



State of New Hampshire

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

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Jm

LINDA M. HODGDON
Commissioner
(603) 271-3201

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

Bureau of Public Works
Design and Construction
Project No. 80775R – Contract A

May 29, 2014

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 Morello Construction, Inc. (VC# 172893) Peterborough, NH, for a total price not to exceed \$46,695, for the Additional Parking for the Liquor Store #69, Nashua, NH. This contract is effective upon Governor and Council approval through September 1, 2014, unless extended in accordance with the contract terms. **100% Other Funds (Liquor Commission Funds).**
- 2). Further authorize that a contingency in the amount of \$6,000 be approved for unanticipated civil engineering/site work expenses for the Additional Parking for the Liquor Store #69, bringing the total to \$52,695. **100% Other Funds (Liquor Commission Funds).**
- 3). Further authorize the amount of \$6,000 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 \$58,695. **100% Other Funds (Liquor Commission Funds).**

Funding is available in account titled Liquor Commission as follows:

Funding is available in account titled Liquor Commission as follows:

02-77-77-770030-09850000	Nashua Retail Store	<u>SFY14</u>
034-500162	– Contract Repairs/Bldgs. & Grounds	\$ 46,695
034-500162	– Contingency	\$ 6,000
034-500162	– BPW Fees Interagency	<u>\$ 6,000</u>

Grand Total **\$ 58,695**

EXPLANATION

Per Chapter 195:1, XII, F, Laws of 2013 for Nashua Retail Store, this project will construct eighteen (18) new parking spaces at the Nashua #69 Liquor Store. The two (2) proposed parking areas are located just off the edge of the existing parking lot. There are three (3) site lights that will also be installed to illuminate the new parking.

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 Liquor Commission 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:	\$52,000
Contract Amount:	<u>\$46,695</u>
Under Estimate:	\$ 5,305

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80775R, Contract A – Additional Parking for Liquor Store #69, Nashua, New Hampshire.

DESCRIPTION: This project will to construct 18 new parking spaces at the Nashua #69 Liquor Store. The two proposed parking areas are located just off the edge of the existing parking lot. There are 3 site lights that will also be installed to illuminate the new parking.

EXPLANATION: This project will create additional parking spaces for customers during the high volume seasons when additional parking is needed. Site lighting will be installed to keep the new spaces lit when necessary.

UNDER ESTIMATE
EXPLANATION: The difference between the low bid and the estimate is considered within industry standards.

DEPARTMENT
ESTIMATE: \$52,000.00
LOW BID: \$46,695.00

BIDDER SUMMARY

PROJECT NAME: ADDITIONAL PARKING FOR LIQUOR STORE #69 NON-FEDERAL 80775R-A
PROJECT NUMBER: 80775R-A
COUNTY: HILLSBOROUGH COUNTY 011
BID OPENING DATE: 04/22/2014
SCOPE OF WORK: THE PROJECT WILL CONSIST OF CONSTRUCTING 18 NEW PAVED PARKING SPACES AT THE NASHUA LIQUOR STORE #69. IN ADDITION TO THE PARKING SPACES, TWO NEW SITE LIGHTS WILL BE INSTALLED.
LOCATION: 25 COLISEUM DR NASHUA, NH
COMPLETION DATE: 09/01/2014

BID RESULTS

A MORELLO CONSTRUCTION INC (B001) - PO BOX 333 PETERBOROUGH, NH 03458	\$	46,695.00	ACCEPTED
B ADVANCED EXCAVATING & PAVING (B001) - PO BOX 581 SUNCOOK, NH 03275	\$	51,265.00	ACCEPTED
C LEIGHTON A WHITE INC (B001) - 468 ROUTE 13 SOUTH MILFORD, NH 03055-4557	\$	54,901.00	ACCEPTED
D GMI ASPHALT LLC (B001) - 288 LACONIA ROAD BELMONT, NH 03220	\$	54,907.00	ACCEPTED
E JEREMY HILTZ EXCAVATING INC (B001) - PO BOX 1142 ASHLAND, NH 03217	\$	71,800.00	ACCEPTED
F NORTHEAST EARTH MECHANICS INC (B001) - 159 BARNSTEAD RD PITTSFIELD, NH 03263	\$	73,300.00	ACCEPTED

BUREAU OF PUBLIC WORKS
Award to A Bidder \$46,695 -
Hold for Negotiation
Cancel Contract
User Agency Liquor Comm.
Authorized by MBJ
Date 4/30/14

NO.	DESCRIPTION	PS&E			A			B		
		UNIT QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL		
901.00	WORK AREA #1 PER PLAN SHEET C-1, C-2 & SPECIFICATIONS	EA 1.00	\$ 38,000.00	\$ 38,000.00	\$ 32,420.00	\$ 32,420.00	\$ 34,525.00	\$ 34,525.00		
902.00	WORK AREA #2 PER PLAN SHEET C-1, C-2 & SPECIFICATIONS	EA 1.00	\$ 10,000.00	\$ 10,000.00	\$ 10,275.00	\$ 10,275.00	\$ 12,740.00	\$ 12,740.00		
903.00	ALLOWANCE FOR ADDITIONS AND MODIFICATIONS TO THE CONTRACT	\$ 4,000.00	\$ 1.00	\$ 4,000.00	\$ 1.00	\$ 4,000.00	\$ 1.00	\$ 4,000.00		
				\$ 52,000.00		\$ 46,695.00		\$ 51,265.00		

NO.	DESCRIPTION	C			D			
		UNIT QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL	TOTAL	
901.00	WORK AREA #1 PER PLAN SHEET C-1, C-2 & SPECIFICATIONS	EA 1.00	\$ 38,000.00	\$ 38,000.00	\$ 34,523.00	\$ 34,523.00	\$ 32,112.00	\$ 32,112.00
902.00	WORK AREA #2 PER PLAN SHEET C-1, C-2 & SPECIFICATIONS	EA 1.00	\$ 10,000.00	\$ 10,000.00	\$ 16,378.00	\$ 16,378.00	\$ 18,795.00	\$ 18,795.00
903.00	ALLOWANCE FOR ADDITIONS AND MODIFICATIONS TO THE CONTRACT	\$ 4,000.00	\$ 1.00	\$ 4,000.00	\$ 1.00	\$ 4,000.00	\$ 1.00	\$ 4,000.00
				\$ 52,000.00		\$ 54,901.00		\$ 54,907.00

NO.	DESCRIPTION	UNIT QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL
901.00	WORK AREA #1 PER PLAN SHEET C-1, C-2 & SPECIFICATIONS	EA 1.00	\$ 38,000.00	\$ 38,000.00	\$ 46,900.00	\$ 46,900.00	\$ 52,800.00	\$ 52,800.00
902.00	WORK AREA #2 PER PLAN SHEET C-1, C-2 & SPECIFICATIONS	EA 1.00	\$ 10,000.00	\$ 10,000.00	\$ 20,900.00	\$ 20,900.00	\$ 16,500.00	\$ 16,500.00
903.00	ALLOWANCE FOR ADDITIONS AND MODIFICATIONS TO THE CONTRACT	\$ 4,000.00	\$ 1.00	\$ 4,000.00	\$ 1.00	\$ 4,000.00	\$ 1.00	\$ 4,000.00
				\$ 52,000.00		\$ 71,800.00		\$ 73,300.00



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/16/2014

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 Infantine Insurance P. O. Box 5125 Manchester NH 03108	CONTACT NAME: Yvette Fanaras
	PHONE (A/C No. Ext): (603) 669-0704 FAX (A/C No.): 603-669-6831
	E-MAIL ADDRESS: yvette@infantine.com
	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A: Peerless Indemnity 18333
INSURED Morello Construction, Inc. PO Box 333 Peterborough NH 03458	INSURER B: Liberty Mutual Holding Co.
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: 2014/2015 Master 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 (WYD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	X	CBP8033912	5/1/2014	5/1/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Each occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 5,000
						PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC					PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY		BA8227437	5/1/2014	5/1/2015	COMBINED SINGLE LIMIT (Each accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS					BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS					BODILY INJURY (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB	X	CU8013891	5/1/2014	5/1/2015	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					AGGREGATE \$ 2,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 10,000					
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		WC1048220	5/1/2014	5/1/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input checked="" type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	State: NH			E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				E.L. DISEASE - EA EMPLOYEE \$ 500,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000

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

RE: Additional Parking for Nashua Liquor Store #69. It is agreed and understood that the State of New Hampshire, NH Dept of Administrative Services is included as additional insured on General Liability and Umbrella when required by written contract.

CERTIFICATE HOLDER

CANCELLATION

State of New Hampshire NH Dept of Administrative Services 7 Hazen Dr Concord, NH 03302-0483	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 Jim Harrison/BYM



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

5/19/2014

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 Infantine Insurance P. O. Box 5125 Manchester NH 03108 FAX (A/C. No.): CODE: 012711 AGENCY CUSTOMER ID #: 00012383 INSURED Morello Construction, Inc., State Department of Administrative Services PO Box 333 Peterborough NH 03458	PHONE (A/C. No. Ext): (603) 669-0704 E-MAIL ADDRESS: jim@infantine.com SUB CODE:	COMPANY Liberty Mutual Holding Co. 13 Riverside Road Weston MA 02493-2298	LOAN NUMBER POLICY NUMBER IM8983729 EFFECTIVE DATE 5/16/2014 EXPIRATION DATE 5/16/2015 CONTINUED UNTIL TERMINATED IF CHECKED THIS REPLACES PRIOR EVIDENCE DATED:
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PROPERTY INFORMATION

LOCATION/DESCRIPTION Loc# 00001/Bldg# 00001 27 Coliseum Ave Nashua, NH 03063

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, Special Form Incl Theft	46,695	1,000

REMARKS (Including Special Conditions)

Named Insured: Any and All Subcontractors

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

NAME AND ADDRESS	MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
	LOAN #	
	AUTHORIZED REPRESENTATIVE	
	Jim Harrison/BYM	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/19/2014

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PRODUCER Infantine Insurance P. O. Box 5125 Manchester NH 03108	CONTACT NAME: Yvette Fanaras PHONE (A/C No. Ext): (603) 669-0704 E-MAIL ADDRESS: yvette@infantine.com	FAX (A/C No.):
	INSURER(S) AFFORDING COVERAGE	
INSURED State Department of Administrative Services PO Box 333 Peterborough NH 03458	INSURER A: Liberty Mutual Holding Co.	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES **CERTIFICATE NUMBER:** 2014/2015 OCP Master **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	GENERAL LIABILITY		GL8985230	5/16/2014	5/16/2015	EACH OCCURRENCE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Each occurrence) \$
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$
						PERSONAL & ADV INJURY \$
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$ 3,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO: <input type="checkbox"/> LOC					PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Each accident) \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A			E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Job: Nashua Liquor Store #69, Nashua NH

CERTIFICATE HOLDER State Department of Administrative Services 7 Hazen Drive 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 Jim Harrison/BYM 