

134 Jm



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

VICKI V. QUIRAM
Commissioner
(603)-271-3201

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

Division of Public Works
Design and Construction
Project No. 80835R – Contract A

June 8, 2016

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

REQUESTED ACTION

- 1). Authorize the Division of Public Works Design and Construction to enter into a contract with Charters Brothers Construction, LLC. (VC# 208666) Danville, New Hampshire, for a total price not to exceed \$690,215, for floor and window repairs, at the New Hampshire Army National Guard Training Site in Center Strafford, New Hampshire. This contract is effective upon Governor and Council approval through December 30, 2016, unless extended in accordance with the contract terms. **100% Federal Funds.**
- 2). Further authorize that a contingency in the amount of \$20,000 be approved for unanticipated expenses and owner initiated changes for Building #8 Renovations and Building #1 Floor and Windows, bringing the total to \$710,215. **100% Federal Funds.**
- 3). Further authorize the amount of \$34,700 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), for engineering services provided, bringing the total to \$744,915. **100% Federal Funds.**

Funding is available in account titled Adjutant General as follows:

02-12-12-120010-22450000 Army Guard Facilities	<u>SFY16</u>
103-500736 – Contract Repairs/Bldgs. & Grounds	\$390,215
103-500736 – Contingency	<u>\$ 20,000</u>
Sub-Total	\$410,215

02-12-12-120010-22440000 Army Sustainable Range Program

103-500736 – Contract Repairs/Bldgs. & Grounds \$300,000

02-12-12-120010-22550000 Inter-Agency Payments

217-502682 – BPW Fees Interagency \$ 34,700

Grand Total \$744,915

EXPLANATION

The project will renovate the interior and exterior of Building #8 and install new flooring and windows in Building #1, at the New Hampshire Army National Training Site located in Center Strafford, New Hampshire.

The Federal funds available for this contract are provided to the Adjutant General's Department by the National Guard Bureau pursuant to a Federal-State Master Cooperative Agreement for the mutual support of the State of New Hampshire and the New Hampshire Army National Guard. The cost of this contract shall be reimbursed to the State by the Federal government at a rate of 100%. In the event that federal funds are not available, General funds will not be requested to support this program.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Department of Justice as to form and substance; and the Adjutant General's 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, Division of Public Works Design and Construction.

Attached please find a copy of the tabulation of bids for this project along with the contract supplemental information sheet.

Respectfully submitted,



Vicki V. Quiram
Commissioner

Department Estimate: \$790,000
Contract Amount: \$690,215
Under Estimate: \$ 99,785

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80835R, Contract A – Building #8 Renovation and Building #1 Floor and Windows, Center Strafford, New Hampshire.

DESCRIPTION: The project includes renovating Building #8 and installing new flooring and windows in Building #1, at the NH Army National Guard Campus, located in Center Strafford, NH. Building #8 is a single story, prefabricated metal activities building. Interior work includes demolition and construction of new bathrooms, reception area, workout/gym room and a conference room. Exterior work includes site work to install a new LP gas line to the building, and installing new asphalt walkways to the building entrances. The building exterior will have two new canopies constructed at the building entrances. New exterior metal paneling and split face CMU will be added to the building's facade to match the appearance of the rest of the Campus. Building #1 is a high volume drill hall/ gymnasium building. The existing gym floor and windows will be removed and replaced.

EXPLANATION: Building #8 has been used as an activities building. These activities have since been relocated into another building on the campus. Building #8 will now become a combination of a work out/gym space, along with an area that will hold training sessions or meetings. The building is estimated to have been built in the early 1980's, and now is in need of repairs and updating; replacing the heating and cooling system along with bathroom upgrades and new finishes throughout. Building #1 is the drill hall/ gymnasium building. The existing gym floor and the windows will be removed and replaced because they are outdated and deteriorating.

UNDER ESTIMATE

EXPLANATION: The reason for why the bid came in under the consultant's estimate is because the Contractor will already be working on the campus on another project, and therefore reducing the cost of supervision and equipment already on the site.

DEPARTMENT

ESTIMATE: \$790,000

LOW BID: \$690,215

ABC Bid Data

BUILDING #8 RENOVATIONS AND BUILDING #1 FLOOR AND
 WINDOWS
 80835R Contract A
 NON-FEDERAL

Item No.	Description	Unit	Quantity	CHARTERS BROTHERS CONST LLC 27 MAIN STREET DANVILLE, NH 03819		BROOKSTONE BUILDERS, INC. 600 HARVEY ROAD MANCHESTER, NH 03103-3320		CARENO CONSTRUCTION CO., LLC 270 WEST ROAD, SITE A PORTSMOUTH, NH 02801-7811	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

901	BUILDING #8 RENOVATION WORK	U	1,000	\$485,265.00	\$485,265.00	\$542,252.00	\$542,252.00	\$518,629.00	\$518,629.00
902	BUILDING #1 FLOOR & WINDOW REPLACEMENT	U	1,000	\$104,950.00	\$104,950.00	\$85,000.00	\$85,000.00	\$141,056.00	\$141,056.00
903	ALLOWANCE FOR MODIFICATIONS TO THE CONTRACT	\$	50,000,000	\$1.00	\$50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00
904	ALLOWANCE FOR ENERGY IMPROVEMENTS - OWNER INITIATED	\$	50,000,000	\$1.00	\$50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00

Totals: **\$690,215.00** **\$727,252.00** **\$759,685.00**

Item 901: \$485,265.
 Item 902: \$104,950.
 Item 903: \$50,000.
 Item 904: \$50,000.
 Total = \$690,215.

BUREAU OF PUBLIC WORKS
 Award to Chunter Bros. Const, LLC
 Hold for Negotiation
 Cancel Contract
 User Agency NHTRANS
 Authorized by [Signature]
 Date 04/28/2016

ABC Bid Data

BUILDING #8 RENOVATIONS AND BUILDING #1 FLOOR AND
 WINDOWS
 80835R Contract A
 NON-FEDERAL

Item No.	Description	Unit	Quantity	SMART ASSISTIVE TECHNOLOGIES OFFICE ROCHESTER, NH 03867		Total	Unit Price	Total	Unit Price	Total
				Unit Price	Total					
901	BUILDING #8 RENOVATION WORK	U	1,000	\$610,811.96	\$610,811.96					
902	BUILDING #1 FLOOR & WINDOW REPLACEMENT	U	1,000	\$88,174.05	\$88,174.05					
903	ALLOWANCE FOR MODIFICATIONS TO THE CONTRACT	\$	50,000,000	\$1.00	\$50,000.00					
904	ALLOWANCE FOR ENERGY IMPROVEMENTS - OWNER INITIATED	\$	50,000,000	\$1.00	\$50,000.00					
Totals:					\$799,986.01					



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/24/2016

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 Infantine Insurance P. O. Box 5125 Manchester NH 03108		CONTACT NAME: Julie Levesque, CPCU, CIC PHONE (A/C No. Ext): (800) 937-0704 E-MAIL ADDRESS: jlevesque@infantine.com FAX (A/C No): (603) 669-6831	
INSURED Charters Brothers Construction, LLC 27 Main Street Danville NH 03819		INSURER(S) AFFORDING COVERAGE INSURER A: Fireman's Ins. Co. of Washington INSURER B: Acadia Ins Co. INSURER C: INSURER D: INSURER E: INSURER F:	NAIC #

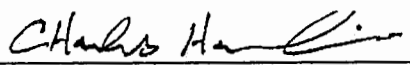
COVERAGES **CERTIFICATE NUMBER:** 16/17 Master **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:		CPA034384516	5/31/2016	5/31/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 250,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Limited Pollution Coverage \$ 200,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		CAA034384617	5/31/2016	5/31/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$		CUA034384716	5/31/2016	5/31/2017	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N N/A	WPA034384817 3A States: MA; ME; NH;	5/31/2016	5/31/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Leased/rented equipment		CPA034384516	5/31/2016	5/31/2017	Limit 50,000 Deductible 1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 RE: NHARNG Building #8 RENovations and Building #1 Floor and Windows, Project # 80835R Contract A. It is agreed and understood that The State of NH, Department of Administrative Services is included as Additional Insured with regards to General Liability when required by a written contract.

CERTIFICATE HOLDER**CANCELLATION**

The State of NH Department of Administrative Services PO Box 483 Concord, NH 03302	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Charles Hamlin/JL6 
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/9/2016

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 Infantine Insurance P. O. Box 5125 Manchester NH 03108		CONTACT NAME: Julie Levesque, CPCU, CIC PHONE (A/C, No, Ext): (800) 937-0704 E-MAIL ADDRESS: jlevesque@infantine.com FAX (A/C, No): (603) 669-6831	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Fireman's Ins. Co. of Washington	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	
INSURED The State of NH Dept of Administrative Services c/o Charters Brothers Construction, LLC 27 Main Street Danville NH 03819			

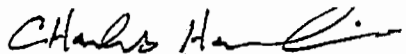
COVERAGES **CERTIFICATE NUMBER:** 16/17 NHARNG OCP **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY			OCP525803610	5/9/2016	5/9/2017	EACH OCCURRENCE	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
	<input checked="" type="checkbox"/> Owners & Contractors						MED EXP (Any one person)	\$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						GENERAL AGGREGATE	\$ 3,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	\$
							Owners Contractors Protective	\$ 2,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	EXCESS LIAB						AGGREGATE	\$
	DED							\$
	RETENTION \$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

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

RE: NHARNG Building #8 Renovations and Building #1 Floor and Windows, Project # 80835R Contract A.

CERTIFICATE HOLDER The State of NH Department of Administrative Services PO Box 483 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 Charles Hamlin/JL6 

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EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

5/31/2016

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

AGENCY Infantine Insurance P. O. Box 5125 Manchester NH 03108	PHONE (A/C, No, Ext): (800) 937-0704	COMPANY Fireman's Ins. Co. of Washington D.C. One Acadia Commons P.O. Box 9010 Westbrook ME 04098-5010
FAX (A/C, No): (603) 669-6831	E-MAIL ADDRESS: jlevesque@infantine.com	
CODE:	SUB CODE:	
AGENCY CUSTOMER ID #: 00325508	INSURED The State of NH Department of Administrative Services c/o Charters Brothers 27 Main Street Danville NH 03819	LOAN NUMBER POLICY NUMBER CIM5257987
	EFFECTIVE DATE 5/9/2016	EXPIRATION DATE 5/9/2017
	CONTINUED UNTIL TERMINATED IF CHECKED <input type="checkbox"/>	
THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION

LOCATION/DESCRIPTION Loc# 00001/Bldg# 00001 Austin Cate Buildings 8 & 1 Center Strafford, NH 03815

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Job Specific Builders Risk	690,215	
Job Specific Special form		1,000

REMARKS (Including Special Conditions)

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CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

The State of NH Department of Administrative Services PO Box 483 Concord, NH 03302-0483	<input type="checkbox"/> MORTGAGEE	<input type="checkbox"/> ADDITIONAL INSURED
	<input type="checkbox"/> LOSS PAYEE	
	LOAN #	
	AUTHORIZED REPRESENTATIVE	
	Charles Hamlin/JL6	