



THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION

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CHRISTOPHER D. CLEMENT, SR.
COMMISSIONER

JEFF BRILLHART, P.E.
ASSISTANT COMMISSIONER

Bureau of Construction
November 14, 2012

His Excellency, Governor John H. Lynch
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

1. Authorize the Department of Transportation to enter into a contract with Delucca Fence Company, Inc. (Vendor 161385) of Methuen, MA on the basis of a low bid of \$951,738.37 for replacement of substandard cable guardrail along the NH Rte. 12 corridor in the Town of Walpole, from the date of Governor and Council approval through June 28, 2013 unless extended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Funding is available as follows:
04-96-96-963515-3054
Consolidated Federal Aid
400-500870 Highway Contract Payments \$951,738.37
FY 2013

2. Further authorize that a contingency in the amount of \$95,173.84 be approved for payment of latent conditions, which may appear during the construction of the project. The contingency requested is 10% of the contract amount.

Funding is available as follows:
04-96-96-963515-3054
Consolidated Federal Aid
400-500870 Highway Contract Payments \$95,173.84
FY 2013

EXPLANATION

This project is part of the annual Highway Safety Improvement Program's (HSIP) safety improvements for 2012. The intent of the project is to replace the existing sub-standard cable guardrail along 14 miles of NH 12 to improve safety. The existing guardrail will be replaced with new steel post and beam guardrail and extend the guardrail where necessary to bring the guardrail as close as possible to current standards. The existing three-strand cable guardrail was originally constructed in 1959. The cable guardrail posts are rotten below ground, the cable is rusted and the height of the rail does not meet current safety standards and requires replacement.

Page 2

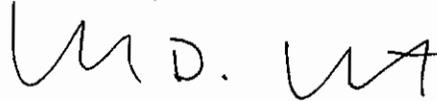
The contingency amount is proposed to be 10% of the contract amount. This is a one season guardrail contract, with sites at various locations along NH Route 12. Additional guardrail extensions, grading and environmental protection measures based on field condition may cause unanticipated overruns.

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 Service's Office, and subsequent to Governor and Council approval will be on file at the Department of Transportation.

This project funding is 90% federal funds with 10% state match. Turnpike toll credit is being utilized for match requirements, effectively using 100% federal funds.

A copy of the Tabulation of Bids received for this project is attached along with the Contract Supplemental Sheet and a map indicating the location of the project.

Sincerely,

A handwritten signature in black ink, appearing to read "C.D. Clement, Sr.", written in a cursive style.

Christopher D. Clement, Sr.
Commissioner

CDC/md

Department Estimate: \$992,545.90
Contract Amount: \$951,738.37
Under Estimate: \$ 40,807.53

Attachments

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION:

This project involves replacement of cable guardrail with steel post and beam guardrail and terminal end units. The project begins in the Town of Walpole on NH Route 12 approximately 0.40 miles south of Bridge Street at the Boat Ramp and continues north 14.0 miles along NH Route 12 ending 0.30 mile south of Ox Brook Road in the Town of Charlestown. The new guardrail terminal end units will be installed approximately in the same location as the obsolete rail. Some minor extensions of guardrail may be associated with these end section replacement.

FEDERAL FUNDING:

The Construction funding is identified from the Highway Safety Improvement Program (HSIP #6767) at 90% federal funding anticipated utilizing 10% Turnpike Toll credit match.

CONTINGENCY:

The Contingency amount is proposed to be 10%. This is a single season guardrail contract, with sites at various locations along NH Route 12. Additional guardrail extensions, grading and environmental protection measures based on field condition may cause unanticipated overruns.

PROJECT INITIATED:

State's Ten-Year Transportation Improvement Program

PROJECT EXPLANATION:

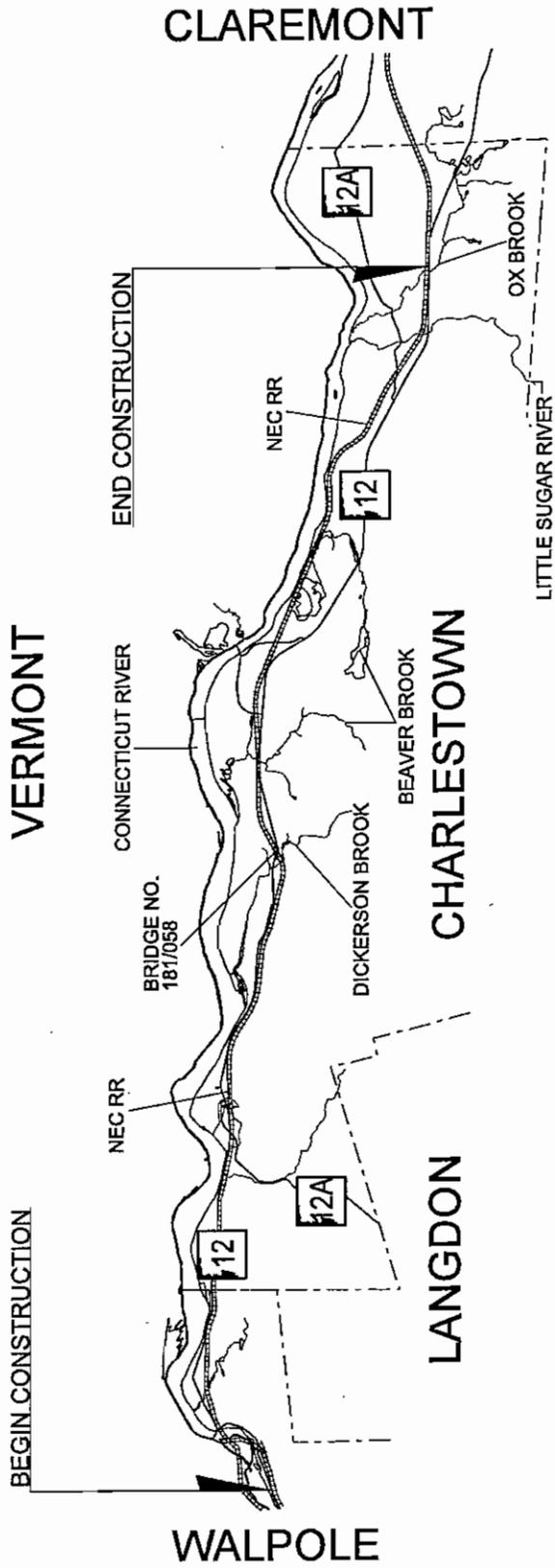
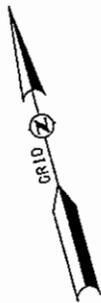
This project is part of the Highway Safety Improvement Program's safety improvements for 2012. The intent of the project is to replace the existing sub-standard cable guardrail with new steel post and beam guardrail and extend the guardrail where necessary to bring the guardrail up as close as possible to current standards. The existing three-strand cable guardrail was originally constructed in 1959. The cable guardrail posts are rotten below ground, the cable is rusted and the height of the rail does not meet current safety standards and requires replacement.

TRAFFIC IMPLICATIONS:

Alternating one-way traffic will be permitted with the use of flaggers or uniformed officers. A 14-foot minimum width lane will be provided for alternating one-way traffic. Two-way traffic shall be maintained whenever possible and shall be restored prior to non-work hours. Daytime shoulder closures will be permitted in conjunction with traffic shifts allowing for guardrail and other operations, where feasible.

COMPLETION DATE: June 28, 2013

STATEWIDE 16259 GUARDRAIL REPLACEMENT NH RTE 12 CHARLESTOWN



PROJECT: STATEWIDE
X-A001(216), 16259

COUNTIES AND CODES: CHESHIRE 005
SULLIVAN 019

DATE BIDS OPEN: OCTOBER 25, 2012

SCOPE OF WORK: GUARDRAIL REPLACEMENT

LOCATION: SEE THE PROSECUTION OF WORK

COMPLETION DATE: JUNE 28, 2013

A DELUCCA FENCE COMPANY, INC.
FIVE OLD FERRY ROAD, METHUEN, MA 01844 \$ 951,738.37
B CWS FENCE & GUARDRAIL
261 FRANKLIN HWY, ANDOVER, NH 03216 \$ 1,018,068.80

ITEM NO.	DESCRIPTION	UNIT	QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL	
				A	B			
201.882	INVASIVE SPECIES CONTROL	SY	100.	20.00	2,000.00	10.00	1,000.00	
202.7	REMOVAL OF GUARDRAIL	LF	20,800.	1.48	30,784.00	2.30	47,840.00	
203.5540	GUARDRAIL TAPERED RAIL PLATFORM	LF	450.	9.69	4,360.50	15.00	6,750.00	
203.5554	GUARDRAIL 50' EAGRT PLATFORM	U	41.	688.50	28,228.50	1,250.00	51,250.00	
203.55541	GUARDRAIL 50' EAGRT PLATFORM ALTERNATE	U	1.	688.50	688.50	1,000.00	1,000.00	
203.5555	GUARDRAIL 25' EAGRT PLATFORM	U	2.	586.50	1,173.00	850.00	1,700.00	
203.55551	GUARDRAIL 25' EAGRT PLATFORM ALTERNATE	U	4.	586.50	2,346.00	850.00	3,400.00	
203.5596	GUARDRAIL E-2 PLATFORM	LF	302.	11.99	3,620.98	15.00	4,530.00	
203.601	EMBANKMENT-IN-PLACE COMMON STRUCTURE	CY	35.	32.64	1,142.40	10.00	350.00	
206.1	EXCAVATION	CY	10.	25.70	257.00	25.00	250.00	
206.19	COMMON STRUCTURE EXCAVATION EXPLORATORY	CY	5.	110.00	550.00	60.00	300.00	
206.2	ROCK STRUCTURE EXCAVATION	CY	10.	127.50	1,275.00	60.00	600.00	
304.32	CRUSHED GRAVEL FOR SHOULDER LEVELING	TON	1,600.	27.54	44,064.00	28.00	44,800.00	
403.12	HOT BITUMINOUS PAVEMENT, HAND METHOD	TON	250.	117.30	29,325.00	250.00	62,500.00	
550.101	STRUCTURAL STEEL (F) MOD BRIDGE APPROACH RAIL,	LB	749.	9.26	6,935.74	6.20	4,643.80	
565.929	ASYMMETRICAL THRIE BEAM TRANS (STEEL POSTS) (F)	U	4.	2,580.00	10,320.00	2,750.00	11,000.00	
585.3	STONE FILL, CLASS C	CY	10.	56.10	561.00	60.00	600.00	
604.4	RECONSTRUCTING/ADJUSTING CATCH BASIN & DROP INLET	LF	5.	382.50	1,912.50	450.00	2,250.00	

ITEM NO.	DESCRIPTION	UNIT	A			B		
			QUANTITY	UNIT PRICE	TOTAL	UNIT PRICE	TOTAL	TOTAL
606.00319	MOD. STEEL BEAM (THREE BEAM) FOR BEAM GUARDRAIL INCLUDING HARDWARE	LF	112.5	32.00	3,600.00	26.00	2,925.00	
606.120	BEAM GUARDRAIL (STANDARD SECTION) (STEEL POST)	LF	22,800.	18.10	412,680.00	17.50	399,000.00	
606.1202	BEAM GUARDRAIL (STANDARD SECTION - DOUBLE NESTED) (STEEL POST)	LF	100.	27.48	2,748.00	20.00	2,000.00	
606.1254	BEAM GUARDRAIL (TERM. UNI TYPE EAGRT 50 FT)	U	42.	1,985.00	83,370.00	1,985.00	83,370.00	
606.1255	BEAM GUARDRAIL (TERM. UNI TYPE EAGRT 25 FT)	U	7.	1,578.00	11,046.00	1,675.00	11,725.00	
606.127	BEAM GUARDRAIL (TERM. UNI TYPE G-2) (STEEL POST)	U	1.	536.00	536.00	500.00	500.00	
606.1296	BEAM GUARDRAIL (TERM. UNI TYPE E-2) (STEEL POST)	LF	302.	26.00	7,852.00	27.50	8,305.00	
606.141	BEAM GUARDRAIL (CURVED W/CRT POSTS)	LF	225.	22.39	5,037.75	22.00	4,950.00	
609.811	BITUMINOUS CURB, TYPE B (4" REVEAL)	LF	12,600.	5.10	64,260.00	6.05	76,230.00	
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	1.	5,000.00	5,000.00	5,000.00	5,000.00	
618.7	FLAGGERS	HR	2,000.	9.93	19,860.00	21.50	43,000.00	
619.1	MAINTENANCE OF TRAFFIC PORTABLE CHANGEABLE MESSAGE SIGN (UNIT WEEK)	U	1.	10,500.00	10,500.00	22,000.00	22,000.00	
619.253	TRUCK-MOUNTED IMPACT ATTENUATOR, TEST LEVEL 3	UWK	24.	160.00	3,840.00	100.00	2,400.00	
621.2	RETROREFLECTIVE BEAM GUARDRAIL DELINEATOR	U	1.	2,500.00	2,500.00	1,500.00	1,500.00	
624.1	RAILROAD PROTECTION - FLAGGING SERVICE	EA	290.	3.80	1,102.00	4.00	1,160.00	
645.43	TEMPORARY SLOPE STABILIZATION TYPE C	HR	20.	165.00	3,300.00	45.00	900.00	
645.531	SILT FENCE	SY	11,000.	1.12	12,320.00	2.50	27,500.00	
645.7	STORM WATER POLLUTION PREVENTION PLAN	LF	2,450.	2.81	6,884.50	3.00	7,350.00	
645.71	MONITORING SWPPP AND EROSION AND SEDIMENT CONTROLS	U	1.	2,000.00	2,000.00	2,000.00	2,000.00	
646.31	TURF ESTABLISHMENT WITH MULCH AND TACKIFIERS	HR	24.	60.00	1,440.00	60.00	1,440.00	
647.1	HUMUS	SY	11,000.	2.04	22,440.00	1.50	16,500.00	
670.066	MAILBOX SUPPORT ASSEMBLIES	CY	1,100.	38.76	42,636.00	20.00	22,000.00	
692.	MOBILIZATION	EA	2.	125.00	250.00	150.00	300.00	
693.	ON-THE-JOB TRAINING OF UNSKILLED WORKERS	U	1.	40,192.00	40,192.00	14,150.00	14,150.00	
		\$	1.	600.00	600.00	600.00	600.00	

ITEM NO.	DESCRIPTION	UNIT	QUANTITY	A		B		TOTAL	UNIT PRICE	TOTAL
				UNIT PRICE	TOTAL	UNIT PRICE	TOTAL			
697.11	INVASIVE SPECIES CONTROL AND MANAGEMENT PLAN	U	1.	1,200.00	1,200.00	1,500.00	1,500.00	1,500.00		1,500.00
699.	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	\$	1.	5,000.00	5,000.00	5,000.00	5,000.00	5,000.00		5,000.00
1010.15	FUEL ADJUSTMENT	\$	1.	10,000.00	10,000.00	10,000.00	10,000.00	10,000.00		10,000.00
					\$951,738.37					\$1,018,068.80



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/30/2012

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 The Rowley Agency, Inc. 139 Loudon Road P.O. Box 511 Concord NH 033020511		CONTACT NAME: PHONE (A/C, No, Ext): 603.224.2562 FAX (A/C, No): 603.224.8012 E-MAIL ADDRESS: PRODUCER CUSTOMER ID #:															
INSURED DeLuca Fence Company, Inc. 15 Old Ferry Road LLC, 5 Old Ferry Road LLC 5 Old Ferry Road Methuen MA 01844		<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Citizens Insurance Co of</td> <td></td> </tr> <tr> <td>INSURER B: The Hanover Insurance Company</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Citizens Insurance Co of		INSURER B: The Hanover Insurance Company		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER D:																	
INSURER E:																	
INSURER F:																	

COVERAGES

CERTIFICATE NUMBER: 11-12 NH WC

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			ZBP667113607	12/31/2011	12/31/2012	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 250,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person)	\$ 5,000
	<input checked="" type="checkbox"/> CG0001						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"/> PRO-JECT <input checked="" type="checkbox"/> LOC							PRODUCTS - COM/POP AGG	\$ 2,000,000
								\$
B	AUTOMOBILE LIABILITY			AMP667113707	12/31/2011	12/31/2012	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS							\$
<input type="checkbox"/> NON-OWNED AUTOS							\$	
B	UMBRELLA LIAB			UHP667113807	12/31/2011	12/31/2012	EACH OCCURRENCE	\$ 10,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB						AGGREGATE	\$ 10,000,000
	<input type="checkbox"/> DEDUCTIBLE							\$
	<input checked="" type="checkbox"/> RETENTION \$ 0							\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WHP940927500	12/31/2011	12/31/2012	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	<input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A	STATE 3A: NH NO EXCL OFFICERS			E.L. EACH ACCIDENT	\$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 500,000
	Leased/Rented Equipment			ZBP667113607	12/31/2011	12/31/2012	E.L. DISEASE - POLICY LIMIT	\$ 500,000
							Limit: \$250,000	
							Deductible: \$1,000	

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

Statewide X-A001 (216) 16259 replacement of cable guardrail with steel post and beam guardrail and terminal end units. DOT are included as additional insured under general liability coverage when required by written contract. *except 10 days for nonpayment of premium.

CERTIFICATE HOLDER**CANCELLATION**

NH Department of Transportation
 PO Box 483
 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

Christine Holman/CHH



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/30/2012

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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 THE ROWLEY AGENCY INC. 139 Loudon Road P.O. Box 511 Concord NH 03302-0511	CONTACT NAME: Christine Holman, CPCU, CIC PHONE (A/C No. Ext.): (603) 224-2562 E-MAIL ADDRESS: cholman@rowleyagency.com	FAX (A/C No.): (603) 224-8012
	INSURER(S) AFFORDING COVERAGE	
INSURED State of New Hampshire, DOT c/o Delucca Fence Company Inc. 5 Old Ferry Road Methuen MA 01844	INSURER A: Hanover Ins - Maine INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 0004

COVERAGES **CERTIFICATE NUMBER:** OCP - NH DOT **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 <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		OCP103012	10/30/2012	10/30/2013	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 0 MED EXP (Any one person) \$ 0 PERSONAL & ADV INJURY \$ 0 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 0
	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					
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 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				WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 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)
Statewide X-A001(216), 16259 Replacement of cable guardrail with steel post and beam guardrail and terminal end units

CERTIFICATE HOLDER State of New Hampshire DOT PO Box 483 Concord, NH 03302	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 C Holman, CPCU, CIC/C <i>Christine Holman</i>
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