

## **Contractor's Performance Evaluation Report**

Contractor Name					Date of Evaluation		
Project Name					Evaluatio	n Period	
Contract / Work Order #					Report N	umber of	
Phase (if applicable)							
Date of Program's Last Site Visit							
Final Report?							
Brief Description of Work/Services							
•							
Performance Category	Ratings				Comments		
	Exceeds Expectations Score=3	Satisfactory Performance Score=2	Marginal Performance Score=1	Unsatisfactory Performance Score=0	Please provide a narrat	ive description for ratings of $\underline{1}$ or $\underline{0}$ below (attachments are acceptable.)	
Quality & Accuracy							
Timeliness							
Reports							
HUB (for Quarterly Reporting, complete this portion only and return)	NA	NA	NA	NA	Not applicable		
Communication							
Cost Control							
Technology							
Evaluator's Name: Signature: Will be signed when final							
(Printed or Typed)							
Division: Water Quality Planning					Section:	Planning & Implementation	

Submit this form to Clean Rivers Program MC-234, TCEQ, PO Box 13087, Austin, TX 78711-3087. If you have any questions about this form, please contact us at (512) 239-1810 or CRP@tceq.texas.gov.

TCEQ-20331