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

CHARLES M. ARLINGHAUS
Commissioner
(603)-271-3201

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

Division of Public Works
Design and Construction
Project No. 80929R – Contract X

November 21, 2017

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

Retroactive

REQUESTED ACTION

Authorize the Division of Public Works Design and Construction to enter into a **retroactive** contract with Northern Peabody, LLC (VC# 158436) Manchester, NH, for a total price not to exceed \$280,400, for the additional Steam Conversion Temporary Boilers at the Department of Justice Buildings and the State Office Park South, Concord, NH. This contract is effective November 27, 2017 through February 1, 2019, unless extended in accordance with the contract terms. **100% General - Capital Funds.**

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

		<u>SFY18</u>
01-14-14-146030-24170000	Emergency Repairs	
	034-500162 - Repair/Renovations Bldgs.	<u>\$280,400</u>

EXPLANATION

The reason for the this **retroactive** request is that a notice to proceed was issued upon receipt of the signed contract in order to maintain space temperatures during the winter months, while permanent boiler solutions are being completed. Per Chapter 220:1, II, A, 1, Laws of 2015 for Emergency Repairs, the project will complete the installation of one (1) temporary boiler at the Department of Justice Building (DOJ), and certain repairs to the installation of a total of three (3) existing temporary boilers, one (1) at DOJ and two (2) at Hugh H. Gallen State Office Park South (SOPS).

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and substance, 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:	\$395,000
Contract Amount:	<u>\$280,400</u>
Under Estimate:	\$114,600

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: DPW Project No. 80929, Contract X – Steam Conversion - Temporary Boilers Additional Construction Department of Justice and State Office Park South, Concord, New Hampshire.

DESCRIPTION: Scope of the project includes work to complete the installation of one (1) temporary boiler at DOJ, and certain repairs to the installation of a total of three (3) existing temporary boilers (one) at DOJ and two at Hugh H. Gallen Office Park South (SOPS).

EXPLANATION: With the closing of Concord Steam, there are a total of twenty-six (26) State Buildings that will require heating system installations in order to maintain space temperatures during the winter months. This project will complete the installation of the temporary boilers to provide heat while the permanent boiler solutions are being completed.

UNDER ESTIMATE

EXPLANATION: The original bid was approximately 29 percent under the construction estimate. The original estimate included a preheat system boiler water for the DOJ site, since this system does not return condensate. It was decided that the system design should maintain space temperatures, so this work can wait until such time that it is determined that this is additional work may be required.

DEPARTMENT

ESTIMATE: \$395,000
LOW BID: \$280,400



ABC Bid Data

CONCORD
SUBSEX
NON-FEDERAL

Division of Public Works

PROJECT: CONCORD
STATE PROJECT NUMBER: 8029X
NON-FEDERAL
DATE BIDDING BEGAN: November 15, 2017, 02:00 PM
SCOPE OF WORK: STEAM CONVERSION - TEMPORARY BOILERS ADDITIONAL CONSTRUCTION DO3 & SOPS
COMPLETION DATE: February 01, 2019
LOCATION: Merrimack

Certified by: _____

Summary of Bidders

Contractor	Bid Amount	Rank
NORTHERN PEABODY LLC 25 DEPOT STREET, PO BOX 569, MANCHESTER NH 03105	\$280,400.00	A
RTH MECHANICAL CONTRACTORS INC 99 PINE ROAD, BRENTWOOD NH 03833-6510	\$357,916.00	B

901: \$210,400.-
 902: 70,000.-

 \$280,400.-

BUREAU OF PUBLIC WORKS
 Award to Northern Peabody, LLC
 Hold for Negotiation
 Cancel Contract
 User Agency: NH DAS
 Authorized by: _____
 Date: 11/16/2017



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/28/2017

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. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511 INSURED Northern Peabody, LLC PO Box 569 Manchester NH 03105		CONTACT NAME: Danielle Rice PHONE (A/C, No, Ext): (603) 224-2562 E-MAIL ADDRESS: drice@rowleyagency.com FAX (A/C, No): (603) 224-8012	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: The Netherlands Ins. Co.	
		INSURER B: Peerless Insurance Co.	
		INSURER C: Continental Insurance Co	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** ST of NH w/UB AGG **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 INSP WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
X	COMMERCIAL GENERAL LIABILITY					
A	CLAIMS-MADE X OCCUR		CBP 8411212	4/8/2017	4/8/2018	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/OPAGG \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER						
	POLICY X PRO-JECT					
	LOC					
	OTHER					
B	X ANY AUTO ALL OWNED AUTOS		BA8417465	4/8/2017	4/8/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
	X HIRED AUTOS	X SCHEDULED AUTOS NON-OWNED AUTOS				
C	X UMBRELLA LIAB	OCCUR				EACH OCCURRENCE \$ 1,000,000
	EXCESS LIAB	CLAIMS-MADE				AGGREGATE \$ 1,000,000
	DED X RETENTION \$ 10,000		L5086004445	4/8/2017	4/8/2018	PROD/COMP OPS - AGG \$ 1,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	WC8975490			X PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N N/A	3A STATES: NH, MA, VT, CT & ME	4/8/2017	4/8/2018	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
D	Leased & Rented Equipment		IM 8904136	4/8/2017	4/8/2018	Limit \$250,000
	Installation Floater					Limit \$250,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 CONCORD 80929X, STEAM CONVERSION, TEMPORARY BOILERS ADDITIONAL CONSTRUCTION DOJ & SOPS State of New Hampshire is an additional insured on all liability policies except workers compensation, when required by written contract.

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services 25 Capitol Street 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 Sarah Fifield/SEF <i>Sarah Fifield</i>
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/17/2017

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(les) 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 rights to the certificate holder in lieu of such endorsement(s).

PRODUCER THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Danielle Rice PHONE (A/C No, Ext): (603)224-2562 E-MAIL ADDRESS: drice@rowleyagency.com	FAX (A/C, No): (603)224-8012
	INSURER(S) AFFORDING COVERAGE	
INSURED State of New Hampshire Department of Administrative Services 25 Capitol Street Concord NH 03301	INSURER A: Liberty Mutual Ins Co (Peerless)	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

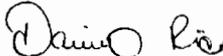
COVERAGES **CERTIFICATE NUMBER:** 17-18 OCP State of NH **REVISION NUMBER:**

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 Protective Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			OCP11202017	11/20/2017	11/20/2018	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"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <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) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> 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)

CONCORD 80929X, STEAM CONVERSION, TEMPORARY BOILERS ADDITIONAL CONSTRUCTION DOJ & SOPS

CERTIFICATE HOLDER State of New Hampshire Department of Administrative Services, Inc. 25 Capitol Street 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 

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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

11/17/2017

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Danielle Rice PHONE (A/C, No, Ext): (603) 224-2562 FAX (A/C, No): (603) 224-8012 E-MAIL ADDRESS: drice@rowleyagency.com PRODUCER CUSTOMER ID: 00004293														
INSURED Northern Peabody, LLC; State of NH Department of Administrative Services, Inc.; Any & All Subs. PO Box 569 Manchester NH 03105	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Liberty Mutual Ins Co (Peerless)</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Liberty Mutual Ins Co (Peerless)		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Liberty Mutual Ins Co (Peerless)															
INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES **CERTIFICATE NUMBER:** 17-18 BR State of NH **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 105 Pleasant Street & 33 Capitol Street

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS	
A	<input checked="" type="checkbox"/> PROPERTY	BMO 58419084	11/20/2017	11/20/2018	BUILDING	\$	
	CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
	BASIC				BUILDING	BUSINESS INCOME	\$
	BROAD				CONTENTS	EXTRA EXPENSE	\$
	SPECIAL					RENTAL VALUE	\$
	<input checked="" type="checkbox"/> EARTHQUAKE				25,000	BLANKET BUILDING	\$
	WIND					BLANKET PERS PROP	\$
	<input checked="" type="checkbox"/> FLOOD				25,000	BLANKET BLDG & PP	\$
<input checked="" type="checkbox"/> Builders Risk	1,000	<input checked="" type="checkbox"/> Builders Risk	\$	280,400			
					\$		
	INLAND MARINE	TYPE OF POLICY			\$		
	CAUSES OF LOSS				\$		
	NAMED PERILS	POLICY NUMBER			\$		
					\$		
	CRIME				\$		
	TYPE OF POLICY				\$		
					\$		
	BOILER & MACHINERY / EQUIPMENT BREAKDOWN				\$		
					\$		
					\$		
					\$		

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CONCORD 80929X, STEAM CONVERSION, TEMPORARY BOILERS ADDITIONAL CONSTRUCTION DOJ & SOPS

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire
 Department of Administrative Services, In
 25 Capitol Street
 Concord, NH 03302

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

Danielle Rice/DJR