PHONE (A/C No. Ext): (603) 224-2562 FAX (A/C No.): (603) 224-8012 E-MAIL ADDRESS: rskillings@rowleyagency.com	
INSURED D.L. King & Associates, Inc. 27 Tanglewood Drive Nashua NH 03062		INSURER(S) AFFORDING COVERAGE INSURER A: Arbella Insurance Group INSURER B: Arbella Protection Ins Co NAIC # 41360 INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 16-17 All lines **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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		8500062916	9/3/2016	9/3/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		1020032951	9/3/2016	9/3/2017	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 type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		4600062918	9/3/2016	9/3/2017	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
B	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 Y N/A	9126050915 3A States: NH/MA Excluded Officers: Donna & Arthur King, Jr.	9/3/2016	9/3/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	LEASED/RENTED EQUIPMENT		8500062916	9/3/2016	9/3/2017	LIMIT 30,000 DED 500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project #80888B; Elevator upgrades at Philbrook and Monadnock Mill, Concord and Claremont, NH
It is agreed and understood The State of NH Dept of Administrative Services is included as additional insured with regard to general liability when required by written contract.

CERTIFICATE HOLDER (603) 271-6758 mdrouin@dot.state.nh.us State of New Hampshire Dept of Administrative Services 7 Hazen Drive 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 Renee Skillings/RLS <i>Renee L. Skillings</i>
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CERTIFICATE OF LIABILITY INSURANCE

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11/30/2016

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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).

PRODUCER THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Renee Skillings PHONE (A/C No. Ext): (603) 224-2562 E-MAIL ADDRESS: rskillings@rowleyagency.com		FAX (A/C No.): (603) 224-8012
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED State of NH Dept of Administrative Services c/o D.L. King & Associates, Inc. 27 Tanglewood Drive Nashua NH 03062	INSURER A: Great American		
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 16-17 OCP #80888B **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 <input type="checkbox"/> Protective Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			OCP12012016	12/01/2016	12/01/2017	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMPI/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						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	Y/N		N/A			PER STATUTE OTH-ER 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)
 Project #80888B; Elevator upgrades at Philbrook and Monadnock Mill, Concord and Claremont, NH

CERTIFICATE HOLDER State of New Hampshire Dept of Administrative Services 7 Hazen Drive 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 Renee Skillings/RLS <i>Renee L. Skillings</i>

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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

11/30/2016

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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. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Renee Skillings	
	PHONE (A/C. No. Ext): (603) 224-2562	FAX (A/C. No.): (603) 224-8012
E-MAIL ADDRESS: rskillings@rowleyagency.com		
PRODUCER CUSTOMER ID: 00007629		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Peerless Insurance Co.		24198
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES **CERTIFICATE NUMBER: BR #80888B** **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Project #80897, Contract B, NH State House improvements-exterior painting, 107 N. Main St., Concord, NH

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 CAUSES OF LOSS DEDUCTIBLES <input type="checkbox"/> BASIC BUILDING <input type="checkbox"/> BROAD CONTENTS <input type="checkbox"/> SPECIAL <input type="checkbox"/> EARTHQUAKE <input type="checkbox"/> WIND <input type="checkbox"/> FLOOD				<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 CAUSES OF LOSS <input type="checkbox"/> NAMED PERILS	TYPE OF POLICY BUILDERS RISK POLICY NUMBER BR12012016	12/01/2016	12/01/2017	<input checked="" type="checkbox"/> JOBSITE <input checked="" type="checkbox"/> TRANSIT <input checked="" type="checkbox"/> TEMPORARY STORAGE <input checked="" type="checkbox"/> SOFT COSTS	\$ 324,000 \$ 162,000 \$ 162,000 \$ 50,000
	<input type="checkbox"/> CRIME TYPE OF POLICY					\$ \$ \$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$ \$
					<input type="checkbox"/> EARTHQUAKE <input type="checkbox"/> SEWER BACKUP	\$ \$

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Project #80888B; Elevator upgrades at Philbrook and Monadnock Mill, Concord and Claremont, NH

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services 7 Hazen Drive 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 Renee Skillings/RLS <i>Renee S. Skillings</i>
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