

Contractor Performance Review Rating Form
Contractors and Subcontractors

**WYOMING DEPARTMENT OF ENVIRONMENTAL QUALITY
SOLID & HAZARDOUS WASTE DIVISION
Hazardous Waste, Voluntary Remediation, and Orphan Site Programs**

Contractor (or subcontractor): _____
 Project title: _____
 Contract beginning and ending dates: _____
 Evaluator Signature: _____ Date: _____
 Evaluator Position: _____ Date: _____

Items to be Evaluated	Rating* (circle one)
1. Schedule: a. Project schedules met b. DEQ deadlines met c. Adequate timing/coordination of subcontractor(s)	a. A / IA / NA b. A / IA / NA c. A / IA / NA
2. Project Management: a. Project Manager performance b. Project Geologist/Engineer/Technical Personnel performance c. Effectively communicated with DEQ Project Manager d. Provided timely responses to project needs and DEQ Project Manager's questions/needs/concerns e. Effectively coordinated project activities f. Adhered to contract requirements g. Followed project plan(s) h. Maintained good property owner and subcontractor relationships.	a. A / IA / NA b. A / IA / NA c. A / IA / NA d. A / IA / NA e. A / IA / NA f. A / IA / NA g. A / IA / NA h. A / IA / NA
3. Work Quality: a. Timely submittal of written products (e.g., documentation, work plans, reports, etc) that are technically adequate and complete b. Adequate sampling, monitoring and QA/QC activities c. Subcontractor performance	a. A / IA / NA b. A / IA / NA c. A / IA / NA
4. Budget/Cost Controls/Billing: a. Plans and specifications prepared in consideration of the budget b. Timely identification of needed changes and offered alternative solutions c. Minimized supplemental amendments to contract d. Provided timely, accurate, itemized invoices consistent with contract proposal	a. A / IA / NA b. A / IA / NA c. A / IA / NA d. A / IA / NA
5. Occupational Health and Safety: a. Developed adequate Health and Safety Plan b. Complied with Project Health and Safety Plan c. Compliance with OSHA/WYOSHA Regulations d. Maintained on-site good housekeeping, traffic control and safe work environment	a. A / IA / NA b. A / IA / NA c. A / IA / NA d. A / IA / NA
6. Overall Performance: a. Contractor consistently performed services in a professional manner and in the best interest of the State	a. A / IA / NA

Contractor Performance Review Rating Form will be provided to the Contractor with the contract close-out letter

- * A – Adequate
- IA – Inadequate
- NA – Not Applicable