

## VENDOR PERFORMANCE EVALUATION FORM

Contract No.: \_\_\_\_\_ Description: \_\_\_\_\_  
 Vendor Name: \_\_\_\_\_ Vendor Contact Name (Team Lead): \_\_\_\_\_  
 Vendor Email: \_\_\_\_\_ Contract Completion Date: \_\_\_\_\_

**Check One:**

Interim Evaluation: \_\_\_\_\_ Final Evaluation: \_\_\_\_\_

Date of Evaluation: \_\_\_\_\_

Evaluation Criteria (including but not limited to)	Evaluation Assessment		Evaluator Comments
	Rating Category (see chart on this form)	Score out of 5	
<b>Administration:</b> • Invoice accuracy • Customer Service • Communication (public & staff)	Please Select Rating Category	#N/A	
<b>Quality of Project/Project</b> • Project Delivery • Quality of workmanship • Project Management • Communication	Please Select Rating Category	#N/A	
<b>Timelines:</b> • Adherence to project schedule	Please Select Rating Category	#N/A	
<b>Cost Control:</b> • Number of Change Orders • Cost of Additional Service and/or Work • Compliance with Original Contract Price	Please Select Rating Category	#N/A	
<b>Health &amp; Safety:</b> • Adherence to Health & Safety Act • Injuries or "close calls"	Please Select Rating Category	#N/A	
<b>TOTAL SCORE:</b>		#N/A	
<b>Overall Comments:</b>			

Evaluator Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Senior Manager, Strategic Procurement: \_\_\_\_\_ Signature: \_\_\_\_\_

**Staff Acknowledgment:**

I declare that I have completed this evaluation in a fair and honest manner. I further confirm that my judgement in completing this evaluation has not been influenced by any actual or potential "Conflict of Interest".

**NOTE: COMPLETED EVALUATION FORMS ARE TO BE SUBMITTED TO ONTC PROCUREMENT DEPARTMENT**

Rating	Description of Rating
5	Exceptional
5	Performance significantly exceeds requirements to Ontario Northland's benefit, for example, the Vendor implemented innovative or business process reengineering techniques, which resulted in added value to Ontario Northland. The performance of the element or sub-element being assessed was accomplished with few minor problems for which corrective actions taken by the Vendor were highly effective.
4	Good
4	Performance meets requirements and exceeds in some area(s) to Ontario Northland's benefit. The performance of the element or sub-element being assessed was accomplished with some minor problems for which corrective actions taken by the Vendor were effective.
3	Satisfactory
3	Performance meets requirements. The performance of the element or sub-element contains some minor problems for which proposed corrective actions taken by the Vendor appear satisfactory, or completed corrective actions were satisfactory.
2	Cautionary
2	Performance did not quite meet requirements. The performance of the element or sub-element contains some minor problems for which proposed corrective actions taken by the Vendor appear to be a continued minor concern, or completed corrective actions were slightly below satisfactory.
1	Not Satisfactory
1	Performance does not meet some requirements. The performance of the element or sub-element being assessed reflects a serious problem for which the Vendor has submitted minimal corrective actions, if any. The Vendor's proposed actions appear only marginally effective or were not fully implemented.
0	Unacceptable
0	Performance does not meet requirements and/or recovery is not likely in a timely or cost effective manner. The performance of the element or sub-element contains serious problem(s) for which the Vendor's corrective actions appear to be or were ineffective.

**VENDOR REPLY TO ONTARIO NORTHLAND TRANSPORTATION COMMISSION**

The Vendor has fifteen (15) business days to:

1. Accept the evaluation rating by signing and returning this form; or
2. Request a review of this evaluation by checking the appropriate box below, signing and returning with an attached written response.

If no response is received within the fifteen (15) business day timeframe the evaluation will be deemed final and binding.

<b>Please fill out the following form, and return via email to Jason.Baker@ontarionorthland.ca.</b>	
<b>Business Name:</b>	
<b>Contract No. &amp; Description:</b>	
<b>Address:</b>	
<b>Phone Number:</b>	
<b>Fax Number:</b>	
<b>Contact Name and Title:</b>	
<b>Contact Phone:</b>	
<b>Contact Email:</b>	
<b>Vendor Comments:</b>	

**Check One:**

- I agree with this evaluation as completed by Ontario Northland.
- I do not agree and wish to request a review of this evaluation, further information is attached.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_