



# State of New Hampshire 9 AM11:42 DAS

#### 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

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

Division of Public Works Design and Construction Project No. 80998, Contract C

January 16, 2019

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

#### **REQUESTED ACTION**

- 1). Authorize the Division of Public Works Design and Construction to enter into a contract with VHV Company, Inc. (VC# 280796) Winooski, VT, for a total price not to exceed \$154,266, for the HVAC Replacement and Repairs Rebid at Monadnock Mills, Claremont, NH. This contract is effective upon Governor and Council approval through August 30, 2019, unless extended in accordance with the contract terms. 96% Capital General Funds, 3% Other Funds, 1% General Operating Funds.
- 2). Further authorize the amount of \$5,500 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 \$159,766. 100% General Operating Funds.

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

	_	<u> FY19</u>
01-14-149030-15050000 Claremont HVAC 034-500162 – Repair/Renovations Bldgs.	\$	148,750
01-14-14-149010-21670000 Old Mill #1		
048-500226 – Contractual Maint. – Bldg. & Grounds	\$	516
048-500226 – DPW Fees Interagency	\$	5,500
Sub-Total	\$	6,016

His Excellency, Governor Christopher T. Sununu and the Honorable Council
January 16, 2019
Page 2 of 2

01-14-14-149010-29500000 General Service Maint. & Grounds 048-500226 – Contractual Maint. – Bldg. & Grounds \$ 5,000

**Grand Total** 

\$159,766

#### **EXPLANATION**

Per Chapter 228:1, II, B, 6, Laws of 2017, for the Claremont HVAC Replacements and Repairs. This project will remove existing boiler and pump and replace with one new boiler and pump. The current boiler is of the 1980's vintage and needs to be replaced because it is at its end of life

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and execution, and the Department of Administrative Services has certified that the necessary funds are available. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Services, Division of Public Works Design and Construction.

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

Respectfully submitted,

Charles M. Arlinghaus

Commissioner

Department Estimate: \$145,000 Contract Amount: \$154,266

Over Estimate: \$ 9,266

## CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT:

DPW Project No. 80998, Contract C - Rebid HVAC

Replacement and Repairs at Monadnock Mills,

Claremont, New Hampshire

DESCRIPTION:

Remove existing boiler and pump and replacing with

one new boiler and pump.

EXPLANATION:

The boiler is 1980's vintage and needs to be replaced

because it is at its end of life.

**OVER ESTIMATE** 

EXPLANATION: Travel time to Claremont might have raised the price.

**DEPARTMENT** 

**ESTIMATE:** 

\$145,000

LOW BID:

\$154,266

#### **ABC Bid Data**



Revised 10/16/18

CLAREMONT ROSSINC: NON-FEDERAL

Rank

PROJECT: STATE PROJECT NUMBER: FED. PROJECT NUMBER: DATE BIDS OPEN: SCOPE OF WORK:

COMPLETION DATE:

LOCATION:

CLAREMONT 80998C

MON-FEDERAL September 26, 2018, 02:00 PM REBID HWAC REPLACEMENT AND REPAIRS

August 30, 2019 Sulfhen

25 DEPOT STREET, MANCHESTER NH 03101

Certified by:

Summary of Bidders

**Bid Amount** Contractor \$154,266.00 VHV COMPANY, INC. 16 Tigan Street, WINOOSKI VT 05404 В \$188,750,00 RTH MECHANICAL CONTRACTORS INC 99 PINE ROAD, BRENTWOOD NH 03833-6510 C \$230,343,00 NORTHERN PEABODY LLC

I tem 902: \$149,266.

I tem 902: \$5,000.

BUREAU OF PUBLIC WORKS Award to VHV Com Hold for New Wation Cancel Cuntract **User Agency** Authorized by

				PS&E		VHV COM 16 Tigan Winooski, 1	Street	RTH MECHANICAL CONTRACTORS INC 99 PINE ROAD BRENTWOOD, NH 03833-6510		
Item No.	Description	Unit	Quantity	Unit Price	Unit Price Total		Total	Unit Price	Total	
Items 901	REMOVE AND REPLACE BOILER AND PUMP	υ	1.00	\$140,000.00	\$140,000.00	\$149,268.00	\$149,265.00	\$181,750.00	\$181,750.00	
	ALLOWANCE NO 1 OWNERS CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS	\$	5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	\$1.00	\$5,000.00	
<u>-</u>			Totals:		\$145,000.00		\$154,268.00	9188,750.00		
			Alt. Totals:							
			Totals:		\$145,000.00		\$154,268.00	\$188,750.00		

				P	3&E	NORTHERN PEABODY LLC 25 DEPOT STREET MANCHESTER, NH 03101		
item No. Items	Description	Unit	Quantity	Unit Price	Total	Unit Price	Total	
901	REMOVE AND REPLACE BOILER AND PUMP	U	1.00	\$140,000,00	\$140,000.00	\$225 343 00	\$225,343.0	
902	ALLOWANCE NO 1 OWNERS CHANGES FOR UNKNOWN, LATENT OR DIFFERING EXISTING CONDITIONS	\$	5,000.00	\$1.00			<del></del>	
			Totals:		\$145,000.00		\$230,343.0	
			Alt. Totals: Totals:		\$145,000.00		\$230,343.00	

**BBIANCHI** 



# **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 1/9/2019

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

this certificate does not confer rights to the certificate holds	r in lieu of such end	lorsement(s)	•							
PRODUCER	CONTAC NAME:	CT Brice Bia	anchi							
Hickok & Boardman, Inc. 346 Shelburne Rd	PHONE (A/C, No									
Burlington, VT 05401		ADDRESS, bbianchi@hbinsurance.com								
		INSURER(8) AFFORDING COVERAGE								
	INSURE	INSURER A: West American Insurance Company								
INSURED	INSURE	INSURER B : The Netherlands Ins Co 24171								
VHV Company	INSURE	INSURER C: Ohio Casualty Ins Co 24074								
16 Tigan Street, Suite A	INSURE	RD: Americ	an Fire and	Casualty Cor	npany		24066			
Wincoski, VT 05404	INSURE	INSURER E:								
•	INSURE	INSURER F:								
COVERAGES CERTIFICATE NUMBER:		'		REVISION NUM						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LIS INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSUREXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN	OR CONDITION OF A RANCE AFFORDED BY	NY CONTRA 7 THE POLIC REDUCED BY	CT OR OTHER IES DESCRIB PAID CLAIMS.	DOCUMENT WIT	TH RESPE	CT TO	WHICH THIS			
INSR TYPE OF INSURANCE INSD WYD PO	LICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	8				
A . X 2 COMMERCIAL GENERAL LIABILITY				EACH OCCURREN		\$ -	1,000,000			
3 ) STIP DIM CLAMS MADE X OCCUR X BKW(19) 59	<b>)</b> 10 59 78	4/14/2018	4/14/2019	DAMAGE TO RENT PREMISES (Ea occ	ntteuce)	\$	500,000			
X Contractual Llab.				MED EXP (Any one	penson)	\$	15,000			
X Per Terms & Cond.				PERSONAL & ADV	INJURY	\$	1,000,000			
GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREC	SATE	\$	2,000,000			
POLICY X JECT LOC				PRODUCTS - COM	P/OP AGG	\$	2,000,000			
OTHER:				COMBINED SINGLE	I IMIT	\$	1,000,000			
- B AUTOMOBILE LIABILITY	-			(Ea accident)	_ Carean	\$	1,000,000			
X ANY AUTO BA8311351	ı	4/14/2018	4/14/2019	BODILY INJURY (Po		\$				
AUTOS ONLY AUTOS				BODILY INJURY (PO	er accident)	\$	<del></del>			
HIRED AUTOS ONLY AUTOS ONLY UTOS ONLY 1,000				PROPERTY DAMAG (Per accident) MedPayPerPer		\$	1,000			
		i				\$	5,000,000			
C X UMBRELLA LIAB X OCCUR USO584791	124	4/14/2018	4/14/2019	EACH OCCURREN	CE	\$	5,000,000			
EXCESS LIAB.			77.7720.0	AGGREGATE Comp Ops Ag	<del></del>	<u>\$</u>	5,000,000			
- D. manusina anumusia Pou				X PER STATUTE	OTH- ER	\$	-,,,,,,,,			
[AND EMPLOYERS' LIABILITY	124	4/14/2018	4/14/2019				1,000,000			
ANY PROPRIETO PARTNER EXECUTIVE N N/A (Mandatoy in NH):			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	E.L. EACH ACCIDE		<u> </u>	1,000,000			
If yes, describe under IDESCRIPTION OF OPERATIONS below				E.L. DISEASE - EA			1,000,000			
DESCRIPTION OF OPERATIONS below				E.L. DISEASE - POI	LICY LIMIT	<u> </u>				
.   • .							. '			
DESCRIPTION OF OPERATIONS // OCATIONS / VEHICLES /ACORD 464 Additions	il Remarks Schedule, may h	a attached if mo	i re anace la recuir	ed)						
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 181, Additional States included under Workers' Compensation Section 3.A- CT, D	E, ME, MA, NH, NY, a	nd VT.		,						
RE: Monadnock Mills Boller Replacement   Claremont, NH										
				. 40 04%	00 44 45	46.40.	, ·			
Additional Insured status under the General Liability Policy as pe	r terms and condition	is of attached	i forms: CG 8	8 10 04/13 & CG	86 11 10/	16 (GL	-)			
30 days' notice of cancelation under the General Liability, Busine attached forms: CG 89 70 04/13 (GL), 17 490 10/10 (BA), WC 99 20	ss Auto, Workers Cor	mpensation a	nd Umbrella	Policy as per ter	ms and c	onditio	ons of			
attached forms: CG 89 70 04/13 (GL), 17 490 10/10 (BA), WC 99 20	75 12/16 (WC), CU 89	07 06/12 (UA	AB)							
CÉRTIFICATE HOLDER	CANO	CELLATION	-							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										
				ESCRIBED POLIC						
State of New Hampshire		THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
c/o Department of Administrative Services		``.								
7 Hazen Drive, Room 250 Concord, NH 03302	AUTHO	AUTHORIZED REPRESENTATIVE								
	نير	Ac At Real								
<b>:</b>	V	No H Boardman								

BBIANCHI

ACORD'

### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/3/2019

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 rights to the certificate holder in lieu of such endorsement(s). CONTACT Brice Bianchi Hickok & Boardman, Inc. PHONE (A/C, No, Ext): (802) 383-1607 FAX (AC, No): (802) 658-0541 346 Shelburne Rd Burlington, VT 05401 LODRESS bblanchi@hbinsurance.com INSURER(S) AFFORDING COVERAGE NAIC # 24074 INSURER A: Ohio Casualty Ins Co INSURED INSURER B : State of New Hampshire INSURER C c/o Department of Administrative Services INSURER D: 7 Hazen Drive, Room 250 Concord, NH 03302 INSURER E : INSURER F : REVISION NUMBER COVERAGES CERTIFICATE 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. POLICY EFF POLICY EXP ADDL SUBR LIMITS **POLICY NUMBER** TYPE OF INSURANCE 2,000,000 COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE
DAMAGE TO RENTED
PREMISES (Ea occurrence) CLAIMS-MADE X OCCUR 59432953BLO1Q1 1/3/2019 1/3/2020 OCP X MED EXP (Any one person) PERSONAL & ADV INJURY GEN'L AGGREGATE LIMIT APPLIES PER: **GENERAL AGGREGATE** 3,000,000 PRO: POLICY PRODUCTS - COMP/OP AGG LOC OTHER: COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY ANY AUTO BODILY INJURY (Per person) OWNED AUTOS ONLY SCHEDULED AUTOS BODILY INJURY (Per accident) PROPERTY DAMAGE (Per scoklent) HIRED AUTOS ONLY NON-OWNED AUTOS ONLY UMBRELLA LIAB OCCUR EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE AGGREGATE DED RETENTION \$ PER STATUTE\_ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mendatory in NH) E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 161, Additional Remarks Schedule, may be attached if more space is required) RE: VHV Company 16 Tigan Street, Winooski, VT | Monadnock Mills Boiler Replacement Project in Claremont, NH CANCELLATION **CERTIFICATE HOLDER** SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. The State of New Hampshire C/O Department of Administrative Services AUTHORIZED REPRESENTATIVE



# **CERTIFICATE OF PROPERTY INSURANCE**

01/03/2019

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.

PRODUCER Hickok & Boardman, Inc. 346 Shelburne Rd Burlington, VT 05401					NAME: Brice Blanchi								
					[사는, No, Ext): (802) 383-1607 [소송, No): (802) 658-0541								
					E-MAIL ADDRESS: bbianchl@hbinsurance.com								
3 <b>u</b> .i					PRODUCER CUSTOMER ID:	/HVCOMP-01			•	,			
		ひば メモザ				INSURER(S) AFFOR	RDIN	G COVERAGE		NAIC #			
WSURED					Menoso A. Ha					22292			
VHV Company S 16 Tigan Street, Suite A, C Wincoski, VT 05404 7			INV	State of New Hampshire c/o Department of Admin Services 7 Hazen Drive, Room 250		INSURER A: Hanover Insurance Company							
			reet, Suite A,		INSURER B:	, i.							
			T 05404		INSURER C :	<del>  </del>							
		•		Concord, NH 03302	INSURER D :	<del>                                     </del>							
					INSURER E :					1			
					INSURER F :								
		AGES	·	CERTIFICATE NUMBER: ROPERTY (Attach ACORD 101, Additional Remark			KE	VISION NUMBE	K:				
Mon	adno	ock Mills Bolle	THAT THE BOLL	Cies os insulpance Listed Bel Ow HA	Æ BEEN ISSUED 1	O THE INSURED N	AME	ED ABOVE FOR TH	E POLICY	PERIOD			
IN	DICA	NTED NOTWI	THSTANDING AN	Y REQUIREMENT, TERM OR CONDITION AY PERTAIN, THE INSURANCE AFFORDE SUCH POLICIES. LIMITS SHOWN MAY HA	OF ANY CONTRAC	CT OR OTHER DOC	UME	ENT WITH RESPEC	CT TO WHI	CH THIS I			
INSR LTR		TYPE OF IN		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DO/YYYY)	1	COVERED PROPERTY		LIMITS			
	- (	PROPERTY						BUILDING	\$				
	CAL	JSES OF LOSS	DEDUCTIBLES					PERSONAL PROPE	RTY \$				
		BASIC	BUILDING	1				BUSINESS INCOME	\$				
		BROAD						EXTRA EXPENSE	\$				
	-	SPECIAL	CONTENTS					RENTAL VALUE	\$				
		EARTHQUAKE	-	1 .				BLANKET BUILDING					
	-	WIND		<del>-</del>				BLANKET PERS PR	<del></del>				
			<del> </del>	1				BLANKET BLDG & P	-				
	!	FLOOD		1				BONNE BLOG &	\$				
		•		<b>-</b>				-	5				
		in 16	_	Time or not the					5				
3		INLAND MARIN	<b>.</b>	TYPE OF POLICY	• 1			-{	\$				
5 9		SES OF LOSS	•	POLICY NUMBER				1	5	<del></del>			
		NAMED PERILS	•	POLICY NUMBER				4	\$				
			<del></del>					1	\$				
•		CRIME						-					
	TYF	PE OF POLICY					_	-	\$				
		1						-	\$				
		BOILER & MACI	HINERY / EAKDOWN			}	_	-	\$				
_		na Bisis	Deller	HN/ D704262 00	04/02/2040	04/02/2020		Per Occurence	\$	154,266			
Α	Bu	ilders Risk	Policy	IHV D794353 00	01/03/2019	01/03/2020	X	-	\$	154,200			
		<u> </u>				<u> </u>		<u> </u>	\$				
The -	State	e of New Ham	HER COVERAGES ( pshire Departm sas named Insu	(ACORD 101, Additional Remarks Schedule, may be ent of Administrative Services, all Contreds.	e attached if more spa ractors, Sub-Conf	ce is required) tractors, all Sub Si	ub-C	Contractors and o	thers emp	oloyed on the			
	. 7.7.		DED.	······································	CANCELLA	TION							
اعب	< 1   F	ICATE HOL	UEK		CANCELLAT	IUN			· · · ·				
	:. :/ :	• .	New Hampshir artment of Adn		THE EXPIRA	Y OF THE ABOVE D TION DATE THERE CE WITH THE POLICE	OF, I	NOTICE WILL BE D	BE CANCE DELIVERED	LLED BEFORE IN			
		Room 2			AUTHORIZED REPRESENTATIVE								
Concord, NH 03302				Acott Boardman									

ACORD 24 (2016/03)

© 1995-2015 ACORD CORPORATION. All rights reserved.

The ACORD name and logo are registered marks of ACORD