

**ATTACHMENT J.5 PAST PERFORMANCE QUESTIONNAIRE AND COVER LETTER**

DATE: (TBD)

Dear Client,

We are currently responding to a request for proposal (RFP) for the NASA Ames Research Center Multiple Award Construction Contract (MACC) II procurement.

NASA Ames Research Center is continuing to place increasing emphasis on past performance as a source selection factor. As such, a requirement of its solicitation is that past clients of ours be identified and asked to participate in the evaluation process. We have identified \_\_\_\_\_ of your organization as the point of contact based on his/her knowledge concerning our work.

Please help us completing the enclosed Past Performance Questionnaire and forwarding it directly to NASA Ames Research Center, ATTN: Patricia Finnell-Mendoza, Code JAC:213-13, Moffett Field, CA 94035-0001, Telephone 650-604-6332. Facsimile responses are acceptable. Please fax to the attention of Patricia Finnell-Mendoza, fax 650-604-2593. E-mail responses may be sent to: [patricia.f.mendoza@nasa.gov](mailto:patricia.f.mendoza@nasa.gov).

A response to this questionnaire is requested to the above address not later than

\_\_\_\_\_.

Thank you for completing this questionnaire. Any questions may be directed to the undersigned.

Sincerely,

Enclosure

**This form contains Sources Selection Information when completed.**

SECTION I.      NNA12450885R-PFM      CONTRACT IDENTIFICATION (To be completed by Offeror)	
Offeror (Company/Division/Mailing Address):	
Contract Name:	
Contract Number:	
Contract Type (i.e. Fixed Price, Cost Plus Award Fee, etc):	
Customer Contact Person (Full name and phone number)	
Project Product or Service Description:	
Total Amount of Contract (Basic plus any options)	Claim Information
\$	
Period of Performance Dates (Basic plus any options)	
From:	To:
During this contract period of performance, this firm was the:	
<input type="checkbox"/> Prime Contractor <input type="checkbox"/> Subcontractor	
Describe any contracts that were terminated for performance issues or other circumstances.	
Please describe the issues here:	

## **SECTION II. PAST PERFORMANCE EVALUATION**

### **(To be completed by Contract Customer Only)**

Based on your knowledge of the contract identified above, please provide your assessment of how well the contractor performed on each of the following questions. It is very important to keep in mind that only performance in the *past 5 years* is relevant. Please rate the contractor as described below. Please give a short narrative as to why you chose the adjective you did, especially for those answers that are other than "satisfactory"

<b>Outstanding</b>	Performance meets contractual requirements and exceeds many to the Government's benefit. The contractual performance of the element or sub-element being assessed was accomplished with few minor problems for which corrective actions taken by the contractor were highly effective.
<b>Above Average</b>	Performance meets contractual requirements and exceeds some to the Government's benefit. The contractual performance of the element or sub-element being assessed was accomplished with some minor problems for which corrective actions taken by the contractor were effective.
<b>Satisfactory</b>	Performance meets contractual requirements. The contractual performance of the element or sub-element contains some minor problems for which corrective actions taken by the contractor appear or were satisfactory.
<b>Marginal</b>	Performance does not meet some contractual requirements. The contractual performance of the element or sub-element being assessed reflects a serious problem for which the contractor has not yet identified corrective actions. The contractor's proposed actions appear only marginally effective or were not fully implemented.
<b>Unsatisfactory</b>	Performance does not meet significant contractual requirements and recovery is not likely in a timely manner. The contractual performance of the element or sub-element contains a serious problem(s) for which the contractor's corrective actions appear or were ineffective.

**N/A:** Not applicable or rater has not observed performance in this area.

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<b>Management and Administration-Rate the following areas of contract performance</b>
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**Please rate the overall effectiveness of each contractor project management team member:**

1	Project Manager	O	AA	S	M	U	N/A
2	Safety Manager	O	AA	S	M	U	N/A
3	Quality Control Manager	O	AA	S	M	U	N/A
4	Superintendent	O	AA	S	M	U	N/A

**Please rate the overall accessibility and responsiveness of the project management team:**

5	Accessibility	O	AA	S	M	U	N/A
6	Responsiveness	O	AA	S	M	U	N/A

**Please rate the contractor's overall project management:**

7	Ability to develop and maintain the construction schedule	O	AA	S	M	U	N/A
8	Ability to meet contractual deadlines	O	AA	S	M	U	N/A
9	Timeliness of submittals	O	AA	S	M	U	N/A
10	Completeness of submittals	O	AA	S	M	U	N/A
11	Overall workmanship	O	AA	S	M	U	N/A
12	Ability to identify and solve problems in a timely manner	O	AA	S	M	U	N/A
13	Ability to work effectively with the customer	O	AA	S	M	U	N/A
14	Consideration in disrupting the customer as little as possible	O	AA	S	M	U	N/A
15	Compliance with security requirements	O	AA	S	M	U	N/A
16	Ability to maintain a safe construction site	O	AA	S	M	U	N/A
17	Any injuries, incidents, or close calls were adequately reported and/or resolved.	O	AA	S	M	U	N/A
18	Compliance with all environmental regulations	O	AA	S	M	U	N/A

**Please rate the contractor's subcontract management abilities:**

19	General contractor's control of subcontractors	O	AA	S	M	U	N/A
20	Timeliness of subcontractor performance	O	AA	S	M	U	N/A

**Please rate the contractor's contract administration abilities:**

21	Working with the Contracting Officer to resolve contract disputes	O	AA	S	M	U	N/A
22	Contract modifications were bid at a competitive price	O	AA	S	M	U	N/A
23	Maintained all required bonds and insurance throughout the project	Yes			No		

**Other-Complete the following questions**

**What are the contractor's strengths?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What are the contractor's weaknesses?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Have there been any indications that the contractor has financial problems?**

YES  NO  Do not know

**(If YES, Please explain)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Would you select this contractor again and why?**

YES  NO

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How would you rate the contractor's overall performance and why?**

O	AA	S	M	U	N/A
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Any additional comments and/or remarks on answers from the first page:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION III. RESPONDENT INFORMATION**

A. Name of evaluator \_\_\_\_\_

B. Agency company name and mailing address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Position title: \_\_\_\_\_

D. Role in the program/contract: \_\_\_\_\_

E. Telephone number: \_\_\_\_\_

F. Facsimile number: \_\_\_\_\_

G. E-mail address: \_\_\_\_\_

H. Length of involvement in program/contract: \_\_\_\_\_

I. Date questionnaire completed: \_\_\_\_\_

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Signature \_\_\_\_\_ Date \_\_\_\_\_