



# State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES

25 Capitol Street - Room 120  
Concord, New Hampshire 03301

83 mll

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. 81109 - Contract B

February 24, 2022

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 Daniel Hebert Inc. (VC# 154610) Colebrook, New Hampshire, for a total price not to exceed \$1,209,884 for the Lancaster District 1 Office Addition, Lancaster, New Hampshire. This contract is effective upon Governor and Council approval through December 12, 2022, unless extended in accordance with the contract terms. **97% Highway Funds, 3% Capital-General.**
- 2). Further authorize that a contingency in the amount of \$50,000 be approved for unanticipated structural expenses for the Lancaster District 1 Office Addition, bringing the total to \$1,259,884. **100% Highway Funds**
- 3). Further authorize the amount of \$55,450 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 \$1,315,334. **100% Highway Funds.**

Funding is available in account titled Dept. of Transportation as follows:

	<b><u>SFY22</u></b>
04-96-96-960030-13490000 19-146:2IIF Lancaster Office 034- 500161 New Construction	\$ 638,000
04-96-96-960030-93530000 L21:216 Patrol Sheds DO 034-500161 New Construction	\$ 530,341

Funding is available in the account titled Dept of Administrative Services

01-14-14-140030-92920000 L21:1IF Statewide Enrgy Eff Imprv 034-500155 New Construction	\$ 41,543
<b>Subtotal</b>	<b>\$1,209,884</b>

Funding is available in account titled Dept. of Transportation as follows:

04-96-96-960030-93530000 L21:216 Patrol Sheds DO 034-500161 New Construction - Contingency	\$ 50,000
<b>Subtotal</b>	<b>\$1,259,884</b>

04-96-96-960030-93530000 L21:216 Patrol Sheds DO 034-500161 New Construction - DPW Fees	\$ 55,450
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<b>Grand Total</b>	<b>\$1,315,334</b>
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#### EXPLANATION

This project will construct an addition to the Department of Transportation's Lancaster District office and renovate an existing office space. The addition will provide a second means of egress from occupied spaces in the basement, as well as, additional program space to support the functions of the highway maintenance facility. The new program spaces include meeting/training space, kitchen/breakroom, storeroom, and ADA compliant restrooms. The project will also remodel a large existing office into three (3) small offices. The building will be removed from the existing septic system and connected to the municipal sanitary sewer system. A new boiler, emergency generator, and upgrades to the security and fire alarm systems will also be included in this project.

The State Fire Marshal's Office (SFMO) issued one Inspection Report in 2018 and one in 2019, listing multiple Life Safety code violations. Specifically, the SFMO cited non-compliance of: the egress from the occupied space in the basement; combustible material storage in the mechanical room; exit signage; and electrical panel clearance. This project will correct all of these Life Safety code violations. Further, the existing facility is no longer adequate for supporting the District's highway maintenance functions. The addition will provide much needed training space, kitchen/breakroom space and ADA improvements. This project is instrumental in order for the Department of Transportation to provide the level of service expected by the traveling public.

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 Transportation 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,



Charles M. Arlinghaus,  
Commissioner

Department Estimate:	\$ 1,007,827
Contract Amount:	<u>\$ 1,209,884</u>
Over Estimate:	\$ 202,057

## CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 81109, Contract B  
Lancaster District Office Addition, Lancaster, New Hampshire

DESCRIPTION: This project will construct an addition to the Department of Transportation's (DOT) Lancaster District office and renovate an existing office space. The addition will provide a second means of egress from occupied spaces in the basement, as well as, additional program space to support the functions of the highway maintenance facility. The new program spaces include meeting/training space, kitchen/breakroom, storeroom, and ADA compliant restrooms. The project will also remodel a large existing office into three (3) small offices. The building will be removed from the existing septic system and connected to the municipal sanitary sewer system. A new boiler, emergency generator, and upgrades to the security and fire alarm systems will also be included in this project.

EXPLANATION: The State Fire Marshal's Office (SFMO) issued one Inspection Report in 2018 and one in 2019, listing multiple Life Safety code violations. Specifically, the SFMO cited non-compliance of the egress from the occupied space in the basement; combustible material storage in the mechanical room; exit signage; and electrical panel clearance. This project will correct all of these Life Safety code violations. Further, the existing facility is no longer adequate for supporting the District's highway maintenance functions. The addition will provide much needed training space, kitchen/breakroom space and ADA improvements. This project is instrumental in order for the DOT to provide the level of service expected by the traveling public.

### OVER ESTIMATE

EXPLANATION: The low bid is approximately 20% above the Department estimate. The estimate did not adequately reflect the volatility in bid prices due to the COVID pandemic. Material and labor prices have increased dramatically over the past 1 ½ years.

DEPARTMENT ESTIMATE:	\$ 1,007,827
LOW BID:	<u>\$ 1,209,884</u>
OVER ESTIMATE:	\$ 202,057



Division of Public Works

## ABC Bid Data

LANCASTER

81109B

NON-FEDERAL

PROJECT: LANCASTER  
STATE PROJECT NUMBER: 81109B  
FED. PROJECT NUMBER: NON-FEDERAL  
DATE BIDS OPEN: November 03, 2021,  
SCOPE OF WORK: LANCASTER DISTRICT OFFICE ADDITION  
COMPLETION DATE: December 12, 2022  
LOCATION: Coos

Awarded To:

Amount: \$0.00

Award Date:

Certified by:

Director of Project Development

### Summary of Bidders

Contractor	Bid Amount	Rank
HEBERT, DANIEL INC. 12 PLEASANT ST., COLEBROOK NH 03576	\$1,209,884.00	A
RAY'S ELECTRIC, & GENERAL CONTRACTING INC PO BOX 597, BERLIN NH 03570	\$1,445,000.00	B

### BUREAU OF PUBLIC WORKS

☒ Award to A' Bidder  
☐ Hold for Negotiation \$1,209,884  
☐ Cancel Contract

User Agency DOT  
Authorized by MWJ  
Date 12/3/21



Division of Public Works

# ABC Bid Data

LANCASTER  
81109B  
NON-FEDERAL

Item No.	Description	Unit	Quantity	PS&E		HEBERT, DANIEL INC. 12 PLEASANT ST. COLEBROOK, NH 03576		RAY'S ELECTRIC, & GENERAL CONTRACTING INC PO BOX 597 BERLIN, NH 03570	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

## Items

901	NEW 1440 SF ADDITION SITE WORK MINOR RENOVATIONS EXISTING BLDG	U	1.00	\$907,827.00	\$907,827.00	\$1,109,884.00	\$1,109,884.00	\$1,345,000.00	\$1,345,000.00
902	UNFORESEEN CONDITIONS	\$	100,000.00	\$1.00	\$100,000.00	\$1.00	\$100,000.00	\$1.00	\$100,000.00
Totals:				\$1,007,827.00		\$1,209,884.00		\$1,445,000.00	
Alt. Totals:									
Totals:				\$1,007,827.00		\$1,209,884.00		\$1,445,000.00	

# State of New Hampshire

## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that DANIEL HEBERT, INC. is a New Hampshire Profit Corporation registered to transact business in New Hampshire on September 24, 1970. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 12463

Certificate Number: 0005488849



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 3rd day of January A.D. 2022.

A handwritten signature in cursive script, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State



## Business Information

### Business Details

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Business Name: DANIEL HEBERT, INC.	Business ID: 12463
Business Type: Domestic Profit Corporation	Business Status: Good Standing
Business Creation Date: 09/24/1970	Name in State of Incorporation: Not Available
Date of Formation in Jurisdiction: 09/24/1970	
Principal Office Address: 12 Pleasant Street, Colebrook, NH, 03576, USA	Mailing Address: NONE
Citizenship / State of Incorporation: Domestic/New Hampshire	
	Last Annual Report Year: 2022
	Next Report Year: 2023
Duration: Perpetual	
Business Email: jfalconer@dhigc.com	Phone #: NONE
Notification Email: jfalconer@dhigc.com	Fiscal Year End Date: NONE

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### Principal Purpose

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S.No	NAICS Code	NAICS Subcode
1	OTHER / GENERAL/MECHANICAL CONTRACTOR	

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## Principals Information

Name/Title	Business Address
Daniel Hebert Jr / Director	12 Pleasant Street, Colebrook, NH, 03576, USA
Daniel Hebert Jr / President	12 Pleasant Street, Colebrook, NH, 03576, USA
Daniel Hebert Jr / Treasurer	12 Pleasant Street, Colebrook, NH, 03576, USA
John D Falconer / Secretary	12 Pleasant Street, Colebrook, NH, 03576, USA
Chris Hebert / Vice President	12 PLEASANT ST., Colebrook, NH, 03576, USA

Page 1 of 1, records 1 to 5 of 5

## Registered Agent Information

Name: Falconer, John D

Registered Office 12 Pleasant Street, Colebrook, NH, 03576, USA  
Address:

Registered Mailing 12 Pleasant Street, Colebrook, NH, 03576, USA  
Address:

## Trade Name Information

No Trade Name(s) associated to this business.

## Trade Name Owned By

No Records to View.

## Trademark Information

Trademark Number	Trademark Name	Business Address	Mailing Address
No records to view.			

[Filing History](#)   [Address History](#)   [View All Other Addresses](#)   [Name History](#)   [Shares](#)  
[Businesses Linked to Registered Agent](#)   [Return to Search](#)   [Back](#)

NH Department of State, 107 North Main St. Room 204, Concord, NH 03301 -- [Contact Us \(/online/Home/ContactUS\)](#)

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/24/2022

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).

<b>PRODUCER</b> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101		<b>CONTACT NAME:</b> Janice Jobin <b>PHONE (A/C, No, Ext):</b> (603) 669-3218 <b>FAX (A/C, No):</b> (603) 645-4331 <b>E-MAIL ADDRESS:</b> manch.certs@crossagency.com	
<b>INSURED</b> Daniel Hebert, Inc. 12 Pleasant Street  Colebrook NH 03576		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Selective Insurance Co. of America NAIC # 12572 <b>INSURER B:</b> Selective Insurance Co. of NY 13730 <b>INSURER C:</b> Selective Insurance Co of Southeast 39926 <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

## COVERAGES

**CERTIFICATE NUMBER:** 22-23 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 INSD	SUBR 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 checked="" type="checkbox"/> LOC OTHER:	Y		S2441264	01/25/2022	01/25/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Limited Jobsite Pollution \$ 100,000						
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						S2441264	01/25/2022	01/25/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$			
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$									S2441264	01/25/2022	01/25/2023	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 Comp Ops Aggregate \$ 10,000,000
	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below												WC5059368 (3a.) VT
C	MA & NH Workers Compensation: per state statue; Daniel Hebert Jr. excluded	WC9082197	01/25/2022	01/25/2023	Each Accident Limit: \$500,000 Disease Policy Limit: \$500,000 Disease Each Employee: \$500,000								

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

Re: Lancaster 81109B-Lancaster District Office Addition Lancaster, NH. The State of New Hampshire, its agencies & its agents & employees are included as additional insured with respects to the CGL and umbrella policies as required by executed written contract with the above named insured. Notice of cancellation to certificate holder is 30-days, 10-days non-payment on CGL, BA & umbrella policies.

## CERTIFICATE HOLDER

State of NH Department of Administrative Services  
7 Hazen Drive  
Room 250  
Concord NH 03302

## 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

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/02/2022

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).

<b>PRODUCER</b> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101		<b>CONTACT NAME:</b> Janice Jobin <b>PHONE (A/C, No, Ext):</b> (603) 669-3218 <b>FAX (A/C, No):</b> (603) 645-4331 <b>E-MAIL ADDRESS:</b> manch.certs@crossagency.com	
<b>INSURED</b> State of NH Department of Administrative Services, c/o Daniel Hebert, Inc. 12 Pleasant Street Colebrook NH 03576		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Selective Insurance Group INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

## COVERAGES

CERTIFICATE NUMBER: 22-23 OCP

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
	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"/> PROJECT <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 \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	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						
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> 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						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Owners Contractors Protective Liability			S2512296	01/04/2022	01/04/2023	Each Occurrence \$2,000,000 Aggregate \$4,000,000

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

Re: Lancaster 81109B-Lancaster District Office Addition Lancaster, NH. Waiver of subrogation applies.

## CERTIFICATE HOLDER

## CANCELLATION

State of NH Department of Administrative Services 7 Hazen Drive Room 250 Concord NH 03302	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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