

ATTACHMENT L-2
PAST / PRESENT PERFORMANCE QUESTIONNAIRE (PPQ)

WHEN FILLED IN THIS DOCUMENT IS SOURCE SELECTION SENSITIVE INFORMATION IAW FAR 2.101 & 3.104

I. CONTRACT IDENTIFICATION : Please correct any information below known to be inaccurate:

- A. Contractor (Company / Division): _____
- B. Point of Contact (Program Manager and Contracting Officer): _____

- C. Telephone Number: _____
- D. Cage Code: _____
- E. Contract Number: _____
- F. Dollar Amount: _____
- G. Contract Type (e.g., FFP, FPIF, CPIF, CPFF, CPAF): _____
- H. Contract Period of Performance: _____
- I. Program Title: _____
- J. Brief Program Description: _____

- K. Program Phase: (e.g., Engineering & Manufacturing Development (EMD)) _____
- L. Contractor Performed as the **Prime Contractor** **Joint Venture Partner** **Subcontractor**
(If Joint Venture Partner, specifically identify the managing partner and other partners, and the percentage of work the contractor performed as part of the Joint Venture; if Subcontractor, identify Prime Contractor. If not Prime, state the specific role in executing the work).

II. RESPONDENT(S) TO QUESTIONNAIRE

- A. Name(s): _____
- B. Address: _____
- C. Phone Number(s): _____
- D. Fax Number: _____
- E. Email Address: _____
- F. Position (e.g., Program Manager, PCO / ACO): _____
- G. Other suggested points of contact: _____

III. GENERAL COMMENTS

IV. PERFORMANCE EVALUATION

Please indicate your performance rating for the contractor by circling or place an “X” over the appropriate code using the performance evaluation scale below. Ratings are defined as follows:

<u>CODE</u>	<u>PERFORMANCE RATING</u>
B	BLUE / EXCEPTIONAL - During the contract period, contractor performance is meeting (or met) all contract requirements and consistently exceeding (or exceeded) many. Very few, if any, minor problems encountered. Contractor took immediate and effective corrective action.
P	PURPLE / VERY GOOD - During the contract period, contractor is meeting (or met) all contract requirements and consistently exceeding (or exceeded) some. Some minor problems encountered. Contractor took timely corrective action.
G	GREEN / SATISFACTORY - During the contract period, contractor performance is meeting (or met) all contract requirements. For any problems encountered, contractor took effective corrective action.
Y	YELLOW / MARGINAL - During the contract period, contractor performance is not meeting (or did not meet) some contract requirements. For problems encountered, corrective action appeared only marginally effective, not effective, or not fully implemented. Customer involvement was required.

- R RED / UNSATISFACTORY - During the contract period, contractor performance is failing (or failed) to meet most contract requirements. Serious problems encountered. Corrective actions were either ineffective or non-existent. Extensive Customer oversight and involvement was required.
- N/A NOT APPLICABLE - Unable to provide a rating. Contract did not include performance for this aspect. Do not know.

Respondents should explain their rating in the remarks section for any rating of Blue, Yellow, or Red, and ratings that might contradict official Past Performance documentation (e.g., Contractor Performance Assessment Reports (CPARs)). If more space is needed, remarks may be continued on separate pages. Please identify question number.

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A. TECHNICAL FACTOR - Rate the contractor's performance for the following:

1. MANAGEMENT APPROACH	B	P	G	Y	R	N/A
A) Workload Management: How well did the contractor demonstrate workforce flexibility and mobility across multiple facilities and integrate operations with multiple contractor interfaces?						
B) Workload Management: How well did the contractor accommodate significant workload increases and decreases?						
C) Workload Management: How well did the contractor manage multiple facilities and people with varied skills, both salary and wage to meet rapidly changing work requirements?						
D) Workload Management: How well did the contractor manage labor relations with both Organized Labor (Union Workforce), Salaried Workforce, and others?						
E) Interface Management: How well did the contractor identify relevant interfaces and demonstrate an effective approach to managing interfaces in collaborating with multiple contractor and Government entities?						
F) Performance Management: How well did the contractor use performance measures and metrics to guide actions and motivate high performance?						
G) Safety and Mishap Prevention: How well did the contractor minimize the potential for / severity of safety incidents?						
H) Safety and Mishap Prevention: How well did the contractor respond to safety incidents?						
I) Subcontract Management: How well did the contractor demonstrate timely resolution of contract administration issues and contract changes with their subcontractors?						
J) Subcontract Management: How well did the contractor execute a subcontract management plan?						
K) Organizational Conflict of Interest (OCI): How well did the contractor manage OCI issues and risks in accordance with FAR Part 9.5?						
2. TECHNICAL OPERATIONS	B	P	G	Y	R	N/A
A) Test Operations: How well did the contractor perform technical research, development, and test and evaluation tasks or products at various stages of technical development?						
B) Test Operations: How well did the contractor perform analysis tasks that accurately assessed the system under test?						

C) Test Operations: How well did the contractor protect Controlled Information?						
D) Test Operations: How well did the contractor efficiently and effectively conduct operations of test and test support assets?						
E) Test Operations: How well did the contractor ensure delivery of test and system operational data?						
F) Lifecycle Sustainment: How well did the contractor demonstrate effective operations, maintenance, repair, and modernization of industrial facilities (e.g., aerospace test facilities, petro-chemical facilities, automobile industry, nuclear facilities, etc.)?						
G) Lifecycle Sustainment: How well did the contractor demonstrate a clear understanding of software lifecycle management, including configuration management and development principles required during development, test, and production?						
H) Lifecycle Sustainment: How well did the contractor maintain effective configuration management of operations and maintenance information?						
I) Capital Improvements: How well did the contractor demonstrate a clear understanding of system engineering processes for delivering capital improvement projects?						
J) Surge Efforts: How well did the contractor mobilize resources to execute unanticipated, high-magnitude workload (surge projects)?						
K) Surge Efforts: How well did the contractor execute surge workload without impacting day-to-day operations?						
3. QUALIFIED PERSONNEL	B	P	G	Y	R	N/A
A) Key Personnel: How well did the contractor provide the proposed key leadership, management, and technical experts?						
B) Staffing: How well did the contractor provide personnel with the skills and experience enabling that employee to be fully qualified on day one?						
C) Staffing: How well did the contractor demonstrate the capability to retain existing expertise whether it be through current workforce or from external sources?						
D) Staffing: How well did the contractor show ability to hire, maintain, and replace, if necessary, qualified personnel during the contract period?						
4. TRANSITION	B	P	G	Y	R	N/A
A) Phase-in: How well did the contractor accomplish phase-in to ensure full continuity of mission requirements by the performance start date?						
B) Phase-out: How well did the contractor accomplish phase-out to ensure seamless transfer of work to succeeding contract?						

B. COST / PRICE FACTOR - Rate the contractor's performance for the following:

COST PERFORMANCE	B	P	G	Y	R	N/A
A) How well did the contractor forecast cost / price?						
B) How well did the contractor develop and meet realistic project cost estimates?						
C) How well did the contractor show initiative and resourcefulness in controlling fringe benefit costs?						
D) How well did the contractor alert Government / customer of unforeseen costs before they occurred?						
E) How well did the contractor handle unforeseen cost increases?						
F) How well did the contractor provide accurate and timely cost reporting?						
G) How well did the contractor ensure subcontractors / suppliers were paid in a timely manner?						
H) How well did the contractor identify accurate and complete scope of efforts in order to facilitate cost estimating?						

Please provide the following information regarding cost / price:

- (1) Original Contract Cost or Price \$ _____
- (2) Value of Negotiated Contract Changes \$ _____
- (3) Actual / Projected Cost to Complete \$ _____
- (4) Baseline Estimate at Completion (EAC) \$ _____
- (5) Total Negotiated Changes EAC \$ _____
- (6) Cost Underrun / Overrun (-) \$ _____

C. NARRATIVE SUMMARY

1. Please discuss each and every response for which you indicated Blue / Exceptional, Yellow / Marginal, or Red / Unsatisfactory) in response to the questions above (use additional sheets, if necessary).

2. What were the contractor's greatest strengths in the performance of the contract?

3. What were the contractor's greatest weaknesses in the performance of the contract?

C. GOVERNMENT CONTRACTS ONLY

1. Was the contractor ever issued a cure or show cause notice under the referenced contract?

Yes _____ No _____

2. Was this contract partially or completely terminated for default or convenience or are there any pending terminations?

Yes _____ Default _____ Convenience _____ Pending Termination _____

No _____

If yes, please explain (e.g., inability to meet cost, performance, or delivery schedules) _____

D. GENERAL COMMENT (Choose one of the following and explain your choice in the remarks)

Given what I know today about the contractor's ability to execute what was promised in the proposal, I

definitely would _____ probably would _____ might or might not _____

probably would not _____ definitely would not _____

award to that contractor today given that I had a choice.

REMARKS: _____

Evaluator's Signature

Date

Thank you for your prompt response and assistance!

Please email this completed questionnaire to: aedc.sso@us.af.mil

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