



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

State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES

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

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

Division of Public Works
Design and Construction
Project No. 80854R – Contract E

March 21, 2018

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 Martini Northern, LLC (VC# 254859) Portsmouth, NH, for a total price not to exceed \$944,000, for the New Generator Phase 2 Chillers and Associated Component Replacement at New Hampshire Hospital, Concord, NH. This contract is effective upon Governor and Council approval through December 31, 2018, unless extended in accordance with the contract terms. 100% Capital General Funds.
- 2). Further authorize that a contingency in the amount of \$50,000 be approved for unanticipated structural expenses for the New Generator Phase 2 Chillers and Associated Component Replacement, bringing the total to \$994,000. **100% Capital General Funds.**
- 3). Further authorize pursuant to 228:13, Laws of 2017, the amount of \$20,000 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC# 177875), Capital Clerk for oversight and engineering services provided, bringing the total to \$1,014,000. 100% Capital General Funds.

Funding is available in account titled Department of Health and Human Services - (NH Hospital) as follows:

Crand Total	e ·	1 014 000
034-500162 – Repair/Renovations Bldgs. 034-500162 – Repair/Renovations Bldgs. 034-500162 - DPW Fees Interagency	\$ \$ -	944,000 50,000 20,000
01-94-940030-52670000 Childers & Assoc. Components		<u>SFY18</u>

His Excellency, Governor Christopher T. Sununu and the Honorable Council March 21, 2018 Page 2 of 2

EXPLANATION

This project includes supplying and installing a one (1) Megawatt Natural Gas Standby Generator at the New Hampshire Hospital Acute Psychiatric Services Building at 36 Clinton Street, Concord NH. Also, we will balance the load of two (2) emergency branch systems and their respective panelboards.

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 Health and Human 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 rabbiation of bids for this project along with the contract supplemental information sneet.

Respectfully submitted,

Charles M. Arlinghaus

Commissioner

Department Estimate: \$1,200,000 Contract Amount: \$ 944,000 Under Estimate \$ 256,000

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: B

BPW Project No. 80854, Contract E - New Generator Phase 2, Chillers and Associated Components Replacement at Acute Psychiatric Services Building (APS).

DESCRIPTION:

Work of the Project includes supply and installing a one 1 Megawatt Natural Gas Standby Generator at APS at 36 Clinton Street, Concord NH. Also, we will balance the load of two (2) emergency branch systems and their respective panelboards.

EXPLANATION:

APS operates 24 hours a day, 7 days a week, providing care to patients with mental health disorders and cannot tolerate any interruptions with the heating and cooling process. This 1 Megawatt Natural Gas Standby Generator will provide 100% power if there is a break in the utility power. This will keep the APS building functioning as normal with no interruptions due to street power failure.

UNDER ESTIMATE

EXPLANATION:

We had six (6) competitive bidders on this project. We might have estimated a little high on the 24 hour shut down.

DEPARTMENT

ESTIMATE:

\$1,200,000

LOW BID:

\$ 944,000



CONCORD 8855E NON-FEDERAL

PROJECT: STATE PROJECT NUMBER: PEU, PROJECT NUMBER: DATE BUG OFFEN: BCOPE OF WORK: COMPLETION DATE: LOCATION:	CONCORD 808S-KE NOW-F3D-BALL ACEMENT 31, 2018, 02:00 PM CONTINEN & ASSOCIATED COMPONENT REPLACEMENT DECEmber 31, 2018 Mentineck
	Summary of Bidders
Contractor	Bid Amount Rank
MARTINI NORTHERN LLC	A \$99.0000 \$144.000.00
299 HANOVER STR	298 HANOVER STREET, PORTSMOUTH NH 03801
D. L. KING & ASSOCIATES INC.	TES INC. \$847,000.00 B
27 TANGLEWOOD I	
TURNSTONE CORPORATION	SOLAR CONTROL OF THE PROPERTY
479 NASHUA STREI	479 NASHUA STREET, MILFORD MH 08065-3706
METHUEN CONSTRUCTION CO., INC.	2110N CO., INC. \$989,443.00 D
144 MAIN STREET,	144 MAIN STREET, PO BOX 980, PLAISTOW NH 03079
LAFLANME, INC. GERARD A.	ARD A.
100 HARVEY ROAD	100 HARVEY ROAD, PO BOX 5706, MANCHESTER NH 03106
CARENO CONSTRUCTION CO., LLC	TION CO, LLC \$989,650.00 F
270 WEST ROAD, S	270 WEST ROAD, STE 4, PORTSMOUTH NH 03801-7611

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Washed to Man Fine Ms
Hold for Negotiation User Agency Authorized by __ 484,000. 900. 4 50.00. 902. 4 50.00.

Page 1 of 1

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D. L. KING & ASSOCIATES INC. 27 TANGLEWOOD DRIVE NASHUA, NH 0362-1044	Unit Price Total
MARTINI NORTHERN LLC 299 HANOVER STREET PORTSMOUTH, NH 03801	Unit Price Total
PSEE	Unit Price Total
	Quantity
	Unit
	Description
	Item No.

 \$947,000.00		\$944,000.00		\$1,200,000.00		Totals:			
 \$50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00	\$1.00	50,000.00	•	ALLOWANCE 1 OWNERS CHANGES FOR UNKNOWN LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 1	902
 \$897,000.00	\$897,000.00	\$884,000.00	\$894,000.00	\$1,150,000.00 \$1,150,000.00	\$1,150,000.00	1.00	5	SUPPLY & INSTALL A 1 MEGAWATT GENERATOR PER SPECS AND PLANS	901

PS&E TURNSTONE CORPORATION METHUEN CONSTRUCTION CO.,JNC. 479 NASHUA STREET 144 MAIN STREET MILFORD, NH 03055-3705 PLAISTOW, NH 03079	Unit Quantity Unit Price Total Unit Price Total
	Unit
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902	ALLOWANCE 1 OWNERS CHANGES FOR UNKNOWN LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 1	<u> </u>	50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00
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Item No.	ftem No. Description	Unit	Quantity Unit Price	l	Total	Unit Price	Total	Unit Price	Total
Items									
901	SUPPLY & INSTALL A 1 MEGAWATT GENERATOR I		1.00	\$1,150,000.00	1.00 \$1,150,000.00 \$1,150,000.00	\$931,400.00	\$931,400.00	\$949,650.00	\$949,650.00
902	ALLOWANCE 1 OWNERS CHANGES FOR UNKNOWN LATENT OR DIFFERING EXISTING CONDITIONS FOR BID ITEM 1	_	50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00
			Totals		\$1,200,000.00		\$981,400.00		\$999,650.00

Client#: 704644 MARTINOR5

ACORD...

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/03/2018

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

PRODUCER USI Insurance Services LLC 3 Executive Park Drive, Suite 300	CONTACT NAME: PHONE	
Bedford, NH 03110 855 874-0123	INSURER(S) AFFORDING COVERAGE INSURER A : Acadia insurance Company	NAIC #
INSURED Martini Northern, LLC 299 Hanover St.	INSURER B	
Portsmouth, NH 03801	INSURER D INSURER E INSURER F	

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 ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) LIMITS TYPE OF INSURANCE POLICY NUMBER X COMMERCIAL GENERAL LIABILITY 01/01/2018 01/01/2019 EACH OCCURRENCE \$1,000,000 CPA032433120 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) \$5,000 s1,000,000 PERSONAL & ADV INJURY \$2,000,000 GENTLAGGREGATE LIMIT APPLIES PER GENERAL AGGREGATE PRO PRODUCTS - COMP/OP AGG 52,000,000 POLICY LLOC. OTHER 01/01/2018 01/01/2019 COMBINED SINGLE LIMIT s1,000,000 AUTOMOBILE LIABILITY CAA032433418 BODILY INJURY (Per person) X ANY AUTO SCHEDULED BODILY INJURY (Per accident) \$ OWNED AUTOS ONLY AUTOS NON-OWNED AUTOS ONLY PROPERTY DAMAGE X HIRED AUTOS ONLY (Per accident) X UMBRELLA LIAB 01/01/2018 01/01/2019 EACH OCCURRENCE \$10,000,000 CUA032433518 X OCCUR \$10,000,000 **EXCESS LIAB** AGGREGATE CLAIMS-MADE **Product-Comp** \$10,000,000 X: RETENTION 50 DED WORKERS COMPENSATION 01/01/2018 01/01/2019 X STATUTE WPA032433618 AND EMPLOYERS' LIABILITY \$1,000,000 ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E L EACH ACCIDENT E L DISEASE - EA EMPLOYEE \$1,000,000 (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below EL DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate Holder Continues: Division of Public Works-Design & Construction.

CERTIFICATE NUMBER:

"New Generator Phase 2-Chillers & Associated Component Replacement, project Number 80854, Contract E located at 36 Clinton Street, Concord, NH. The general Liability, Commercial Auto, Workers Compensation and Commercial Umbrella policies includes an endorsement providing that 30 days notice of cancellation for reason other than non payment of premium and 10 days notice of cancellation for non payment of premium will (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
State of New Hampshire Department of Administrative Services	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
POB 483, 7 Hazen Drive Room 250	AUTHORIZED REPRESENTATIVE
Concord, NH 03302-0483	See Hot

DESCRIPTIONS (Continued from Page 1)
be give to the certificate holder by the insurance carrier. The general liability, Commercial Auto and Commercial Umbrella includes an automatic additional insured endorsement that provides additional insured status to the certificate holder with regard to work performed on behalf of the named insured.

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ACORD.

CERTIFICATE OF LIABILITY INSURANCE

2/16/2018

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

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PRODUCER		CONTACT NAME:						
USI Insurance Services LLC		PHONE (A/C, No, Ext): 855 874-0123	FAX (A/C, No):					
	utive Park Drive, Suite 300	E-MAIL ADDRESS:	(Cas, No)					
Bedford, NH 03110 855 874-0123		INSURER(S) AFFORDIN	IG COVERAGE NAIC #					
		INSURER A : Union Insurance Company	25844					
INSURED State of New Horsesting Department of	INSURER B :							
	State of New Hampshire Department of Administrative Services	INSURER C :						
		INSURER D :						
	299 Hanover St.	INSURER E :						
	Portsmouth, NH 03801	INSURER F :						

INSU	INSURED					INSURER B:						
		State of New Hampshire D	Department of				INSURER C:					
		Administrative Services				INSURER D :						
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	X	OCP							PERSONAL & ADV INJURY	\$		
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	If yes	s, describe under							E.L. DISEASE - POLICY LIMIT			
\vdash	DES	CRIPTION OF OPERATIONS below		<u> </u>					E.L. DISCASE - PULICY LIMIT	•		
DES	RIPT	ION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACOR) 101. Additional Remarks Schedu	de, may i	be attached if mo	re space is requi	ired)			
		Number 80854, Contract E										
Cer	tific	ate Holder Continues: Divisio	n of	Pub	lic Works-Design & Co	onstru	ction.	•	•			
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		at 36 Clinton Street, Concord										
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						SHOULD ANY OF THE AROVE DESCRIBED POLICIES BE CANCELLED REFORE						

State of New Hampshire
Department of Administrative
Services

POB 483, 7 Hazen Drive Room 250 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

Sully

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DATE (MM/DD/YYYY) ACORD. EVIDENCE OF PROPERTY INSURANCE 02/16/2018 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 PHONE (A/C, No, Ext): COMPANY 855 874-0123 USI Insurance Services LLC Acadia Insurance Company 3 Executive Park Drive, Suite 300 Bedford, NH 03110 FAX (A/C, No): ADDRESS: Sean.Hood@usi.com CODE: SUB CODE: AGENCY CUSTOMER ID #: 704644 LOAN NUMBER POLICY NUMBER INSURED Martini Northern, LLC its Subcontractors CIM5337946 and The Subcontractor's Subs EFFECTIVE DATE **EXPIRATION DATE** State of New Hampshire CONTINUED UNTIL 02/14/18 02/14/19 299 Hanover St. TERMINATED IF CHECKED THIS REPLACES PRIOR EVIDENCE DATED: Portsmouth, NH 03801 PROPERTY INFORMATION LOCATION/DESCRIPTION 36 Clinton Street Concord NH-Project Number 80854 Contract E **New Generator PHASE 2 Chillers & Asociated Component Replacement** 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 builders Risk/ Open Perils 1,200,000 2500 **Equipment Breakdown** 1,200,000 \$25,000 **REMARKS (Including Special Conditions)** 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 State of New Hampshire Department Named Insured LOSS PAYEE of Administrative Services LOAN# PO Box 483 7 Hazen Drive AUTHORIZED REPRESENTATIVE **Room 250**

Concord, NH 03302-0483