# PAST PERFORMANCE QUESTIONNAIRE

## SOLICITATION NO. 140P20XXRXXXX

INSTRUCTIONS: Offeror to complete Sections A and B and transmit questionnaire to reference.
Reference to complete Sections C and D and transmit back to Contracting Officer listed in section E.

**Notice to Contractor**

Information provided in this questionnaire is intended for use as source selection information and as such is deemed Source Selection Sensitive. Statements or comments provided in the questionnaire do not signify an express or implied endorsement of any product, supply, service, or enterprise.

This information shall not be construed as an endorsement by the Government or its employee(s) of the contractor for advertising purposes or in a manner that implies the contractor, its products, or services, are approved, endorsed, or considered by the Government to be superior to other products or services.

The contractor shall not be permitted to use any information provided in this questionnaire to publicize, or otherwise circulate, promotional materials that state or imply Governmental, organizational, group, expert, or individual endorsement or consumer testimonial of a product, service, or position which the contractor represents.

### A. OFFEROR INFORMATION

| | |
|---|---|
| **Company Name** | Company |
| **Street Address** | Address |
| **City** | City |
| **State** | State |
| **Zip Code** | XXXXX |
| **Unique Entity Identifier (UEI) Number / SAM** | XXXXXXX |
| **Point of Contact** | Name, Email, Phone |

### B. CONTRACT INFORMATION FOR PAST PROJECT (PROJECT SUBMITTED UNDER PROJECT EXPERIENCE)

| | |
|---|---|
| **Project Title** | Title |
| **Contract Number** | XXXXXXXXXX |
| **Contract Type** | Firm Fixed Price / Time & Materials / Cost Reimbursable / Other |
| **Awarded Contract Price** | $X,XXX,XXX |
| **Current / Final Price** | $X,XXX,XXX |
| **Contract Award Date** | XX/XX/XXXX |
| **Contract Completion Date** | XX/XX/XXXX |
| **Period of Performance** | XX/XX/XXX – XX/XX/XXX |
| **Project Location** | Park or Street address, City, State |
| **Client / Owner** | Company |
| **Brief description of the contract & work effort:** | Scope of work description |

## C. REFERENCE:

| | |
|---|---|
| **Name** | First, Last |
| **Position / Title** | Title |
| **Organization** | Agency or Company |
| **Phone Number** | XXX-XXX-XXXX |
| **Email Address** | Email |
| **Signature** | Signature |
| **Date** | XX/XX/XXXX |

## D. EVALUATION

| Rating | Definition |
|---|---|
| Exceptional | Performance met contractual requirements and exceeded ***many*** to the owner's benefit. The element being assessed was accomplished with ***few minor problems*** for which corrective actions taken by the contractor were ***highly effective.*** |
| Very Good | Performance met contractual requirements and exceeded ***some*** to the owner's benefit. The element being assessed was accomplished with ***some minor problems*** for which corrective actions taken by the contractor were ***effective.*** |
| Satisfactory | Performance met contractual requirements. The element being assessed contains ***some minor problems*** for which corrective actions taken by the contractor appear or were ***satisfactory.*** |
| Marginal | Performance ***did not meet some*** contractual requirements. The element being assessed reflects a ***serious problem*** for which the contractor ***has not yet identified corrective actions***. |
| Unsatisfactory | Performance does ***not*** meet most contractual requirements and ***recovery is not likely in a timely manner***. The element being assessed contains a ***serious problem(s)*** for which the contractor's corrective actions appear or were ***ineffective.*** |

| Evaluation Area | Rating |
|---|---|
| **Quality** | |
| Quality of workmanship (including subcontractors)? | Choose an item. |
| Quality of and adherence to quality control plan? | Choose an item. |
| Quality of informational and technical submittals? | Choose an item. |
| **Overall Quality Rating** | **Choose an item.** |
| **Comments** (Please provide comments supporting the above ratings. Comments supporting ratings of excellent, marginal, & unsatisfactory are especially helpful.): | |
| **Schedule (& Time Management)** | |
| Met project schedule milestones? | Choose an item. |
| Responded to owner requests in a timely manner? | Choose an item. |
| Informational and technical submittals submitted timely? | Choose an item. |
| Promptly addressed scheduling issues? | Choose an item. |
| **Overall Schedule (& Time Management) Rating** | **Choose an item.** |
| **Comments** (Please provide comments supporting the above ratings. Comments supporting ratings of excellent, marginal, & unsatisfactory are especially helpful.): | |
| **Cost Control** | |
| Addressed differing & unforeseen site conditions so as to minimize additional costs? | Choose an item. |
| Provided fair and reasonable pricing for contract modifications? | Choose an item. |

| | |
|---|---|
| Submitted accurate and complete invoices? | Choose an item. |
| Promptly paid subcontractors and suppliers? | Choose an item. |
| **Overall Cost Control Rating** | **Choose an item.** |
| **Comments** (Please provide comments supporting the above ratings. Comments supporting ratings of excellent, marginal, & unsatisfactory are especially helpful.): | |

| **Management** | |
|---|---|
| General oversight by project manager and superintendent? | Choose an item. |
| Coordination with and control of subcontractors? | Choose an item. |
| Avoidance of accidents & safety violations? | Choose an item. |
| Addressed location factors (especially remote locations)? | Choose an item. |
| Maintained good working relationship with owner representatives? | Choose an item. |
| Demonstrated flexibility, innovativeness and cooperation in resolving potential problems? | Choose an item. |
| **Overall Management Rating** | **Choose an item.** |
| **Comments** (Please provide comments supporting the above ratings. Comments supporting ratings of excellent, marginal, & unsatisfactory are especially helpful.): | |

| **Small Business Subcontracting (& Labor Standards)** | |
|---|---|
| Met regulatory and contractual labor standards? | Choose an item. |
| Successfully contracted with small and socio-economically disadvantaged businesses? | Choose an item. |
| Quality and adherence to applicable subcontracting plans? | Choose an item. |
| **Overall Small Business Subcontracting (& Labor Standards) Rating** | **Choose an item.** |
| **Comments** (Please provide comments supporting the above ratings. Comments supporting ratings of excellent, marginal, & unsatisfactory are especially helpful.): | |

| **Regulatory Compliance** | |
|---|---|
| Met building and life safety codes? | Choose an item. |
| **Overall Regulatory Compliance Rating** | **Choose an item.** |
| **Overall Recommendation:** | |
| Given what I know today about the contractor's ability to perform in accordance with the contract's most significant requirements, I would recommend them for similar contracts: | Choose an item. |
| **Overall Comments:** | |

## E. RETURN:

| | |
|---|---|
| **Return by** | Time / Date |
| **Name** | CO or CS name |
| **Title** | Contracting Officer / Contract Specialist |
| **Organization** | National Park Service – Denver Service Center |
| **Email** | First_Last@nps.gov |