



Victoria F. Sheehan
Commissioner

THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF TRANSPORTATION



William Cass, P.E.
Assistant Commissioner

Bureau of Construction
April 16, 2021

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 K5 Corporation of Rockland, MA (Vendor 162024) on the basis of a low bid of \$192,288.80 for maintenance of select stenciled and transverse line pavement markings statewide, from the date of Governor and Council approval through October 15, 2021, unless extended by the Department in accordance with the Standard Specifications. 100% Other Funds.

Funding is available in State Fiscal Year 2021, as follows:

Funding is available as follows:	<u>FY 2021</u>
04-96-96-963015-3039	
Highway Betterment Aid	
400-500870 Highway Contract Payments	\$192,288.80

EXPLANATION

This project is included in the State's Ten Year Transportation Improvement Plan, under the Pavement Marking Improvement Program. This project will perform maintenance of select stenciled and transverse line pavement markings using retroreflective paint and thermoplastic marking materials at specific locations in the State. This work is to be performed during the 2021 season. Work locations will be on state-maintained roads at intersections and along corridors. Locations are determined by Bureau of Traffic Pavement Marking section based on condition of existing markings, roadway priority/volume, and locations not subject to resurfacing. Scope includes select locations along the US 3 corridor Nashua to Merrimack, NH 101A corridor Milford to Merrimack, NH 125 corridor Plaistow to Rochester, Lee and Keene roundabouts, 14 railroad grade crossings, as well as other locations.

Project is needed to ensure and enhance the safety of traveling public by maintaining effective pavement markings. Pavement marking maintenance is normally performed by NHDOT forces but continually expanding inventory suggested outsourcing a portion of the annual work.

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 and

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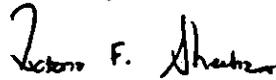
the bid reasonably conforms to the engineer's estimate in accordance with State procedures. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Service's Office, and subsequent to Governor and Council approval will be on file at the Department of Transportation.

This project funding is: 0% Federal Funding (100% Betterment; BET-STAL-HQ).

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.

Your approval of this resolution is respectfully requested.

Sincerely,



Victoria F. Sheehan
Commissioner

VFS/pcj

Department Estimate: \$253,841.10
Contract Amount: \$192,288.80
Under Estimate: \$ 61,552.30

Attachments



ABC Bid Data

STATEWIDE PAVEMENT MARKINGS
 43214
 NON-FEDERAL

PROJECT:	STATEWIDE PAVEMENT MARKINGS	Awarded To:	K5 CORPORATION
STATE PROJECT NUMBER:	43214		9 ROCKVIEW WAY
FED. PROJECT NUMBER:	NON-FEDERAL		ROCKLAND, MA 02370
DATE BIDS OPEN:	April 08, 2021, 2:00	Amount:	\$192,288.80
SCOPE OF WORK:	Pavement Marking Maintenance via Contractor. Limited to Stenciled and Transverse Markings	Certified by:	<u>PETER.E.STAMNAS</u> Director of Project Development
COMPLETION DATE:	October 15, 2021	Award Date:	
LOCATION:	Merrimack, Hillsborough, Cheshire, Carroll, Strafford, Belknap		

Summary of Bidders

Contractor	Bid Amount	Rank
K5 CORPORATION 9 ROCKVIEW WAY, ROCKLAND MA 02370	\$192,288.80	A
L & D SAFETY MARKINGS CORP 304 EAST MONTPELIER RD, BARRE VT 05641-8373	\$214,505.90	B



ABC Bid Data

STATEWIDE PAVEMENT MARKINGS

43214

NON-FEDERAL

Item No.	Description	Unit	Quantity	P&E		KI CORPORATION 8 ROCKVIEW WAY ROCKLAND, MA 02370		L & D SAFETY MARKINGS CORP 304 EAST MONTPELIER RD BARRE, VT 05841-4373	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

Items

618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	11,000.00	\$1.00	\$11,000.00	\$1.00	\$11,000.00	\$1.00	\$11,000.00
618.7	FLAGGERS	HR	610.00	\$40.00	\$24,400.00	\$20.00	\$12,200.00	\$15.00	\$9,150.00
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$22,000.00	\$22,000.00	\$8,000.00	\$8,000.00	\$18,000.00	\$18,000.00
632.02	RETROREFLECTIVE PAINT PAVEMENT MARKING, SYMBOL OR WORD	SF	44,423.60	\$3.50	\$155,482.60	\$3.00	\$133,270.80	\$3.30	\$146,597.88
632.3104	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 4" LINE	LF	601.00	\$2.50	\$1,502.50	\$1.00	\$601.00	\$1.50	\$901.50
632.3124	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 24" LINE	LF	1,150.00	\$12.00	\$13,800.00	\$8.50	\$7,475.00	\$7.00	\$8,050.00
632.32	RETROREFLECT. THERMOPLAS. PAVEMENT MARKING, SYMBOL OR WORD	SF	2,385.60	\$10.00	\$23,856.00	\$7.50	\$17,742.00	\$7.95	\$18,806.52
1010.15	FUEL ADJUSTMENT	\$	2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00
Totals:					\$253,841.10		\$192,288.80		\$214,505.90
Alt. Totals:									
Totals:					\$253,841.10		\$192,288.80		\$214,505.90



PS&E Comparison

STATEWIDE PAVEMENT MARKINGS

43214

NON-FEDERAL

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
Items								
618.61	UNIFORMED OFFICERS WITH VEHICLE	\$	11,000.00	\$1.00	\$11,000.00	\$1.00	\$11,000.00	\$0.00
618.7	FLAGGERS	HR	610.00	\$20.00	\$12,200.00	\$40.00	\$24,400.00	(\$12,200.00)
619.1	MAINTENANCE OF TRAFFIC	U	1.00	\$8,000.00	\$8,000.00	\$22,000.00	\$22,000.00	(\$14,000.00)
632.02	RETROREFLECTIVE PAINT PAVEMENT MARKING, SYMBOL OR WORD	SF	44,423.60	\$3.00	\$133,270.80	\$3.50	\$155,482.60	(\$22,211.80)
632.3104	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 4" LINE	LF	601.00	\$1.00	\$601.00	\$2.50	\$1,502.50	(\$901.50)
632.3124	RETROREFLECT. THERMOPLAS. PAVE. MARKING, 24" LINE	LF	1,150.00	\$6.50	\$7,475.00	\$12.00	\$13,800.00	(\$6,325.00)
632.32	RETROREFLECT. THERMOPLAS. PAVEMENT MARKING, SYMBOL OR WORD	SF	2,365.60	\$7.50	\$17,742.00	\$10.00	\$23,656.00	(\$5,914.00)
1010.15	FUEL ADJUSTMENT	\$	2,000.00	\$1.00	\$2,000.00	\$1.00	\$2,000.00	\$0.00
Total:					\$192,288.80		\$253,841.10	(\$61,552.30)

March 2, 2021

SUPPLEMENTAL PROJECT INFORMATION SHEET

DESCRIPTION: This project will perform maintenance of select stenciled and transverse line pavement markings using retroreflective paint and thermoplastic marking materials at specific locations in the State. This work is to be performed during the 2021 season. Work locations will be on state-maintained roads at intersections and along corridors. Locations are determined by Bureau of Traffic Pavement Marking section based on condition of existing markings, roadway priority/volume, and locations not subject to resurfacing. Scope includes select locations along the US 3 corridor Nashua to Merrimack, NH 101A corridor Milford to Merrimack, NH 125 corridor Plaistow to Rochester, Lee and Keene roundabouts, 14 railroad grade crossings, as well as other locations.

FEDERAL FUNDING: 0% (100% Betterment; BET-STAL-HQ)

PROJECT INITIATED: Under the Bureau pavement marking improvement program as highest priority locations within funding constraints.

CONTINGENCY: There is no contingency for this project.

PROJECT EXPLANATION: Project is needed to ensure and enhance the safety of traveling public by maintaining effective pavement markings. Pavement marking maintenance is normally performed by NHDOT forces but continually expanding inventory suggested outsourcing a portion of the annual work.

TRAFFIC IMPLICATIONS: Traffic impacts are expected to be minimal. Traffic Control for short-term operations will be performed by the contractor, specific to the work activity and locations. Generally, traffic control involves lane closure during application of marking material. Select locations require night work in areas of high daytime traffic volumes and other locations will be considered if requested by Contractor. Flaggers will be used for all operations except where uniformed officers may be warranted due to traffic volumes.

ADVERTISING DATE: March 16, 2021

INTERMEDIATE COMPLETION DATE: September 17, 2021

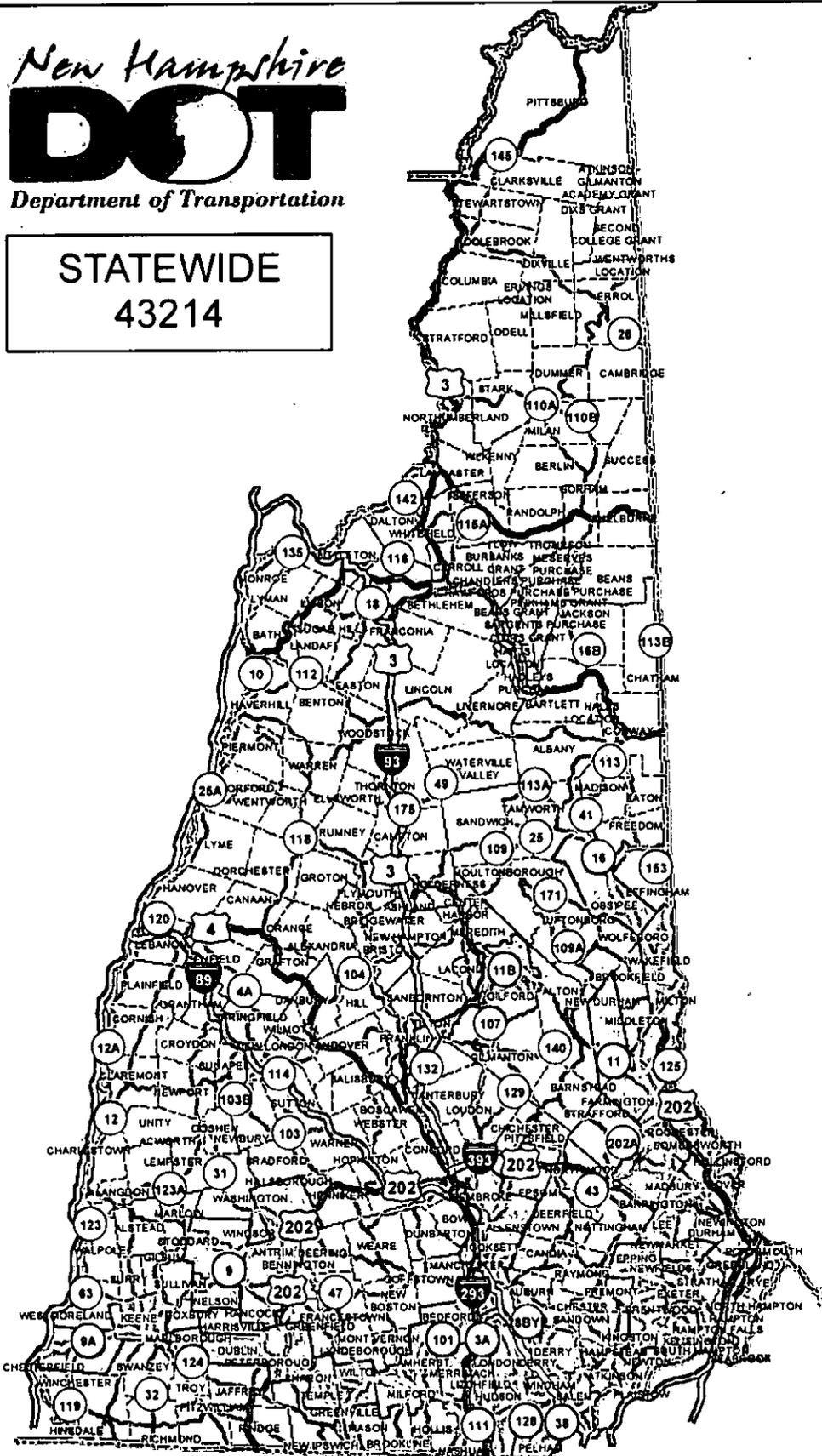
Complete all of the thermoplastic pavement markings (Items 632.31xx and 632.32) by the intermediate completion date.

COMPLETION DATE: October 15, 2021



New Hampshire
DOT
 Department of Transportation

STATEWIDE
 43214



- ALLENSTOWN
- AMHERST
- ANTRIM
- BARRINGTON
- BEDFORD
- BRENTWOOD
- CONCORD
- CHESTERFIELD
- DERRY
- DUBLIN
- EAST KINGSTON
- EPPING
- FARMINGTON
- FRANKLIN
- GILFORD
- HAMPTON
- HAMPTON FALLS
- HILLSBOROUGH
- HOOKSETT
- HUDSON
- KEENE
- KINGSTON
- LEE
- LITCHFIELD
- LONDONDERRY
- MARLBOROUGH
- MERRIMACK
- MILFORD
- MILTON
- NELSON
- NEW DURHAM
- NEWMARKET
- OSSIPEE
- PELHAM
- PEMBROKE
- PETERBOROUGH
- PLAISTOW
- ROCHESTER
- ROLLINSFORD
- SALEM
- SEABROOK
- SOMERSWORTH
- STODDARD
- TEMPLE
- TILTON
- WAKEFIELD
- WILTON
- WINDHAM

NOTE:	STATE OF NEW HAMPSHIRE	
	DEPARTMENT OF TRANSPORTATION BUREAU OF TRAFFIC	
	PROJECT: STATEWIDE.	STATE NO: 43214
LOCATION:VARIOUS ROUTES SOUTHERN NH		



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/29/2021

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).

PRODUCER Alliant Insurance Services, Inc. 40 Stanford Dr 2nd Fl Farmington CT 06032	CONTACT NAME: Sharyn Parker	
	PHONE (A/C, No, Ext): 860-269-2164	FAX (A/C, No):
E-MAIL ADDRESS: sharyn.parker@alliant.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
License#: 0C36861 HI-WSAF-02	INSURER A: Hudson Insurance Company	25054
INSURED Boston & Maine Corp ETAL c/o Pan Am Railways 1700 Iron Horse Park North Billerica, MA 01862	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 511559523 **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	ADOL INSD	SUBR WYD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR 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 \$
A	Railroad Protective Liability			RRP012703010497	4/29/2021	4/29/2022	Each Occurrence \$2,000,000 General Aggregate \$8,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Statewide Pavement Marking #43214. K5 Corp Work Order #233691

Contractor Name: K5 Corporation

CERTIFICATE HOLDER **CANCELLATION**

Boston & Marine Corp ETAL c/o Pan Am Railways 1700 Iron Horse Park North Billerica MA 01862	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 



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/29/2021

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.

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PRODUCER Alliant Insurance Services, Inc 40 Stanford Dr 2nd Fl Farmington CT 06032 License#: 0C36861 HI-WSAF-02	CONTACT NAME: Sharyn Parker PHONE (A/C No. Ext): 860-269-2164 E-MAIL ADDRESS: sharyn.parker@alliant.com	FAX (A/C No.):
	INSURER(S) AFFORDING COVERAGE	
	INSURER A : Hudson Insurance Company	25054
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER: 1371456309** **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
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						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 \$
A	Railroad Protective Liability			RRP012699010496	4/29/2021	4/29/2022	Each Occurrence \$2,000,000 General Aggregate \$8,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Statewide Pavement Marking #43214. K5 Corp Work Order #233691

Contractor Name: K5 Corporation

CERTIFICATE HOLDER **CANCELLATION**

New Hampshire Northcoast Corporation PO Box 429, Route 16 Ossipee NH 03864	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 
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