

**PAST PERFORMANCE QUESTIONNAIRE  
SOLICITATION NUMBER: SP3100-09-R-0004**

An offeror has provided this questionnaire to you (the Respondent) based upon previous work that they have accomplished for you. The offeror considers this to be relevant experience for the work involved in this solicitation. The Government will evaluate relevant past performance of each offeror in making its award determination. This questionnaire is one way for the Government to obtain such information.

Please provide your candid responses. It is important that your information be as factual, accurate and complete as possible to preclude the need for follow-up by Government evaluators. However, the Government may contact you for follow-up information. If you do not have knowledge of or experience with the company in question, please forward this Questionnaire to the person who does or notify the Contract Specialist identified below immediately. Thank you.

**PART I (To be completed by the Offeror)**

**A. RELEVANT PREVIOUS CONTRACT -- IDENTIFICATION**

Contractor/Company Name/Division:  
Contract Place of Performance (Address):  
Program Identification/Title:  
Contract Number:  
Contract Type:  
Prime Contractor Name (if this was a subcontract effort):  
Contract Award Date:  
Forecasted or Actual Contract Completion Date:  
Method of Acquisition (competitive or noncompetitive)  
Nature of Award (initial or follow-on)  
Nature of the Contractual Effort or Items Purchased:  
Awarded Contract Price/Cost:  
Final Contract Price/Cost:

**B. OFFEROR'S POINT OF CONTACT FOR RESPONDENT QUESTIONS**

Name:  
Title:  
Telephone Number:  
FAX Number:  
E-mail Address:

C. DATE SENT TO RESPONDENT: \_\_\_\_\_

**PART II – EVALUATION (To be completed by Respondent)**  
**PAST/PRESENT PERFORMANCE QUESTIONNAIRE**

*WHEN FILLED IN THIS DOCUMENT IS SOURCE SELECTION SENSITIVE IAW FAR 2.101 AND 3.104*

**SECTION 1: CONTRACT IDENTIFICATION**

- A. Contractor: \_\_\_\_\_
- B. Contract number: \_\_\_\_\_
- C. Contract type: \_\_\_\_\_
- D. Was this a competitive contract? Yes \_\_\_\_\_ No \_\_\_\_\_
- E. Period of performance: \_\_\_\_\_
- F. Initial contract cost: \$ \_\_\_\_\_
- G. Current/final contract cost: \$ \_\_\_\_\_
- H. Reasons for differences between initial contract cost and final contract costs:  
\_\_\_\_\_  
\_\_\_\_\_
- I. Description of service provided:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 2: CUSTOMER OR AGENCY IDENTIFICATION**

- A. Customer or agency name:  
\_\_\_\_\_
- B. Geographic description of services under this contract, i.e. local, nationwide, worldwide, other  
Commands:  
\_\_\_\_\_

**SECTION 3: EVALUATOR IDENTIFICATION**

- A. Evaluator's name and title:  
\_\_\_\_\_
- B. Evaluator's phone/fax number: \_\_\_\_\_
- C. Number of years evaluator worked on subject contract: \_\_\_\_\_

**SECTION 4: EVALUATION**

Please indicate your satisfaction with the contractor’s performance by placing an “X” in the appropriate block using the scale provided to the right of each question. This scale is defined as follows:

- |             |  |
|-------------|--|
| <u>CODE</u> | <u>PERFORMANCE LEVEL</u>   |
| O           | OUTSTANDING - The contractor has demonstrated an outstanding performance level that was significantly in excess of anticipated achievements and is commendable as an example to others, so that it justifies adding a point to the score. It is expected that this rating will be used in those rare circumstances where contractor performance clearly exceeds the performance levels described as “Excellent”. |
| E           | EXCELLENT – The contractor has substantially exceeded the contract performance requirements.   |
| G           | GOOD – There are no, or very minimal issues and the contractor has met the contract requirements.  |
| F           | FAIR – Overall compliance requires minor agency resources to ensure achievement of contract requirements.  |
| P           | POOR – Overall compliance requires significant agency resources to ensure achievement of contract requirements.  |
| U           | UNSATISFACTORY – Non-conformances are jeopardizing the achievement of contract requirements, despite use of agency resources. Recovery is not likely. If performance cannot be substantially corrected, it constitutes a significant impediment in consideration for future awards containing similar requirements.  |
| N           | NOT APPLICABLE - Unable to provide a score.  |

<i>Quality of Service</i>	O	E	G	F	P	U	N
Ability to manage and perform warehousing and distribution of multiple commodities to multiple customers over a large geographic area.							
Performance in receipt and inspection of inbound material.							
Ability to accurately identify, locate, pick, pack and ship material as set forth in customer issue requirements.							
Skills in packaging, marking and packing as required by type of material and/or customer specifications.							
Maintains stock in a ready for issue condition, e.g., performs visual surveillance, documents and performs repairs on packaging. Performance in implementing and maintaining good warehouse practices such as location placards, visual location/floor markings, storage aids in good/maintained condition.							
Ability to accurately maintain inventories of stock in locations.							

Quality control measures such as implementation of a quality control plan that identifies methodologies to include identification of lot sizes, sample sizes, accept/reject rate for conducting and documenting quality surveillance; identifying and implementing corrective actions if deficiencies are found and updating quality control plan as needed or at least on an annual basis.							
Ability to utilize your data systems for warehouse and distribution or supply functions.							
Reports for accuracy and completeness.							
Performance at start up and continuity thereafter.							
Safety record.							
Knowledge of and compliance with federal, state and local laws for hazardous materiel.							
Ability to identify and implement process improvements.							

<b>Schedule/Timeliness</b>	<b>O</b>	<b>E</b>	<b>G</b>	<b>F</b>	<b>P</b>	<b>U</b>	<b>N</b>
Ability to plan and cope with surge requirements/daily workload fluctuations.							
Response time, beginning with the request to fill an order to the time that order is shipped.							
Shipment planning ability.							
Adherence to contract delivery schedule.							
Ability to complete inventories on schedule.							
Ability to meet timeliness standards.							
Ability to provide required training to obtain and maintain required licenses and certifications.							

<b>Cost Control</b>	<b>O</b>	<b>E</b>	<b>G</b>	<b>F</b>	<b>P</b>	<b>U</b>	<b>N</b>
Ability to meet proposed cost estimates.							
Financial management practices (payroll, supplier payments, timely and accurate invoicing, etc.) and their impact on this contract.							
Submittal of reasonable priced proposals on contract changes.							
Performance in providing accurate, timely and complete billing.							

<b>Business Relations</b>	<b>O</b>	<b>E</b>	<b>G</b>	<b>F</b>	<b>P</b>	<b>U</b>	<b>N</b>
Ability to resolve problems.							
Communications with the Quality Assurance Organization, Corporate Headquarters, Contracting Officer, etc.							
Professionalism.							
Responsiveness to customer complaints and questions.							
Intuitiveness to perceive customer needs/problem areas and provide solutions prior to customer complaints.							
Ease in negotiating.							
Ability to coordinate, integrate and provide for effective subcontractor management.							
Ability to anticipate, avoid or mitigate problems.							
Overall contract management.							

<b>Management of Key Personnel</b>	<b>O</b>	<b>E</b>	<b>G</b>	<b>F</b>	<b>P</b>	<b>U</b>	<b>N</b>
Ability to retain key employees.							
Ability to replace or add additional key employees.							
Effectiveness of assigned key personnel in terms of the appropriate mix of education and experience to accomplish the requirement							

**Government Contracts Only:** Has/was this contract been partially or completely terminated for default or convenience or are there any pending terminations?

Yes \_\_\_      Default \_\_\_      Convenience \_\_\_      Pending Terminations \_\_\_  
 No \_\_\_

If yes, please explain (e.g., inability to meet cost, performance, or delivery schedules, etc).

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**SECTION 5: NARRATIVE SUMMARY**

What were the contractor's greatest strengths in the performance of the contract?

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What were the contractor's greatest weaknesses in the performance of the contract?

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Would you hire this contractor in the future to perform one of your critical and demanding programs?

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Please provide any additional comments concerning this contractor's performance, as desired.

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\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

**Thank you for your prompt response and assistance!**

**PART III – RETURN INFORMATION**

Please return this completed Questionnaire to the Contract Specialist, via e-mail (shane.crusey@dla.mil) or fax (717) 770-5689 within 3 days of receipt.

DATE OF COMPLETION & SUBMISSION: \_\_\_\_\_