



Victoria F. Sheehan  
Commissioner

THE STATE OF NEW HAMPSHIRE  
DEPARTMENT OF TRANSPORTATION



William Cass, P.E.  
Assistant Commissioner

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Send

Bureau of Highway Maintenance  
(Well Section)  
June 29, 2017

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

**REQUESTED ACTION**

Authorize the Department of Transportation to enter into a contract with Kriester Artesian Well Co. of Henniker, NH (Vendor 151947) in the amount of \$19,620.00 for a 6-inch drilled well and pump on the property of Heide Sreirik, 91 East Road, Atkinson, NH, from the date of Governor and Council approval through June 1, 2018, unless extended by the Department in accordance with the Standard Specifications. 100% Highway funds.

Funding is available for FY 2018 contingent upon the availability and continued appropriation.

Funding is available as follows:

**FY 2018**

04-96-96-960515-3066

Salted Wells Account

400-500870 Highway Contract Payments

\$19,620.00

**EXPLANATION**

Results of investigations and water analysis has been evaluated, and it has been determined that the existing water supply has been contaminated by highway chlorides. The Department is therefore obligated to obtain a new water supply for the owner. This proposal is in conformity with RSA 228:34.

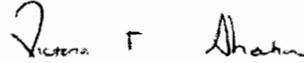
This contract was advertised and three bids were received and publicly opened on April 27, 2017. Kriester Artesian Well Co. was the low bidder at \$19,620.00 and the Department considers this bid to be reasonable.

Although this contract is below the \$25,000 Governor and Council threshold, this item, if approved, would place the vendor above the threshold.

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The Contractor has been prequalified by this Department. The Contract has been approved by the Attorney General as to form and execution; and the 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' Office, and subsequent to Governor and Council approval will be on file at the Department of Transportation.

Sincerely,



Victoria F. Sheehan  
Commissioner

VFS/md

Attachment:

Department Estimate:	\$25,100.00
Contract Amount:	<u>\$19,620.00</u>
Under Estimate:	\$ 5,480.00

PROJECT: ATKINSON  
 STATE PROJECT NUMBER: 41064F  
 FED. PROJECT NUMBER: NON-FEDERAL  
 DATE BIDS OPEN: April 27, 2017, 2:00  
 SCOPE OF WORK: Replace Skerik salted well  
 COMPLETION DATE: June 01, 2018  
 LOCATION:

Awarded To: KRIESTER ARTESIAN WELL  
 CO  
 PO BOX 392  
 HENNIKER, NH 03242  
 Amount: \$19,620.00  
 Award Date:

Certified by: PETER E. STAMNAS  
Director of Project Development

Summary of Bidders

Contractor	Bid Amount	Rank
KRIESTER ARTESIAN WELL CO PO BOX 392, HENNIKER NH 03242	\$19,620.00	A
SKILLINGS & SONS INC 9 COLUMBIA DRIVE, AMHERST NH 03031	\$20,636.00	B
WRAGG BROS OF VERMONT INC ROUTE 5, PO BOX 110, ASCUTNEY VT 05030	\$20,900.00	C

Item No.	Description	Unit	Quantity	PS&E		KRIESTER ARTESIAN WELL CO PO BOX 392 HENNIKER, NH 03242		SKILLINGS & SONS INC 9 COLUMBIA DRIVE AMHERST, NH 03031	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

**Items**

662.1626	6" DRILLED WELL	LF	800.000	\$12.00	\$9,600.00	\$9.00	\$7,200.00	\$10.00	\$8,000.00
662.166	PILOT HOLE FOR 6" WELL (INCLUDES 6" CASING)	LF	200.000	\$21.00	\$4,200.00	\$20.00	\$4,000.00	\$15.00	\$3,000.00
662.244	4" WELL CASING (INCLUDING JASWELL SEALS & GROUT)	LF	500.000	\$6.50	\$3,250.00	\$2.00	\$1,000.00	\$4.95	\$2,475.00
662.41	TRENCH AND PIPE	LF	160.000	\$15.00	\$2,400.00	\$8.00	\$1,280.00	\$7.95	\$1,272.00
662.421	1" PE FLEXIBLE TUBING	LF	400.000	\$0.50	\$200.00	\$0.10	\$40.00	\$0.50	\$200.00
662.52075	SUBMERSIBLE PUMP (3/4 HP) AND ACCESSORIES	EA	1.000	\$2,250.00	\$2,250.00	\$2,900.00	\$2,900.00	\$2,489.00	\$2,489.00
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	3,000.000	\$1.00	\$3,000.00	\$1.00	\$3,000.00	\$1.00	\$3,000.00
1008.18	ALTERATIONS AND ADDITIONS AS NEEDED - PUMPING TEST	\$	200.000	\$1.00	\$200.00	\$1.00	\$200.00	\$1.00	\$200.00

Totals:	\$25,100.00	\$19,620.00	\$20,636.00
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Item No.	Description	Unit	Quantity	PSAE		WRAO BROS OF VERMONT INC ROUTES 5 ASCUTNEY, VT 05630	
				Unit Price	Total	Unit Price	Total

**Items**

662.1626	6" DRILLED WELL	LF	800.000	\$12.00	\$9,600.00	\$10.00	\$8,000.00
662.166	PILOT HOLE FOR 6" WELL (INCLUDES 6" CASING)	LF	200.000	\$21.00	\$4,200.00	\$20.00	\$4,000.00
662.244	4" WELL CASING (INCLUDING JASWELL SEALS & GROUT)	LF	500.000	\$6.50	\$3,250.00	\$3.00	\$1,500.00
662.41	TRENCH AND PIPE	LF	160.000	\$15.00	\$2,400.00	\$10.00	\$1,600.00
662.421	1" PE FLEXIBLE TUBING	LF	400.000	\$0.50	\$200.00	\$0.25	\$100.00
662.52075	SUBMERSIBLE PUMP (3/4 HP) AND ACCESSORIES	EA	1.000	\$2,250.00	\$2,250.00	\$2,500.00	\$2,500.00
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	3,000.000	\$1.00	\$3,000.00	\$1.00	\$3,000.00
1008.18	ALTERATIONS AND ADDITIONS AS NEEDED - PUMPING TEST	\$	200.000	\$1.00	\$200.00	\$1.00	\$200.00

Totals:	\$25,100.00	\$20,900.00
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# PS&E Comparison

ATKINSON  
 41064F  
 NON-FEDERAL

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
662.1626	6" DRILLED WELL	LF	800.000	\$9.00	\$7,200.00	\$12.00	\$9,600.00	(\$2,400.00)
662.166	PILOT HOLE FOR 6" WELL (INCLUDES 6" CASING)	LF	200.000	\$20.00	\$4,000.00	\$21.00	\$4,200.00	(\$200.00)
662.244	4" WELL CASING (INCLUDING JASWELL SEALS & GROUT)	LF	500.000	\$2.00	\$1,000.00	\$6.50	\$3,250.00	(\$2,250.00)
662.41	TRENCH AND PIPE	LF	160.000	\$8.00	\$1,280.00	\$15.00	\$2,400.00	(\$1,120.00)
662.421	1" PE FLEXIBLE TUBING	LF	400.000	\$0.10	\$40.00	\$0.50	\$200.00	(\$160.00)
662.52075	SUBMERSIBLE PUMP (3/4 HP) AND ACCESSORIES	EA	1.000	\$2,900.00	\$2,900.00	\$2,250.00	\$2,250.00	\$650.00
1008.11	ALTERATIONS AND ADDITIONS AS NEEDED - UNANTICIPATED WORK	\$	3,000.000	\$1.00	\$3,000.00	\$1.00	\$3,000.00	\$0.00
1008.18	ALTERATIONS AND ADDITIONS AS NEEDED - PUMPING TEST	\$	200.000	\$1.00	\$200.00	\$1.00	\$200.00	\$0.00

**Total:** \$19,620.00 \$25,100.00 (\$5,480.00)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/01/2017

**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 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).**

<b>PRODUCER</b>		<b>CONTACT NAME:</b> Butch Amadio	
Amadio Insurance Agency		<b>PHONE (A/C, No, Ext):</b> 603-464-5882	<b>FAX (A/C, No):</b> 603-464-4769
P.O. Box 1189		<b>E-MAIL ADDRESS:</b> Butch@amadioins.com	
Hillsboro NH 03244		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> NGM Insurance Company	
		<b>INSURER B:</b> NGM Insurance Company	
		<b>INSURER C:</b> Riverport Insurance Company	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	
<b>INSURED</b>			
Kriester Artesian Well			
PO Box 392			
Henniker NH 03242			

**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CPT1356X	06/20/2017	06/20/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> OTHER:			BIT1271X	06/20/2017	06/20/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical \$ 5,000
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		NHARP300309	11/17/2016	11/17/2017	PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

Property of Heidi Skeirik, 91 East Road, Atkinson, NH 03811 - Project No. 41064F

State of NH is listed as additional insured.

**CERTIFICATE HOLDER****CANCELLATION**

N.H. Department of Transportation

Finance and Contracts  
7 Hazen Drive  
Concord NH 03301

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

*Butch Amadio*

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