

ATTACHMENT 0003 – PERFORMANCE QUESTIONNAIRE
W519TC-26-R-A054

Per Section L of the RFP, Offerors are hereby put on notice that this is the single opportunity to adequately address any negative past performance submitted in response to this RFP. The Government will not be giving the Offeror an additional opportunity to address negative past performance information during evaluations.

INSTRUCTIONS:

A separate questionnaire shall be provided for the Prime, for each proposed teammate performing 20% or more of the effort, and/or each proposed major subcontractor.

- **For Prime BOA holders and their approved teammates** (those listed in BOA Attachment 0002 – Team Arrangement), complete this form for the following timeframe: date of the Offerors original BOA RFP Step 2 proposal and the closing date of this RFP.
- **For major subcontractors** complete this form for the Recency time frame defined within this RFP.

In order to verify the recency and relevancy of any information provided, please also provide the following information for each contract referenced below:

- Description of effort performed under this contract
- Functional areas performed under this contract: Transportation/Supply/Maintenance
- Average Annual Dollar Value (Note: If contract reference provided is for work performed as a Prime under a Government contract, provide the total obligation to date divided by the years of contract performance to date. If contract reference is for work performed as a subcontractor on a Government contract, provide the total obligation to date divided by the years of subcontract performance to date.)
- Contractor's Role in the Performance of this contract (Prime/Sub)
- Place(s) of Performance
- Period of Performance (Start and End dates)

COMPANY NAME: _____

1. **Has the company listed above had any relevant contracts where it experienced performance problems during the timeframe outlined above?** If yes, provide the information below for each separate issue, and attach copies of any Level III CARs, Cure Notices, or Show Cause Letters received. Please attach extra pages as necessary.

___ YES ___ NO

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|--|--|
| a. Contract Number | d. Extent to which corrective action has been successful |
| b. Brief description of issue | e. Mitigation plan of how to prevent future issues |
| c. Corrective actions taken to avoid recurrence of the problem | f. POC(s) who can confirm the success of corrective measures |

2. **Has the company listed above had any recent and relevant contracts Terminated for Default or Terminated for Cause, in whole or in part, during the timeframe outlined above?** If yes, provide the information below for each termination. Please attach extra pages as necessary.

___ YES ___ NO

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|------------------------|--|
| a. Contract Number | c. Reason for Termination |
| b. Type of Termination | d. POC(s) to verify the information provided |