

75 *Chm*



State of New Hampshire
DEPARTMENT OF ADMINISTRATIVE SERVICES
OFFICE OF THE COMMISSIONER
25 Capitol Street – Room 120
Concord, New Hampshire 03301

CHARLES M. ARLINGHAUS
Commissioner
(603)-271-3201

JOSEPH B. BOUCHARD
Assistant Commissioner
(603)-271-3204

Division of Public Works
Design and Construction
Project No. 80929 – Contract R

February 22, 2018

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 \$7,149,000 for Steam Conversion at the State House, State House Annex, and State Library, Concord, NH. This contract is effective through October 30, 2019, unless extended in accordance with the contract terms. **100% General Funds (98% Capital Funds).**

2). Further authorize pursuant to Chapter 228:13, Laws of 2017, the amount of \$30,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), Clerk of the Works for oversight and engineering services provided, bringing the total to \$7,179,000. **100% General Funds.**

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

01-14-14-140030-15200000	Concord Steam	<u>SFY18</u>
	034-500162 – Repair/Renovations Bldgs.	<u>\$7,000,000</u>
01-14-14-141510-69370000	Heating-State Owned Bldgs.	
	103-500736 – Contracts for OP Services	\$ 149,000
	103-500736 – Interagency Fees - DPW	<u>\$ 30,000</u>
	Sub-Total	\$ 179,000
	Grand Total	\$7,179,000

EXPLANATION

Per Chapter 228:1, II, B, 10, Laws of 2017, for Concord Steam Conversion. The scope of project includes the construction of a new boiler building at 33 Green Street, installation of complete boiler systems in the building and the removal and installation of a new steam and condensate line distribution system along Green Street, Park Street, and School Street to serve the State House, State House Annex and State Library. The project also includes minor construction in the State House, State House Annex and State Library to connect new steam services and to provide for new condensate removal.

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, 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:	\$6,221,840
Contract Amount:	<u>\$7,149,000</u>
Over Estimate:	\$ 927,160

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 80929, Contract R-Steam Conversion-
State House, State House Annex and State Library

DESCRIPTION: Scope of project includes the construction of a new boiler building at 33 Green Street; installation of complete boiler systems in the building and the removal and installation of a new steam and condensate line distribution system along Green Street, Park Street, and School Street to serve the State House, State House Annex and State Library. The project also includes minor construction in the State House, State House Annex and State Library to connect new steam services; provide for new condensate removal.

EXPLANATION: With the closing of Concord Steam, there are a total of 26 State Buildings that require heating system installations in order to maintain space temperatures during the winter months. This project will provide permanent boiler solutions to serve the State House, State House Annex and the State Library.

OVER ESTIMATE

EXPLANATION: There were a total of three bids received ranging from about 15-22 percent above the construction estimate. Because of the size of the project, there are a limited pool of contractors qualified to submit bids. These contractors are also typically larger and busier and have a higher mark-up, resulting in higher bid costs.

DEPARTMENT

ESTIMATE: \$6,221,840
LOW BID: \$7,149,000



ABC Bid Data

CONCORD
8929R
NON-FEDERAL

PROJECT: CONCORD
STATE PROJECT NUMBER: 8929R
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: January 31, 2018, 02:00 PM
SCOPE OF WORK: STEAM CONVERSION-STATE HOUSE, STATE HOUSE ANNEX, STATE LIBRARY
COMPLETION DATE: October 30, 2019
LOCATION: Merrimack

Certified by: _____
Administrative

Summary of Bidders

Contractor	Bid Amount	Rank
TURNSTONE CORPORATION 479 NASHUA STREET, MILFORD NH 03066-3706	\$7,745,000.00	A
HUTTER CONSTRUCTION CORP. 810 TURNPIKE ROAD, PO BOX 257, NEW IPSWICH NH 03071	\$7,575,000.00	B
MERIDIAN CONSTRUCTION CORP. 32 ARTISAN COURT #4, GILFORD NH 03249-0603	\$6,486,400.00	C

BUREAU OF PUBLIC WORKS

Award to A' Bidder *Turnstone Corp*
 Hold for Negotiation
 Cancel Contract
 User Agency DAS
 Authorized by MLJ
 Date 2/12/18

\$7,149,000

Item No.	Description	Unit	Quantity	PS&E		TURNSTONE CORPORATION 479 NASHUA STREET MILFORD, NH 03055-3705		HUTTER CONSTRUCTION CORP. 810 TURNPIKE ROAD NEW IPSWICH, NH 03071	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

901	BOILER BUILDING AND ASSOCIATED WORK	U	1.00	\$2,348,738.00	\$2,348,738.00	\$3,545,000.00	\$3,545,000.00	\$3,145,000.00	\$3,145,000.00
902	STEAM AND CONDENSATE LINES AND ASSOCIATEDWORK - GREEN AND PARK STREET	U	1.00	\$1,056,931.00	\$1,056,931.00	\$1,647,000.00	\$1,647,000.00	\$1,800,000.00	\$1,800,000.00
903	STEAM AND CONDENSATE LINES AND ASSOCIATED WORK - SCHOOL STREET	U	1.00	\$1,702,834.00	\$1,702,834.00	\$1,086,000.00	\$1,086,000.00	\$1,600,000.00	\$1,600,000.00
904	WORK IN STATE HOUSE, ANNEX AND LIBRARY	U	1.00	\$763,339.00	\$763,339.00	\$521,000.00	\$521,000.00	\$680,000.00	\$680,000.00
905	ALLOWANCE PER OWNERS INITIATED CHANGES PER SPECIFICATIONS	\$	350,000.00	\$1.00	\$350,000.00	\$1.00	\$350,000.00	\$1.00	\$350,000.00
Totals:					\$6,221,848.00		\$7,149,000.00		\$7,575,000.00

Item No.	Description	Unit	Quantity	PS&E	MERIDIAN CONSTRUCTION CORP. 32 ARTISAN COURT #4 GILFORD, NH 03249-0803	
			Unit Price	Total	Unit Price	Total

Items

901	BOILER BUILDING AND ASSOCIATED WORK	U	1.00	\$2,348,736.00	\$2,348,736.00	\$3,797,018.00	\$3,797,018.00
902	STEAM AND CONDENSATE LINES AND ASSOCIATED WORK - GREEN AND PARK	U	1.00	\$1,056,931.00	\$1,056,931.00	\$2,036,610.00	\$2,036,610.00
903	STEAM AND CONDENSATE LINES AND ASSOCIATED WORK - SCHOOL STREET	U	1.00	\$1,702,834.00	\$1,702,834.00	\$1,727,935.00	\$1,727,935.00
904	WORK IN STATE HOUSE, ANNEX AND LIBRARY	U	1.00	\$763,339.00	\$763,339.00	\$577,926.00	\$577,926.00
905	ALLOWANCE PER OWNERS INITIATED CHANGES PER SPECIFICATIONS	\$	350,000.00	\$1.00	\$350,000.00	\$1.00	\$350,000.00
Totals:					\$6,221,840.00		\$8,489,489.00



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/16/2018

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: Tracy Andriski, CISR PHONE (A/C No, Ext): (603) 524-2425 FAX (A/C, No): (603) 524-3666 E-MAIL ADDRESS: tandriski@crossagency.com	
INSURED Turnstone Corporation 479 Nashua Street Milford NH 03055-0539		INSURER(S) AFFORDING COVERAGE INSURER A: Firemen's Ins. Co. of Washington NAIC # 21784 INSURER B: Acadia Ins Co. 31325 INSURER C: Indian Harbor Ins Co INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER: CL17122734455 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	ADOL 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 checked="" type="checkbox"/> LOC OTHER:		CPA0065107-27	12/31/2017	12/31/2018	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 - COMP/OP AGG \$ 2,000,000 Employee Benefits \$ 1,000,000
A	AUTOMOBILE LIABILITY <input checked="" 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		CAA0065120-28	12/31/2017	12/31/2018	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 \$		CUA0065121-27	12/31/2017	12/31/2018	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 Prod & Comp Ops 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	WPA0095615-25	12/31/2017	12/31/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C	Professional Liability Pollution Liability		PEC004891501 PEC004891501	12/31/2017 12/31/2017	12/31/2018 12/31/2018	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)

Steam Conversion Project #80929R
 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.

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services Contract Office, Room 130 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 T Andriski, CISR/TA5 <i>Tracy Andriski</i>
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CERTIFICATE OF LIABILITY INSURANCE

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2/16/2018

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

COVERAGES CERTIFICATE NUMBER: CL1821540183 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	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"/> PROJECT <input type="checkbox"/> LOC OTHER:		OCP5340059-10	2/16/2018	2/16/2020	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 - COM/PO/AGG \$ \$
	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					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 \$ \$
	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				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER 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)
Steam Conversion Project #80929R

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services Contract Office, Room 130 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 T Andriski, CISR/TA5 <i>Tracy Andriski</i>

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EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
2/16/2018

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: dhaley@crossagency.com			
CODE:	SUB CODE:			
AGENCY CUSTOMER ID#: 00178165		LOAN NUMBER		POLICY NUMBER CIM5335788-10
INSURED State of NH - Dept of Administrative Services c/o Turnstone Corporation 479 Nashua Street Milford NH 03055-0539		EFFECTIVE DATE 2/16/2018	EXPIRATION DATE 2/16/2020	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION State House, State Annex, State Library Concord, NH
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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, RC, Special Form	7,149,000	1,000

REMARKS (Including Special Conditions)

Steam Conversion Project #80929R

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 Contract Office, Room 130 7 Hazen Drive Concord, NH 03302	MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
	LOAN #	
	AUTHORIZED REPRESENTATIVE	