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THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



Victoria F. Sheehan
Commissioner

William Cass, P.E.
Assistant Commissioner

Bureau of Highway Maintenance
(Well Section)
December 1, 2015

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

REQUESTED ACTION

Authorize the Department of Transportation to enter into a contract with Wragg Brothers of Vermont, Inc. of Ascutney, VT (Vendor 160458) in the amount of \$20,450.00 for a 6-inch drilled well and pump on the property of Brad Little, 223 Portsmouth Avenue, Stratham, NH, from the date of Governor and Council approval through June 24, 2016, unless extended by the Department in accordance with the Standard Specifications. 100% Highway funds.

Funding is available as follows:

Salted Wells Account

04-96-96-960515-3066

400-500870 Highway Contract Payments

FY 2016

\$20,450.00

EXPLANATION

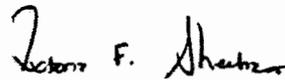
Results of investigations and water analysis has been evaluated, and it has been determined that the existing water supply has been contaminated by highway chlorides. The Department is therefore obligated to obtain a new water supply for the owner. This proposal is in conformity with RSA 228:34.

This contract was advertised and three bids were received and publicly opened on November 12, 2015. Wragg Brothers of Vermont, Inc. was the low bidder at \$20,450.00 and the Department considers this bid to be reasonable.

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The Contractor has been prequalified by this Department. The Contract has been approved by the Attorney General as to form and execution; and the Department 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' Office, and subsequent to Governor and Council approval will be on file at the Department of Transportation.

Sincerely,



Victoria F. Sheehan
Commissioner

VFS/md
Attachment:

Department Estimate:	\$22,100.00
Contract Amount:	<u>\$20,450.00</u>
Under Estimate:	\$ 1,650.00

**State of New Hampshire
Department of Transportation**

40316E.01

Project: STRATHAM - LITTLE SALTED
WELL NONE 40316E

County and Code: ROCKINGHAM COUNTY 015

Date Bids Open: November 12, 2015

Scope of Work: DRILLED WELL & PUMP

Location: BRAD LITTLE, 223 PORTSMOUTH AVENUE, STRATHAM
NH 03855

Completion Date: June 24, 2016

A WRAGG BROTHERS OF VERMONT INC
PO BOX 110 ASCUTNEY VT 05030 \$20,450.00

B SKILLINGS & SONS INC
9 COLUMBIA DRIVE AMHERST NH 03031 \$20,855.00

C CAPITAL WELL COMPANY INC
150 CONCORD STAGE ROAD DUNBARTON NH 03046 \$22,600.00

Item No:	Description	Unit	A			B			C		
			Quantity	Unit Price	Total	Unit Price	Total	Unit Price	Total		
662.1626	6" DRILLED WELL	LF	800.00	\$10.00	\$8,000.00	\$10.00	\$8,000.00	\$12.00	\$9,600.00		
662.166	PILOT HOLE FOR 6" WELL (INCLUDES 6" CASING)	LF	200.00	\$20.00	\$4,000.00	\$20.00	\$4,000.00	\$24.00	\$4,800.00		
662.244	4" WELL CASING (INCLUDING JASWELL SEALS & GROUT)	LF	500.00	\$5.00	\$2,500.00	\$5.00	\$2,500.00	\$4.00	\$2,000.00		
662.41	TRENCH AND PIPE	LF	50.00	\$10.00	\$500.00	\$18.00	\$900.00	\$10.00	\$500.00		
662.421	1" PE FLEXIBLE TUBING	LF	200.00	\$0.25	\$50.00	\$0.25	\$50.00	\$0.25	\$50.00		
662.52050	SUBMERSIBLE PUMP (1/2 HP) AND ACCESSORIES	EA	1.00	\$2,200.00	\$2,200.00	\$2,205.00	\$2,205.00	\$2,450.00	\$2,450.00		
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00		
1008.18	ALTERATIONS AND ADDITIONS AS NEEDED - PUMPING TEST	\$	200.00	\$1.00	\$200.00	\$1.00	\$200.00	\$1.00	\$200.00		
					\$20,450.00		\$20,855.00		\$22,600.00		

A - PS&E Comparison

PS&E = NHDOT Cost Estimate

Item No:	Description	Unit	A-Bidder		PS&E		A-PS&E Difference	
			Quantity	Unit Price	Total	Unit Price		Total
662.1626	6" DRILLED WELL	LF	800.00	\$10.00	\$8,000.00	\$11.00	\$8,800.00	(\$800.00)
662.166	PILOT HOLE FOR 6" WELL (INCLUDES 6" CASING)	LF	200.00	\$20.00	\$4,000.00	\$21.00	\$4,200.00	(\$200.00)
662.244	4" WELL CASING (INCLUDING JASWELL SEALS & GROUT)	LF	500.00	\$5.00	\$2,500.00	\$5.50	\$2,750.00	(\$250.00)
662.41	TRENCH AND PIPE	LF	50.00	\$10.00	\$500.00	\$11.00	\$550.00	(\$50.00)
662.421	1" PE FLEXIBLE TUBING	LF	200.00	\$0.25	\$50.00	\$0.50	\$100.00	(\$50.00)
662.52050	SUBMERSIBLE PUMP (1/2 HP) AND ACCESSORIES	EA	1.00	\$2,200.00	\$2,200.00	\$2,500.00	\$2,500.00	(\$300.00)
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00	\$0.00
1008.18	ALTERATIONS AND ADDITIONS AS NEEDED - PUMPING TEST	\$	200.00	\$1.00	\$200.00	\$1.00	\$200.00	\$0.00
					\$20,450.00		\$22,100.00	(\$1,650.00)

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 People's United Insurance Agency 87 West Street Rutland, VT 05701	CONTACT NAME: Claire M. Wilber PHONE (A/C, No, Ext): 802 786-5521 FAX (A/C, No): 802 770-6726 E-MAIL ADDRESS: claire.wilber@peoples.com													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A : Netherlands Insurance Company</td> <td>24171</td> </tr> <tr> <td>INSURER B : Peerless Insurance Company</td> <td>24198</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Netherlands Insurance Company	24171	INSURER B : Peerless Insurance Company	24198	INSURER C :		INSURER D :		INSURER E :		INSURER F :
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INSURED Wragg Brothers of VT Inc Wragg Brothers of NH LLC P O Box 110 Ascutney, VT 05030														

COVERAGES **CERTIFICATE NUMBER:** **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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Blanket Addl Insured <input type="checkbox"/> per Written Contract GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC		Y	CBP8282277 Endt #22-45	06/01/2015	06/01/2016	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$15,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			BA8284477	06/01/2015	06/01/2016	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 <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$10000			CU8286277	06/01/2015	06/01/2016	EACH OCCURRENCE \$3,000,000 AGGREGATE \$3,000,000 \$
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	WC8436472	06/01/2015	06/01/2016	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Project #40316E Stratham, NH. Certificate Holder and State of New Hampshire, its officials, employees and volunteers are listed as additional insured under general liability and auto liability as required by written contract for work performed by insured subject to terms and conditions of the policy.

CERTIFICATE HOLDER New Hampshire Dept of Transportation Office of Federal Compliance 7Hazen 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 <i>Claire M Wilber</i>
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