Offeror: Please make copies of this form and have references submit directly to Iron River/Watersmeet Ranger District offices, E23979 US 2 East, Watersmeet, MI 49969, or fax to (906) 358-4000

Attachment 2

PRESENT/PAST PERFORMANCE QUESTIONNAIRE

You have been selected to provide information on the Contractor named in Section A. Please complete Section B and the attached questionnaire and fax or mail attention of: Contracting Officer at (906) 358-4000 by 1:00 PM (CT) on January 19, 2016. Please mark "Confidential".

SECTION A: CONTRACTOR INFORMATION

1) Contractor's Name and Address: _____
_____

2) Point of Contact: _____

3) Phone #: _____

4) Contract Number: _____ Contract Type: _____

5) Project Title: _____

6) Period of Performance: _____

7) Brief Description/Scope of Services provided: _____

8) Authorization is hereby granted to provide the information requested in SECTION B of this questionnaire.

_____ _____
Signature of Authorized Contractor Representative Date

_____
Printed Name and Title of Authorized Contractor Representative

SECTION B: RESPONDENT INFORMATION:

A. Name:_____
B. Position:_____
C. Telephone Number:_____ Fax Number: _____
D. Address:_____
_____
_____
E. Relationship and Time Involved with Contractor:_____
F. Date Questionnaire Completed:_____

E	A	N	M	U
Exceptional	Acceptable	No Rating	Marginal	Unacceptable

	Contract Performance						
1.	Working relationship with your Company	E	A	N	M	U	
2.	Did the contractor provide experienced managers and supervisors with the technical and administrative abilities needed to meet contract requirements? If no, please explain.	Yes	No		N/A		
3.	Exhibited knowledge of and compliance with government (or other) regulations and industry standards	E	A	N	M	U	
4.	Did the contractor provide and properly maintain operational equipment throughout the term of the contract? If no, please explain.	Yes	No		N/A		
5.	Did the contractor demonstrate the ability to hire, maintain, and replace, if necessary qualified personnel during the contract? If no, please explain.	Yes	No		N/A		
6.	Does the contractor provide timely and accurate records?	Yes	No		N/A		
7.	How well did the contractor comply with Environmental, Safety, health and security requirements	E	A	N	M	U	
8	Would you award similar contracts to this contractor (If no, Please explain in remarks)	Yes	No		N/A		
9.	Contractor's Overall Performance	E	A	N	M	U	
	Quality of Service/Control						
1.	Contractor's accomplishment in meeting the quality standards	E	A	N	M	U	
2.	Did the contractor provide an effective quality control plan or inspection procedures to meet contract requirements? If no, please explain.	Yes	No		N/A		
3.	Overall Quality of Service/Control	E	A	N	M	U	
	Timeliness						
1.	Was the job/contract started and completed on time?. If not, explain	Yes	No		N/A		
2.	Did the contractor have a system or method to track progress on all work in progress?	Yes	No		N/A		

REMARKS: If additional remarks are necessary, please attach an additional sheet.

_____

_____

_____

_____

_____

_____