



LINDA M. HODGDON
Commissioner
(603) 271-3201

State of New Hampshire

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

25 *dm*

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

Bureau of Public Works
Design and Construction
Project No. 80699R – Contract A

August 12, 2013

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

REQUESTED ACTION

Authorize the Bureau of Public Works Design and Construction to enter into a contract with Hascall & Hall (VC# 219202) Portland, ME, for a total price not to exceed \$271,730, for State Buildings Masonry Repairs, Concord, N. H. This contract is effective upon Governor and Council approval through November 30, 2013, unless extended in accordance with the contract terms. **97% General – Operating Funds and 3% Transfer Funds.**

Funding is available in account titled Administrative Services – Bureau of Plant & Property Management as follows:

	<u>SFY14</u>
01-14-14-141510-29500000 General Services Maint & Grounds	
048-500226– Contractual Maint. Bldg. & Grounds	\$ 262,322
01-14-14-141510-29520000 DOT Buildings	
048-500226– Contractual Maint. Bldg. & Grounds	\$ <u>9,408</u>
Grand Total	\$ 271,730

EXPLANATION

This project includes the masonry repairs at seven (7) buildings located in the Concord area. The Buildings include the New Hampshire State House, State House Annex, State Library,

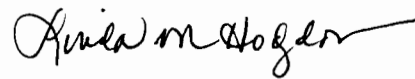
Her Excellency, Governor Margaret Wood Hassan
and the Honorable Council
August 12, 2013
Page 2 of 2

Supreme Court, Administrative Office of the Courts, the Records and Archives Building and the Department of Transportation – John O Morton Building.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and execution, and the Department of Administrative Services has certified that the necessary funds are available. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Services, Bureau 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,

A handwritten signature in black ink, appearing to read "Linda M. Hodgdon", with a long horizontal flourish extending to the right.

Linda M. Hodgdon
Commissioner

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80699R, Contract A – State Buildings
Masonry Repairs, Concord.

DESCRIPTION: This project includes the masonry repairs at seven (7) buildings located in the Concord area. The Buildings include the New Hampshire State House, State House Annex, State Library, Supreme Court, Administrative Office of the Courts, the Records and Archives Building and the Department of Transportation – John O Morton Building.

EXPLANATION: The exterior of these buildings are showing minor structural damage. These repairs are being completed to limit further damage.

OVER

ESTIMATE

EXPLANATION: During the bidding phase, it was discovered that the repair work to the rear stairway to the State Library required more labor and materials than was estimated or anticipated. In addition, the Department based its estimate on material prices from a project completed within the last two years, escalated for inflation. These prices were generally lower than the contractor's prices.

DEPARTMENT

ESTIMATE: \$200,000

LOW BID: \$271,730

STATE OF NEW HAMPSHIRE
DEPARTMENT OF ADMINISTRATIVE SERVICES
BIDS WERE OPENED ON THE 16TH DAY OF APRIL, 2013 FOR STATE BUILDINGS MASONRY REPAIRS, CONCORD, NH
PROJECT NO.: 80699R CONTRACT A

COMPLETION DATE: SEPTEMBER 27, 2013
NOVEMBER 30, 2013

ITEM NO.	ITEM	QUANTITIES	A.		B.		C.	
			UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
1	MASONRY REPAIRS AS SPECIFIED AT THE STATE HOUSE	1 UNIT	\$19,678.00	\$19,678.00	\$34,740.00	\$34,740.00	\$55,280.00	\$55,280.00
2	MASONRY REPAIRS AS SPECIFIED AT THE STATE HOUSE ANNEX	1 UNIT	\$63,781.00	\$63,781.00	\$74,645.00	\$74,645.00	\$74,844.00	\$74,844.00
3	MASONRY REPAIRS AS SPECIFIED AT THE STATE LIBRARY	1 UNIT	\$60,278.00	\$60,278.00	\$44,960.00	\$44,960.00	\$56,210.00	\$56,210.00
4	MASONRY REPAIRS AS SPECIFIED AT THE SUPREME COURT	1 UNIT	\$24,051.00	\$24,051.00	\$24,880.00	\$24,880.00	\$62,120.00	\$62,120.00
5	MASONRY REPAIRS AS SPECIFIED AT THE ADMINISTRATIVE OFFICE OF THE COURTS	1 UNIT	\$20,761.00	\$20,761.00	\$38,625.00	\$38,625.00	\$12,000.00	\$12,000.00
6	MASONRY REPAIRS AS SPECIFIED AT THE RECORDS & ARCHIVES BUILDING	1 UNIT	\$13,186.00	\$13,186.00	\$15,755.00	\$15,755.00	\$8,880.00	\$8,880.00
7	REPAIR GEORGE HAMILTON PERKINS STATUE	1 UNIT	\$10,587.00	\$10,587.00	\$18,490.00	\$18,490.00	\$16,000.00	\$16,000.00
8	MASONRY REPAIRS AS SPECIFIED AT THE NH DEPARTMENT OF TRANSPORTATION	1 UNIT	\$9,408.00	\$9,408.00	\$12,855.00	\$12,855.00	\$14,090.00	\$14,090.00
9	ALLOWANCE TO COVER UNFORESEEN FIELD CONDITIONS AS OUTLINED IN SECTION 01200-PRICE & PAYMENT	1 ALLOW- ANCE	\$50,000.00	\$50,000.00	\$50,000.00	\$50,000.00	\$50,000.00	\$50,000.00
BASE BID LUMP SUM FOR ITEMS 1 THROUGH 9				\$271,730.00	\$314,950.00	\$314,950.00	\$349,424.00	\$349,424.00

- A. HASCALL & HALL, 273 PRESUMPCOT STREET, PO BOX 1838, PORTLAND, ME 04104
B. KNOWLES INDUSTRIAL SERVICES CORPORATION, 295 NEW PORTLAND ROAD, GORHAM, ME 04038
C. E. GUIMOND CONSTRUCTION, LLC, 103 KNOX ROAD, BOW, NH 03304

BUREAU OF PUBLIC WORKS

X Award to A - Bidder
 Hold for Negotiation \$ 271,730.00
 Cancel Contract
 User Agency DAS - GS
 Authorized by E 7.2
 Date 7-18-13



July 3, 2013

RECEIVED

JUL 18 2013

Bureau of Public Works

Mr. H. Dana Abbott Contract Administrator
Department of Administrative Services
Bureau of Public Works Design & Construction
P.O. Box 483
Concord, New Hampshire 03302

RE: State Buildings Masonry Repairs
Bureau of Public Works Project Number 80699-R

Dear Mr. Abbott:

Per our telephone conversation today regarding the above-referenced project and the delay in getting the contracts, we would be looking for an extension of time to complete the project until November 30, 2013.

Please contact me with any questions or concerns.

We look forward to working with you on this project.

Sincerely,

A handwritten signature in black ink, appearing to read 'Robert L. Bergeron', with a stylized flourish at the end.

Robert L. Bergeron
President

RLB/kbb



RECEIVED

APR 22 2013

BUREAU OF PUBLIC WORKS

April 18, 2013

Mr. H. Dana Abbott, Contract Administrator
Department of Administrative Services
Bureau of Public Works Design & Construction
John O. Morton Building, Room 250
7 Hazen Drive
P.O. Box 483
Concord, New Hampshire 03302

RE: State Buildings Masonry Repairs
Bureau of Public Works Project Number 80699-R

Dear Mr. Abbott:

Per our telephone conversation today regarding the above-referenced project, we agree to hold our bid price of \$271,730.00 until July 1, 2013 to accommodate your new budget year, at which time we will be pleased to discuss the work schedule.

We look forward to working with you on this project.

Sincerely,

Robert L. Bergeron
President

RLB/kbb



CERTIFICATE OF LIABILITY INSURANCE

HASCHAL-01

SWING

DATE (MM/DD/YYYY)

7/23/2013

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 United Insurance - Falmouth 202 U.S. Route One Falmouth, ME 04105	CONTACT NAME: PHONE (A/C, No, Ext): (207) 781-3519 FAX (A/C, No): (207) 781-3907 E-MAIL: ADDRESS:
INSURED Hascall & Hall P.O. Box 1838 Portland, ME 04104	INSURER(S) AFFORDING COVERAGE INSURER A: Netherlands Insurance Co 24171 INSURER B: Peerless Insurance Co 24192 INSURER C: Maine Employers Mutual Insurance Co 11149 INSURER D: INSURER E: INSURER F:

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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR ☒ GL Extension Endorse GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PROJECT ☐ LOC	X	CBP8654835	4/27/2013	4/27/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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 CONTRACTUAL \$ 1,000,000
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS	X	BA8655338	4/27/2013	4/27/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$ \$
B	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$ 10,000	X	CU8652042	4/27/2013	4/27/2014	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	5101800066	1/1/2013	1/1/2014	☒ WC STATUTORY LIMITS ☐ 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)

The State of New Hampshire, its Agencies, its Agents and its employees are named Additional Insured except for Workers Compensation regarding work performed by the Named Insured regarding State Buildings Masonry Repairs Project No. 80699R - A as required by written agreement or contract. A 30 Day Cancellation Notice applies except for Non-Payment of Premium

CERTIFICATE HOLDER

CANCELLATION

New Hampshire Department of Administrative Services
7 Hazen Drive
Concord, NH 03302-0483

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

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CERTIFICATE OF LIABILITY INSURANCE

HASCHAL-01

SWING

DATE (MM/DD/YYYY)

8/12/2013

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
United Insurance - Falmouth
202 U.S. Route One
Falmouth, ME 04105

CONTACT NAME:

PHONE (A/C, No, Ext): (207) 781-3519

FAX (A/C, No): (207) 781-3907

E-MAIL

ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Peerless Insurance Co

24198

INSURED

State of New Hampshire
New Hampshire Department of Administrative Services
7 Hazen Drive
Concord, NH 03302

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

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	ADDITIONAL SUBROGATION WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY		GL8951480	8/5/2013	8/5/2014	EACH OCCURRENCE	\$ 2,000,000	
	☐ COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
	☐ CLAIMS-MADE ☒ OCCUR					MED EXP (Any one person)	\$	
	☒ Owners Contractors					PERSONAL & ADV INJURY	\$	
	☒ Protective Liability					GENERAL AGGREGATE	\$ 3,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMPI/OP AGG	\$	
	☐ POLICY ☒ PROJECT ☐ LOC						\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	☐ ANY AUTO						BODILY INJURY (Per person)	\$
	☐ ALL OWNED AUTOS	☐ SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
☐ HIRED AUTOS	☐ NON-OWNED AUTOS		PROPERTY DAMAGE (PER ACCIDENT)	\$				
					\$			
	UMBRELLA LIAB	☐ OCCUR				EACH OCCURRENCE	\$	
	EXCESS LIAB	☐ CLAIMS-MADE				AGGREGATE	\$	
	DED	RETENTION \$					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N				WC STATUTORY LIMITS	OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	☐ N/A				E.L. EACH ACCIDENT	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE	\$	
						E.L. DISEASE - POLICY LIMIT	\$	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
30 Notice of Cancellation applies except for Non-Payment of Premium

CERTIFICATE HOLDER

CANCELLATION

Hascall & Hall - Designated Contractor
P.O. Box 1838
Portland, ME 04104

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



SWING

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
8/13/2013

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 United Insurance - Falmouth 202 U.S. Route One Falmouth, ME 04105		PHONE (A/C, No, Ext): (207) 781-3519	COMPANY Peerless Insurance Co	
FAX (A/C, No): (207) 781-3907		E-MAIL ADDRESS:		
CODE:		SUB CODE:		
AGENCY CUSTOMER ID #: HASCHAL-01				
INSURED State of New Hampshire New Hampshire Department of Administrative Services 7 Hazen Drive Concord, NH 03302		LOAN NUMBER		POLICY NUMBER IM8951184
		EFFECTIVE DATE 8/5/2013	EXPIRATION DATE 11/5/2014	☐ CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION

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

REMARKS (Including Special Conditions)

Builders Risk - Limit \$271,730 - Special Coverage including
Theft of Building Material - Deductible \$1,000

The above coverage applies to Contract Concord 80699R-A

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

NAME AND ADDRESS State of New Hampshire New Hampshire Department of Administrative Services 7 Hazen Drive Concord, NH 03302	MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
	LOAN #	
AUTHORIZED REPRESENTATIVE <i>Sandra L. Wing</i>		