

DIVISION OF CAPITAL ASSET MANAGEMENT STANDARD CONTRACTOR EVALUATION FORM

Section I - General Project Information

Your Name:	Telephone No.:
Position/Title:	Date:
Agency/Firm:	DCAM Interviewer (If any):
Name of Contractor:	Total Contract Cost With Change Orders:
	Contract Start/ End Dates:
Project Title:	Actual Completion Date
Scope of Work:	
Project Location:	

Important!!

***Please check (Ö) if this is an Interim Report (50% complete) •
or a Final Evaluation (at least 99% complete) •***

Section II - Evaluation Questionnaire

Please rate this contractor's performance in each of the following areas. If you need additional space, attach 8 1/2" x 11" sheets. If you rate the contractor below Satisfactory in any area, you must provide detailed information to explain the rating assigned.

1. Quality of Workmanship *0-28 points (refer to Page 4)*

Rate the quality of this contractor's completed work. Were there quality related or workmanship problems on the contract? If not, provide specific examples.

2. Project Management *0-13 points (refer to Page 4)*

a) Scheduling - Rate this contractor's performance with regard to adhering to contract schedules. Did this contractor meet the contract schedule or the schedule as revised by approved change orders? If not, was the delay attributable to this contractor? If so, provide specific examples.

0-13 points (refer to Page 4)

- (b) **Subcontractor Management** - Rate this contractor's ability, effort and success in managing and coordinating subcontractors (if no subcontractors, rate this contractor's overall project management). Was this contractor able to effectively resolve problems? If not, provide specific examples.

0-9 points (refer to Page 4)

- c) **Safety and Housekeeping Procedures** - Rate this contractor's safety and housekeeping procedures on this project. Were there any OSHA violations or serious safety accidents? If so, provide specific examples.

0-9 points (refer to Page 4)

- d) **Change Orders** - Did this contractor unreasonably claim change orders or extras? Was this contractor's price on change order and extras reasonable? If not, provide specific examples.

0-7 points (refer to Page 4)

- e) **Working Relationships** - Rate this contractor's working relationships with other parties (i.e., owner, designer, subcontractors, etc.). Did this contractor relate to other parties in a professional manner? If not, give specific examples.

0-7 points (refer to Page 4)

- f) **Paperwork Processing** - Rate this contractor's performance in completing and submitting required project paperwork (i.e., submittals, drawings, requisitions, payrolls, workforce reports, etc.). Did the contractor submit the required paperwork promptly and in proper form? If not, provide specific examples.

3. On-Site Supervisory Personnel Rating*0-14 points (refer to Page 4)*

- a) **General Performance** - Rate the general performance of this contractor's on-site supervisory personnel. Did the superintendent(s) have the knowledge, management skills and experience to run a project of this size and scope? If not, provide specific examples.

SECTION III - Legal and Administrative Proceedings

Are you aware of any legal or administrative proceedings, invoked bonds, assessed damages, demands for direct payment, payment bond claims, contract failures, contract terminations, or penalties involving this contractor on this contract? What is the status of any pending litigation? What was the final outcome of any completed litigation? What are the dollar amounts of assessed damages or penalties?

SECTION IV - Numerical Rating

Use the grid on the following page to rate the contractor's performance on this project. In assigning the Numerical Rating, please note the following:

1. You are not restricted to using the numerical values shown and may score in between the numbers shown.
2. A total Numerical Rating of 70 is required for a passing grade.
3. If you rate the contractor below satisfactory in any area, you must provide written comments in Section II to explain the rating(s) assigned.

Contractor's Name:

	Unsatisfactory	Below Average		Average		Above Average		Rating
		Poor	Deficient	Satisfactory (Passing)	Good	Very Good	Excellent	
1. Quality of Work	0	10	16	22	24	26	28	
2. Project Management								
a) Scheduling	0	4	8	10	11	12	13	
b) Subcontractor Management	0	4	8	10	11	12	13	
c) Safety and Housekeeping	0	3	4	6	7	8	9	
d) Change Orders	0	3	4	6	7	8	9	
e) Working Relationships	0	2	3	4	5	6	7	
f) Paperwork Processing	0	2	3	4	5	6	7	
						Subtotal - Item 2		
3. Supervisory Personnel Rating								
General performance	0	2	4	8	10	12	14	
						Subtotal - Item 3		
						Total Numerical Rating		

Section V - Evaluator Certification

I certify that the information contained in this evaluation form represents, to the best of my knowledge, a true analysis of this contractor's performance record on this contract.

I also certify that I have no ties with this contractor either through a business or family relationship.

I have mailed a copy of this completed evaluation form to the contractor on _____
 (A copy of this completed evaluation form **must** be mailed to the contractor.).

 Signature

 Date

Section VI - Additional Comments