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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

VICKI V. QUIRAM
Commissioner
(603)-271-3201

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

Bureau of Public Works
Design and Construction
Project No. 80867R – Contract B

May 24, 2016

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 Careno Construction Co, LLC., (VC# 159063) Portsmouth, NH, for a total price not to exceed \$709,500, for the Rebid Salt Building, Derry, NH. This contract is effective upon Governor and Council approval through October 31, 2016, unless extended in accordance with the contract terms. **100% Capital - Highway Funds.**
- 2). Further authorize the amount of \$32,745 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 \$742,245. **100% Capital - Highway Funds.**

Funding is available in account titled Department of Transportation as follows:

04-96-96-960030-79900000	New Patrol Shed	<u>SFY16</u>
034-500161	– New Construction	\$ 349,041
04-96-96-960030-82900000	Salt Sheds	
034-500161	– New Construction	\$ 360,459
034-500161	– Interagency Fees	\$ <u>32,745</u>
	Sub-total	\$ 393,204
	Grand Total	\$ 742,245

EXPLANATION

Per Chapter 195:2, II, E, Laws of 2013, as extended by Chapter 220:23, 104, laws of 2015 for a New Patrol Shed PS 528 in Derry and Chapter 220:2, III, E laws of 2015 for Statewide Salt Sheds. This project includes the construction of new 6,700 square foot salt shed building and associated site improvements. The use of the capital funds for this purpose was approved by the Capital Budget Overview Committee on March 30, 2016.

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 Transportation 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,



Vicki V. Quiram
Commissioner

CONTRACT SUPPLEMENTAL INFORMATION SHEET

PROJECT: BPW Project No. 80867R, Contract B – Rebid Salt Building, Derry, NH.

DESCRIPTION: This project includes construction of a new 6,700 square foot salt storage building and associated site improvements.

EXPLANATION: The current Highway Maintenance facility in Derry is undergoing an expansion due to the widening of Interstate 93. Currently, there is not enough storage capacity for the salt necessary for the required treatment of the highway. The new building will give the DOT capacity to store salt to meet the increased demand.

OVER ESTIMATE

EXPLANATION: The construction of salt buildings is currently experiencing an upward trend of over 25% of anticipated square foot costs.

DEPARTMENT

ESTIMATE: \$570,000

LOW BID: \$709,500

OVER ESTIMATE \$139,500



CAP 16-014

MICHAEL W. KANE, MPA
Legislative Budget Assistant
(603) 271-3161

CHRISTOPHER M. SHEA, MPA
Deputy Legislative Budget Assistant
(603) 271-3161

State of New Hampshire

OFFICE OF LEGISLATIVE BUDGET ASSISTANT
State House, Room 102
Concord, New Hampshire 03301

STEPHEN C. SMITH, CPA
Director, Audit Division
(603) 271-2785

April 1, 2016

Vicki V. Quiram, Commissioner
Department of Administrative Services
25 Capitol Street, Room 120
Concord, New Hampshire 03301

Dear Commissioner Quiram,

The Capital Budget Overview Committee, pursuant to the provisions of Chapter 195:2, II, E, Laws of 2013, further extended by Chapter 220:104, Laws of 2015 and Chapter 220:2, III, E, Laws of 2015, on March 30, 2016, approved the request of the Department of Administrative Services, Bureau of Public Works Design and Construction, in conjunction with the Department of Transportation, to move forward with the construction of a Salt Shed in Derry at an amount not to exceed \$744,500, subject to the conditions as specified in the request dated March 10, 2016.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael W. Kane".

Michael W. Kane
Legislative Budget Assistant

MWK/pe
Attachment

Cc: Michael Connor, Deputy Commissioner, Department of Administrative Services ✓
William Cass, Assistant Commissioner, Department of Transportation

BIDDER SUMMARY

PROJECT NAME: **REBID SALT BUILDING**
PROJECT NUMBER: **80867R-B**
COUNTY: **ROCKINGHAM**
BID OPENING DATE: **03/23/2016**
SCOPE OF WORK: **CONSTRUCT 70' BY 95'-4" HIGH-ARCH GAMBREL SALT BUILDING INCLUDING ASSOCIATED SITE AND ELECTRICAL WORK.**
LOCATION: **59 KENDALL POND ROAD, DERRY, NH**
COMPLETION DATE: **10/31/2016**

BID RESULTS

A CARENO CONSTRUCTION COMPANY, LLC - 270 WEST ROAD PORTSMOUTH, NH03801	\$ 709,500.00	ACCEPTED
B CMGC BUILDING CORP - 360 HARVEY ROAD MANCHESTER, NH 03103	\$ 754,316.00	ACCEPTED
C DL KING & ASSOCIATES INC - 27 TANGLEWOOD DR NASHUA, NH 03062-1044	\$ 846,600.00	ACCEPTED

*DOT account to provide bid - \$709,500.
plus DPW fee.*

BUREAU OF PUBLIC WORKS

Award to Careno Const. Corp., LLC
 Hold for Negotiation
 Cancel Contract
User Agency DPW
Authorized by [Signature]
Date 04/12/2016

ITEM NO.	DESCRIPTION	PS&E		C	
		UNIT QUANTITY	UNIT PRICE	UNIT PRICE	TOTAL
901.00	SALT BUILDING	EA 1.00	\$ 435,000.00	\$ 756,600.00	\$ 756,600.00
902.00	ALL SITEWORK FOR FACILITY	EA 1.00	\$ 100,000.00	\$ 55,000.00	\$ 55,000.00
903.00	UNFORESEEN CONDITIONS OR OWNER INITIATED CHANGES	\$ 35,000.00	\$ 1.00	\$ 35,000.00	\$ 35,000.00
				\$ 570,000.00	\$ 846,600.00
991.00	PROVIDE 95'-4" BY 25' ADDITION ON THE WEST SIDE OF SALT BUILDING	EA 1.00	\$ 132,500.00	\$ 130,000.00	\$ 130,000.00
992.00	PROVIDE 95'-4" BY 25' ADDITION ON THE EAST SIDE OF SALT BUILDING	EA 1.00	\$ 86,250.00	\$ 92,000.00	\$ 92,000.00

ALTERNATES

ITEM NO.	DESCRIPTION	PS&E		B		
		UNIT QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL
901.00	SALT BUILDING	EA	\$ 435,000.00	\$ 435,000.00	\$ 551,914.00	\$ 551,914.00
902.00	ALL SITEWORK FOR FACILITY	EA	\$ 100,000.00	\$ 100,000.00	\$ 167,402.00	\$ 167,402.00
903.00	UNFORESEEN CONDITIONS OR OWNER INITIATED CHANGES	\$	\$ 1.00	\$ 35,000.00	\$ 1.00	\$ 35,000.00
				\$ 570,000.00		\$ 754,316.00
991.00	PROVIDE 95'-4" BY 25' ADDITION ON THE WEST SIDE OF SALT BUILDING	EA	\$ 132,500.00	\$ 132,500.00	\$ 147,754.00	\$ 147,754.00
992.00	PROVIDE 95'-4" BY 25' ADDITION ON THE EAST SIDE OF SALT BUILDING	EA	\$ 86,250.00	\$ 86,250.00	\$ 106,027.00	\$ 106,027.00

ALTERNATES

ITEM NO.	DESCRIPTION	UNIT QUANTITY	UNIT PRICE	TOTAL	PS&E	UNIT PRICE	TOTAL	A	TOTAL
901.00	SALT BUILDING	EA	1.00	\$ 435,000.00	\$	435,000.00	\$ 435,000.00	\$	554,500.00
902.00	ALL SITEWORK FOR FACILITY	EA	1.00	\$ 100,000.00	\$	100,000.00	\$ 100,000.00	\$	120,000.00
903.00	UNFORESEEN CONDITIONS OR OWNER INITIATED CHANGES	\$	35,000.00	\$	1.00	\$ 35,000.00	\$	1.00	\$ 35,000.00
						\$ 570,000.00			\$ 709,500.00
991.00	PROVIDE 95'-4" BY 25' ADDITION ON THE WEST SIDE OF SALT BUILDING	EA	1.00	\$ 132,500.00	\$	132,500.00	\$ 132,500.00	\$	131,000.00
992.00	PROVIDE 95'-4" BY 25' ADDITION ON THE EAST SIDE OF SALT BUILDING	EA	1.00	\$ 86,250.00	\$	86,250.00	\$ 86,250.00	\$	119,000.00

ALTERNATES



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/27/2016

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 FIAI/Cross Insurance 1100 Elm Street Manchester NH 03101		CONTACT NAME: Jennifer Galante PHONE (A/C, No, Ext): (603) 669-3218 FAX (A/C, No): (603) 645-4331 E-MAIL ADDRESS: jgalante@crossagency.com															
INSURED Careno Construction Co., LLC West Road Equipment LLC 270 West Rd Portsmouth NH 03801		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Ohio Security Ins Co</td> <td>24082</td> </tr> <tr> <td>INSURER B: American Fire & Casualty</td> <td>24066</td> </tr> <tr> <td>INSURER C: Ohio Casualty Insurance Company</td> <td>24074</td> </tr> <tr> <td>INSURER D: West American Ins Co</td> <td>44393</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Ohio Security Ins Co	24082	INSURER B: American Fire & Casualty	24066	INSURER C: Ohio Casualty Insurance Company	24074	INSURER D: West American Ins Co	44393	INSURER E:		INSURER F:	
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COVERAGES CERTIFICATE NUMBER: 16-17 All lines 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 INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:	X	BKS55970851	3/26/2016	3/26/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$	
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		BAA57159889	3/26/2016	3/26/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Business Auto Enhancement \$	
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	X	USO55970851	3/26/2016	3/26/2017	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$	
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	XWW55970851 (3a.) NH Charles Locke; Jeff Murray & Paul Careno excluded	3/26/2016	3/26/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 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)

Job: Derry Salt Shed Project #80867R-B, Derry, NH. The State of NH Department of Administrative Services is named as additional insured with respects to General Liability and Umbrella when required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

State of New Hampshire Department of Administrative Services 7 Hazen Drive PO Box 483 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 J Harrison, V.P./JSC
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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
4/27/2016

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 FIAI/Cross Insurance 1100 Elm Street Manchester NH 03101		CONTACT NAME: Jennifer Galante PHONE (A/C, No, Ext): (603) 669-3218 FAX (A/C, No): (603) 645-4331 E-MAIL ADDRESS: jgalante@crossagency.com PRODUCER CUSTOMER ID: 00327720	
INSURED NH Department of Administrative Services Careno Construction Co. and any Subcontractor and any sub of subcontractor Contract Office, Room 130 7 Hazen Drive Concord, NH 03302-0483		INSURER(S) AFFORDING COVERAGE INSURER A: Liberty Mutual Holding Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	


COVERAGES **CERTIFICATE NUMBER:** 2016 BR NH Dept Admin **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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	B1642715498	4/27/2016	4/27/2017	<input checked="" type="checkbox"/> BUILDING	\$ 709,500	
		CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
		BASIC				BUILDING	BUSINESS INCOME	\$
		BROAD				1,000	EXTRA EXPENSE	\$
		SPECIAL				CONTENTS	RENTAL VALUE	\$
		EARTHQUAKE					BLANKET BUILDING	\$
		WIND					BLANKET PERS PROP	\$
		FLOOD					BLANKET BLDG & PP	\$
		<input checked="" type="checkbox"/> Builders Risk						\$
								\$
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY				\$		
	CAUSES OF LOSS					\$		
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER				\$		
	<input type="checkbox"/> CRIME					\$		
	TYPE OF POLICY					\$		
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$		
						\$		

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Covering salt building construction, project no. 80867R-B. 30 days cancellation provision applies, with the exception of non-payment which is 10 days.

CERTIFICATE HOLDER NH Department of Administrative Services Contract Office Room 130 7 Hazen Drive Concord, NH 03302-0483	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 J Harrison, V.P./JSC 
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/27/2016

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	INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Liberty Mutual Holding Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED NH Department of Administrative Services, Contract 7 Hazen Drive Concord NH 03302-0483	

COVERAGES **CERTIFICATE NUMBER:** 2016 OCP NH Dept Admin **REVISION NUMBER:**

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A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owners/Contractors <input type="checkbox"/> Protective Liability GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		GL8284884	4/27/2016	4/27/2017	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 - COMPI/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> 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	Y/N	N/A			<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)
Covering work to performed in connection with salt building construction. Project # 80867R-B. 30 days cancellation provision applies, with the exception of non-payment which is 10 days.

CERTIFICATE HOLDER NH Department of Administrative Services Contract Office, Room 130 7 Hazen Drive Concord, NH	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 J Harrison, V.P./JG3
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