CITY OF LOS ANGELES

**Department of Public Works**

**Bureau of Contract Administration**

**Special Research & Investigation Section**

#### 1149 South Broadway, Suite 300

##### Los Angeles, CA 90015

##### Phone: (213) 847-2408 Mail Stop 480

#### CONTRACTOR EVALUATION FOR SERVICE CONTRACTS

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| **DEPARTMENT INFORMATION** | |
| City Department: | Date Evaluated: |
| Name & Title of Dept. Evaluator: | |
| Evaluator’s Signature: | Phone: |
| Name & Title of Supervisor Approving Evaluation: | |
| Supervisor’s Signature: | Date Approved: |

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| **COMPANY INFORMATION** | | |
| Name of Company: | Contract Number: | |
| Company’s Contact Person: | Phone: | |
| Company Street Address: | | |
| City: | State: | Zip: |
| Contract Term – Start Date:       End Date: | | |
| Total Dollar Amount of Contract: | | |
| Service Provided by Company: | | |

The City representative most familiar with the contractor’s work performance must complete this evaluation and submit to the Department of Public Works, Bureau of Contract Administration, Special Research and Investigation Section (SRI) a **draft** for review within 14 calendar days of the contract’s end date. After the evaluation is finalized, if the evaluation contains a Marginal or Unsatisfactory rating, SRI will transmit a copy to the contractor who will be given 14 calendar days to respond. The final evaluation, and any response from the contractor, will be available to departments to be used as a reference check after departments have selected a contractor through an evaluation process.

The following list provides a basic set of evaluation criteria that should be applicable to any service contractor. Narrative responses are required to support some of the assessment ratings and must be attached to this evaluation. If a narrative response is required, indicate before each narrative the number of the question for which the response is being provided. Any available supporting documentation to justify any Marginal or Unsatisfactory ratings must also be attached.

**Assessment Ratings:**

**Very Good** - Performance exceeded contractual requirements.

**Satisfactory** - Performance met contractual requirements. (The contractual performance being assessed may or may not have reflected some minor problems for which corrective actions taken by the contractor were satisfactory.)

**Marginal** - Performance did not meet some contractual requirements or performance met contractual requirements but only after extensive corrective action was required. (The contractual performance being assessed reflected a serious problem. The contractor’s corrective actions were only marginally effective or were not fully implemented.)

**Unsatisfactory** - Performance did not meet contractual requirements. The contractual performance being assessed reflected serious problems for which the contractor’s corrective actions were ineffective.

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| WORK PEFORMANCE | | | | | |
| 1. | Did the contractor perform all of the work required by the contract?  If “No,” specify on the attachment work the contractor failed to perform; cite any problems or delays encountered, and the reason for delay(s). Provide documentation. | Yes | | No | N/A |
|  | 1. Did the contractor perform the work in the method required by the contract? If “No,” explain on the attachment. Provide documentation. | Yes | | No | N/A |
| 2. | Was the work performed by the contractor accurate and complete?  If “No,” explain on the attachment and provide documentation. Complete (a) and (b) below. | Yes | | No | N/A |
|  | 1. Were corrections requested? If “Yes,” specify the date(s) and reasons(s) for the correction(s). Provide documentation. | Yes | | No | N/A |
|  | 1. If corrections were requested, did the contractor make the corrections as requested? If “No,” explain on the attachment. Provide documentation. | Yes | | No | N/A |
| 3. | Was the contractor responsive to City staff’s comments and concerns regarding the work performed or the work product delivered?  If “No,” explain on the attachment. Provide documentation. | Yes | | No | N/A |
| 4. | Were there other significant issues related to “Work Performance?” Explain on the attachment. Provide documentation. | Yes | No | | N/A |
| **5.** | **Overall how did the contractor rate on Work Performance?**  **Your Overall Rating for this category must be consistent with the responses to the questions given above regarding Work Performance.**  **Very Good**  **Satisfactory**  **Marginal**  **Unsatisfactory** |  |  | | N/A |

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| TIMELINESS | | | | | |
| 6. | Did the contractor complete each portion of the work within the time required by the contract (including time extensions or amendments)?  If “No,” explain on the attachment why the work was not completed according to schedule. Provide documentation. | Yes | | No | N/A |
| 7. | Was the contractor required to provide a service in accordance with an established schedule (such as for security, maintenance, custodial, etc.)?  If “No” or “Not Applicable,” go to Question #8. If “Yes,” complete (a) below. | Yes | | No | N/A |
|  | 1. Were the services provided within the days and times scheduled? If “No,” explain on the attachment and specify the dates the contractor failed to comply with this requirement (such as tardiness, failure to report, etc.). Provide documentation. | Yes | No | | N/A |
| 8. | Were there other significant issues related to “Timeliness?” Explain on the attachment. Provide documentation. | Yes | No | | N/A |
| **9.** | **Overall, how did the contractor rate on Timeliness?**  **Your Overall Rating for this category must be consistent with the responses to the questions given above regarding Timeliness.**  **Very Good**  **Satisfactory**  **Marginal**  **Unsatisfactory** |  |  | | N/A |

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| FINANCIAL | | | | |
| 10. | Were the contractor’s billings accurate and reflective of the contract payment terms?  If “No,” explain on the attachment. Provide documentation of occurrences and amounts (such as corrected invoices). | Yes | No | N/A |
| 11. | Were there any amendments to increase the contract amount?  If “Yes,” list the original contract amount, the final contract amount (inclusive of all amendments), the number of amendments, and explain on the attachment the reason for the amendment(s).  Original Amt.: $ \_\_\_\_\_\_\_\_ Final Amt.: $ \_\_\_\_\_\_\_\_\_ # of Amendments: \_\_\_\_\_ | Yes | No | N/A |
| 12. | Were there other significant issues related to “Financial?” Explain on the attachment. Provide documentation. | Yes | No | N/A |
| **13.** | **Overall, how did the contractor rate on Financial issues?**  **Your Overall Rating for this category must be consistent with the responses to the questions given above regarding Financial issues.**  **Very Good**  **Satisfactory**  **Marginal**  **Unsatisfactory** |  |  | N/A |

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| **COMMUNICATION** | | | | |
| 14. | Was the contractor responsive to the City’s questions, requests for information, etc.?  If “No,” explain on the attachment. | Yes | No | N/A |
| 15. | Did the contractor communicate with City staff clearly and in a timely manner regarding: |  |  |  |
|  | 1. Notification of any significant issues that arose? If “No,” explain on the attachment. | Yes | No | N/A |
|  | 1. Staffing issues (changes, additions, replacements, etc.)? If “No,” explain on the attachment. | Yes | No | N/A |
|  | 1. Periodic progress reports as required by the contract (both verbal and written)? If “No,” explain on the attachment. | Yes | No | N/A |
|  | 1. Billing disputes? If “No,” explain on the attachment. | Yes | No | N/A |
|  | 1. Proposed contract amendments? If “No,” explain on the attachment. | Yes | No | N/A |
| 16. | Were there other significant issues related to “Communication?” Explain on the attachment. Provide documentation. | Yes | No | N/A |
| **17.** | **Overall, how did the contractor rate on Communication issues?**  **Your Overall Rating for this category must be consistent with the responses to the questions given above regarding Communication issues.**  **Very Good**  **Satisfactory**  **Marginal**  **Unsatisfactory** |  |  | N/A |

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| **EXPERTISE** | | | | |
| 18. | Did the personnel assigned by the contractor have the expertise and skills required to satisfactorily perform under the contract?  If “No,” explain on the attachment. | Yes | No | N/A |
| **19.** | **Overall, how did the contractor rate on Expertise?**  **Your Overall Rating for this category must be consistent with the responses to the questions given above regarding Expertise issues.**  **Very Good**  **Satisfactory**  **Marginal**  **Unsatisfactory** |  |  | N/A |

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| CONTRACT TERMINATION | | | | |
| 20. | Was the contractor terminated for cause?  If “Yes,” explain on the attachment the reasons and circumstances for the termination. | Yes | No | N/A |

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| CONTRACTOR STATUS AND COMPLIANCE WITH MBE/WBE/OBE PLEDGE LEVELS | | | | | | | | | |
| 21. | If known, indicate whether the prime contractor falls into one or more of the following categories and whether the contractor’s status has been certified by the City of Los Angeles. Check all boxes that apply. If the contractor’s status is not known, check “Not Known.” | | | | | | | | |
| Prime Contractor’s Status is: | | | | | |  | | |
| Not Known (Continue onto Question #22.) | | Was the status certified? | | | |
| Minority-owned Business Enterprise (MBE) | | Yes | | Not known | |
| Women-owned Business Enterprise (WBE) | | Yes | | Not known | |
| Other Business Enterprise (OBE) | | Yes | | Not known | |
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| 22. | Did the request for bid or proposal contain language requiring a “Good Faith Effort” to conduct outreach to MBE/WBE/OBE?If MBE/WBE/OBE outreach was not required, check “No” and go to Question #24.If “Yes,” list below the anticipated levels, the levels pledged by the contractor, and the level achieved at the end of the contract. | | | | | | Yes | No | N/A |
| Anticipated Percentage Level: | MBE     % | | WBE     % | | OBE     % |
| Contractor’s Pledged Percentage Level: | MBE     % | | WBE     % | | OBE     % |
| Percentage Level Achieved by Contractor: | MBE     % | | WBE     % | | OBE     % |
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| 23. | If the contractor did not meet its obligation to use the MBE/WBE/OBE subcontractor(s) listed in its bid/proposal package, were all subcontractor substitutions approved by the City? | | | | | | Yes | No | N/A |

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| OVERALL CONTRACTOR RATING | | | | |
| **24.** | **How would you rate the contractor overall?**  **Very Good**  **Satisfactory**  **Marginal**  **Unsatisfactory** |  |  | N/A |

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| ADDITIONAL COMMENTS: You may use this sheet to provide any additional comments requested above, and any other comments about the contractor’s performance, including the contractor’s compliance with the MBE/WBE/OBE program. Indicate before each narrative the number of the question for which the response is being provided. Attach additional sheets if necessary. |
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