



THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



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William Cass, P.E.
Assistant Commissioner

Her Excellency, Governor Margaret Wood Hassan
and the Honorable Council
State House
Concord, New Hampshire 03301

Bureau of Mechanical Services
July 7, 2015

REQUESTED ACTION

Authorize the Department of Transportation to enter into a contract with North American Equipment Upfitters, Inc. (Vendor 174352) of Hooksett NH, on the basis of a low bid of \$130,010.00 for providing Aerial Lifts Inspection, repair, scheduled service and unscheduled emergency parts and repair, effective upon Governor and Council approval through June 30, 2017. 95% Highway Funds, 5% other Funds.

Funds to support this request are anticipated to be available in the following accounts in State FY 2016 and State FY 2017 upon the availability and continued appropriation of funds in the future operating budget, with the ability to adjust encumbrances between State Fiscal Years through the Budget Office, if needed and justified:

Table with 3 columns: Account Number, FY 2016, FY 2017. Row 1: 04-96-96-960515-3005 Mechanical Services. Row 2: 024--500225 Contract Repairs; Machine-Equip. Values: \$62,785.00 and \$67,225.00.

EXPLANATION

The service contract is necessary to perform inspections, repairs and service to the Department's Aerial lift trucks.

The Department of Transportation, Bureau of Mechanical Services currently owns twenty (20) Aerial lift vehicles that are used for road sign mounting and maintenance, traffic sign repair and maintenance and various other functions. The Aerial lift trucks require yearly safety inspections, repair and maintenance. Once the inspection is completed, the Bureau is provided an explanation of repairs and maintenance needed, and the associated costs.

Invitation for bids was solicited in the Union Leader, Manchester, NH, for three (3) consecutive business days, May 5, 7 and 8, 2015. The bid opening date was May 18, 2015. Two bids were received, one from North American Equipment Upfitters, Inc. and a second bid from Consolidated Utility Equipment Service Incorporated. The contract amount of \$130,010.00 includes the inspection fee and labor estimated from the past contract period. North American Equipment Upfitters, Inc. bid amount of \$130,010.00 is reasonable based on previous contracts for similar work. The Department believes it to be in the best interest of the State of New Hampshire to accept this bid to accomplish the needed work.

The Contract has been approved by the Attorney General as to form and execution. Funding for FY 2016, and FY 2017 is contingent upon the availability and continued appropriation of funds. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Service's Office, and subsequent to Governor and Council approval will be on file at the Department of Transportation.

The Department of Transportation respectfully requests Governor and Council approval of this contract.

Sincerely,

Signature of William Cass, P. E.
William Cass, P. E.
Assistant Commissioner

STATE OF NEW HAMPSHIRE - DEPARTMENT OF TRANSPORTATION - BUREAU OF MECHANICAL SERVICES
BID RFB_DOT_15_4 AERIAL LIFT INSPECTION, REPAIRS & SCHEDULED MAINTENANCE
CONTRACT VALUE

NORTH AMERICAN EQUIPMENT UPFITTERS

| Aerial Lift Make & Model | Quantity | FY2016 | | FY2017 | |
|----------------------------|-----------|----------------|-------------------|----------------|-------------------|
| | | Inspection Ea. | Inspection x Qty. | Inspection Ea. | Inspection x Qty. |
| ALTEC AT200A | 2 | \$85.00 | \$170.00 | \$275.00 | \$550.00 |
| TELSTA A37 - P | 2 | \$80.00 | \$160.00 | \$225.00 | \$450.00 |
| VERSALIFT SST - 37 - NE | 4 | \$115.00 | \$460.00 | \$300.00 | \$1,200.00 |
| VERSALIFT TEL - 29 - NE | 1 | \$80.00 | \$80.00 | \$225.00 | \$225.00 |
| VERSALIFT - 29 - N | 1 | \$80.00 | \$80.00 | \$225.00 | \$225.00 |
| VERSALIFT - SST37-EIH-01 | 1 | \$215.00 | \$215.00 | \$400.00 | \$400.00 |
| VERSALIFT - TEL - 29 | 4 | \$80.00 | \$320.00 | \$225.00 | \$900.00 |
| VERSALIFT - VAN - 29 | 1 | \$80.00 | \$80.00 | \$225.00 | \$225.00 |
| ELLIOTT - H55R - D | 2 | \$235.00 | \$470.00 | \$875.00 | \$1,750.00 |
| MTI - U3 | 1 | \$125.00 | \$125.00 | \$400.00 | \$400.00 |
| VERSALIFT VST - 50001 - 01 | 1 | \$125.00 | \$125.00 | \$400.00 | \$400.00 |
| TOTAL UNITS | 20 | | \$2,285.00 | | \$6,725.00 |

Assumptions: Estimated parts cost to repair issues discovered during the inspection = \$30,000 total for 20 Aerial lifts.
 Estimated labor (time) to repair issues discovered during the inspection = 7 hrs (each) X 20 Aerial lifts x \$75.00/hr = \$10,500.00

Method of Payment: The Annual Safety Inspection service shall be paid per unit including all labor to perform the inspection. Parts discovered as needing to be replaced during the annual inspection shall be paid based upon invoice amount charged.
 Labor to perform the repairs shall be paid for by the hourly rate. Prior to any work being completed, the contractor shall provide a written estimate for the proposed work, to be reviewed and approved by department personnel prior to commencement.

Bid tabulation values
 Inspection Fee for 20 Aerial Lifts \$2,285.00
 Labor Cost (\$75 x 7 hrs x 20 Aerial lifts) \$10,500.00
 Bid tabulation Totals \$12,785.00

| | FY2016 | FY2017 |
|--------------------------------|--------------------|--------------------|
| Contract Cost: | | |
| Bid tabulation Totals | \$12,785.00 | \$17,225.00 |
| Assumed parts cost for repairs | \$30,000.00 | \$30,000.00 |
| Unscheduled Emergency Repairs | \$20,000.00 | \$20,000.00 |
| Contract Value per fiscal year | \$62,785.00 | \$67,225.00 |

Total contract value (FY2016 + FY2017) equal to P-37 **\$130,010.00**

Contractors Initials: TD
 Date: 6/11/15

STATE OF NEW HAMPSHIRE - DEPARTMENT OF TRANSPORTATION - BUREAU OF MECHANICAL SERVICES

BID RFB_DOT_15_04 AERIAL LIFT INSPECTION, REPAIRS & SCHEDULED MAINTENANCE

BID DUE DATE 5/18/2015

BID TABULATION

TIME 1:30 PM

| VENDOR | NORTH AMERICAN EQUIPMENT UPFITTERS | | | | CUES | | | | |
|---|------------------------------------|---|------------------|--------------|---|---|------------------|--------------|------------|
| AERIAL LIFT | ALTEC AT200A | | QUANTITY / UNITS | TOTAL | ALTEC AT200A | | QUANTITY / UNITS | TOTAL | |
| 2016 INSPECTION / EA. | \$85.00 | X | 2 | = \$170.00 | \$247.00 | X | 2 | = \$494.00 | |
| 2017 INSPECTION / EA. | \$275.00 | X | 2 | = \$550.00 | \$247.00 | X | 2 | = \$494.00 | |
| 2016 LABOR RATE / HR | \$75.00 | X | 14 | = \$1,050.00 | \$84.00 | X | 14 | = \$1,176.00 | |
| 2017 LABOR RATE / HR | \$75.00 | X | 14 | = \$1,050.00 | \$84.00 | X | 14 | = \$1,176.00 | |
| ALTEC AT200A 2016 / 2017 TOTAL | | | | \$2,820.00 | ALTEC AT200A 2016 / 2017 TOTAL | | | | \$3,340.00 |
| AERIAL LIFT | TELSTA A37- P | | QUANTITY / UNITS | TOTAL | TELSTA A37- P | | QUANTITY / UNITS | TOTAL | |
| 2016 INSPECTION / EA. | \$80.00 | X | 2 | = \$160.00 | \$247.00 | X | 2 | = \$494.00 | |
| 2017 INSPECTION / EA. | \$225.00 | X | 2 | = \$450.00 | \$247.00 | X | 2 | = \$494.00 | |
| 2016 LABOR RATE / HR | \$75.00 | X | 14 | = \$1,050.00 | \$84.00 | X | 14 | = \$1,176.00 | |
| 2017 LABOR RATE / HR | \$75.00 | X | 14 | = \$1,050.00 | \$84.00 | X | 14 | = \$1,176.00 | |
| TELSTA A37P 2016 / 2017 TOTAL | | | | \$2,710.00 | TELSTA A37P 2016 / 2017 TOTAL | | | | \$3,340.00 |
| AERIAL LIFT | VERSALIFT SST-37-NE | | QUANTITY / UNITS | TOTAL | VERSALIFT SST-37-NE | | QUANTITY / UNITS | TOTAL | |
| 2016 INSPECTION / EA. | \$115.00 | X | 4 | = \$460.00 | \$270.00 | X | 4 | = \$1,080.00 | |
| 2017 INSPECTION / EA. | \$300.00 | X | 4 | = \$1,200.00 | \$270.00 | X | 4 | = \$1,080.00 | |
| 2016 LABOR RATE / HR | \$75.00 | X | 28 | = \$2,100.00 | \$84.00 | X | 28 | = \$2,352.00 | |
| 2017 LABOR RATE / HR | \$75.00 | X | 28 | = \$2,100.00 | \$84.00 | X | 28 | = \$2,352.00 | |
| VERSALIFT SST-37-NE 2016 / 2017 TOTAL | | | | \$5,860.00 | VERSALIFT SST-37-NE 2016 / 2017 TOTAL | | | | \$6,864.00 |
| AERIAL LIFT | VERSALIFT TEL-29-NE | | QUANTITY / UNITS | TOTAL | VERSALIFT TEL-29-NE | | QUANTITY / UNITS | TOTAL | |
| 2016 INSPECTION / EA. | \$80.00 | X | 1 | = \$80.00 | \$225.00 | X | 1 | = \$225.00 | |
| 2017 INSPECTION / EA. | \$225.00 | X | 1 | = \$225.00 | \$225.00 | X | 1 | = \$225.00 | |
| 2016 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 | |
| 2017 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 | |
| VERSALIFT TEL-29-NE 2016 / 2017 TOTAL | | | | \$1,355.00 | VERSALIFT TEL-29-NE 2016 / 2017 TOTAL | | | | \$1,626.00 |
| AERIAL LIFT | VERSALIFT VAN - 29-N | | QUANTITY / UNITS | TOTAL | VERSALIFT VAN - 29-N | | QUANTITY / UNITS | TOTAL | |
| 2016 INSPECTION / EA. | \$80.00 | X | 1 | = \$80.00 | \$225.00 | X | 1 | = \$225.00 | |
| 2017 INSPECTION / EA. | \$225.00 | X | 1 | = \$225.00 | \$225.00 | X | 1 | = \$225.00 | |
| 2016 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 | |
| 2017 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 | |
| VERSALIFT VANTEL-29-N 2016 / 2017 TOTAL | | | | \$1,355.00 | VERSALIFT VANTEL-29-N 2016 / 2017 TOTAL | | | | \$1,626.00 |
| AERIAL LIFT | VERSALIFT SST37 - EIH-01 | | QUANTITY / UNITS | TOTAL | VERSALIFT SST37 - EIH-01 | | QUANTITY / UNITS | TOTAL | |
| 2016 INSPECTION / EA. | \$215.00 | X | 1 | = \$215.00 | \$370.00 | X | 1 | = \$370.00 | |
| 2017 INSPECTION / EA. | \$400.00 | X | 1 | = \$400.00 | \$370.00 | X | 1 | = \$370.00 | |
| 2016 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 | |
| 2017 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 | |
| VERSALIFT SST37 -EIH - 01 2016 / 2017 TOTAL | | | | \$1,665.00 | VERSALIFT SST37 -EIH - 01 2016 / 2017 TOTAL | | | | \$1,916.00 |

| VENDOR | NORTH AMERICAN EQUIPMENT UPFITTERS | | | | CUES | | | |
|-----------------------|---|---|------------------|--------------|---|---|------------------|--------------|
| AERIAL LIFT | VERSALIFT TEL - 29 | | QUANTITY / UNITS | TOTAL | VERSALIFT TEL - 29 | | QUANTITY / UNITS | TOTAL |
| 2016 INSPECTION / EA. | \$80.00 | X | 4 | = \$320.00 | \$225.00 | X | 4 | = \$900.00 |
| 2017 INSPECTION / EA. | \$225.00 | X | 4 | = \$900.00 | \$225.00 | X | 4 | = \$900.00 |
| 2016 LABOR RATE / HR | \$75.00 | X | 28 | = \$2,100.00 | \$84.00 | X | 28 | = \$2,352.00 |
| 2017 LABOR RATE / HR | \$75.00 | X | 28 | = \$2,100.00 | \$84.00 | X | 28 | = \$2,352.00 |
| | VERSALIFT TEL - 29, 2016 / 2017 TOTAL | | | \$5,420.00 | VERSALIFT TEL - 29, 2016 / 2017 TOTAL | | | \$6,504.00 |
| AERIAL LIFT | ELLIOTT H55R-MHA | | QUANTITY / UNITS | TOTAL | ELLIOTT H55R-MHA | | QUANTITY / UNITS | TOTAL |
| 2016 INSPECTION / EA. | \$235.00 | X | 2 | = \$470.00 | \$375.00 | X | 2 | = \$750.00 |
| 2017 INSPECTION / EA. | \$875.00 | X | 2 | = \$1,750.00 | \$375.00 | X | 2 | = \$750.00 |
| 2016 LABOR RATE / HR | \$75.00 | X | 14 | = \$1,050.00 | \$84.00 | X | 14 | = \$1,176.00 |
| 2017 LABOR RATE / HR | \$75.00 | X | 14 | = \$1,050.00 | \$84.00 | X | 14 | = \$1,176.00 |
| | ELLIOTT H55R - MHA 2016 / 2017 TOTAL | | | \$4,320.00 | ELLIOTT H55R - MHA 2016 / 2017 TOTAL | | | \$3,852.00 |
| AERIAL LIFT | MTI U3 | | QUANTITY / UNITS | TOTAL | MTI U3 | | QUANTITY / UNITS | TOTAL |
| 2016 INSPECTION / EA. | \$125.00 | X | 1 | = \$125.00 | \$319.00 | X | 1 | = \$319.00 |
| 2017 INSPECTION / EA. | \$400.00 | X | 1 | = \$400.00 | \$319.00 | X | 1 | = \$319.00 |
| 2016 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 |
| 2017 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 |
| | MTI U3 2016 / 2017 TOTAL | | | \$1,575.00 | MTI U3 2016 / 2017 TOTAL | | | \$1,814.00 |
| AERIAL LIFT | VAN - 29 | | QUANTITY / UNITS | TOTAL | VAN - 29 | | QUANTITY / UNITS | TOTAL |
| 2016 INSPECTION / EA. | \$80.00 | X | 1 | = \$80.00 | \$225.00 | X | 1 | = \$225.00 |
| 2017 INSPECTION / EA. | \$225.00 | X | 1 | = \$225.00 | \$225.00 | X | 1 | = \$225.00 |
| 2016 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 |
| 2017 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 |
| | VERSALIFT TEL - 29 2016 / 2017 TOTAL | | | \$1,355.00 | VERSALIFT TEL - 29 2016 / 2017 TOTAL | | | \$1,626.00 |
| AERIAL LIFT | VERSALIFT VST - 50001 - 01 | | QUANTITY / UNITS | TOTAL | VERSALIFT VST - 50001 - 01 | | QUANTITY / UNITS | TOTAL |
| 2016 INSPECTION / EA. | \$125.00 | X | 1 | = \$125.00 | \$425.00 | X | 1 | = \$425.00 |
| 2017 INSPECTION / EA. | \$400.00 | X | 1 | = \$400.00 | \$425.00 | X | 1 | = \$425.00 |
| 2016 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 |
| 2017 LABOR RATE / HR | \$75.00 | X | 7 | = \$525.00 | \$84.00 | X | 7 | = \$588.00 |
| | VERSALIFT VST - 50001 - 012016 / 2017 TOTAL | | | \$1,575.00 | VERSALIFT VST - 50001 - 012016 / 2017 TOTAL | | | \$2,026.00 |
| | BID TOTAL | | | \$30,010.00 | BID TOTAL | | | \$36,160.00 |

"bid totals" were utilized to evaluate low bid offers

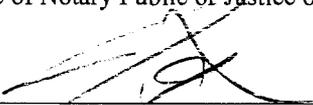
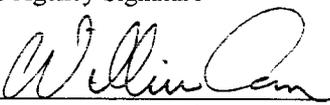
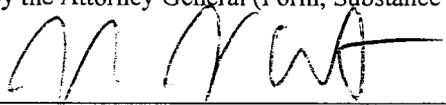
Subject: **AERIAL LIFTS, INSPECTION, REPAIRS & SCHEDULED SERVICE**

AGREEMENT

The State of New Hampshire and the Contractor hereby mutually agree as follows:

GENERAL PROVISIONS

1. IDENTIFICATION.

| | | | |
|--|---|---|---|
| NH DOT BUREAU OF MECHANICAL SERVICES | | 1.1 State Agency Address 33 SMOKEY BEAR BLVD, PO BOX 456 CONCORD, NH 03302 | |
| 1.2 Contractor Name NORTH AMERICAN EQUIPMENT UPFITTERS INC. | | 1.4 Contractor Address 6 SUTTON CIRCLE HOOKSETT, NH 03106 | |
| 1.5 Contractor Phone Number 603-324-6288 | 1.6 Account Number 04-96-960515-3005 Mechanical Services 024-500225 Contract Repair; Machine – Equip. | 1.7 Completion Date JUNE 30, 2017 | 1.8 Price Limitation \$62,785.00 / FY 2016 \$67,225.00 / FY 2017 TOTAL \$ 130,010.00 |
| 1.9 Contracting Officer for State Agency Michael P. Walsh II, Assistant Administrator | | 1.10 State Agency Telephone Number 603-271-3721 | |
| 1.11 Contractor Signature  | | 1.12 Name and Title of Contractor Signatory Brendan Dunican, Sales Rep | |
| 1.13 Acknowledgement: State of <u>New Hampshire</u> , County of <u>Rockingham</u> | | | |
| On <u>June 1, 2015</u> , before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12. | | | |
| 1.13.1 Signature of Notary Public or Justice of the Peace  | | | |
| 1.13.2 Name and Title of Notary or Justice of the Peace Jacqueline Delude, Notary Public | | | |
| 1.14 State Agency Signature  | | 1.15 Name and Title of State Agency Signatory William Cass Assistant Commissioner | |
| 1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____ | | | |
| 1.17 Approval by the Attorney General (Form, Substance and Execution) By:  On: <u>5/10/15</u> | | | |
| 1.18 Approval by the Governor and Executive Council By: _____ On: _____ | | | |

2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED. The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

3. EFFECTIVE DATE/COMPLETION OF SERVICES.
3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, this Agreement, and all obligations of the parties hereunder, shall not become effective until the date the Governor and Executive Council approve this Agreement ("Effective Date").
3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT. Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

5. CONTRACT PRICE/PRICE LIMITATION/PAYMENT.
5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.
5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.
5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.
6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. In addition, the Contractor shall comply with all applicable copyright laws.
6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.
6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

7. PERSONNEL.
7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.
7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.
7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

Contractor Initials BD
Date 6/1/15

8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

- 8.1.1 failure to perform the Services satisfactorily or on schedule;
- 8.1.2 failure to submit any report required hereunder; and/or
- 8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

- 8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;
- 8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;
- 8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or
- 8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

10. TERMINATION. In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination

Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS. The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written consent of the N.H. Department of Administrative Services. None of the Services shall be subcontracted by the Contractor without the prior written consent of the State.

13. INDEMNIFICATION. The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$250,000 per claim and \$2,000,000 per occurrence; and

14.1.2 fire and extended coverage insurance covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than fifteen (15) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be

attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to endeavor to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than ten (10) days prior written notice of cancellation or modification of the policy.

15. WORKERS' COMPENSATION.

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("*Workers' Compensation*").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. WAIVER OF BREACH. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

17. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

18. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire.

19. CONSTRUCTION OF AGREEMENT AND TERMS.

This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

22. SPECIAL PROVISIONS. Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.

23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.

#RFB DOT 15 04 FOR CONTRACT FOR: AERIAL LIFT INSPECTION, REPAIRS & SCHEDULED SERVICE
BID TERMS AND CONDITIONS

CONTRACTOR RESPONSIBILITY:

The Contractor shall be solely responsible for meeting all terms and conditions specified in the bid, and any resulting contract(s).

TERMS OF SUBMISSION:

All material received in response to this bid shall become the property of State and will not be returned to the Contractor. Regardless of the Contractors selected, State reserves the right to use any information presented in a bid response. The content of each Contractor's bid shall become public information once a contract(s) has been awarded. Complete bids shall be filled out on original bid format. Contractors may submit additional paperwork with pricing, but all pricing shall be on bid and in the State's format.

LIABILITY:

The State shall not be held liable for any costs incurred by the Contractor in the preparation of their bid or for work performed prior to contract(s) issuance.

BID INQUIRIES:

All questions regarding this bid, including clarifications and proposed specification changes shall be submitted to **Michael P. Walsh II**, Assistant Administrator, NH DOT Mechanical Services at mwalsh2@dot.state.nh.us.

All requests shall be submitted five business days prior to bid opening date. Contractor shall include complete contact information including the Contractor's name, telephone number and fax number and e-mail address.

BID DUE DATE:

Sealed bids shall be received and deposited in the bid box at the 33 Smokey Bear Boulevard, Concord office of The Bureau of Mechanical Services prior to **1:30 pm, prevailing time on 5/18/2015**, at which time they will be opened. It shall be the Contractors' responsibility to ensure the bid is deposited as specified. Bids delivered to the bureau by alternative means are submitted at the sole risk of the Contractor. The Department will not accept responsibility for any reason if the bids are not deposited in the bid box by the specified time and date. Bids received after the time stated for opening bids will not be opened or considered.

- The State is under no obligation to make an award based upon this solicitation; the State, in its discretion, may reject any or all of the submitted bids."
- All offers shall remain valid for a period of sixty (60) days from the bid due date. A Contractor's disclosure or distribution of Bids other than to NH DOT – Bureau of mechanical Services may be grounds for disqualification.

CERTIFICATE OF INSURANCE:

Contractors awarded a contract(s) shall be required to submit proof of Comprehensive General Liability prior to performing any services for the State. The coverage shall have appropriate riders against all claims of bodily injury, death or property damage, in amounts of not less than \$250,000.00 per claim and \$2,000,000.00 per incident or \$1,000,000.00 per occurrence and \$1,000,000.00 umbrella. Coverage shall also include automobile liability and workers' compensation.

Prior to performing any services for the State, Contractors awarded a contract shall be required to:

- Certify compliance with, or exemption from, the requirements of NH RSA 281-A, Workers' Compensation, in accordance with Section 15 of the P-37 contract.
- Provide certificate of insurance with the minimum limits required as described above

CONTRACT(S) TERMS AND CONDITIONS:

The Contractor's signature on a bid submitted in response to this bid guarantees that all of the State of New Hampshire's Terms and Conditions are accepted by the Contractor
The form contract(s) P-37 attached hereto shall be part of this bid and the basis for the contract(s). The successful Contractor and the State, following notification, shall promptly execute this form of contract(s), which is to be completed by incorporating the service requirements and price conditions established by the Contractor's offer, a sample of the P-37 document is attached for Contractors review

Contractor's Initials: BD

Date: 6/1/15

IF AWARDED A CONTRACT, The Contractor must complete the following sections of the attached Agreement State of New Hampshire Form #P-37;

- Section 1.3 Contractor(s) Name
- Section 1.4 Contractor(s) Address
- Section 1.11 Contractor(s) Signature
- Section 1.12 Name & Title of Contractor(s) Signor
- Section 1.13 Acknowledgements
- Section 1.13.1 Signature of Notary Public or Justice of the Peace
- Section 1.13.2 Name & Title of Notary or Justice of the Peace

- Provide certificate of insurance with the minimum limits required as described above.
- Provide a certificate of good standing from the NH Secretary of State or proof of your completion of and payment for the start of the registration process.

PUBLIC DISCLOSURE OF BID SUBMISSIONS:

Generally, all bids and proposals (including all materials submitted in connection with them, such as attachments, exhibits and addenda) become public information upon the effective date of a resulting contract or purchase order. However, to the extent consistent with applicable state and federal laws and regulations, as determined by the State, including, but not limited to, RSA Chapter 91-A (the "Right-to-Know" Law), the State will attempt to maintain the confidentiality of portions of a bid that are clearly and properly marked by a Contractor as confidential. Any and all information contained in or connected to a bid or proposal that a Contractor considers confidential must be clearly designated in a manner that draws attention to the designation. The State shall have no obligation to maintain the confidentiality of any portion of a bid, proposal or related material, which is not so marked. Marking an entire bid, proposal, attachment or sections thereof confidential without taking into consideration the public's right to know will neither be accepted nor honored by the State. Notwithstanding any provision of this RFP/RFB to the contrary, pricing will be subject to public disclosure upon the effective date of all resulting contracts or purchase orders, regardless of whether or not marked as confidential. If a bid or proposal results in a purchase order or contract, whether or not subject to approval by the Governor and Executive Council, all material contained in, made part of, or submitted with the contract or purchase order shall be subject to public disclosure.

If a request is made to the State by any person or entity to view or receive copies of any portion of a bid or proposal, and if disclosure is not prohibited under RSA 21-I: 13-a, Contractors acknowledge and agree that the State may disclose any and all portions of the bid, proposal or related materials which is not marked as confidential. In the case of bids, proposals or related materials that contain portions marked confidential, the State will assess what information it believes is subject to release; notify the Contractor that the request has been made; indicate what, if any, portions of the bid, proposal or related material will not be released; and notify the Contractor of the date it plans to release the materials. The State is not obligated to comply with a Contractor's designation regarding confidentiality.

By submitting a bid or proposal, the Contractor agrees that unless it obtains and provides to the State, prior to the date specified in the notice described in the paragraph above, a court order valid and enforceable in the State of New Hampshire, at its sole expense, enjoining the release of the requested information, the State may release the information on the date specified in the notice without any liability to the Contractor.

CONTRACTOR(S) OPPORTUNITY:

Contractor(s) may also make site visits to any location they chose to bid on if applicable. Contractor(s) are responsible for having ascertained pertinent local conditions, such as equipment conditions, locations, accessibility and general character of the sites knowledge of conditions affecting delivery performance. The act of submitting a bid is to be considered in full acknowledgment that the Contractor(s) is familiar with the conditions and requirements of these specifications.

Contractor's Initials: BD

Date: 6/1/15

CONTRACTOR CERTIFICATIONS:

ALL Contractors **SHALL** be duly registered as a Contractor authorized to conduct business in the State of New Hampshire. Contractors shall comply with the certifications below at the time of submission and through the term of any contract which results from said bid. Failure to comply shall be grounds for disqualification of bid and/or the termination of any resultant contract:

- **STATE OF NEW HAMPSHIRE CONTRACTOR APPLICATION:** Contractor **SHALL** has a completed Contractor Application and Alternate W-9 Form which **SHALL** be on file with the NH Bureau of Purchase and Property. See the following website for information on obtaining and filing the required forms (no fee): <http://admin.state.nh.us/purchasing/Contractor.asp>
- **NEW HAMPSHIRE SECRETARY OF STATE REGISTRATION:** A bid award, in the form of a contract(s), will **ONLY** be awarded to a Contractor who is registered to do business **AND** in good standing with the State of New Hampshire. Please visit the following website to find out more about the requirements for registration with the NH Secretary of State: <http://www.sos.nh.gov/corporate>.
- **CONFIDENTIALITY & CRIMINAL RECORD:** If Applicable, by the using agency, the Contractor will have signed by each of employees or its approved sub-contractor(s), if any, working in the office or externally with the State of New Hampshire records a Confidentiality form and Criminal Record Authorization Form. These forms shall be returned to the individual using agency prior to the start of any work.

CONTRACTOR'S RESPONSIBILITY:

Read the entire bid invitation prior to filling it out. Complete the pricing information in the "Offer" section (the unit price is the price for the unit of purchase required by this bid invitation (i.e. each, case, box, etc.) and all other required information on your offer. The extension is the unit price multiplied by the quantity required by this bid invitation. Also complete the "Contractor Contact Information" section. Finally, complete the company information on the "General Conditions and Instructions" page of this bid invitation, then sign the bid in the space provided on that page. This request for Bid and any addenda to this bid invitations are advertised / posted at the following web site: <http://admin.state.nh.us/purchasing/index2.asp>

- It is a prospective Contractor's responsibility to access our website to determine any bid invitation under which they wish to participate. It is also the Contractor(s)'s responsibility to access our website for any posted addendum.
- The website is update several times per day; it is the responsibility of the prospective Contractor(s) to access the website frequently to ensure no bidding opportunity or addenda are overlooked.
- It is the prospective Contractor's responsibility to forward a signed copy of any associated addenda to the Bureau of Mechanical Services along with their bid response.

OBLIGATIONS & LIABILITY OF THE CONTRACTOR:

The Contractor shall do all the work and furnish all the materials, tools, equipment and safety devices necessary to perform in the manner and within the time hereinafter specified. Contractor shall complete the entire work to the satisfaction of the State and in accordance with the specifications herein mentioned, at the price herein agreed upon and fixed therefore. All the work, labor and equipment to be done and furnished under this contract(s), shall be done and furnished strictly pursuant to, and in conformity with the specifications described herein, and the directions of the State representatives as given from time to time during the progress of the work, under the terms of this contract(s) and also in accordance with contract(s) drawings.

The Contractor shall take all responsibility for the work under this contract(s); for the protection of the work; and for preventing injuries to persons and damage to property and utilities on or about the work. They shall in no way be relieved of their responsibility by any right of the State to give permission or issue orders relating to any part of the work; or by any such permission given on orders issued or by failure of the State to give such permission or issue such orders. The Contractor shall bear all losses resulting to him or to the Owner on account of the amount or character of the work, or because of the nature of the area in or on which the work is done is differed from what was estimated or expected, or account of the weather, elements or other causes.

The Contractor agrees that any damage or injury to buildings, materials, and equipment or to other property during the performance of this service will be repaired at their own expense.

Contractor's Initials: BD

Date: 6/1/15

BID INVITATION FOR A CONTRACT FOR:

#RFB DOT 15 04 FOR CONTRACT FOR: ARIAL LIFT INSPECTION, REPAIRS & SCHEDULED SERVICE

INSTRUCTIONS TO CONTRACTOR:

Read the entire bid invitation prior to filling it out. Complete the pricing information in the "Offer" section (the unit price is the price for the unit of purchase required by this bid invitation {i.e. each, case, box, etc.}) and all other required information on your offer. The extension is the unit price multiplied by the quantity required by this bid invitation. Also complete the "Contractor Contact Information" section.

BID SUBMITTAL

All bids must be submitted on this form or an exact copy, must be typed or clearly printed in ink and must be received on or before the date and time specified.

Specifications and bid forms may be obtained from Mechanical Services at the address below or at the following website link. http://www.admin.state.nh.us/purchasing/bids_posteddate.asp?sort=PostedDate%20DESC

Bids shall be placed in two envelopes, with the inner envelope sealed and plainly marked "**Bid for ARIAL LIFT INSPECTION & REPAIR" RFB DOT 15 04 NH DOT -Mechanical Services**".

Addressed to:

NH – DOT Bureau of Mechanical Services,
PO Box 456, 33 Smokey Bear Boulevard
Concord, New Hampshire 03302-0456

Sealed bids shall be received and deposited in the bid box at the **33 Smokey Bear Boulevard, Concord office of The Bureau of Mechanical Services prior to 1:30 PM EST, prevailing time on May 18, 2015**, at which time they will be opened. It shall be the Contractor's responsibility to ensure the bid is deposited as specified. Bids delivered to the Bureau of Mechanical Services by alternative means, FAX, MAIL ETC... are submitted at the sole risk of the Contractor. The Department will not accept responsibility for any reason if the bid is not deposited in the bid box by the specific time and date. Bids received after the time for opening bids will not be considered.

PURPOSE:

The purpose of this bid invitation is to establish a contract for supplying the State of New Hampshire Department of Transportation, Bureau of Mechanical Services with the service(s) indicated in the "Offer" section of this bid invitation to be requested as needed during the term of the contract, in accordance with the requirements of this bid invitation and any resulting contract.

CONTRACT TERM:

Any resulting contract (s) for service shall commence upon approval by Governor and Council for a term of approximately 2 years beginning approximately July 1, 2015 through June 30, 2017, whichever is later

TERMINATION:

The State of New Hampshire shall have the right to terminate the purchase contract at any time by giving the successful Contractor a thirty (30) day written notice.

REQUEST FOR CHANGES AND/OR CLARIFICATION:

Any Questions must be submitted by an individual authorized to commit their organization to the Terms and Conditions of this bid. Submissions must clearly identify the bid Number, the Contractor's name and address and the name of the person submitting the question. Any requested changes to this bid invitation by the Contractor must be received in writing at the Bureau of Mechanical Services no later than 3:30 PM on the (5th) fifth business day **prior** to the date of the bid opening. Questions must be submitted by E-mail to Michael Walsh at the following address: mwalsh2@dot.state.nh.us

SITE VISITATION

Prior to bidding, it is each Contractor's responsibility to become thoroughly familiar with the intended service, to determine everything necessary to accomplish the service. Contact **Michael Walsh at 603-271-3721** to make an appointment to view the aerial lifts. Failure of the Contractor to make a site visit does not relieve the Contractor of responsibility to fully understand what is necessary to accomplish a successful and complete installation.

Contractor's Initials: DD

Date: 6/1/15

ADDENDUM:

In the event it becomes necessary to add to or revise any part of this bid prior to the scheduled submittal date, the Bureau of Mechanical Services will post on the states web site any Addenda. Before your submission, always check the site for any addenda or other materials that may have been issued affecting the bid. The web site address is www.admin.state.nh.us/purchasing/bids.

ID PRICES:

Bid prices must be in US dollars and must include all costs required by this bid invitation. Bid prices should result in prices that are no higher than those charged to the Contractor's best/preferred customer. Special charges, surcharges, or fuel charges of any kind (by whatever name) may not be added on at any time.

BID AWARD:

The award of the bid will be based upon **THE TOTAL LOW BID MEETING ALL SPECIFICATIONS** from the listing of the items indicated in the "Exhibit B" of this bid invitation. Successful Contractor will not be allowed to require any other type of order, nor will the successful Contractor be allowed to require the filling out or signing of any other document by State of New Hampshire personnel. The State reserves the right to reject any or all bids or any part thereof and add/delete locations to the contract price. If an award is made it shall be, in the form of an NH DOT Contract.

NOTIFICATION AND AWARD OF CONTRACT(S):

Bid results will not be given by telephone. For Contractors wishing to attend the bid opening: Bid results will be made public after final approval of the contract(s).

BID OPENING:

Contractors wishing to attend the bid Opening: Only the names of the Contractors submitting responses will be made public.

BID RESULTS:

Bid results may also be viewed on our website at <http://www.state.nh.us/purchasing/bid.asp>.

ABILITY TO PROVIDE:

Successful Contractor must be capable of providing the State of New Hampshire, Department of Transportation with their entire requirements of the repair services as required in this bid invitation and any resulting contract without any delay or substitution. **Contractor's location shall be within a 30-mile radius of the address shown below.**

Bureau of Mechanical Services, 33 Smokey Bear Boulevard Concord, New Hampshire 03302-0456

ESTIMATED CONTRACT VALUE:

The annual value of the contract is estimated to be **\$45,000.00 per year**. This figure is given for informational purposes only and shall not be considered a guaranteed or minimum figure, nor shall it be considered a maximum figure. The state reserves the right to add or remove aerial lifts to be inspected or repaired from the list indicated in Exhibit B, due to the possibility of units being added or removed from service during the contract period. Actual contract value will be dependent upon work required.

SPECIFICATION COMPLIANCE:

Contractor's offer must meet or exceed the required specifications as written. The State of New Hampshire shall be the sole determining factor of what meets or exceeds the required specifications unless otherwise specified and authorized at time of repair estimate approval, all parts & components offered by the Contractor must be new; shall not be used, rebuilt, refurbished; shall not have been used as demonstration equipment, and shall not have been placed anywhere for evaluation purposes.

CONTRACTOR CONTACT INFORMATION:

The following information is for this office to be able to contact a person knowledgeable of your bid response, and who can answer questions regarding it:

| | | |
|--|---|---|
| <u>Brendan Dunican</u> Contact Person | <u>(603) 624-6288</u> Local Telephone Number | <u>N/A</u> Toll Free Telephone Number |
| <u>(603) 624-6289</u> Fax Number | <u>BDunican@NAEUInc.com</u> E-mail Address | <u>www.naeuinc.com</u> Company Website |

Contractor's Initials: BD

Date: 6/1/15

STATE OF NEW HAMPSHIRE - DEPARTMENT OF TRANSPORTATION
BUREAU OF MECHANICAL SERVICES
33 SMOKEY BEAR BLVD / P.O. BOX 456
CONCORD NH 03301-6398

ADDENDUM # 1 TO BID #: RFB_DOT_15_04

DATE: 4/5/2015

ADDENDUM #: 1

DATE OF BID OPENING: 5/18/2015

RFB TITLE: Aerial lift, inspection, Repair & Maintenance TIME OF BID OPENING: 1:30 PM EST

CHANGE OF SPECIFICATION

Within bid RFB_DOT_15_04, under Exhibit A, year 2 of the contract (2017) requires replacement of the hydraulic fluid. Please DELETE that requirement in its entirety. The annual inspection requirements and process should be the same for both contract years.

PLEASE SIGN AND RETURN THIS ADDENDUM AS PART OF YOUR SOLICITATION PACKAGE AND UTILIZE THIS INFORMATION WHEN FORMULATING AN OFFER FOR RFB_DOT_15_04

NOTE: IN THE EVENT THAT YOUR BID HAS BEEN SENT TO THIS OFFICE PRIOR TO RECEIVING THIS ADDENDUM, RETURN ADDENDUM WITHIN THE SPECIFIED TIME WITH ANY CHANGES YOU WISH TO MAKE AND MARK ON THE REMITTANCE ENVELOPE BID NUMBER AND OPENING DATE. RETURNED ADDENDUM WILL SUPERSEDE ANY PREVIOUSLY SUBMITTED BIDS.

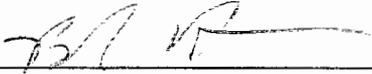
PLEASE TYPE OR PRINT BUSINESS NAME: North American Equipment Upfitters, Inc.

BIDDER: Brendan Dunican

ADDRESS: 6 Sutton Circle Hooksett, NH

BY: Brendan Dunican
TYPE OR PRINT AUTHORIZED NAME

ZIP: 03106

BY: 
AUTHORIZED SIGNATURE

PHONE: (603) 624-6288

FAX: (603) 624-6289

Michael P. Walsh II
Assistant Administrator
Telephone: 603-271-3721
Fax: 603-271-1649
E-mail: mwalsh2@dot.state.nh.us

E-MAIL: BDunican@NAEUInc.com

STATE OF NEW HAMPSHIRE - DEPARTMENT OF TRANSPORTATION
BUREAU OF MECHANICAL SERVICES
33 SMOKEY BEAR BLVD / P.O. BOX 456
CONCORD NH 03301-6398

ADDENDUM # 21 TO BID #: RFB_DOT_15_04

DATE: 4/5/2015

ADDENDUM #: 2

DATE OF BID OPENING: 5/18/2015

RFB TITLE: Aerial lift, inspection, Repair & Maintenance TIME OF BID OPENING: 1:30 PM EST

REVISED EXHIBIT B, OFFER SECTION

Within bid RFB_DOT_15_04, under Exhibit B, Offer Section. The original EXHIBIT B, Offer section had duplicate sections for H1368, H1489 and H1540. The revised and attached EXHIBIT B, offer section has deleted the duplicates. Please utilize the attached Exhibit B, Offer section as part of your solicitation offer

PLEASE SIGN AND RETURN THIS ADDENDUM AS PART OF YOUR SOLICITATION PACKAGE AND UTILIZE THIS INFORMATION WHEN FORMULATING AN OFFER FOR RFB_DOT_15_04

NOTE: IN THE EVENT THAT YOUR BID HAS BEEN SENT TO THIS OFFICE PRIOR TO RECEIVING THIS ADDENDUM, RETURN ADDENDUM WITHIN THE SPECIFIED TIME WITH ANY CHANGES YOU WISH TO MAKE AND MARK ON THE REMITTANCE ENVELOPE BID NUMBER AND OPENING DATE. RETURNED ADDENDUM WILL SUPERSEDE ANY PREVIOUSLY SUBMITTED BIDS.

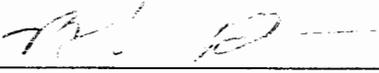
PLEASE TYPE OR PRINT BUSINESS NAME: North American Equipment Upfitters, Inc.

BIDDER: Brendan Dunican

ADDRESS: 6 Sutton Circle Hooksett, NH

BY: Brendan Dunican
TYPE OR PRINT AUTHORIZED NAME

ZIP: 03106

BY: 
AUTHORIZED SIGNATURE

PHONE: (603) 624-6288

FAX: (603) 624-6289

Michael P. Walsh II
Assistant Administrator
Telephone: 603-271-3721
Fax: 603-271-1649
E-mail: mwalsh2@dot.state.nh.us

E-MAIL: BDunican@NAEUInc.com

EXHIBIT A

ARIAL LIFT INSPECTION –REPAIRS-SCHEDULED SERVICE

SCOPE OF SERVICES

PERFORMING SERVICES:

The Contractor will perform all services according to the requirements and specifications of this bid.

ANNUAL INSPECTION – COMPLIANCE STANDARDS

Annual inspections of the aerial lifts shall be in accordance with "OSHA" 1926 subpart CC & "ANSI" B30.22 & ANSI B30.5 or most recent revisions. All inspections shall take place at NH DOT 0 Bureau of mechanical Services, 33 Smokey Bear Blvd. Concord, NH

CONTRACTOR QUALIFICATIONS:

Note: Contractor must have qualified people to verify compliance with the provisions of the aerial lift inspection, per ASME B 30.5-2004 or latest revision.

ANNUAL INSPECTION PROCESS

Contractor shall provide the following under the annual ANSI / OSHA inspection segment:

Both Years of contract - 2016 & 2017

- Perform Annual ANSI / OSHA safety inspection for issuance of certificate (sample attached)
- Perform Manufacturers recommended inspection for optimum utilization and safety (sample attached)
- Replacement of all hydraulic filter(s), quantity /type to be determined by the make/model specified in Exhibit B
- Grease / lubricate all fittings

Year 2 of contract – 2017, in addition to all 2016 requirements

- Replace hydraulic fluid in all units. (Only in year 2 of contract [FY 2017]). Replacement hydraulic fluid product per manufacturers recommendation for region

ANNUAL SAFETY INSPECTION BY APPOINTMENT

The annual safety inspection shall take place according to Exhibit A, scope of services. Inspection times and dates shall be coordinated on a mutually agreed appointment schedule with the utilizing agency. The inspections shall be scheduled to allow the utilizing agency employees to wait at the location while the inspection is performed and return with the vehicle to their normal location the same day, during normal business hours.

Transportation of truck / Aerial lift to the **Bureau of mechanical Services** for inspection shall be the responsibility of the utilizing agency.

It is anticipated that the inspections shall occur over a two to six week period to avoid having multiple units being inspected. Contractor and utilizing agency may schedule as many inspections in a day as time and a thorough inspection process allows. Agency personnel shall report any known operational issues to the Contractor upon arrival for inspection

ANNUAL SAFETY INSPECTION – RELEASE OF UNIT

If the aerial lift should not pass the annual safety inspection, the Contractor shall document such to the utilizing agency employee waiting for the vehicle and have him sign a document (to be supplied by the Contractor) identifying the specific functions of the crane that are tagged out of service (because they did not meet the ANSI / OSHA inspection criteria) until repairs are made to the referenced unit. At that point the utilizing agency personnel shall take the vehicle and may utilize any part of the vehicle not flagged for failure by the inspection report (i.e. transportation vehicle). The utilizing agency employees shall be permitted to view the inspection process (while maintaining necessary safety precautions).

ANNUAL SAFETY INSPECTION – STATUS / COMMUNICATION / TIME

Once the annual ANSI / OSHA safety inspection is complete, the Bureau of Mechanical Services will be provided a "repair estimate" Inspection compliance repairs or factory recommended services and the associated cost for parts and labor to perform the aforementioned work. A copy of the ANSI / OSHA inspection report along with a copy of the repair estimate shall be emailed to mechanical services for review. The Contractor shall have up to **seven (7) business days** to submit the specified information from the date of inspection completion to the Bureau of Mechanical Services at the following Email: Bureau33@dot.state.nh.us , attention Tom Moore.

Contractor's Initials: BD

Date: 6/1/15

REPAIR ESTIMATE COMPONENTS:

Supplied estimates shall have the following documentation, at a minimum:

- Customer name & address.
- Mechanical Services Contact person, telephone ,fax and email
- Date of inspection, make, model and serial of unit inspected and State vehicle number ("H" number)
- Each job repair on the estimate is broken out to include parts and labor for each job and a priority code as stated below. Service Code:
 - Damaged - Required to pass ANSI inspection - Imminent Safety - "X"
 - Normal wear - Factory Recommended service "W"
 - Good condition – "G"
 - Requires repair – "O"
 - Not Applicable – "N/A"

REPAIR AUTHORIZATION:

Under this solicitation and resulting contract, all repair authorizations (Parts, labor or both) shall come from the Bureau of Mechanical Services. Utilizing agencies do not have the authority to approve work, add work, purchase parts or augment any repair estimate. Any work done or parts purchased without the written consent of the Bureau of Mechanical Services is prohibited and shall not be paid for.

REPAIR ESTIMATE APPROVAL PROCESS, LOCATION

- Upon review and approval of the submitted repair estimate by NH DOT Mechanical Services, the Contractor shall order the necessary parts and materials. Once the parts arrive, the Contractor shall contact the utilizing agency to schedule the repair work to include whether the aerial lift will be left for repair or it is the utilizing agency intension to wait while the repair is being completed.
- In the event that unforeseen additional work is found during repairs and service work, the Contractor shall contact the Bureau of Mechanical Services prior to any additional spending and supply an estimate for the cost for the additional work. Upon review and approval of the submitted repair estimate, by NH DOT Mechanical Services, the Contractor shall order the necessary parts and materials to do the approved repairs.

REPAIR TIME:

- General - The successful Contractor shall be required to accomplish the intended service within the quoted time communicated on the submitted repair report. The number of hours or days the unit would be out of service at the Contractors' location for safety inspection compliance repairs or Factory recommended service would be communicated on the "repair estimate and communicated verbally to the utilizing agency when scheduling the repair.
- All repair and scheduled maintenance work shall be performed at **the Contractors' place of business.**
- SCHEDULING - Once the Contractor notifies the utilizing agency that the parts are received , the utilizing agency and the Contractor shall schedule a time for repair at mutual agreement to both parties

REPAIR PROCESS

- Upon completion of the inspection, required repairs and scheduled maintenance, the Contractor shall notify the utilizing agency and the Bureau of Mechanical Services.
- The Contractor shall provide an itemized invoice comprised of all parts / supplies stated in the "repair estimate" plus actual cost, (cost billed to the state) to complete authorized repairs. There may be times when the 'actual labor cost is less than the estimated labor cost.
- Transportation of truck / Aerial lift to the Contractor's location for repair shall be the responsibility of the utilizing agency.

PAIR – POST INSPECTION

After completion of all authorized work and before the utilizing agency employee leaves the Contractor's location with the unit, a post repair inspection of all items authorized for repair or replacement under the repair estimate shall be inspected and / or tested by the technician who did the work and observed utilizing agency employee responsible for the vehicle. A printed list of repaired items shall be given to the utilizing agency employee prior to the post repair inspection. Once complete and the inspection is successful, all records shall be finalized and prepared for billing.

Contractor's Initials: BD

Date: 6/1/15

CORRECTING FAILURES - FOUND DURING POST REPAIR INSPECTION

Items repaired / replaced specified on the repair estimate that fail the post repair inspection shall be documented by the Contractor & the utilizing agency employee. The utilizing agency employee shall leave the unit for up to an

Additional two (2) business day's period. The Contractor has up to the same two (2) business days to correct all failures, re inspect the unit and turn it over to the utilizing agency.

WARRANTY REQUIREMENTS:

Successful Contractor shall be required to warranty all of the parts or components repaired or installed for a period of not less than the manufacturer's standard period of time, from the date the items are received, inspected and accepted by the State of New Hampshire. The warranty shall cover 100% of all parts, shipping, labor, travel, lodging and expenses.

WORK HOURS

Contractor will observe official State holidays. All hours the contractor is required to work on a State holiday will be considered as Sunday or holiday work hours. The following State holidays will be observed:

| | |
|--------------------------|------------------------|
| NEW YEARS DAY | PRESIDENTS DAY |
| MARTIN LUTHER KING'S DAY | VETERAN'S DAY |
| MEMORIAL DAY | THANKSGIVING DAY |
| INDEPENDENCE DAY | DAY AFTER THANKSGIVING |
| LABOR DAY | CHRISTMAS DAY |

Contractor's Initials: BD

Date: 6/1/15

EXHIBIT B

AERIAL LIFT INSPECTION –REPAIRS-SCHEDULED SERVICE & COMPENSATION

REPAIR PARTS – PRICING & MARK UP

- Parts or materials required and utilized in the "annual inspection" segment of the contract shall be included in the safety inspection flat rate charge offered by the Contractor for this service as identified in exhibit B.
- Parts and materials required and identified in the "repair estimate" to provide needed repairs, safety inspection compliance repairs or Factory recommended service shall be charged to the Agency Remit Account at the same invoice price charged by the Contractor's supplier plus an adder not to exceed **25%**. A copy of the Contractor's invoice(s) from the Contractor's supplier for purchased parts and materials shall be submitted with the contractor's invoice for payment.
- Parts and materials that are undefined or unanticipated and **not** stated in the "repair estimate" to provide needed repairs, safety inspection compliance repairs or Factory recommended service shall be charged to the Agency Remit Account at the same invoice price charged by the Contractor's supplier plus an adder not to exceed **25%** plus a written explanation as to the need for the added parts and /or materials. A copy of the Contractor's invoice(s) from their parts supplier for such parts and materials shall be submitted with the Contractor's invoice for payment.
- Freight cost for **expedited freight** (previously quoted and approved by NH DOT – Mechanical Services) shall be billed at the same price the shipping Contractor charged the Contractor with no additional markup cost
- The state reserves the right to request verification of any transaction prior to payment

INVOICING:

Invoicing shall be done to the Agency Remit Account on the basis of each order completed. Invoices shall clearly indicate the license plate number of the vehicle ["H" number], part quantity, description, part number, date of service, labor, Contract labor rate and Total due. Invoices shall include copies of "part" support documentation as specified above

INVOICING – STATUS / COMMUNICATION / TIME

Once all work is complete and the aerial lift is accepted back to the State, A copy of the final invoice shall be emailed to Mechanical Services for review. The Contractor shall have up to **five (5) business days** to submit the specified information from the date of final work completion to the Bureau of Mechanical Services at the following Email: bureau08@dot.state.nh.us attention Tom Moore

ROAD SERVICE – RATES AND CHARGES

In the case of equipment failure or breakdown, Contractor shall indicate road service rates:

\$ _____ / Mile

\$ 75⁰⁰ / Hour

- These rates are fixed for the term of the contract **but not considered in the bid evaluation.**
- In the case where the equipment failure or breakdown is found to be from labor or parts provided by the Contractor and is under Contractor's warranty, no road service charges shall be charged.

NOTE: The state reserves the right to add or remove aerial lifts to be inspected or repaired from the list indicated in Exhibit B, due to the possibility of units being added or removed from service during the contract period

Contractor's Initials: BD

Date: 6/1/15

EXHIBIT B - OFFER SECTION:

Bidder hereby offers to furnish Aerial Lift Inspections, repairs and scheduled Service to the State of New Hampshire in accordance with all of the requirements of this bid invitation at the following prices for the entire contract.

INVENTORY, INSPECTION COSTS AND HOURLY RATES:

| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact | | |
|---|------|--------|------------|-------------|---------------|---|------------|----------|
| LSTA | 2002 | A-37P | 1 | H 1505 | 2760021 | District 2 - Rumney Crew - Tony Albert Tel # 252-6298 | | |
| LSTA | 2002 | A-37P | 1 | H 1506 | 2760022 | District 5 - Derry Crew - John Robinson Tel#235-8390 | | |
| TOTAL UNITS - 2 | | | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | | | |
| \$160.00 | | | + | \$450.00 | + | = | 2 YR TOTAL | \$610.00 |
| FY2016 | | | | Fy2017 | | | | |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | | | |
| \$75.00 | | \$/hr. | X | 14 Hrs | = | FY2016 total | \$1,050.00 | |
| FY2016 | | | | | | | | |
| \$75.00 | | \$/hr. | X | 14Hrs. | = | FY2017 total | \$1,050.00 | |
| Fy2017 | | | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | | \$2,710.00 | |

| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact | | |
|--|------|---------|------------|-------------|---------------|--|------------|----------|
| Altec | 2007 | AT-200A | 1 | H-331 | 0407BU13298 | Traffic - Sign Shop - Jamie Cotnoir Tel # 419 - 0358 | | |
| Altec | 2007 | AT-200A | 1 | H-386 | 0407BU13345 | Traffic - Sign Shop - Doug Hinton Tel # 419 - 0359 | | |
| TOTAL UNITS - 2 | | | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | | | |
| \$170.00 | | | + | \$550.00 | + | = | 2 YR TOTAL | \$720.00 |
| FY2016 | | | | Fy2017 | | | | |
| Labor Per Hour For Repairs And Scheduled (*hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | | | |
| \$75.00 | | \$/hr. | X | 14 Hrs | = | FY2016 total | \$1,050.00 | |
| 2016 | | | | | | | | |
| \$75.00 | | \$/hr. | X | 14 Hrs | = | FY2017 total | \$1,050.00 | |
| Fy2017 | | | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | | \$2,820.00 | |

| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact | | |
|--|------|----------|------------|-------------|---------------|--|------------|------------|
| Elliott | 2012 | H55R-MHA | 1 | H-820 | AY - 5244 | Turnpikes / Traffic - Robert Hyslop Tel # 419-9306 | | |
| Elliott | 2012 | H55R-MHA | 1 | H-1633 | MX-5243 | Traffic - Kevin O'connor Tel # 419-9306 | | |
| TOTAL UNITS - 2 | | | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | | | |
| \$470.00 | | | + | \$1,750.00 | + | = | 2 YR TOTAL | \$2,220.00 |
| FY2016 | | | | Fy2017 | | | | |
| Labor Per Hour For Repairs And Scheduled (*hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | | | |
| \$75.00 | | \$/hr. | X | 14 Hrs | = | FY2016 total | \$1,050.00 | |
| FY2016 | | | | | | | | |
| \$75.00 | | \$/hr. | X | 14 Hrs | = | FY2017 total | \$1,050.00 | |
| Fy2017 | | | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | | \$4,320.00 | |

Contractor Initials: BD
Date: 6/1/15

EXHIBIT B - OFFER SECTION: CONTINUED

INVENTORY, INSPECTION COSTS AND HOURLY RATES:

| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact | | |
|---|------|-------------|------------|-------------|---------------|---|------------|------------|
| Versaliff | 2012 | SST37EIH-01 | 1 | H - 341 | DR120028 | Traffic - Signal Shop - Doug Curtis tel # 419-0396 | | |
| TOTAL UNITS -1 | | | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | | | |
| \$215.00 | | | + | \$400.00 | + | = | 2 YR TOTAL | \$615.00 |
| FY2016 | | | | Fy2017 | | | | |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | | | |
| \$75.00 | | \$/hr. | X | 7 Hrs. | = | FY2016 total | \$525.00 | |
| FY2016 | | | | | | | | |
| \$75.00 | | \$/hr. | X | 7Hrs. | = | FY2017 total | \$525.00 | |
| FY2017 | | | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | | \$1665.00 | |
| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact | | |
| Versaliff | 2003 | SST - 37NE | 1 | H - 319 | DU020028 | Traffic - Signal Shop - Bob Foster tel # 419-0395 | | |
| Versaliff | 2006 | SST - 37NE | 1 | H - 387 | DU060001 | Traffic - Signal Shop - Cam White Tel # 419-0397 | | |
| Versaliff | 2002 | SST - 37NE | 1 | H - 1503 | DU020026 | District 6 - Newfields Crew - Ray Ellis Tel # 419-9950 | | |
| Versaliff | 2003 | SST - 37NE | 1 | H - 1504 | DU020029 | District 4 - Marlow Crew - Sampson Bodner Tel # 933-0684 | | |
| TOTAL UNITS -4 | | | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | | | |
| \$460.00 | | | + | \$1,200.00 | + | = | 2 YR TOTAL | \$1,660.00 |
| FY2016 | | | | Fy2017 | | | | |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | | | |
| 5.00 | | \$/hr. | X | 28 HRS. | = | FY2016 total | \$2,100.00 | |
| FY2016 | | | | | | | | |
| \$75.00 | | \$/hr. | X | 28 HRS. | = | FY2017 total | \$2,100.00 | |
| FY2017 | | | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | | \$5860.00 | |
| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact | | |
| Versaliff | 2003 | TEL - 29 | 1 | H - 308 | A1020182 | Traffic-Sign-Swaney Crew Mark Vaillancourt Tel # 419-0378 | | |
| Versaliff | 2003 | TEL - 29 | 1 | H - 314 | A1020183 | Traffic-Sign-Concord Crew Jim Edmunds Tel # 419-0385 | | |
| Versaliff | 2006 | TEL - 29 | 1 | H - 349 | A1050070 | Traffic-Sign-Concord Crew Paul Schofield Tel # 419-0384 | | |
| Versaliff | 2003 | TEL - 29 | 1 | H - 354 | A1020179 | Traffic-Sign-Littleton Crew Russell Bell Tel # 419-0357 | | |
| TOTAL UNITS -4 | | | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | | | |
| \$320.00 | | | + | \$900.00 | + | = | 2 YR TOTAL | \$1,220.00 |
| FY2016 | | | | Fy2017 | | | | |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | | | |
| \$75.00 | | \$/hr. | X | 28 HRS. | = | FY2016 total | \$2,100.00 | |
| FY2016 | | | | | | | | |
| \$75.00 | | \$/hr. | X | 28 HRS. | = | FY2017 total | \$2,100.00 | |
| FY2017 | | | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | | \$5420.00 | |
| Contractor Initials: | | | | | | <u>8D</u> | | |
| Date: | | | | | | <u>6/1/15</u> | | |

EXHIBIT B - OFFER SECTION: CONTINUED

INVENTORY, INSPECTION COSTS AND HOURLY RATES:

| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact |
|---|------|------------|------------|-------------|---------------|--|
| Versalift | 2008 | TEL - 29NE | 1 | H - 1368 | AI080091 | Traffic - Signal Shop - Dave Nysten tel # 419-0610 |
| TOTAL UNITS -1 | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | |
| \$80.00 | | | | | | 2 YR TOTAL \$305.00 |
| | | | \$225.00 | | | |
| FY2016 | | | | | | Fy2017 |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | |
| \$75.00 | | \$/hr. | X | 7 Hrs. | | FY2016 total \$525.00 |
| FY2016 | | | | | | |
| \$75.00 | | \$/hr. | X | 7Hrs. | | FY2017 total \$525.00 |
| Fy2017 | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | \$1355.00 |
| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact |
| MTI | 2001 | U3 | 1 | H - 1489 | 2137010 | Turnpikes / Traffic - Neal Heon Tel # 396-1275 |
| TOTAL UNITS -1 | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | |
| \$125.00 | | | | | | 2 YR TOTAL \$525.00 |
| | | | \$400.00 | | | |
| FY2016 | | | | | | Fy2017 |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | |
| \$75.00 | | \$/hr. | X | 7 Hrs. | | FY2016 total \$525.00 |
| FY2016 | | | | | | |
| \$75.00 | | \$/hr. | X | 7 Hrs. | | FY2017 total \$525.00 |
| Fy2017 | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | \$1355.00 |
| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact |
| Versalift | 2002 | VAN - 29 | 1 | H - 1540 | BW020001 | Construction Crew Ken Morrison Tel # 419-0284 |
| TOTAL UNITS -1 | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | |
| \$80.00 | | | | | | 2 YR TOTAL \$305.00 |
| | | | \$225.00 | | | |
| FY2016 | | | | | | Fy2017 |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | |
| \$75.00 | | \$/hr. | X | 7 HRS. | | FY2016 total \$525.00 |
| FY2016 | | | | | | |
| \$75.00 | | \$/hr. | X | 7 HRS. | | FY2017 total \$525.00 |
| Fy2017 | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | \$1355.00 |
| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact |
| Versalift | 2003 | VAN - 29N | 1 | H - 1664 | VT030005 | Construction Crew Ken Thoroughgood Tel # 419-9567 |
| TOTAL UNITS -1 | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | |
| \$80.00 | | | | | | 2 YR TOTAL \$305.00 |
| | | | \$225.00 | | | |
| FY2016 | | | | | | Fy2017 |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | |
| \$75.00 | | \$/hr. | X | 7 HRS. | | FY2016 total \$525.00 |
| FY2016 | | | | | | |
| \$75.00 | | \$/hr. | X | 7 HRS. | | FY2017 total \$525.00 |
| Fy2017 | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | \$1,355.00 |

Contractor Initials: BD
 Date: 6/1/15

EXHIBIT B - OFFER SECTION: CONTINUED

INVENTORY, INSPECTION COSTS AND HOURLY RATES:

| Make | Year | Model | # of Units | TRUCK "H" # | Serial Number | Garage Location and Contact |
|---|------|----------------|------------|-------------|---------------|--|
| Versalift | 2007 | VST - 50001-01 | 1 | H - 1628 | GG070017 | Traffic Sign Portsmouth Gene Popien Tel # 396-4644 |
| TOTAL UNITS -1 | | | | | | |
| Annual Safety Inspection (Flat Rate Charge) | | | | | | |
| \$125.00 | | + | \$400.00 | + | = | 2 YR TOTAL \$525.00 |
| FY2016 | | | Fy2017 | | | |
| Labor Per Hour For Repairs And Scheduled (* hours are estimated for bid basis only, actual hours will be invoiced) | | | | | | |
| \$75.00 | | \$/hr. | X | 7 Hrs. | = | FY2016 total \$525.00 |
| FY2016 | | | | | | |
| \$75.00 | | \$/hr. | X | 7 Hrs. | = | FY2017 total \$525.00 |
| Fy2017 | | | | | | |
| 2 YEAR TOTAL INCLUDING LABOR & INSPECTION SUBSECTION TOTAL | | | | | | \$1575.00 |
| 2 YEAR TOTAL OF ALL SUBSECTION TOTALS ABOVE TOTAL | | | | | | \$30,010.00 |

Contractor initials: BD
 Date: 6/1/15

EXHIBIT C

ARIAL LIFT INSPECTION -REPAIRS-SCHEDULED SERVICE

SPECIAL PROVISIONS

There are no special provisions for this contract

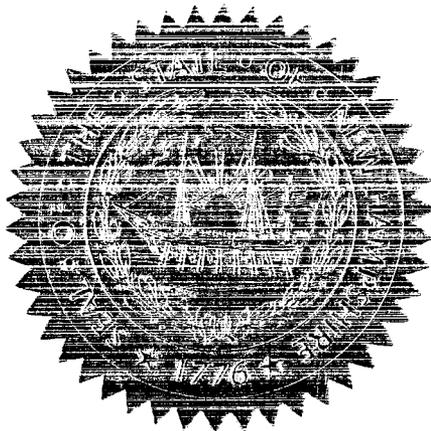
Contractor's Initials: BD

Date: 6/1/15

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 NORTH AMERICAN EQUIPMENT UPFITTERS, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on January 7, 1999. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.



In TESTIMONY WHEREOF, I hereto
set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 10th day of April, A.D. 2015

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

William M. Gardner
Secretary of State

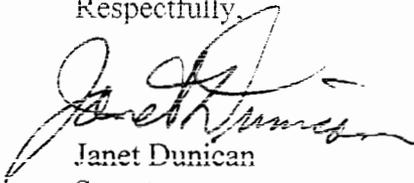
North American Equipment Upfitters, Inc



Certificate of Vote

This is to certify that a special meeting of the board of directors of North American Equipment Upfitters, Inc. held at our office at 6 Sutton Circle Hooksett, NH 03106 on June 1, 2015, all directors being present and vote, unanimously agree to enter into a service contract with the State of New Hampshire to provide service of Inspection, repairs and scheduled service to Aerial Lifts per #RFB_DOT_15_04, and Brendan Dunican, Sales Rep, to execute all documents related to the service contract.

Respectfully,

A handwritten signature in black ink, appearing to read "Janet Dunican".

Janet Dunican
Secretary

PO Box 1017 Londonderry, NH 03053
Phone: (603) 624-6288

6 Sutton Circle Hooksett, NH 03106
Fax: (603) 624-6289



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/7/2015

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 FIAI/Cross Insurance 1100 Elm Street Manchester NH 03101 | CONTACT NAME: Lynn Blanchard, CIC, CISR | |
| | PHONE (A/C No, Ext): (603) 669-3218 FAX (A/C No): (603) 645-4331 E-MAIL ADDRESS: lblanchard@crossagency.com | |
| INSURED North American Equipment Upfitters, Inc. Boru Enterprises, LLC PO Box 1017 Londonderry NH 03053 | INSURER(S) AFFORDING COVERAGE | NAIC # |
| | INSURER A: Travelers Ins. Co. | - |
| | INSURER B: The Phoenix Ins Co | 25623 |
| | INSURER C: James River Ins Co | |
| | INSURER D: | |
| | INSURER E: | |

COVERAGES CERTIFICATE NUMBER: 15-16 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 | | | 6307820A866 | 7/3/2015 | 7/3/2016 | EACH OCCURRENCE \$ 1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER | | | | | | |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS | | | 8101018A137 | 7/3/2015 | 7/3/2016 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 |
| | <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS | | | | | | |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE | | | CUP1018A149 | 7/3/2015 | 7/3/2016 | Underinsured motorist \$ 1,000,000 |
| | DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 | | | | | | |
| 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 | N/A | UP5989X447 (3a.) MA ME NH NY RI VT Michael & Janet Dunican excluded | 3/1/2015 | 3/1/2016 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER |
| | | | | | | | E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000 |
| C | Excess Liability | | | 000646181 | 7/3/2015 | 7/3/2016 | Limit \$2,000,000 |
| A | Garagekeepers Liability | | | 8101018A137 | 7/3/2015 | 7/3/2016 | Deductible: \$500 Limit: 750,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Refer to policy for exclusionary endorsements and special provisions.

CERTIFICATE HOLDER

CANCELLATION

| | |
|---|--|
| State of New Hampshire Department of Transportation Bureau of Mechanical Service PO Box 456 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 M Hendershot, CIC/JSC <i>Meredith J Hendershot</i> |

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