

PERFORMANCE EVALUATION (ARCHITECT-ENGINEER)						A-E CONTRACTOR I.D. NUMBER <i>(For ACASS use only)</i>	
						1. A-E CONTRACT NUMBER	
						2. CONSTRUCTION CONTRACT NUMBER	
IMPORTANT: Be sure to complete back of form. If additional space is necessary for any item, use Remarks section on back.							
3. TYPE OF EVALUATION						4. PROJECT NUMBER	5. DELIVERY ORDER NO. (S) <i>(if applicable)</i>
a. PHASE OF COMPLETION		b. COMPLETION <i>(X one)</i>		c. X IF APPLICABLE			
<input type="checkbox"/> INTERIM (_____ %)	<input type="checkbox"/> FINAL	<input type="checkbox"/> DESIGN	<input type="checkbox"/> ENGINEERING SERVICES	<input type="checkbox"/> CONSTRUCTION	<input type="checkbox"/> TERMINATION <i>(Explain in Remarks)</i>		
6. NAME AND ADDRESS OF A-E CONTRACTOR					7a. PROJECT TITLE AND LOCATION		
					7b. DESCRIPTION OF PROJECT IF NOT EXPLAINED BY TITLE		
8. NAME, ADDRESS AND PHONE NUMBER OF OFFICE RESPONSIBLE FOR:							
a. SELECTION OF A-E CONTRACTOR				b. NEGOTIATION/AWARD OF A-E CONTRACT			
c. ADMINISTRATION OF A-E CONTRACT				d. ADMINISTRATION OF CONSTRUCTION CONTRACT			
9. A-E CONTRACT DATA <i>(Items 9d thru 9g are not applicable during construction unless there are modifications to the A-E contract.)</i>							
a. TYPE OF WORK <i>(Design, study, etc.)</i>					b. TYPE OF CONTRACT		INDEFINITE DELIVERY/INDEFINITE QUANTITY (ID/IQ)
					<input type="checkbox"/> FIRM FIXED-PRICE		TASK ORDER UNDER ID/IQ
					<input type="checkbox"/> COST-REIMBURSEMENT		OTHER <i>(Specify)</i>
c. PROJECT COMPLEXITY		d. CONTRACT OR TASK ORDER AMOUNT					
<input type="checkbox"/> DIFFICULT	<input type="checkbox"/> ROUTINE	(1) INITIAL FEE		(2) CONTRACT OR TASK ORDER MODIFICATIONS		(3) TOTAL FEE	
		\$		NO. AMOUNT		\$	
e. CONTRACT OR TASK ORDER AWARD DATE		f. NEGOTIATED CONTRACT OR TASK ORDER COMPLETION DATE <i>(or number of days)</i> <i>(Including extensions)</i>			g. ACTUAL CONTRACT OR TASK ORDER COMPLETION DATE <i>(or number of days)</i>		
10. CONSTRUCTION CONTRACT DATA <i>(Not applicable at completion of design or engineering services not involving construction.)</i>							
a. CONSTRUCTION COSTS		(1) AUTHORIZED CONSTRUCTION COST \$		(2) A-E ESTIMATE FOR BID ITEMS AWARDED \$		(3) AWARD AMOUNT \$	
b. DATA AT TIME OF CONSTRUCTION COMPLETION <i>(Completion date _____)</i>				NUMBER		TOTAL COST	
(1) CONSTRUCTION MODIFICATIONS						\$	
(2) CONSTRUCTION MODIFICATIONS ARISING FROM DESIGN DEFICIENCIES						\$	
11. A-E LIABILITY		<input type="checkbox"/> NONE	<input type="checkbox"/> UNDETERMINED	<input type="checkbox"/> PENDING \$		<input type="checkbox"/> SETTLEMENT \$	
12. OVERALL RATING				13. RECOMMENDED FOR FUTURE CONTRACTS?			
<input type="checkbox"/> EXCEPTIONAL	<input type="checkbox"/> SATISFACTORY	<input type="checkbox"/> UNSATISFACTORY		<input type="checkbox"/> YES	<input type="checkbox"/> CONDITIONALLY		
<input type="checkbox"/> VERY GOOD	<input type="checkbox"/> MARGINAL		<input type="checkbox"/> NO <i>(Explain "No" or "Conditionally" in Remarks.)</i>				
14a. NAME, TITLE AND OFFICE OF RATING OFFICIAL				15a. NAME, TITLE AND OFFICE OF REVIEWING OFFICIAL			
TELEPHONE NUMBER:				TELEPHONE NUMBER:			
b. SIGNATURE			c. DATE	b. SIGNATURE			c. DATE <i>(Official Report date)</i>
AGENCY USE: <i>(Distribution, etc.)</i>							

