

**NNL07186436R**  
**Attachment L-2**  
**Evaluation of Past Performance Questionnaire and Instructions**

Sections I through III provide for contractually related descriptive information and identification of the evaluator.

Section IV lists the major work elements within the Statement of Work (SOW). Please provide your assessment of the performance associated with our SOW evidenced within the contract for which you are a reference.

Section V evaluates the overall performance, while Section VI evaluates factors associated with their business management and Section VII evaluates the Contractor's technical performance. Space is provided for comments (additional pages may be used if desired) and comments would be particularly appreciated concerning excellent and poor/unsatisfactory performance.

**Please send the completed form directly to the address listed at the top of the first page of the form. This completed form is due no later than May 14, 2007.**

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**Attachment L-2**  
**Evaluation of Past Performance Questionnaire and Instructions**

**ATTACHMENT L-2**  
**ATTN: MICHAEL KASZYCA**  
**TO BE OPENED BY ADDRESSEE ONLY**  
**NASA LANGLEY RESEARCH CENTER**  
**9B LANGLEY BOULEVARD, MS 126**  
**HAMPTON VA 23681-2199**  
**TELEPHONE: (757) 864-2436**  
**FAX: (757) 864-9775**  
**EMAIL: MICHAEL.KASZYCA-1@NASA.GOV**

*This form contains Source Selection Information when completed.*  
*See FAR 3.104.*

**EVALUATION OF PAST PERFORMANCE**

Solicitation No. NNL07186436R

**I. CONTRACT INFORMATION**

A. Name of Company Being Evaluated:

B. Address:

C. Contract Number:

D. Contract Type:

E. Contract Value:

F. Period of Performance: From:                      To:

**II. DESCRIPTION OF CONTRACT:**

During the contract performance being evaluated, this firm was the: \_\_\_\_\_ Prime Contractor;  
\_\_\_\_\_ Significant Subcontractor; \_\_\_\_\_ Team Member; \_\_\_\_\_ Other (describe)

Does a corporate or business relationship exist between the firm being evaluated and your organization?

\_\_\_ No, \_\_\_ Yes. If Yes, please describe.

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**III. EVALUATOR**

Name:

Title:

Organization:

Address:

e-mail address:

Telephone No.:

Fax No.:

SEND TO:

**PERFORMANCE INFORMATION:** Mark the column/number that corresponds to the descriptions in the table below to describe the contractor's performance.

<b>P/U</b>	<b>S</b>	<b>G</b>	<b>VG</b>	<b>E</b>	<b>N</b>
<b>Poor/ Unsatisfactory</b>	<b>Satisfactory</b>	<b>Good</b>	<b>Very Good</b>	<b>Excellent</b>	<b>Neutral</b>
<b>Does not meet minimum acceptable standards in one or more areas; remedial action required in one or more areas; deficiencies in one or more areas which adversely affect overall performance.</b>	<b>Meets or slightly exceeds minimum acceptable standards; adequate results; reportable deficiencies with identifiable, but not substantial, effects on overall performance.</b>	<b>Effective performance; fully responsive to contract requirements; reportable deficiencies, but with little identifiable effect on overall performance.</b>	<b>Very effective performance; fully responsive to contract requirements; contract requirements accomplished in a timely, efficient, and economical manner for the most part; only minor deficiencies with minimal effect on overall performance.</b>	<b>Of exceptional merit; exemplary performance in a timely, efficient, and economical manner; very minor (if any) deficiencies with no adverse effect on overall performance.</b>	<b>No record of relevant past performance or past performance information is not available</b>

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IV. TECHNICAL INPUT

WORK ELEMENT	P/U	S	G	VG	E	N
<b>Title of Evaluation Area</b>						
1. Mowing						
2. Edging						
3. Cultivating						
4. Mulching						
5. Pruning						
6. Ground Cover Maintenance						
7. Refuse, Trash and Litter Collection/Removal						
8. Pest Control Services						
9. Leaf Raking and Gathering						
10. Herbicide Application						
11. Street Sweeping						
12. Tree Removal						
13. Limb Removal						
14. Excavation						
15. Cleaning (Septic, Grease Trap, Ditch, Catch Basins)						
16. Topsoil Placement						
17. Seeding						
18. Fertilizing						
19. Establishing Trees, Shrubs and Ground Cover						
20. Transplanting Trees, Shrubs and Ground Cover						
21. Underbrushing						
22. Lawn Repair						
23. Sandbagging						
24. Barricade Transportation and Set-up						
25. Handling and Disposal of Boxed Trash and Privacy Act Material						
26. Maintenance of Perimeter Fence Line						
27. Maintenance of Prestige (e.g., The area that surrounds a Headquarters Building or similar area of such importance.) Grounds						

Comments:

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**V. OVERALL PERFORMANCE**

How would you rate the Contractor in the following areas? Please indicate E, VG, G, S, P/U or N for each area (see instruction sheet for definitions):

<b>Area</b>	<b>P/U</b>	<b>S</b>	<b>G</b>	<b>VG</b>	<b>E</b>	<b>N</b>
Local Management Authority						
Contract Compliance						
Subcontract Administration						
Responsiveness to Technical Direction						
Responsiveness to Change Orders (N/A if not services)						
Phase-in						
Meeting SDB Goals						
Planning, Estimating and Scheduling						
Work Control						
Responsiveness to Changing Requirements						
Management of Diverse Tasks						
Early Identification of Problems and Timely Resolution						
Labor Relations						
Worked Without Extensive Guidance						

**VI. FINANCIAL MANAGEMENT PERFORMANCE**

A. How would you rate the Contractor in the following areas?  
Please indicate E, VG, G, S, P/U or N for each area:

<b>Area</b>	<b>P/U</b>	<b>S</b>	<b>G</b>	<b>VG</b>	<b>E</b>	<b>N</b>
Complete and Timely Reporting						
Cost Control						
Procurement System						
Property Management System						
Accounting System						
Adherence to Cost Estimates						
Overall Financial Management						

B. Please provide the Contractor's yearly overhead and G&A rates for the most recent three years available:

<b>Overhead Rate</b>	<b>G&amp;A Rate</b>	<b>Year</b>

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C. If ceiling rates are contained in this contract, please indicate current ceiling rates:

<b>Overhead</b>	<b>G&amp;A</b>

D. Has the Contractor experienced overruns or underruns? (No or Yes)

If yes, please elaborate.

**VII. TECHNICAL PERFORMANCE**

A. How would you rate the Contractor's technical performance in the following areas? Please indicate E, VG, G, S, P/U or N for each area:

<b>Area</b>	<b>P/U</b>	<b>S</b>	<b>G</b>	<b>VG</b>	<b>E</b>	<b>N</b>
Completeness and Accuracy						
Timeliness						
Product Reviews/Product Assurance						
Documentation						
Qualifications of Technical Staff						
Overall Technical Performance						

B. How long did proposed key personnel remain on contract?

C. What is the Contractor's average annual turnover rate?

D. Is there an award or incentive fee? If so, please give the fee dollars and percentages earned for the last three reporting periods:

<b>Review Period</b>	<b>Fee Dollars</b>	<b>Percentage of Possible Fee</b>

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**VIII. SAFETY PERFORMANCE**

A. How would you rate the Contractor's technical performance in the following areas? Please indicate E, VG, G, S, P/U or N for each area:

<b>Area</b>	<b>P/U</b>	<b>S</b>	<b>G</b>	<b>VG</b>	<b>E</b>	<b>N</b>
Compliance with safety and health rules and regulations						
Timeliness and effectiveness of controlling and eliminating hazards in the workplace						

B. Was the Contractor issued any internal or OSHA notice of violations during the time of their contract with your organization? If so, please explain.

**IX. CONCLUSIONS**

Would you recommend this Contractor for another contract? Why?  
Please add any comments you feel pertinent.