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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. 80871R – Contract D

May 9, 2017

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 Turnstone Corporation, (VC# 169530) Milford, NH, for a total price not to exceed \$1,799,700, for the Flume Visitor's Center Renovations, Lincoln, NH. This contract is effective upon Governor and Council approval through June 29, 2018, unless extended in accordance with the contract terms. **100% General – Capital Funds.**

2). Further authorize the amount of \$45,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), for engineering services provided, bringing the total to \$1,844,700. **100% General – Capital Funds.**

Funding is available in account titled Department of Resources and Economic Development as follows:

03-35-35-350030-52860000 Toilet Building	<u>SFY17</u>
034-500162 – Repair/Renovation Buildings	\$1,299,700
034-500162 – Interagency Fees - DPW	<u>45,000</u>
Sub-Total	\$1,344,700
 03-35-35-350030-52840000 Roofing & Repairs	
034-500162 – Repair/Renovation Buildings	\$ 280,000

03-35-35-350030-52880000 Franconia Notch State Park
Flume Visitor's Center Renovations

034-500162 – Repair/Renovation Buildings \$ 220,000

Grand Total **\$1,844,700**

EXPLANATION

Per Chapter 220:1, XIII, C, Laws of 2015, for the Toilet Building, Chapter 220:1, XIII, A for Roofing and Repairs, and Chapter 220:1, XIII, E for the Franconia Notch State Park Flume Visitor's Center Renovations. This project will include renovations to the existing bathrooms, heating system and fire protection, and additions to the bathrooms, gift shop, basement and site alterations.

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 Department of Resources and Economic Development 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,

Joseph Bouchard, Assistant Comm.
for Vicki V. Quiram
Commissioner

Department Estimate: \$1,214,750
Contract Amount: \$1,799,700
Over Estimate: \$ 584,950

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 80871, Contract D – Flume Visitors Center Renovations, Lincoln, New Hampshire.

DESCRIPTION: Work of the project includes renovations to the existing bathrooms, heating system and fire protection and additions to the bathrooms, gift shop, basement and site alterations.

EXPLANATION: The current facility lacks adequate toilet space to accommodate the visitors causing long lines interfering with the attraction. In addition, by adding to the gift shop face, more revenue can be generated by increasing the items for sale. The heating system and fire protection are also in need of replacement due to failure or non-code compliance conditions.

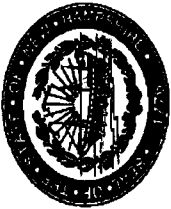
OVER ESTIMATE

EXPLANATION: The restrictive nature of working around the tourist season and in harsh winter weather caused a greater rise in General Conditions and subcontractor tradework than anticipated.

DEPARTMENT

ESTIMATE: \$1,214,750

LOW BID: \$1,799,700



Division of Public Works

ABC Bid Data

LINCOLN
80871-D
NON-FEDERAL

PROJECT: LINCOLN
STATE PROJECT NUMBER: 80871-D
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: April 12, 2017, 02:00 PM
SCOPE OF WORK: Flume Visitors Center Renovations
COMPLETION DATE: June 29, 2018
LOCATION: Grafton

Awarded To: TURNSTONE CORPORATION
479 NASHUA STREET
MILFORD, NH 03055-3705

Amount: \$1,799,700.00
Award Date:
Certified by: Theodore Kupper
Administrator

Summary of Bidders

Contractor	Bid Amount	Rank
TURNSTONE CORPORATION 479 NASHUA STREET, MILFORD NH 03055-3705 BUCK, T. CONSTRUCTION, INC. 302B AUBURN ROAD, TURNER ME 04282	\$1,799,700.00	A
	\$1,891,200.00	B

\$1,799,700.

BUREAU OF PUBLIC WORKS

Award to Turnstone Corporation
 Hold for Negotiation
 Cancel Contract
 User Agency BPEO
 Authorized by [Signature]
 Date 05042017

Item No.	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total

Item No.	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total
801	PLUMB VISITOR CENTER RENOVATIONS	U	1.000	\$924,750.00	\$924,750.00	\$1,456,000.00	\$1,456,000.00
802	UNFORESEEN CONDITIONS OR OWNER INITIATED CHANGES	\$	75,000.000	\$1.00	\$75,000.00	\$75,000.00	\$75,000.00
803	6FT SHOP ADDITION	U	1.000	\$200,000.00	\$200,000.00	\$255,000.00	\$255,000.00
804	ELECTRICAL CONDUIT FOR GRAVEL PATH	U	1.000	\$15,000.00	\$15,000.00	\$13,700.00	\$13,700.00

Totals \$1,214,750.00 \$1,799,700.00

BUCK, T. CONSTRUCTION, INC.
3029 ALUMINUM ROAD
TURNERS, NH 03877

TURBOSTONE CORPORATION
479 NASHUA STREET
NHL FORD, NH 03842-7708



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/28/2017

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 CROSS INSURANCE - LACONIA 155 Court Street Laconia NH 03246		CONTACT NAME: Janice Bagley, CIC PHONE (A/C, No, Ext): (603) 524-2425 E-MAIL ADDRESS: jbagley@crossagency.com FAX (A/C, No): (603) 524-3666															
INSURED TURNSTONE CORPORATION 479 NASHUA STREET MILFORD NH 03055		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Firemen's Ins. Co. of Washington</td> <td>21784</td> </tr> <tr> <td>INSURER B: Acadia Ins Co.</td> <td>31325</td> </tr> <tr> <td>INSURER C: Indian Harbor Ins Co</td> <td>36940</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Firemen's Ins. Co. of Washington	21784	INSURER B: Acadia Ins Co.	31325	INSURER C: Indian Harbor Ins Co	36940	INSURER D:		INSURER E:		INSURER F:	
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INSURER F:																	

COVERAGES

CERTIFICATE NUMBER: CL16121394709

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"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			CPA0065107-26	12/31/2016	12/31/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> 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			CAA0065120-27	12/31/2016	12/31/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$			CUA0065121-26	12/31/2016	12/31/2017	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/A	WPA0095615-24	12/31/2016	12/31/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C	Professional Liability Pollution Liability			PEC0048915 PEC0048915	12/31/2016 12/31/2016	12/31/2017 12/31/2017	Per claim/aggregate \$1,000,000 Per claim/aggregate \$1,000,000

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

Project #80871 Contract D, Flume Visitor Center Renovations, 852 DW Highway, Lincoln, NH
 State of New Hampshire, Department of Administrative Services is an additional insured for ongoing operations performed by or on behalf of Turnstone Corporation when required in a written contract.1

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire Department of Administrative Services PO Box 483 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 J Bagley, CIC/JB8 <i>Janice Bagley</i>
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4/28/2017

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PRODUCER CROSS INSURANCE - LACONIA 155 Court Street Laconia NH 03246	CONTACT NAME: Tracy Andriski, CISR PHONE (A/C, No. Ext): (603) 524-2425 E-MAIL ADDRESS: tandriski@crossagency.com	FAX (A/C, No.): (603) 524-3666
	INSURER(S) AFFORDING COVERAGE	
INSURED State of NH-Dept of Administrative Services c/o Turnstone Corporation 479 Nashua Street Milford NH 03055-0539	INSURER A Acadia Ins Co. NAIC # 31325	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER: CL1742707988** **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:			OCP5303381-10	4/28/2017	10/28/2018	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"/> 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 #80871, Contract D
Flume Visitor Center Renovations
852 DW Highway, Lincoln, NH

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services PO Box 483 7 Hazen Drive 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 J Bagley, CIC/JB8 <i>Jancee Bagley</i>



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
4/28/2017

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY CROSS INSURANCE - LACONIA 155 Court Street Laconia NH 03246		PHONE (A/C, No, Ext): (603) 524-2425	COMPANY Acadia Ins Co. One Acadia Commons P.O. Box 9010 Westbrook ME 04098-5010	
FAX (A/C, No): (603) 524-3666	E-MAIL ADDRESS: tandriski@crossagency.co			
CODE:	SUB CODE:			
AGENCY CUSTOMER ID #: 00178165		LOAN NUMBER		POLICY NUMBER CIM5300237
INSURED Turnstone Corporation and State of NH Dept of Admin Services 479 Nashua Street Milford NH 03055-0539		EFFECTIVE DATE 4/28/2017	EXPIRATION DATE 4/28/2018	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION
Flume Visitors Center, 852 DW Highway, Lincoln, NH

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Builders Risk - Renovations Replacement Cost, Special Form	1,799,700	1,000

REMARKS (Including Special Conditions)

Project #80871 Contract D
Flume Visitor Center Renovations
852 DW Highway, Lincoln, NH

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.

ADDITIONAL INTEREST

State of New Hampshire Department of Administrative Services PO Box 483 7 Hazen Drive Concord, NH 03302	MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
LOAN #		
AUTHORIZED REPRESENTATIVE Janice Bagley, CIC/JB8 <i>Janice Bagley</i>		