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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  
(603) 271-3201

Joseph B. Bouchard  
Assistant Commissioner  
(603) 271-3204

Catherine A. Keane  
Deputy Commissioner  
(603) 271-2059

Division of Public Works  
Design and Construction  
Project No. 81050R - Contract B

August 26, 2019

His Excellency, Governor Christopher T. Sununu  
and the Honorable Executive 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 T. Buck Construction, Inc. (VC# 156635) Turner, Maine, for a total price not to exceed \$1,462,172, for a New Hampshire Army National Guard AASF Paint Booth and Renovations, located in Concord, NH. This contract is effective upon Governor and Council approval through July 31, 2020 unless extended in accordance with the contract terms. **100% Federal Funds.**

2). Further authorize that a contingency in the amount of \$80,000 be approved for unanticipated expense for the AASF Paint Booth and Renovations, bringing the total to \$1,542,172. **100% Federal Funds.**

3). Further authorize the amount of \$40,000 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 \$1,582,172. **100% Federal Funds.**

Funding is available in account titled Adjutant General as follows:

02-12-12-120010-22450000	Army Guard Facilities	<u>SFY20</u>
103-500736	- Contract Repairs/Bldgs. & Grounds	\$1,462,172
103-500736	- Contingency	<u>\$ 80,000</u>
	<b>Sub -Total</b>	<b>\$1,542,172</b>

02-12-120010-22550000 Inter-Agency Payments 217-502682- DPW Fees Interagency	\$ <u>40,000</u>
<b>Grand Total</b>	<b>\$1,582,172</b>

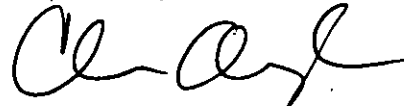
**EXPLANATION**

This work of this project includes replacement of the AASF paint booth with a larger unit, and associated components. The work also includes retro commissioning modifications, hangar floor coating, updating electrical panel directories and changes to the wash water handling system.

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 execution; 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,



Charles M. Arlinghaus  
Commissioner

Department Estimate:	\$ 810,000
Negotiated Amount:	<u>\$1,582,172</u>
Over Estimate:	\$ 772,172



ABC Bid Data

CONCORD  
81050RB  
NON-FEDERAL

PROJECT: CONCORD  
STATE PROJECT NUMBER: 81050RB  
FED. PROJECT NUMBER: NON-FEDERAL  
DATE BIDS OPEN: July 17, 2019, 02:00 PM  
SCOPE OF WORK: ASF PAINT BOOTH AND RENOVATIONS  
COMPLETION DATE: July 31, 2020  
LOCATION: Merrimack

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

Summary of Bidders

Contractor	Bid Amount	Rank
BUCK, T. CONSTRUCTION, INC. 302B AUBURN ROAD, TURNER ME 04282	\$1,462,172.00	A
MARK CARRIER CONSTRUCTION INC SUITE 101, 175 LINCOLN STREET, MANCHESTER NH 03103-5031	\$1,463,900.00	B

Item 901 = \$435,000.-  
 902 = \$533,172.-  
 903 = \$355,000.-  
 904 = \$59,000.-  
 905 = \$80,000.-  
 Total = \$1,462,172.-

BUREAU OF PUBLIC WORKS  
 Award to T. Buck Construction, Inc.  
 Hold for Negotiation  
 Cancel Contract  
 User Agency Adj Gen Office  
 Authorized by [Signature]  
 Date 08/06/2019

Item No.	Description	Unit	Quantity	PS&E		BUCK, T. CONSTRUCTION, INC. 302B AUBURN ROAD TURNER, ME 04282		MARK CARRIER CONSTRUCTION INC SUITE 101 MANCHESTER, NH 03103-5031	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

901	RETROCOMMISSIONING	U	1.00	\$275,000.00	\$275,000.00	\$435,000.00	\$435,000.00	\$340,300.00	\$340,300.00
902	REPLACE PAINT SPRAY BOOTH	U	1.00	\$300,000.00	\$300,000.00	\$533,172.00	\$533,172.00	\$625,900.00	\$625,900.00
903	WASH WATER SYSTEM MODIFICATIONS	U	1.00	\$50,000.00	\$50,000.00	\$355,000.00	\$355,000.00	\$397,300.00	\$397,300.00
904	ELECTRICAL PANEL DIRECTORY UPDATING	U	1.00	\$105,000.00	\$105,000.00	\$59,000.00	\$59,000.00	\$20,400.00	\$20,400.00
905	ALLOWANCE #1 UNFORESEEN CONDITIONS AND OWNER INITIATED CHANGES	\$	80,000.00	\$1.00	\$80,000.00	\$1.00	\$80,000.00	\$1.00	\$80,000.00
<b>Totals:</b>					<b>\$810,000.00</b>		<b>\$1,462,172.00</b>		<b>\$1,463,900.00</b>

**ADD ALTERNATE 81050RA**

<b>ADD ALTERNATE #1</b>									
991	ADD ALTERNATE 1 ADD COST FOR HANGAR FLOOR COATING	U	1.00	\$360,000.00	\$360,000.00	\$120,000.00	\$120,000.00	\$98,794.00	\$98,794.00

<b>Alt. Totals:</b>									
<b>Totals:</b>					<b>\$810,000.00</b>		<b>\$1,462,172.00</b>		<b>\$1,463,900.00</b>

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 81050R, Contract B – AASF Paint Booth and Renovations.

DESCRIPTION: The work of this project includes replacement of the AASF paint booth with a larger unit, and associated components. The work also includes retrocommissioning modifications, hangar floor coating, updating electrical panel directories, and changes to the wash water handling system.

EXPLANATION: A larger paint booth is necessary in order to accommodate Black Hawk helicopter rotor blades. Retro commissioning will address system deficiencies uncovered from previous retro commissioning work, and remedy other building operational concerns. Wash water system changes are required for storage and disposal means of wash water, and to address pump and filter deterioration. The original hangar floor is wearing out and requires re-coating.

OVER ESTIMATE

EXPLANATION: There were a total of two bidders, though a total six (6) general contractors attended the pre-bid walk-throughs and pulled plans and specifications. The two bids submitted were less than \$2,000 apart. It would appear that because of the scope of work, and the fact that this was bid by general contractors, this negatively affected the estimates that were prepared by DPW.

DEPARTMENT

ESTIMATE: \$810,000  
LOW BID: \$1,462,172

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).

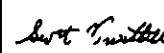
<b>PRODUCER</b> USI Insurance Services, LLC 75 John Roberts Road, Building C South Portland, ME 04106 855 874-0123	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 855 874-0123		FAX (A/C, No): 877-775-0110
	<b>E-MAIL ADDRESS:</b>		
<b>INSURED</b> T.Buck Construction Inc. 302B Auburn Road Turner, ME 04282	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	INSURER A : Citizens Insurance Company of America		31534
	INSURER B : Hanover Insurance Company		22292
	INSURER C : Maine Employers Mutual Ins Co		11149
	INSURER D : Allmerica Financial Benefit Ins. Co.		41840
	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	<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 type="checkbox"/> LOC OTHER:		ZBPA887416	03/31/2019	03/31/2020	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
D	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		AWPA887475	03/31/2019	03/31/2020	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 \$0		UHPA887417	03/31/2019	03/31/2020	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 PROD-COMP/OP AGG \$10,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	5101800485	04/01/2019	04/01/2020	<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

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**\*\* Workers Comp Information \*\***  
**Proprietors/Partners/Executive Officers/Members Excluded:**  
 Terry Buck, Owner  
  
**RE: Project #81050RB: AASF Paint Booth and Renovations, 26 Regional Drive, Concord, NH 03301**  
 (See Attached Descriptions)

<b>CERTIFICATE HOLDER</b>  State of New Hampshire c/o Department of Administrative Services 7 Hazen Drive, 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 
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## DESCRIPTIONS (Continued from Page 1)

The General Liability, Automobile Liability and Umbrella Liability Policies include an automatic Additional Insured endorsement that provides Additional Insured status to State of New Hampshire, its agencies, its agents and employees c/o Department of Administrative Services, only when there is a written contract or written agreement between the named insured and the certificate holder and with regard to work performed on behalf of the named insured. The General Liability, Automobile Liability, Umbrella Liability and Workers Compensation Policies provide a Blanket Waiver of Subrogation in favor of the same, when required by written contract.

The Umbrella policy follows form over General Liability, Auto Liability and employers Liability including products and completed operations aggregate.

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<b>PRODUCER</b> USI Insurance Services, LLC 75 John Roberts Road, Building C South Portland, ME 04106 855 874-0123	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 855 874-0123      FAX (A/C, No): 877-775-0110	
	<b>E-MAIL ADDRESS:</b> _____	
<b>INSURED</b> State of New Hampshire Department of Administrative Services c/o T Buck Construction Inc. 302B Auburn Road Turner, ME 04282	<b>INSURER(S) AFFORDING COVERAGE</b> <b>NAIC #</b>	
	INSURER A : Hanover Insurance Company      22292	
	INSURER B : _____	
	INSURER C : _____	
	INSURER D : _____	
INSURER E : _____		
INSURER F : _____		

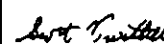
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INSR LTR	TYPE OF INSURANCE	ADDLSUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <hr/> GEN'L AGGREGATE LIMIT APPLIES 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 \$ \$
	<b>AUTOMOBILE LIABILITY</b> <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) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	<b>Owner/Contractor Liability</b>		LPH016072	09/01/2019	09/01/2020	\$2,000,000 per occurrence \$3,000,000 aggregate

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**RE: Project #81050RB: AASF Paint Booth and Renovations, 26 Regional Drive, Concord, NH 03301**

Insurer waives any rights of recovery it may have against contractors, subcontractors or others employed when it is required by written contract.

<b>CERTIFICATE HOLDER</b> State of New Hampshire c/o Department of Administrative Services 7 Hazen Drive, 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 
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	<b>E-MAIL ADDRESS:</b>		
		<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>
		INSURER A : Hanover Insurance Company	22292
<b>INSURED</b> T Buck Construction, Inc. State of NH Department of Administrative Services and all subs on this project 302B Auburn Road Turner, ME 04282	<b>INSURER B :</b>		
	<b>INSURER C :</b>		
	<b>INSURER D :</b>		
	<b>INSURER E :</b>		
	<b>INSURER F :</b>		

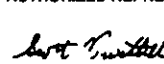
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	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory In NH) 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	<b>Builders Risk</b>		IHPH022912	09/01/2019	07/31/2020	\$1,462,172/\$1,000 Ded.

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