



THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



Bank

CHRISTOPHER D. CLEMENT, SR.
COMMISSIONER

JEFF BRILLHART, P.E.
ASSISTANT COMMISSIONER

Bureau of Construction
October 4, 2012

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

REQUESTED ACTION

Authorize the Department of Transportation to enter into a contract with Jay-Mor Enterprises, Inc. (Vendor 177300) of Pelham, NH on the basis of a low bid of \$57,800.00 for demolition of buildings on two State owned parcels in the City of Keene and Town of Troy, from the date of Governor and Council approval through May 31, 2013 unless extended by the Department in accordance with the Standard Specifications. 100% Federal Funds.

Funding is available as follows: FY 2013
04-96-96-963515-3054
Consolidated Federal Aid
400-500870 Highway Contract Payments \$57,800.00

EXPLANATION

The roadway projects to which these building demolitions are associated are the Keene-Swanzey 10309 and Troy 10434. The two parcels were purchased as advanced acquisitions in anticipation of future construction needs. The buildings on these properties are in poor and deteriorating condition. The building demolition is necessary to make way for roadway construction, reduce property management costs, and reduce liability.

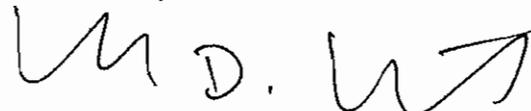
Although the bid costs exceeded the Department's estimate, the low bid is felt to be reasonable for the work involved. Upon conferring with the low bidder, it was determined that the Department's estimate did not fully take into account that dumping facilities are becoming stricter requiring more labor intensive sorting of demo material, that cinder block construction material requires separate site disposal and trucking, and the small quantity of loam and seeding areas. Re-advertising this project would result, in our opinion, in higher prices and prevent the completion of the work in a timely manner. The Department considers it to be in the best interest of the State to accept this bid to accomplish these needed repairs.

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 80% federal funds with 20% 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,



Christopher D. Clement, Sr.
Commissioner

CDC/md

Department Estimate: \$38,320.00
Contract Amount: \$57,800.00
Over Estimate: \$19,480.00

Attachments

PROJECT: KEENE-SWANZEY, TROY

FED. NO.: X-A001(201), X-A002(446)

STATE NO: 10309S, 10434E

DATE: July 23, 2012

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION: This project calls for the demolition of buildings on two State owned parcels located in the City of Keene and Town of Troy. One (1) commercial structure located at 536 West Street in Keene, and one (1) residential structure with a detached garage and a wood framed shed located at 66 Bigelow Hill Road in Troy.

FEDERAL FUNDING: 80% federal funding anticipated utilizing Turnpike Toll credits as the State's 20% match.

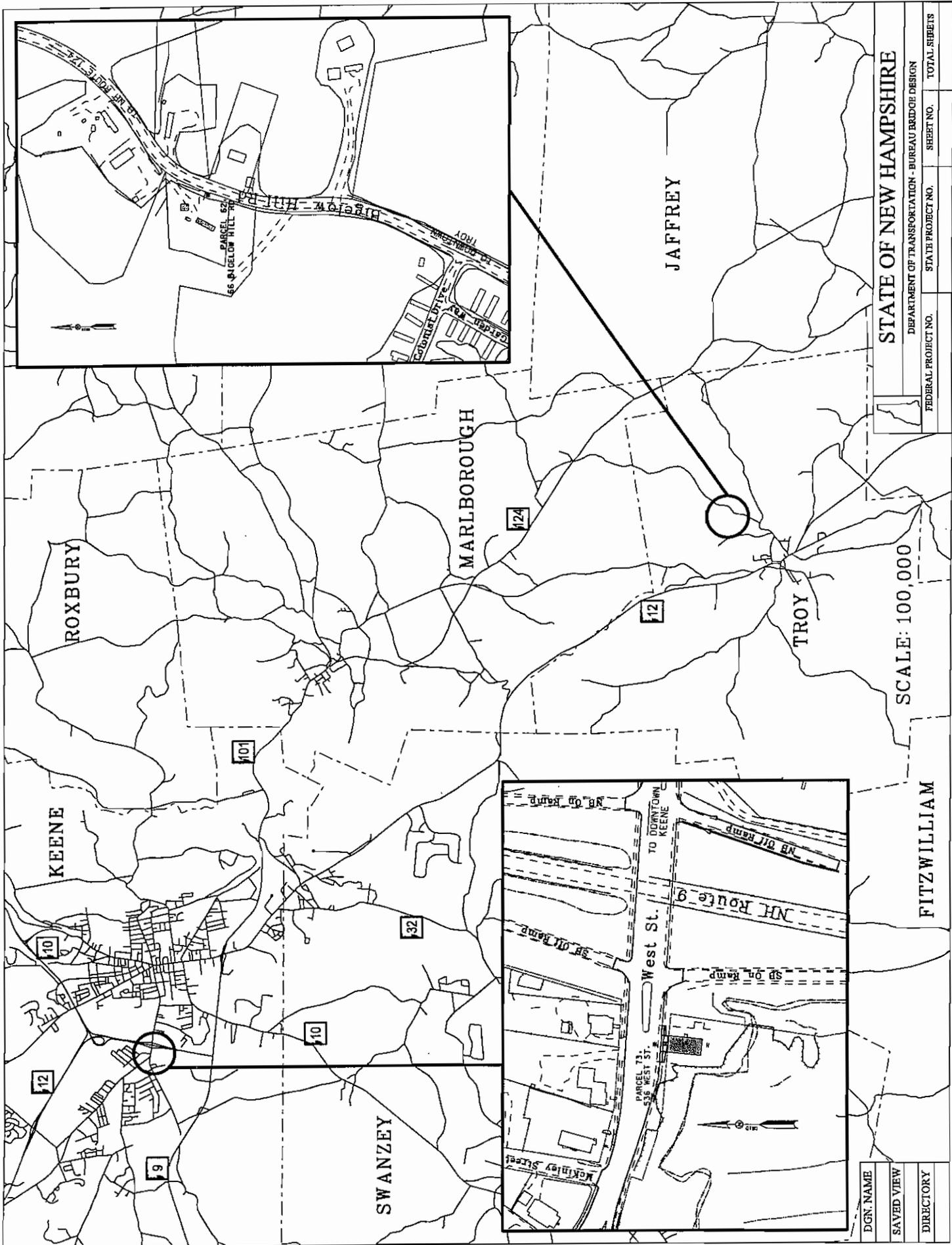
PROJECT INITIATED: State's Ten-Year Transportation Improvement Program.

PROJECT NEED: The roadway projects to which these building demolitions are associated are the Keene-Swanzey 10309 and Troy 10434. The two parcels were purchased as advanced acquisitions in anticipation of future construction needs. The building demolition is necessary to make way for roadway construction, reduce property management costs, and reduce liability.

TRAFFIC IMPLICATIONS: Two-way traffic will be maintained on existing paved roadways while building demolition work is completed. Alternating one-way traffic may be necessary during brief periods of loading and off-loading equipment, and water main capping.

INTERMEDIATE COMPLETION DATE: November 30, 2012

COMPLETION DATE: May 31, 2013



STATE OF NEW HAMPSHIRE

DEPARTMENT OF TRANSPORTATION - BUREAU BRIDGE DESIGN

FEDERAL PROJECT NO. STATE PROJECT NO. SHEET NO. TOTAL SHEETS

SCALE: 100,000

FITZWILLIAM

DGN. NAME	
SAVED VIEW	
DIRECTORY	

THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION

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PROJECT:

KEENE-SWANZEY
X-A001(201), 10309S AND
TROY
X-A002(446), 10434E

COUNTIES AND CODES:

CHESHIRE 005

DATE BIDS OPEN:

SEPTEMBER 6, 2012

SCOPE OF WORK:

BUILDING DEMOLITION

LOCATION:

2 STATE OWNED PARCELS IN THE CITY
OF KEENE AND TOWN OF TROY

COMPLETION DATE:

MAY 31, 2013

A JAY-MOR ENTERPRISES, INC.

505 BRIDGE ST., PO BOX 195, PELHAM, NH 03076-0195 \$ 57,800.00

B FRANCESCO DEMOLITION, INC.

12 CANOE CLUB LANE, PEMBROKE, MA 02359 \$ 60,885.00

ITEM NO.	DESCRIPTION	UNIT	QUANTITY	A		B		TOTAL
				UNIT PRICE	TOTAL	UNIT PRICE	TOTAL	
201.881	INVASIVE SPECIES CONTROL TYPE I	SY	20.	10.00	200.00	50.00	1,000.00	
202.201	DEMOLISHING BUILDINGS	U	1.	28,000.00	28,000.00	23,985.00	23,985.00	
202.202	DEMOLISHING BUILDINGS	U	1.	16,700.00	16,700.00	24,200.00	24,200.00	
202.301	BUILDING ASBESTOS ABATEMENT	U	1.	10,400.00	10,400.00	6,000.00	6,000.00	
619.1	MAINTENANCE OF TRAFFIC MOBILIZATION	U	1.	100.00	100.00	1,000.00	1,000.00	
692.	INVASIVE SPECIES CONTROL AND MANAGEMENT PLAN	U	1.	1,000.00	1,000.00	1,500.00	1,500.00	
697.11	MISCELLANEOUS TEMPORARY EROSION AND SEDIMENT CONTROL	U	2.	100.00	200.00	1,000.00	2,000.00	
699.		\$	1.	1,200.00	1,200.00	1,200.00	1,200.00	
					\$57,800.00		\$60,885.00	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/3/2012

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 FIAI/Cross Ins-Manchester 1100 Elm Street Manchester NH 03101	CONTACT NAME: Jennifer Kokolis
	PHONE (A/C No. Ext): (603) 669-3218 FAX (A/C No.): (603) 645-4331 E-MAIL ADDRESS: JKokolis@crossagency.com
INSURED Jay-Mor Enterprises Inc PO Box 195 505 Bridge Street Pelham NH 03076	INSURER(S) AFFORDING COVERAGE
	INSURER A: First Mercury Ins. Co.
	INSURER B: Union Insurance Company
	INSURER C: Continental Indemnity Company
	INSURER D: Everest Indemnity Is Co
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: CL1252566590 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 <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> XCU included GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC			MA-CGL-000006015-01	2/18/2012	2/18/2013	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 - COMPROP AGG \$ 2,000,000
	B			CAA037327411	12/16/2011	12/16/2012	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist combined \$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			MA-UMB-000006016-01	2/18/2012	2/18/2013	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
C	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	46-854943-01-01 (3a.) NH & MA Robert & James Morgan excluded	5/26/2012	5/26/2013	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
D	Pollution Liability Deductible \$5,000			EF4P00182311	9/1/2011	2/18/2013	Aggregate \$2,000,000 Occurrence \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Project: Keene-Swanzey X-A001(201), 10309S & Troy X-A002(446), 10434E. State of New Hampshire and Department of Transportation are included as Additional Insureds as respects to the CGL as per written contract. All operations/activities usual to the insured's operations throughout the policy term.

CERTIFICATE HOLDER

CANCELLATION

State of New Hampshire
Department of Transportation
7 Hazen Drive
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

Michael Caruso/JSC



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/15/2012

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PRODUCER FIAI/Cross Ins-Manchester 1100 Elm Street Manchester NH 03101	CONTACT NAME: Jennifer Kokolis PHONE (A/C, No, Ext): (603) 669-3218 E-MAIL ADDRESS: jkokolis@crossagency.com	FAX (A/C, No): (603) 645-4331
INSURED Jay-Mor Enterprises, Inc. State of New Hampshire Department of Transportation 7 Hazen Drive Concord NH 03302-0483	INSURER(S) AFFORDING COVERAGE INSURER A Berkley Specialty Underwriting	NAIC #
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: CL12101573590 REVISION NUMBER:

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INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVO	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPROP AGG \$
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						EACH OCCURRENCE \$ AGGREGATE \$
	DED <input type="checkbox"/> RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Owners, Contractors Protective Liability			CGL0045452-20	8/1/2012	8/1/2013	per Occurrence 1,000,000 Per Aggregate 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
All operations/activities usual to the insured's operations throughout the policy term.

State of New Hampshire and Department of Transportation are named as Additional Insureds as respects to written contract for project: Keene-Swanzey X-A0001 (201), 10309S and Troy X-A002 (446), 10434E

CERTIFICATE HOLDER

CANCELLATION

State of New Hampshire
Department of Transportation
7 Hazen Drive
Concord, NH 03302-0483

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AUTHORIZED REPRESENTATIVE

Jennifer Kokolis, JKI