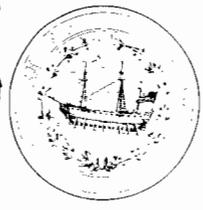


86 [Signature]



State of New Hampshire

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

LINDA M. HODGDON
Commissioner
(603) 271-3201

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

Bureau of Public Works
Design and Construction
Project No. 80631 – Contract C

December 24, 2012

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

REQUESTED ACTION

- 1). Authorize the Bureau of Public Works Design and Construction to enter into a contract with TPD Construction (VC# 229652) Sanford, ME, for a total price not to exceed \$3,131,900, for the Anna Philbrook Center Renovations, Hugh J. Gallen State Office Park, Concord, N. H. This contract is effective upon Governor and Council approval through October 4, 2013 unless extended in accordance with the contract terms. **100% Capital Funds.**
- 2). Further authorize that a contingency in the amount of \$123,051 be approved for unforeseen hazardous materials abatement and supplemental climate control work, if required, for the Anna Philbrook Center Renovations, bringing the total to \$3,254,951. **100% Capital Funds.**
- 3). Further authorize the amount of \$40,380 be approved for payment to the Department of Administrative Services, Bureau of Public Works Design and Construction (VC# 177875), for engineering services provided, bringing the total to \$3,295,331. **100% Capital Funds.**
- 4). Pursuant to RSA 19-A:9, II, further authorize the transfer of \$17,875 to the State Art Fund, within the Department of Cultural Resources. This transfer is for the purchase of art for the Anna Philbrook Center Renovations, Hugh J. Gallen State Office Park, Concord, NH. bringing the total to \$3,313,206. **100% Capital Funds.**

Funding is available in account titled Facilities & Asset Management as follows:

01-14-14-149010-09400000	Philbrook Center	<u>SFY13</u>
	034-500162 – Contract Repairs/Bldgs. & Grounds	\$2,965,069
	034-500162 - Contingency	123,051
	034-500162 - Transfer to Cultural Resources	17,875
	034-500152 – BPW Capital Clerk Fees	40,380

01-14-14-140030-09440000 Department of Admin. Services – Energy Improvements	
034 - 500162 - Contract Repairs/Bldgs. & Grounds	\$ 75,000
01-14-14-920030-04100000 State Office Park South	
034-500162 – Contract Repairs/Bldgs. & Grounds	<u>\$ 91,831</u>
Grand Total	\$3,313,206

EXPLANATION

Per Chapter 253:1, II, B, 7 Laws of 2011, for the Philbrook Center Renovation. Per Chapter 259:1, VII, C State Office Park South – Electrical System Upgrade Laws of 2005, as extended by 264:29, LIV Laws of 2007, as extended by 145:19, 48 Laws of 2009, as extended by 253:28, 68 Laws of 2011. Per Chapter 253:1, II D, 2, Laws of 2011, D, 2 for Statewide Energy Efficiency Improvements. Work of the Project includes Renovations and Upgrades to the Anna Philbrook Center to include architectural, HVAC, electrical fire alarm and parking lot upgrades required for change of use from residential to business office at the Anna Philbrook Center on South Fruit Street of the Governor Hugh J. Gallen State Office Park.

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,



Linda M. Hodgdon
Commissioner

Department Estimate:	\$3,100,000
Contract Amount:	<u>\$3,131,900</u>
Over Estimate:	\$ 31,900

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80631, Contract C – Anna Philbrook Center Renovations, Governor Hugh J. Gallen State Office Park, Concord

DESCRIPTION: Renovations and upgrades to the Anna Philbrook Center to include electrical/fire alarm and parking lot upgrades required for change of use from residential to business office at the Anna Philbrook Center on South Fruit Street of the Governor Hugh J. Gallen State Office Park.

EXPLANATION: The existing building was a residential facility comprised of three connected wings constructed at different dates. The building is being renovated for use as State offices. The change in use, the building's age and construction type requires a significant renovation to meet current codes and standards.

OVER ESTIMATE EXPLANATION: The Bureau estimated the entire project (base plus alternates 1 through 4) to be \$3,100,000. The consultant's cost estimate was \$3,988,595, which the Bureau believed was too conservative. Therefore, as a safety measure, the Bureau re-structured the bid to include a base bid and 5 alternates to ensure that core work in the base bid would be within the budget. The bidding climate was more competitive than the consultant's cost estimator expected and the resulting low bid (including 4 of 5 alternates) was \$3,131,900, which is within 1% of the Bureau's estimate. The alternate that was not taken involved supplemental heating for days when temperatures are below the required design temperature.

BID ALTERNATE ADDS

EXPLANATION: Based on the availability of funds Alternate 1, 2, 3 and 4 were awarded. Alternate 5 was not awarded.

ALT 1 add – Wing A tenant fit-ups; including *architectural, mechanical, and electrical renovations*

ALT 2 add – Roofing replacement Wings B and C.

ALT 3 add – Roofing replacement at Wing A.

ALT 4 add – Perimeter wall insulation; including *Insulation, metal stud and gypsum board.*

ALT 5 add – Hot water supply/return piping and fin tube radiation at wings A (partial), B and C.

DEPARTMENT
ESTIMATE: \$ 3,100,000

LOW BID
WITH ALTS: \$3,131,900

ITEM NO.	ITEM	QUANTITIES	UNIT	TOTAL	UNIT	TOTAL	UNIT	TOTAL
1	UNIT AMOUNT FOR ALL WORK OF THE ANNA PHILBROOK CENTER RENOVATIONS	1 UNIT	\$2,086,000.00	\$2,086,000.00	\$2,250,000.00	\$2,250,000.00	\$2,261,230.00	\$2,261,230.00
2	ALLOWANCE NO. 1; ADDITIONAL WORK DUE TO UNFORESEEN CONDITIONS	1 ALLOWANCE	\$150,000.00	\$150,000.00	\$150,000.00	\$150,000.00	\$150,000.00	\$150,000.00
3	ALLOWANCE NO. 2; EXTERIOR SIGNAGE	1 ALLOWANCE	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00	\$2,500.00
4	ALLOWANCE NO. 3; TREE LIMB REMOVAL	1 ALLOWANCE	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00
5	ALLOWANCE NO. 4; MATERIAL TESTING	1 ALLOWANCE	\$3,000.00	\$3,000.00	\$3,000.00	\$3,000.00	\$3,000.00	\$3,000.00
6	ALLOWANCE NO. 5; FIRE SUPPRESSION SYSTEM	1 ALLOWANCE	\$120,000.00	\$120,000.00	\$120,000.00	\$120,000.00	\$120,000.00	\$120,000.00
BASE BID LUMP SUM FOR ITEMS 1 THROUGH 6				\$2,363,500.00		\$2,527,500.00		\$2,538,730.00

- ALTERNATE NO. 1 ADD: \$504,000.00 ✓
- ALTERNATE NO. 2 ADD: \$56,400.00 ✓
- ALTERNATE NO. 3 ADD: \$70,000.00 ✓
- ALTERNATE NO. 4 ADD: \$138,000.00 ✓
- ALTERNATE NO. 5 ADD: \$324,000.00

- A. TPD CONSTRUCTION COMPANY, 1725 MAIN STREET, SUITE 1A, SANFORD, ME 04073
- B. HARVEY CONSTRUCTION, 10 HARVEY ROAD, BEDFORD, NH 03110
- C. D. L. KING & ASSOCIATES, INC., 27 TANGLEWOOD DRIVE, NASHUA, NH 03062
- D. NORTH BRANCH CONSTRUCTION, INC., 76 OLD TURNPIKE ROAD, CONCORD, NH 03301
- E. SEAVER CONSTRUCTION, INC., 215 LEXINGTON STREET, WOBURN, MA 01801
- F. TURNSTONE CORPORATION, 51 FRANKLIN STREET, MILFORD, NH 03055
- G. DANIEL HEBERT, INC., 12 PLEASANT STREET, COLEBROOK, NH 03576
- H. J. C. N. CONSTRUCTION CO., INC., 155 DOW STREET, SUITE 301, MANCHESTER, NH 03101
- I. T. BUCK CONSTRUCTION, INC., 249 MERROW ROAD, AUBURN, ME 04210

BUREAU OF PUBLIC WORKS

Award to A - Bidder
 Hold for Negotiation Base Bid plus Alt #1 through Alt #4
 Cancel Contract \$ 3,131,900.00
 User Agency DAS
 Authorized by [Signature]
 Date 11-26-12



CERTIFICATE OF LIABILITY INSURANCE

OP ID: DC

DATE (MM/DD/YYYY)

01/02/13

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 Spence & Mathews Ins Agency PO Box 715 - 4 Sullivan Sq Berwick, ME 03901 Donald Campbell	207-698-1210	CONTACT NAME:	
	207-698-4324	PHONE (A/C, No, Ext):	FAX (A/C, No):
		E-MAIL ADDRESS:	
		PRODUCER CUSTOMER ID #:	TPDCO-1
		INSURER(S) AFFORDING COVERAGE	
INSURED	TPD Construction CO.,Inc. PO Box V Sanford, ME 04073	INSURER A :	Peerless Ins/Liberty Mutual Gr 18333
		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	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY						EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	CCP9288962	01/01/13	01/01/14	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						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
GEN'L AGGREGATE LIMIT APPLIES PER:								
<input checked="" type="checkbox"/>	POLICY	<input type="checkbox"/>	PRO-JECT	<input type="checkbox"/>	LOC			
A	AUTOMOBILE LIABILITY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	BA92829063	01/01/13	01/01/14	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS							\$
<input checked="" type="checkbox"/> NON-OWNED AUTOS							\$	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB	<input type="checkbox"/>	<input type="checkbox"/>				EACH OCCURRENCE	\$ 10,000,000
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/>	<input type="checkbox"/>				AGGREGATE	\$ 10,000,000
	<input checked="" type="checkbox"/> DEDUCTIBLE			CU9284463	01/01/13	01/01/14		\$
	RETENTION \$ 10,000							\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC8871377	11/01/12	11/01/13	WC STATUTORY LIMITS	<input checked="" type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>	N/A				E L EACH ACCIDENT	\$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E L DISEASE - EA EMPLOYEE	\$ 500,000
							E L DISEASE - POLICY LIMIT	\$ 500,000
A	Peeless			IM 8184427	08/01/11	08/01/12	Leased	100,000
							Rented EQ	

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

Renovations to a 32,000 SF building, Anna Philbrick Center Renovations, located in Concord NH. All parties will be given 30 days notice of any cancellations, alteration, or material change in coverage.

CERTIFICATE HOLDER

CANCELLATION

NH Department/ Administrative Services- Contract Office
Room 130,7 Hazen Drive
Concord, NH 03320

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
Donald Campbell

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INSURANCE BINDER

OP ID: LN

DATE (MM/DD/YYYY)
01/02/2013**THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.**

AGENCY Spence & Mathews Ins Agency PO Box 715 - 4 Sullivan Sq Berwick, ME 03901 Donald Campbell		COMPANY Acadia Insurance		BINDER # 25873	
PHONE (A/C, No, Ext): 207-698-1210 CODE: 1700		FAX (A/C, No): 207-698-4324 SUB CODE:		THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY # CIM5076858	
AGENCY CUSTOMER ID: TPDCO-1		DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (Including Location) Anna Philbook Center, 129 Fruit Street, Concord NH.			
INSURED NH Deptment of Administative Services -Contract Office Room 130,7 Hazen Drive Concord NH 03320					

COVERAGES**LIMITS**

TYPE OF INSURANCE	CAUSES OF LOSS	COVERAGE/FORMS	DEDUCTIBLE	COINS %	AMOUNT
<input type="checkbox"/> PROPERTY	<input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPEC	All Risk Builders Risk	1000		3,131,900
<input type="checkbox"/> GENERAL LIABILITY	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				
<input type="checkbox"/> AUTOMOBILE LIABILITY	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				
<input type="checkbox"/> AUTO PHYSICAL DAMAGE	<input type="checkbox"/> COLLISION: <input type="checkbox"/> OTHER THAN COL:	<input type="checkbox"/> ALL VEHICLES <input type="checkbox"/> SCHEDULED VEHICLES			
<input type="checkbox"/> GARAGE LIABILITY	<input type="checkbox"/> ANY AUTO				
<input type="checkbox"/> EXCESS LIABILITY	<input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				
<input type="checkbox"/> WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY					
<input type="checkbox"/> SPECIAL CONDITIONS/ OTHER COVERAGES					

NAME & ADDRESS

TPD Construction Co.,Inc. PO BOX V Sanford ME 04073	<input type="checkbox"/> MORTGAGEE <input checked="" type="checkbox"/> LOSS PAYEE	<input type="checkbox"/> ADDITIONAL INSURED
	LOAN # _____	
AUTHORIZED REPRESENTATIVE Donald Campbell		

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

01/02/13

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PRODUCER Spence & Mathews Ins Agency PO Box 715 - 4 Sullivan Sq Berwick, ME 03901 Donald Campbell	207-698-1210 207-698-4324	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS:	FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED NH Department of Administrative Services-Contract Office Room 130,7 Hazen Drive Concord, NH 03320	INSURER A : Peerless Insurance		18333
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

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

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INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> 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						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 <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB OCCUR 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	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> N/A				WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Owner Contractors Protective Liab.			GL53721759	11/26/12	11/26/13	Per Occur 2,000,000 Aggregate 3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Renovation to a 32,000 SF building, Anna Philbrook Center Renovations located in Concord, NH. All parties will be given 30 days notice of any cancellation, alteration, or material change in coverage.

CERTIFICATE HOLDER**CANCELLATION**

TPD Construction CO., Inc.
 PO Box V
 Sanford, ME 04073

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
 Donald Campbell