

**Department of Veterans Affairs  
National Cemetery Administration  
Automatic Gate Opener  
Golden Gate National Cemetery**

**Factor 2: PAST PERFORMANCE SURVEY**

Contractor \_\_\_\_\_

Project \_\_\_\_\_

Name of Company Official Providing Reference \_\_\_\_\_

Phone and Email \_\_\_\_\_

Date Completed \_\_\_\_\_

**Provide a rating of Unsatisfactory, Satisfactory, Good, Excellent, or Not Applicable for each of the following questions (1-6):**

1. How do you rate the contractor's past performance in meeting the construction quality requirements of the project?

Response \_\_\_\_\_

2. How do you rate the contractor's overall ability in managing and minimizing the cost growth of the project?

Response \_\_\_\_\_

3. How do you rate the contractor's ability to effectively handle the owner's requirements and needs during the project?

Response \_\_\_\_\_

4. How do you rate the contractor's past performance on this project in meeting the owner's total overall satisfaction considering all factors?

Response \_\_\_\_\_

5. Is the project 100% complete to your satisfaction?

Response \_\_\_\_\_

6. If not 100% complete to your satisfaction, why not?

Response \_\_\_\_\_

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7. Are there any open financial actions, such as requests for equitable adjustments or claims?

Response \_\_\_\_\_

8. Would you recommend the contractor and/or consider this contractor for another project?

Response \_\_\_\_\_