

PERFORMANCE QUESTIONNAIRE

Your assistance is requested in support of a source selection.

Please complete this Questionnaire and email, Mail or send by facsimile [FAX 202-632-5824] to:

Department of Veterans Affairs
National Cemetery Administration
Attn: Tiffany Thornton
425 I Street NW, 5th Floor
Washington D.E. 20001

Desired Response Date: **August 22, 2013**

Email: *tiffany.thornton@va.gov*

When complete, the information on this form is SOURCE SELECTION SENSITIVE INFORMATION (41 U.S.C. 423) and shall be protected accordingly.

TO BE COMPLETED BY OFFEROR

1. CONTRACTOR NAME & ADDRESS:

2. CONTRACT NO.:

3. CONTRACT INITIATION DATE:

4. COMPLETION DATE:

5. CONTRACT VALUE (with options): \$

6. TYPE OF CONTRACT:

7. DESCRIPTION OF CONTRACT REQUIREMENTS:

Please add a continuation page if additional space necessary.

TO BE COMPLETED BY EVALUATING ORGANIZATION REPRESENTATIVE

8. **EVALUATION:** a. EVALUATOR'S NAME, POSITION (Project Manager/ COR/ Other) AND ORGANIZATION:

b. EVALUATOR'S PHONE NUMBER:

c. MONTHS PERFORMANCE MONITORED BY EVALUATOR:

Please circle the response code for each topic (A – G) that best reflects your experience with this contractor.

O = Outstanding

A = Adequate

P = Poor

E = Excellent

M = Marginal

N/O = Not Observed

A. Quality of Products and Services – Assess the contractor's conformance to contract requirements, specifications, and standards of good workmanship (e.g., technical, professional, environmental, or safety and health standards).

O **E** **A** **M** **P** **N/O**

B. Performance – Assess the contractor's performance as the General Contractor or Architect/Engineer (as appropriate) for the project.

O **E** **A** **M** **P** **N/O**

C. Schedule – Assess the timeliness of contractor against the schedule of activities.

O **E** **A** **M** **P** **N/O**

D. Technical Requirements – Assess the contractor's ability to fulfill the technical requirements of the contract.

O **E** **A** **M** **P** **N/O**

E. Cost Control – Assess the contractor's ability to manage the contract budget and control costs.

O **E** **A** **M** **P** **N/O**

F. Customer Satisfaction – Assess the contractor's responsiveness to customer concerns and "user friendliness".

O **E** **A** **M** **P** **N/O**

G. Overall Assessment.

O **E** **A** **M** **P** **N/O**

If an Award Fee contract, what was the average Award Fee % earned?