

Date: \_\_\_\_\_

From: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

To: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The Department of Veterans Affairs, National Cemetery Administration will be evaluating quotes for **Jacksonville National Cemetery, Grounds Maintenance Services, under solicitation 36C78619Q0053**. In accordance with Federal Acquisition Regulations (FAR), the evaluation of our firm's past performance will be included in the award evaluation decision to be made by VA. Your frank and candid response to this questionnaire will assist the evaluation team in this process.

We understand that you have a busy schedule and your participation in this survey is greatly appreciated. Please complete the enclosed questionnaire as thoroughly as possible and submit no later than **THE DATE AND TIME FOR RECEIPT OF QUOTES WHICH IS CURRENTLY 8:00 A.M., NOVEMBER 16, 2018**. You are encouraged to provide comments on the lines provided after each question.

This survey should be completed by the individual most knowledgeable of our firm's day-to-day operations and the overall condition of the service being rendered. However, that individual is encouraged to supplement their own knowledge of our performance with the judgment of others in your organization.

Completed evaluations shall be emailed directly to [Max.Andrade@va.gov](mailto:Max.Andrade@va.gov) from evaluator.

If you have any questions regarding this document, please contact Mr. Max Andrade at 540-658-7221 or email [Max.Andrade@va.gov](mailto:Max.Andrade@va.gov). Thank you for your valuable input and assistance.

Contractor Name: \_\_\_\_\_  
Contractor Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contract Number: \_\_\_\_\_  
Date of Award: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Original Contract Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Actual Contract Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date Work Was Accepted by Owner: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Description & Location of Work:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Contractor Rating: Please indicate the rating that best applies, and elaborate with comments where applicable. Please use the following criteria in your assessment:*

**Exceptional: Significantly exceeds contract requirements** to benefit the owner. Performance in the area indicated was accomplished with **few minor problems which were effectively corrected.**

**Very Good: Meets all contract requirements and exceeds some** to benefit of the owner. Performance in the area indicated was accomplished with **few minor problems which were effectively corrected.**

**Satisfactory: Meets all contract requirements.** Performance in the area indicated was accomplished with **some minor problems which appear to be adequately corrected.**

**Marginal: Does not meet some contractual requirements.** Performance in the area indicated reflects a **serious problem which has been minimally corrected**, if at all.

**Unsatisfactory: Does not meet contractual requirements** and recovery is not likely in a timely or cost effective manner. Performance in the area indicated contains **serious problem(s) which have been ineffectively corrected.**

**Quality of Work**

Did the contractor comply with all contract requirements?  YES  NO

Did the completed project meet your expectations?  YES  NO

How would you rate the contractor on the basis of owner (end-user) satisfaction?  
 Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

Would you select this firm again?  YES  NO

Please Describe Contractor's Strengths & Weaknesses (Use Additional Sheet if needed):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Timely Performance**

Complexity of Work                     Complex       Difficult       Routine

Was the contractor's staffing level consistent with the project's size and complexity?       YES                     NO

Was communication of schedule and problem issues adequate and consistent?                     YES                     NO

How would you rate the contractor's **adherence to contract delivery schedules**?  
 Exceptional     Very Good     Satisfactory     Marginal     Unsatisfactory

How would you rate the contractor's **timeliness** in submitting required reports, schedules, and documentation?  
 Exceptional     Very Good     Satisfactory     Marginal     Unsatisfactory

How would you rate the **accuracy and completeness** of the contractor's submittals, reports, schedules, and documentation?  
 Exceptional     Very Good     Satisfactory     Marginal     Unsatisfactory

How would you rate the **promptness and quality** of the contractor's response to technical directions, contract change orders, etc.?  
 Exceptional     Very Good     Satisfactory     Marginal     Unsatisfactory

Comments Regarding Timely Performance (Use Additional Sheet if needed):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Cost Control**

Amount of Original Contract      \$ \_\_\_\_\_                    Total Number of Modifications:      \_\_\_\_\_  
Total Dollar Amount of Modifications:      \$ \_\_\_\_\_                    Liquidated Damages Assessed: \$ \_\_\_\_\_

Were deductions taken for unperformed or defective work?  
 Frequently                     Rarely                     Never

Please explain circumstances of any deductions (Use Additional Sheet if needed):  
\_\_\_\_\_  
\_\_\_\_\_

How would you rate the contractor's efforts in **controlling costs**, especially in regards to modifications to the contract?  
 Exceptional     Very Good     Satisfactory     Marginal     Unsatisfactory

**How would you rate the contractor's reasonableness in identifying the scope and cost of modifications?**  
 Exceptional     Very Good     Satisfactory     Marginal     Unsatisfactory

Comments Regarding Cost Control (Use Additional Sheet if needed):  
\_\_\_\_\_  
\_\_\_\_\_

**Business Management**

How would you rate the contractor's **effectiveness in interfacing with owner's staff**?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the contractor's **flexibility and cooperation** with satisfying owner needs?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the contractor's **concern for the interests of the owner**?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the contractor's ability to **proactively recognize and resolve** unanticipated difficulties?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the **effectiveness** of the contractor's solutions to problems?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the contractor's **upper level management responsiveness**?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the contractor's **on-site management** of personnel and subcontractors?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the contractor's **onsite quality control**?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the contractor's **management and coordination** of subcontractors?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

How would you rate the contractor's **relationship** with subcontractors?

- Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

Were there any payment issues (delays, disputes, etc.) brought to your attention by subcontractors?

- YES  NO

Was the Site Manager/Job Superintendent consistently present on site when work was performed?

- YES  NO

Did the contractor demonstrate the ability to execute multiple phases/tasks at the same time?

- YES  NO

Would you consider the contractor and subcontractors to have been in a team relationship with you?

- YES  NO

Would you consider the contractor and subs to have been in an adversarial relationship with you?

- YES  NO

Were any enforcement actions ("cure notice", "show cause") issued over life of the contract?

- YES  NO

If Yes, please explain and indicate the status:

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**Technical Requirements**

[1] Did the Contractor perform **Grounds Maintenance** services under your requirement to include [1] Maintenance of grounds, regular mowing, edging, trimming, removal of leaves and debris, as well as, sweeping and/or blowing off roads and sidewalks, trash removal, snow and ice removal, and lawn maintenance, and [2] Turf Maintenance?  YES  NO

How would you rate the contractor's **effectiveness** on performing **Grounds Maintenance services**?  
 Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

[2] Did the Contractor perform **Headstone Maintenance** services under your requirement to include [1] Resetting and Realigning headstones, and [2] Maintenance and Cleaning of headstones and gravesites?  YES  NO

How would you rate the contractor's **effectiveness** on performing **Headstone Maintenance services**?  
 Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

[3] Did the Contractor perform **Janitorial** services under your requirement?  YES  NO

How would you rate the contractor's **effectiveness** on performing **Janitorial services**?  
 Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

[4] Did the Contractor perform **Casket Transportation and Committal Shelter** services under your requirement to include [1] Transportation of casketed remains and floral arrangements from committal shelter to gravesite, and [2] Daily Committal Shelter Set-up and cleaning?  YES  NO

How would you rate the contractor's **effectiveness** on performing **Casket Transportation and Committal Shelter services**?  
 Exceptional  Very Good  Satisfactory  Marginal  Unsatisfactory

**Overall Rating of Contractor**

What is your **overall rating** of the contractor's performance?

- Exceptional    Very Good    Satisfactory    Marginal    Unsatisfactory

Thank you for your input. Please elaborate on your overall rating of this contractor.

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Evaluated by:

Organization/Owner: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Name of Evaluator: \_\_\_\_\_

Title of Evaluator: \_\_\_\_\_

Signature : \_\_\_\_\_

Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_