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# State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES  
 25 Capitol Street - Room 120  
 Concord, New Hampshire 03301  
Office@das.nh.gov

Charles M. Arlinghaus  
 Commissioner  
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Joseph B. Bouchard  
 Assistant Commissioner  
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 Deputy Commissioner  
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Division of Public Works  
 Design and Construction  
 Project No. 81110- Contract B

February 11, 2020

His Excellency, Governor Christopher T. Sununu  
 and the Honorable Council  
 State House  
 Concord, New Hampshire 03301

## REQUESTED ACTION

1). Authorize the Division of Public Works Design and Construction to enter into a **retroactive contract** with Paradigm Plumbing, Heating and Air Conditioning Inc (VC #25880), Hooksett, New Hampshire for a total price not to exceed \$200,000 for SYSC Water Heater Replacements, Manchester, New Hampshire. This contract is effective upon Governor and Council approval for the period of February 20, 2020 through April 6, 2020 unless extended in accordance with the contract terms. **100% General Funds.**

Funding is available in account titled DHHS Commissioners Office as follows:

01-95-95-950010-56850000 Management Support

103-502664 - Contracts for Ops/Serv

\$200,000

## EXPLANATION

This request is **retroactive** because work needed to start immediately at the Sununu Youth Services Center for boilers that have components that are corroded beyond acceptable levels. The boilers have become potential hazards and two out of four boilers have failed. In order to prevent any more boiler failures, the boilers need to be replaced so the facility can continue operating normally.

His Excellency, Governor Christopher T. Sununu  
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February 11, 2020  
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The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and execution; and the Department of Administrative Services has certified that the necessary funds are available. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Services, Division of Public Works Design and Construction.

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

Respectfully submitted,



Charles M. Arlinghaus,  
Commissioner

Department Estimate:	\$210,000
Contract Amount:	<u>\$200,000</u>
Under Estimate:	\$ 10,000

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 81110, Contract B – SYSC Water Heater Replacements

DESCRIPTION: Remove three existing boilers, three water tanks, and expansion tanks in "E" and "G" units at SYSC. Replace each with two high efficiency boilers, two high efficiency hot water heaters and two expansion tanks. Cutting and welding of ship ladders and handrails will be necessary to fit the equipment through the tight confines of the access route.

EXPLANATION: The Department of Labor has issued violation notices to the Sununu Youth Services Center for boilers that have features which are corroded beyond acceptable levels. The boilers have become potential hazards and two out of four boilers have failed. In order to prevent any more boiler failures, the boilers need to be replaced so the facility can continue operating as necessary. Because of the previous failures, this retroactive request allows the contractor to begin replacing the failing equipment immediately thereby reducing the impact to the 24-hour, 7-day per week facility.

UNDER ESTIMATE

EXPLANATION: The bid was within 5% of the estimate.

DEPARTMENT

ESTIMATE: \$210,000

LOW BID: \$200,000



# ABC Bid Data

MANCHESTER  
811108  
NON-FEDERAL

PROJECT: MANCHESTER  
STATE PROJECT NUMBER: 811108  
FED. PROJECT NUMBER: NON-FEDERAL  
DATE BIDS OPEN: January 29, 2020, 2:00 PM  
SCOPE OF WORK: SYSC WATER HEATER REPLACEMENTS  
COMPLETION DATE: March 05, 2020  
LOCATION: Hillsborough

Certified by: \_\_\_\_\_

## Summary of Bidders

Contractor	Bid Amount	Rank
PARADIGM PLUMBING HEATING & AIR CONDITIONING INC 8 INDUSTRIAL PARK DRIVE, HOOKSETT NH 03108	\$200,000.00	A
NORTHERN PEABODY LLC 25 DEPOT STREET, MANCHESTER NH 03101	\$213,000.00	B
GLOVER PLUMBING & HEATING SERVICES LLC 2035 FRANKLIN PIERCE HWY, BARRINGTON NH 03825	\$233,464.00	C

BUREAU OF PUBLIC WORKS

Award to Paradigm Plumbing + Heating + Air Conditioning, Inc

Hold for Negotiation

Cancel Contract

User Agency HHS

Authorized by [Signature]

Date 02032020

Item No.	Description	Unit	Quantity	PS&E		PARADIGM PLUMBING HEATING & AIR CONDITIONING INC 8 INDUSTRIAL PARK DRIVE HOOKSETT, NH 03106		NORTHERN PEABODY LLC 25 DEPOT STREET MANCHESTER, NH 03101	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

901	REMOVE AND REPLACE BOILER/WATER HEATER IN UNIT "E"	U	1.00	\$95,000.00	\$95,000.00	\$90,000.00	\$90,000.00	\$109,500.00	\$109,500.00
903	REMOVE AND REPLACE BOILER/WATER HEATER IN UNIT "G"	U	1.00	\$95,000.00	\$95,000.00	\$90,000.00	\$90,000.00	\$83,500.00	\$83,500.00
904	ALLOWANCE FOR UNFORESEEN CONDITIONS OR OWNER INITIATED CHANGES	\$	20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00
<b>Totals:</b>					<b>\$210,000.00</b>		<b>\$200,000.00</b>		<b>\$213,000.00</b>
<b>Alt. Totals:</b>									
<b>Totals:</b>					<b>\$210,000.00</b>		<b>\$200,000.00</b>		<b>\$213,000.00</b>

Item No.	Description	Unit	Quantity	PS&E		GLOVER PLUMBING & HEATING SERVICES LLC 2035 FRANKLIN PIERCE HWY BARRINGTON, NH 03825	
				Unit Price	Total	Unit Price	Total

Items

901	REMOVE AND REPLACE BOILER/WATER HEATER IN UNIT "E"	U	1.00	\$95,000.00	\$95,000.00	\$106,732.00	\$106,732.00
903	REMOVE AND REPLACE BOILER/WATER HEATER IN UNIT "G"	U	1.00	\$95,000.00	\$95,000.00	\$106,732.00	\$106,732.00
904	ALLOWANCE FOR UNFORESEEN CONDITIONS OR OWNER INITIATED CHANGES	\$	20,000.00	\$1.00	\$20,000.00	\$1.00	\$20,000.00

Totals:				\$210,000.00		\$233,464.00	
Alt. Totals:							
Totals:				\$210,000.00		\$233,464.00	

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/11/2020

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 have ADDITIONAL INSURED provisions or 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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services LLC 3 Executive Park Drive, Suite 300 Bedford, NH 03110 855 874-0123
CONTACT NAME:
PHONE (A/C, No, Ext): 855 874-0123 FAX (A/C, No):
E-MAIL ADDRESS:
INSURER(S) AFFORDING COVERAGE NAIC #
INSURER A : Patriot Insurance Company 32069
INSURER B : NH Employers Insurance Company 13083
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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL SUBR INSR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, Workers Compensation and Employers' Liability, and Employee Theft.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Additional Insured Status When Required By Contract, Agreement or Permit Per Form CG2033 attached to the policy.

RE: Manchester 81110B SYSC Water Heater Replacements. The State of New Hampshire, its agencies, and its agents and employees are named as Additional Insured with respect to the Commercial General Liability.

CERTIFICATE HOLDER: State of New Hampshire c/o Dept. of Administrative Services 7 Hazen Dr., Room 250 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: [Signature]

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)  
2/11/2020

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<b>PRODUCER</b> USI Insurance Services LLC 3 Executive Park Drive, Suite 300 Bedford, NH 03110 855 874-0123	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 855 874-0123		FAX (A/C, No):	
	<b>E-MAIL ADDRESS:</b>			
<b>INSURED</b> State of NH-Dept. of Admin Services c/o Paradgm Plumbing, Heating & A/C Inc. 8 Industrial Park Dr., Unit 12 Hooksett, NH 03106	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>	
	INSURER A : Mid-Continent Casualty Company		23418	
	INSURER B :			
	INSURER C :			
	INSURER D :			
	INSURER E :			

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

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INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> OCP GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		04OCP001004447	02/11/2020	02/11/2021	EACH OCCURRENCE            \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence)    \$ MED EXP (Any one person)    \$ PERSONAL & ADV INJURY        \$ GENERAL AGGREGATE            \$4,000,000 PRODUCTS - COMP/OP AGG      \$ COMBINED SINGLE LIMIT (Ea accident)    \$ BODILY INJURY (Per person)    \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident)    \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED                          RETENTION \$					EACH OCCURRENCE            \$ AGGREGATE                      \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below					PER STATUTE                  OTH-ER 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: Manchester 81110B-SYSC Water Heater Replacements.**

<b>CERTIFICATE HOLDER</b> State of New Hampshire Dept. of Administrative Services 7 Hazen Dr., Room 250 Concord, NH 03302	<b>CANCELLATION</b> 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>See Note</i>
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Client#: 538295

PARADPLU

**ACORD**

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)  
02/10/2020

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.

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<b>PRODUCER</b> USI Insurance Services LLC 3 Executive Park Drive, Suite 300 Bedford, NH 03110 855 874-0123	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 855 874-0123	FAX (A/C, No):
	<b>E-MAIL ADDRESS:</b>	
<b>INSURED</b> State of N.H. Dept. of Admin Services c/o Paradigm Plumbing, Heating & AC 8 Industrial Park Dr., Unit 12 Hooksett, NH 03106	<b>INSURER(S) AFFORDING COVERAGE</b>	
	INSURER A : Patriot Insurance Company	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
INSURER F :		NAIC # 32069

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INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WYD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED                    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Builders Risk/ Installation Floater			CPP6639471	02/07/2020	08/15/2020	Job Limit: \$200,000 Special Form Incl Theft

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**RE: Manchester 81110B-SYSC Water Heater Replacements. Waiver of Subrogation applies with regards to the Builders Risk/Installation Floater. All subcontractors are included as Insureds.**

<b>CERTIFICATE HOLDER</b>  State of New Hampshire c/o Dept. of Administrative Services 7 Hazen Dr., Room 250 Concord, NH 03302	<b>CANCELLATION</b>  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>See Note</i>
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