

**Information Technology Independent Verification and Validation  
Contract No. 80101507-IVV-15-1**

**Exhibit D  
Contractor Performance Survey**

Customers shall complete this Contractor Performance Survey for each Contractor on a Quarterly basis. Customers will submit the completed Contractor Performance Survey(s) by email to the Department Contract Manager no later than the due date indicated in Section 1.39 of Contract Number 80101507-SA-15-1.

Contractor's Name: \_\_\_\_\_ Quarter: \_\_\_\_\_

Purchase Order Number: \_\_\_\_\_ PO Total \$ Amount: \_\_\_\_\_

PO Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

Please review the attached Rating Definitions and provide your opinion by rating the following:

**Quality of Service**

- |                                   |                            |                            |                            |                            |
|-----------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| 1. Effectiveness performing tasks | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |
| 2. Quality & completeness of work | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |

**Cost Control**

- |   |                            |                            |                            |                            |
|---|----------------------------|----------------------------|----------------------------|----------------------------|
| 3. Accurately estimated and controlled costs to complete work | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |
| 4. Submitted, timely, accurate & complete invoices            | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |

**Timeliness of Performance**

- |   |                            |                            |                            |                            |
|---|----------------------------|----------------------------|----------------------------|----------------------------|
| 5. Adherence to delivery schedule (major tasks, milestones)       | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |
| 6. Timely, current & complete reporting, tracking & documentation | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |

**Business Relations**

- |  |                            |                            |                            |                            |
|--|----------------------------|----------------------------|----------------------------|----------------------------|
| 7. Effectively communicated with Agency management & staff   | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |
| 8. Contractor staff was professional, cooperative & flexible | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |

**Customer Satisfaction**

- |   |                            |                            |                            |                            |
|---|----------------------------|----------------------------|----------------------------|----------------------------|
| 9. Overall Satisfaction with Contractor | 4 <input type="checkbox"/> | 3 <input type="checkbox"/> | 2 <input type="checkbox"/> | 1 <input type="checkbox"/> |
|---|----------------------------|----------------------------|----------------------------|----------------------------|

Comments: (Please use additional page if necessary.)

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

Agency: \_\_\_\_\_ Division/Section/Unit: \_\_\_\_\_

Rater's Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Rater's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

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**Rating Definitions**

**Excellent ★★★★★ (4)**

- There are no quality problems.
- There are no cost issues.
- There are no delays.
- Responses to inquiries, technical, service, and administrative issues are effective and responsive.

**Average ★★★ (3)**

- Non-conformances do not impact achievement of contract requirements.
- Cost issues do not impact achievement of contract requirements.
- Delays do not impact achievement of contract requirements.
- Response to inquiries, technical, service, and administrative issues is usually effective and responsive.

**Below Average ★★ (2)**

- Non-conformances require minor Agency resources to ensure achievement of contract requirements.
- Cost issues require minor Agency resources to ensure achievement of contract requirements.
- Delays require minor Agency resources to ensure achievement of contract requirements.
- Response to inquiries, technical, service, and administrative issues is somewhat effective and responsive.

**Poor ★ (1)**

- Non-conformances are compromising the achievement of contract requirements.
- Cost issues are compromising performance of contract requirements.
- Delays are compromising the achievement of contract requirements.
- Response to inquiries, technical, service, and administrative issues is not effective and responsive.

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**Scoring:** Ratings will be averaged together and then rounded to achieve the Overall Contractor Performance Rating.