



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. 80633 – Contract B

February 26, 2016

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

Sole Source/Retroactive

REQUESTED ACTION

Authorize the Division of Public Works Design and Construction to enter into a **sole source retroactive** amendment of Contract #7001041-1/2 with D. L. King and Associates (VC# 168979) Nashua, NH, originally approved by Governor and Council on August 14, 2013, item #11, to extend the end date from October 31, 2014 to December 16, 2016 with a corresponding increase in the contract price by increasing the base contract amount by \$382,000 from \$972,890 to \$1,354,890, for the State House Dome Repairs. Retroactive effective from November 1, 2014 through December 16, 2016, upon Governor and Council approval. **100% Capital - General Funds.**

Funding is available in account titled Department of Administrative Services as follows:

| | | |
|--------------------------|-------------------------------------|--------------|
| 01-14-14-140030-09470000 | Capital Dome Repair | <u>SFY16</u> |
| 034-500162 | – Contract Repairs/Bldgs. & Grounds | \$ 70 |
| 01-14-14-140030-12540000 | Capital Dome Repair | |
| 034-500162 | – Contract Repairs/Bldgs. & Grounds | \$ 1,250 |
| 01-14-14-140030-49760000 | Capital Dome Repair | |
| 034-500162 | – Contract Repairs/Bldgs. & Grounds | \$ 283,680 |

01-14-14-146030-09430000 Emergency Funds

034-500162 – Repair/Renovations Bldgs. \$ 97,000

Grand Total **\$ 382,000**

EXPLANATION

Per Chapter 253:1, II, D, 5, Laws of 2011, as extended by Chapter 195:47, 17, Laws of 2013 for the State House Dome Repairs; further extended by Chapter 220:23, 21, Laws of 2015. Chapter 195:1, II, B, 4, for the State House Dome Repairs, as extended by Chapter 220:23, 10, Laws of 2015 for the State House Dome. Chapter 220:1, II, B, 9, Laws of 2015, for the State House Dome Repairs, and Chapter 253:1, II, D, 1, as extended by Chapter 220:23, 20, Laws of 2015 for Emergency Repairs – all facilities. This request is noted as **sole source** because the amount is more than 10% of the original contract and **retroactive** because the original Dome and Lantern repair project, which was to be completed in August, 2014, was delayed by unforeseen structural limitations and the period of time it took to design and construct a new platform. This new platform is permanent and will support the scaffolding needed to complete the Dome and Lantern repair work. The Dome and Lantern repair project is to be completed in a one-year period. The parapet millwork was bid as part of the platform project and it is included in this contract at the same price. This will allow all the wood restoration to be completed by the same contractor to ensure consistency with the work. The additional wood work on the platform is a condition of the State Historic Preservation approval of the platform construction.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the New Hampshire Department of Justice 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.

Respectfully submitted,



Vicki V. Quiram
Commissioner

CONTRACT SUPPLEMENTAL INFORMATION SHEET

- PROJECT: DPW Project #80633, Contract B – State of New Hampshire State House Dome Repairs, 107 North Main Street, Concord New Hampshire.
(DL King & Associates, General Contractor's Increase).
- DESCRIPTION: This project is part of the ongoing renovations and repairs to the Capital Dome and Base Lantern. The Dome and Lantern repairs were put on hold until a design and construction was complete to support scaffolding for this renovation. A new structural platform surrounds the Dome and will remain permanently in place to fully support scaffolding loads of the current and future repair projects.
- EXPLANATION: During the construction phase of the Dome/Lantern repairs project, it was determined that the existing roof structure could not support the scaffolding required to complete this work. The result was the design and construction of a platform, which provides a flat working surface and support for the scaffolding needed for repairs to the Dome and Lantern. While the new platform was designed, bid and constructed, the work on the dome stopped completely. In addition, there has been further deterioration to the existing dome surface and materials over the 20 month idle period, adding to the cost of the project. The main goal of the Dome and Lantern Repair project was to be complete in a one-year construction period, with work starting in the spring and being completed in the fall.

**CONTRACT
AMENDMENT
EXPLANATION: \$382,000**

Originally, the Dome and Lantern repair project was to be completed in August, 2014. The project was delayed by unforeseen structural limitations and the period of time it took to design and construct a new platform. This new platform is permanent and will support the scaffolding needed to complete the Dome / Lantern repair work. The Dome and Lantern repair project is to be completed in a one-year period.

The delay in the construction schedule for the Dome / Lantern repair project has resulted in a cost increase for material and labor. While D.L. King has maintained the original sub-contractors for this work, their costs have increased. For example, the gold leaf in storage for the re-gliding has expired and can no longer be used. This will be recycled and new gold leaf will be purchased for this project.

The parapet millwork that was bid as part of the previous platform work as Alternate No1 is being incorporated into this project at the same price. This will allow all the detailed wood restoration work to be completed by the same contractor. The parapet detail work is a condition of the State Historic Preservation approval of the platform construction.

The increase of the project due to the 20 month delay reflects in the escalation cost of work and material as follows:

| | |
|-----------------------------------------------------------------------------------|------------|
| Evergreene Architectural Arts Labor escalation- | \$10,050 |
| Glabe Engineering- new Guy Wire Design and coordinate with new platform structure | - \$38,750 |
| Seacoast Scaffolding escalate material, labor, transportation, Guy wire material | - \$19,975 |

| | |
|-------------------------------------------------------|------------------|
| Caprioli Painting escalation of labor and material | \$4,524 |
| Dennison Woodworking escalation of labor and material | \$3,602 |
| DL King escalation of cost | \$35,660 |
| Add carpet protection at upper floor | \$3,500 |
| Credit for work not required due to new Platform | (\$5,418) |
| Sub- Total | \$110,643 |
| Bond 2.5 % | <u>\$2,489</u> |
| Sub-total | \$113,132 |
| DL King's mark up 10% | <u>\$11,313</u> |
| Change Order #7 | \$124,445 |

The parapet millwork Alternate No1., design from Contract C, Platform Construction, OH/P included \$158,000

| | |
|----------------------------|------------------|
| Bond 2.5% | <u>\$2,555</u> |
| Change Order #8 | \$160,555 |
| DL King Total | \$285,000 |
| Allowance | <u>\$ 97,000</u> |
| Grand total Request | \$382,000 |

Allowance for \$97,000 will be utilized for any unforeseen deteriorated millwork, additional crane time and building security for weekend work if required. In addition this will supplement the existing allowances used to purchase new gold leaf with a credit for recycled material. The net cost was \$88,666 for new gold leaf released for purchase in early February, delivery will be in 2 months.



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
2/3/2016

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 THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511 | | PHONE (A/C. No. Ext): (603) 224-2562 | | COMPANY Liberty Mutual Ins Co (Peerless) 62 Maple Ave Keene NH 03431 | |
| FAX (A/C. No.): (603) 224-8012 CODE: 8110236 | | E-MAIL ADDRESS: ehorner@rowleyagency.com | | LOAN NUMBER | |
| AGENCY CUSTOMER ID #: 00007629 | | SUB CODE: | | POLICY NUMBER IM8955963 | |
| INSURED D.L. King & Associates, Inc., State of NH Dept of Administrative Svcs. 27 Tanglewood Drive Nashua NH 03062 | | EFFECTIVE DATE 7/16/2014 | | EXPIRATION DATE 1/16/2017 | |
| | | | | <input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED | |
| THIS REPLACES PRIOR EVIDENCE DATED: | | | | | |

PROPERTY INFORMATION

| |
|----------------------------------------------------------------------------------------------------------------------------|
| LOCATION/DESCRIPTION Loc# 00001/Bldg# 00001 State House, 107 N. Main St. Concord, NH 03301 Job #80633-B |
|----------------------------------------------------------------------------------------------------------------------------|

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 with Renovations | 991,000 | 1,000 |
| Temporary Location Limit | 495,500 | 1,000 |
| Transit Limit | 495,500 | 1,000 |

REMARKS (Including Special Conditions)

| |
|-------------------------------------------------------------------|
| NAMED INSURED INCLUDES: Any & All Subcontractors ATIMA |
|-------------------------------------------------------------------|

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

| | | |
|---------------------------|------------|---------------------------|
| Insured | MORTGAGEE | ADDITIONAL INSURED |
| | LOSS PAYEE | |
| LOAN # | | |
| AUTHORIZED REPRESENTATIVE | | |
| Renee Skillings/RLS | | <i>Renee L. Skillings</i> |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/25/2016

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 THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511 | | CONTACT NAME: Renee Skillings PHONE (A/C No. Ext): (603) 224-2562 FAX (A/C. No): (603) 224-8012 E-MAIL ADDRESS: rskillings@rowleyagency.com | |
| INSURED D.L. King & Associates, Inc. 27 Tanglewood Drive Nashua NH 03062 | | INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Arbella Protection Ins Co 41360 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F: | |

COVERAGES **CERTIFICATE NUMBER:** 15-16 All Lines **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 | <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"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | 8500062916 | 9/3/2015 | 9/3/2016 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" 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 | | | 1020032951 | 9/3/2015 | 9/3/2016 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 | | | 4600062918 | 9/3/2015 | 9/3/2016 | EACH OCCURRENCE \$ 6,000,000 AGGREGATE \$ 6,000,000 |
| 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 | N/A | 9126050915 3A States: NH Excluded Officers: Donna & Arthur King, Jr. | 9/3/2015 | 9/3/2016 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER 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 | | | 8500062916 | 9/3/2015 | 9/3/2016 | LIMIT: 30,000 DEDUCTIBLE: 500 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project #80633B; State House Dome Repair, 107 N. Main St., Concord, NH

| | |
|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CERTIFICATE HOLDER enelson@bondexins.com BONDEX Program Managers P.O. Box 6 Florham Park, NJ 07932 | 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 Renee Skillings/RLS <i>Renee L. Skillings</i> |
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EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
2/25/2016

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|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| AGENCY THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511 | | PHONE (A/C, No, Ext): (603) 224-2562 | COMPANY Liberty Mutual Ins Co (Peerless) 62 Maple Ave Keene NH 03431 | |
| FAX (A/C, No): (603) 224-8012 | E-MAIL ADDRESS: ehorner@rowleyagency.com | | | |
| CODE: 8110236 | SUB CODE: | | | |
| AGENCY CUSTOMER ID #: 00007629 | | | | |
| INSURED D.L. King & Associates, Inc., State of NH Dept of Administrative Svcs. 27 Tanglewood Drive Nashua NH 03062 | | LOAN NUMBER | POLICY NUMBER IM8955963 | |
| | | EFFECTIVE DATE 7/16/2014 | EXPIRATION DATE 1/16/2017 | <input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED |
| THIS REPLACES PRIOR EVIDENCE DATED: | | | | |

PROPERTY INFORMATION

LOCATION/DESCRIPTION
Loc# 00001/Bldg# 00001
State House, 107 N. Main St.
Concord, NH 03301
Job #80633-B

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COVERAGE INFORMATION

| COVERAGE / PERILS / FORMS | AMOUNT OF INSURANCE | DEDUCTIBLE |
|---------------------------------------------|---------------------|------------|
| Job Specific Builders Risk with Renovations | 1,354,890 | 1,000 |
| Temporary Location Limit | 250,000 | 1,000 |
| Transit Limit | 250,000 | 1,000 |

REMARKS (Including Special Conditions)

NAMED INSURED INCLUDES: Any & All Subcontractors ATIMA

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

| | | |
|---------------------------|------------|---------------------------|
| Insured | MORTGAGEE | ADDITIONAL INSURED |
| | LOSS PAYEE | |
| LOAN # | | |
| AUTHORIZED REPRESENTATIVE | | |
| Renee Skillings/RLS | | <i>Renee L. Skillings</i> |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/25/2016

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| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| PRODUCER THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511 | CONTACT NAME: Renee Skillings PHONE (A/C No. Ext): (603) 224-2562 FAX (A/C No.): (603) 224-8012 E-MAIL ADDRESS: rskillings@rowleyagency.com | |
| | INSURER(S) AFFORDING COVERAGE INSURER A: Colony Insurance Co. | NAIC # |
| INSURED State of NH Dept of Admin Svc (OWNER) D.L. King & Associates, Inc. (CONTRACTOR) 27 Tanglewood Drive Nashua NH 03062 | INSURER B: INSURER C: INSURER D: INSURER E: INSURER F: | |

COVERAGES **CERTIFICATE NUMBER:** 14-17 OCP #80633B **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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owners & Contractors GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | 103GL000513300 | 7/16/2014 | 1/16/2017 | EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ \$ |
| | 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 | | | | | | 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 | | | N/A | | | 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: State House Dome Repair/renovations repair and gold leaf. Project #80633B

| | |
|------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CERTIFICATE HOLDER Insured | 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 Renee Skillings/RLS <i>Renee L. Skillings</i> |

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/25/2016

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| | | |
|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| PRODUCER THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511 | CONTACT NAME: Renee Skillings PHONE (A/C, No. Ext): (603) 224-2562 E-MAIL ADDRESS: rskillings@rowleyagency.com | FAX (A/C, No): (603) 224-8012 |
| | INSURER(S) AFFORDING COVERAGE | |
| INSURED D.L. King & Associates, Inc. 27 Tanglewood Drive Nashua NH 03062 | INSURER A: Arbella Protection Ins Co NAIC # 41360 | |
| | INSURER B: | |
| | INSURER C: | |
| | INSURER D: | |
| | INSURER E: | |
| | INSURER F: | |

COVERAGES **CERTIFICATE NUMBER:** 15-16 All Lines **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 | <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"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | X | | 8500062916 | 9/3/2015 | 9/3/2016 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 |
| A | <input checked="" 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 | | | 1020032951 | 9/3/2015 | 9/3/2016 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| A | <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 \$ 10,000 | | | 4600062918 | 9/3/2015 | 9/3/2016 | EACH OCCURRENCE \$ 6,000,000 AGGREGATE \$ 6,000,000 |
| 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/A | 9126050915 3A States: NH Excluded Officers: Donna & Arthur King, Jr. | 9/3/2015 | 9/3/2016 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER 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 | | | 8500062916 | 9/3/2015 | 9/3/2016 | LIMIT: 30,000 DEDUCTIBLE: 500 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project #80633B; State House Dome Repair, 107 N. Main St., Concord, NH.
It is agreed and understood The State of NH Department of Administrative Services is included as additional insured with regard to general liability when required by written contract.

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CERTIFICATE HOLDER (603) 271-6758 mdrouin@dot.state.nh.us State of New Hampshire Department of Administrative Services 7 Hazen Drive PO Box 483 Concord, NH 03301 | 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 Renee Skillings/RLS <i>Renee L. Skillings</i> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

2/3/2016

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 THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511 | | PHONE (A/C, No, Ext): (603) 224-2562 | | COMPANY Liberty Mutual Ins Co (Peerless) 62 Maple Ave Keene NH 03431 | |
| FAX (A/C, No): (603) 224-8012 | | E-MAIL ADDRESS: ehorner@rowleyagency.com | | | |
| CODE: 8110236 | | SUB CODE: | | | |
| AGENCY CUSTOMER ID #: 00007629 | | LOAN NUMBER | | POLICY NUMBER IM8955963 | |
| INSURED D.L. King & Associates, Inc., State of NH Dept of Administrative Svcs. 27 Tanglewood Drive Nashua NH 03062 | | EFFECTIVE DATE 7/16/2014 | | EXPIRATION DATE 1/16/2017 | |
| | | | | <input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED | |
| THIS REPLACES PRIOR EVIDENCE DATED: | | | | | |

PROPERTY INFORMATION

| |
|----------------------------------------------------------------------------------------------------------------------------|
| LOCATION/DESCRIPTION Loc# 00001/Bldg# 00001 State House, 107 N. Main St. Concord, NH 03301 Job #80633-B |
|----------------------------------------------------------------------------------------------------------------------------|

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 with Renovations | 991,000 | 1,000 |
| Temporary Location Limit | 495,500 | 1,000 |
| Transit Limit | 495,500 | 1,000 |

REMARKS (Including Special Conditions)

| |
|---------------------------------------------------------------|
| NAMED INSURED INCLUDES: Any & All Subcontractors ATIMA |
|---------------------------------------------------------------|

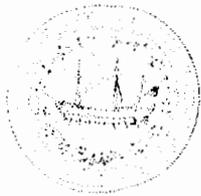
CANCELLATION

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

| | | | | |
|----------------------------------------------------------------------------|--------------------------|------------|--------------------------|--------------------|
| Insured | <input type="checkbox"/> | MORTGAGEE | <input type="checkbox"/> | ADDITIONAL INSURED |
| | <input type="checkbox"/> | LOSS PAYEE | | |
| LOAN # | | | | |
| AUTHORIZED REPRESENTATIVE Renee Skillings/RLS <i>Renee L. Skillings</i> | | | | |

BPW



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. 80633 - Contract B

July 19, 2013

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

8/14/2013

REQUESTED ACTION

1). Authorize the Bureau of Public Works Design and Construction to enter into a contract with D. L. King, Associates, Inc. (VC# 168979) Nashua, NH, for a total price not to exceed \$972,890, for the State House Dome Repairs, Concord, NH. This contract is effective upon Governor and Council approval through October 31, 2014, unless extended in accordance with the contract terms. **100% Capital - General Funds.**

2). Further authorize pursuant to Chapter 195:12, Laws of 2013, the amount of \$57,650 be approved for payment to the Department of Administrative Services, Bureau of Public Works Design and Construction (VC# 177875), for Capital Clerk oversight services provided, bringing the total to \$1,030,540. **100% Capital - General Funds.**

Funding is available in account titled Department of Administrative Services as follows:

| | |
|------------------------------------------------|---------------|
| 01-14-14-140030-09470000 Capital Dome Repair | <u>SFY14</u> |
| 034-500162 - Contract Repairs/Blgds. & Grounds | \$ 548,795 |
| 034-500162 - Interagency Fees (Capital Clerk) | <u>57,650</u> |
| Sub-Total | \$ 606,445 |

01-14-14-140030-12540000 Capital Dome Repair

034-500162 – Contract Repairs/Bldgs. & Grounds \$ 424,095

Grand Total \$ 1,030,540

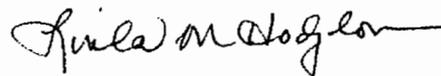
EXPLANATION

Per Chapter 253:1, II, D, 5, Laws of 2011, as extended by Chapter 195:47 Laws of 2013 for the State House Dome Repairs and Chapter 195:1, II, B, 4. This project includes repair and repainting of the exterior white base of the State House dome and white lantern (cupola) structure above the dome; funding was secured in the previous budget cycle (2012/2013) for this work. Also included are repairs to and re-gilding of the dome roof, lantern roof, and ball and eagle; funding was secured in the current budget cycle (2014/2015) for this work.

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: \$1,251,888
Contract Amount: \$ 972,890
Under Estimate: \$ 278,998

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80633, Contract B – State House Dome Repairs, Concord, N.H.

DESCRIPTION: This project includes repair and repainting of the exterior white base of the State House dome and white lantern (cupola) structure above the dome – funding was secured in the previous budget cycle (2012/2013) for this work. Also included are repairs to and re-gilding of the dome roof, lantern roof, and ball and eagle – funding was secured in the current budget cycle (2014/2015) for this work.

EXPLANATION: The existing white dome base and lantern (cupola) above the dome are in need of repairs, refurbishment, and new paint. There are a number of areas where the existing wood trim has deteriorated and needs to be replaced. Window glazing putty is deteriorated and needs to be replaced and metal railings are wired together in places and are in need of repairs and repainting.

Portions of the dome and lantern roofs and ball and eagle are showing excessive wear. There are locations where the primer and coatings below the gold leaf are exposed. The existing gold leafing and substrates have deteriorated in some locations to the point that the copper roofing is exposed. The copper substrate below the gilding is discolored in places. In some areas where the gold leaf remains, it is abraded and scratched.

UNDER ESTIMATE

EXPLANATION: The department estimate assumed that the gilding project might be performed separately from (at a different time) than the painting project. There is a significant savings in staging costs by combining the projects. Approximately seventy (70%) percent of the difference in the cost estimate is related to staging costs and the low bidder's construction schedule. In addition,

a requirement for weekend work for a portion of the work was omitted during bidding, which results in a lower bid amount in comparison to the department estimate.

The project architect indicates, that the uniqueness of project type, level of difficulty in a historic renovation/restoration project, and limited amount of existing construction detail documentation, a very conservative direction was taken in developing the estimate. The architect notes that the area of gilding was estimated due to limited available documentation and that the price of gold/gold leaf was very volatile, fluctuating daily; therefore, additional cost factors were included in the estimate.

BID ALTERNATE
ADDS/DEDUCTS

EXPLANATION: Bid Alternates No's 1 and 2 were omitted during bidding (requirement for weekend work for a portion of work). Bid Alternate No. 3 Deduct was not taken, as there was sufficient funding for the project. The alternate was to remove a portion of the work related to painting and repairs.

DEPARTMENT
ESTIMATE: \$1,251,888
LOW BID: \$ 972,890