This upper area will be filled prior to the evaluation with project identification and progress tracking information

Evaluator will indicate YES or NO on the following questions pertaining to the Contractor's performance on this project. Negative responses must be explained in more detail on an attached sheet, referencing the applicable question number:

rioganite	, 1000011303	mustb	c chpiairic	
□ N/A			D 1.	Was the contractor properly licensed?
□ N/A) 2.	Was bonding provided as required by the Contract Documents?
□ N/A) 3.	Was a competent bid prepared?
□ N/A) 4.	Were all subcontractors properly licensed and approved?
			5.	Was a work schedule provided and diligently pursued?
) 6.	Was adequate manpower provided to diligently pursue the contract work?
			7.	Was proper supervision provided as required by the Contract Documents?
) 8.	Did materials used in this project conform with project specifications?
	□ YES		9.	Were materials installed in accordance with project specifications?
□ N/A			D 10.	Were subcontractors and suppliers paid in a timely manner?
□ N/A			D 11.	Did Change Order pricing compare favorably with market rates?
□ N/A) 12.	Were claims, if any, legitimate and reasonable?
□ N/A	□ YES		D 13.	Was punch list on this project reasonable compared to the size of the project?
			D 14.	Were close-out requirements and documentation provided in a timely manner?
			D 15.	Do you consider this project to be satisfactorily complete?
			D 16.	Was project completed without charging any liquidated damages?
			D 17.	Was project completed without needing to give any official warnings?
			D 18.	Was project completed without starting termination or default proceedings?
			D 19.	Was project completed with out terminating or declaring the Contractor in default
Rate Contractor on the items at right using a			(a) Gene	eral responsiveness ① ② ③ ④ ⑤ ① Not acceptable
scale of 1 to 5 as (b) D			. ,	re to deliver quality project ① ② ③ ④ ⑤ ② Poor
scores of 1 or 2 on an			. ,	rall job management① ② ③ ④ ⑤③ Average
attached sheet.			ely communication to appropriate parties ① ② ③ ④ ⑤ ④ Good	
(e) Overall per		(e) Over	Tall performance ① ② ③ ④ ⑤ Very good	
Do you recommend that the Contractor or any of its YES (attach explanation)				
Subcontractors be disqualified from bidding on future projects?				
Evaluator's printed name				Director's Initials Contractor's printed name
Evaluator's				Contractor's
signature & date				signature & date
				Contractor, upon receiving evaluation from the Owner, is asked to sign above acknowledgement of the process and information, and return the form to Own c/o TBR OFD, Suite 664, 1415 Murfreesboro Rd, Nashville TN 37217-283

c/o TBR OFD, Suite 664, 1415 Murfreesboro Rd, Nashville TN 37217-2833. Contractor may also add comments, which will be filed with evaluation.