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Attachment 3 of FA5209-16-R-0007: Past Performance Questionnaire

The 374 CONS/LGCBB of the Air Force, Yokota Air Base is in the process of competitively selecting a source for a Medical Translation and Liaison Services program. The Contractor shall provide translation services from English to Japanese or vice versa both oral and written when scheduled escorts/emergency transfers to the Japanese medical facilities are initiated.

One of the considerations in proposal evaluation is the verification of the offerors' past performance on contracts or other work efforts which reflect the offeror's ability to perform on the proposed effort. We depend on information received from organizations such as yours, which have had first-hand experience with the offeror, for the evaluation of the offeror's performance on those contracts or work efforts.

Our areas of interest regarding the offeror are summarized in the enclosed questionnaire. In order to meet the acquisition milestones, we request your written response no later than **[insert number of days]** calendar days after your receipt of this letter **[or change to specify a date, e.g., "no later than 30 Jun 15"]**. This schedule will allow us sufficient time to analyze the data prior to the start of negotiations.

To assist you in preparing your response and expediting your reply, the questionnaire may be filled out electronically and e-mailed to tomoko.harashima.jp@us.af.mil or by hand and faxed to [011-81-31175-53346](tel:011-81-31175-53346) (Attention: Ms Tomoko Harashima). Please call Ms Tomoko Harashima at [011-81-42552-3011](tel:011-81-42552-3011) or email prior to fax transmission or if you have any questions. Your completed questionnaire will become a part of the official source selection records.

Your assistance is greatly appreciated and your prompt response will be one of the keys to the successful and timely completion of this Source Selection.

Signature **(Procuring Contracting Officer or Past Performance Evaluation Team Chair)**

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Section 1: Contract Identification

A. Contractor (Company/Division):

B. Contractor Cage Code:

C. Contract Number:

D. Contract Type (e.g., FFP, FPIF, CPIF, CPFF, etc.):

E. Program Title:

F. Brief Program Description:

G. Program Phase (e.g., Engineering & Manufacturing Development (EMD)):

H. Period of Performance

1. Original Schedule (assuming all options exercised):
Beginning Date _____ through _____
2. Current Schedule (assuming all options exercised):
Beginning Date _____ through _____
3. Reason for difference (if applicable):

I. Contract Dollar Value

1. Original maximum contract dollar value (assuming all options exercised): \$
2. Current maximum contract dollar value (assuming all options exercised): \$
3. Reasons for difference between original and current contract dollar value (if applicable):

J. Description of work performed:

K. Was this a competitively awarded contract? ☐ Yes ☐ No

L. Contractor's Role: ☐ Prime Contractor ☐ Subcontractor ☐ Key Personnel

Note: If offeror holds or has held other contracts with your agency/organization in the last three (3) years, please complete separate Past Performance Questionnaire forms for those contracts as well.

Section 2: Customer or Agency Identification

A. Customer or agency name:

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B. Customer or agency description (if applicable):

C. Geographic description of work performed under this contract (i.e., local, nationwide, worldwide, other Commands):

Section 3: Respondent Identification

A. Respondent's name:

B. Respondent's title:

C. Respondent's phone/fax number/e-mail address:

D. Length of time (number of years/months) respondent worked on subject contract and description of responsibility/position/role:

E. Other suggested points of contact:

Section 4: Performance Information

In the table below, indicate your rating for the contractor's performance by placing an "X" in the appropriate block to the right of each question. Provide supporting information for each response in the space provided. Attach additional pages if more space is needed. The performance rating scale is defined as follows:

<u>Code</u>	<u>Performance Rating</u>
E	EXCEPTIONAL – Performance meets contractual requirements and exceeds many requirements to the Government's benefit. The contractual performance being assessed was accomplished with few minor problems for which corrective actions taken by the contractor were highly effective.
V	VERY GOOD – Performance meets contractual requirements and exceeds some requirements to the Government's benefit. The contractual performance being assessed was accomplished with some minor problems for which corrective actions taken by the contractor were effective.
S	SATISFACTORY – Performance meets contractual requirements. The contractual performance being assessed contains some minor problems for which corrective actions taken by the contractor appear or were satisfactory.
M	MARGINAL – Performance does not meet some contractual requirements. The contractual performance being assessed reflects a serious problem for which the contractor has not yet identified corrective actions or the contractor's proposed actions appear only marginally effective or were not fully implemented.
U	UNSATISFACTORY – Performance does not meet most contractual requirements and recovery is not likely in a timely manner. The contractual performance being assessed contains serious problem(s) for which the contractor's corrective actions appear or were ineffective.

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N/A **NOT APPLICABLE** – Unable to provide a rating. Contract did not include performance for this aspect, performance was not observed, or information was not available. Do not know.

The Contractor:	E	V	S	M	U	N/A
1. Provided experienced managers and supervisors with the technical and administrative abilities needed to meet contract requirements. <u>SUPPORTING INFORMATION:</u>						
2. Demonstrated the ability to hire, maintain, and replace, if necessary, qualified personnel during the contract period. <u>SUPPORTING INFORMATION:</u>						
3. Delegated authority to project managers and supervisors commensurate with contract requirements. <u>SUPPORTING INFORMATION:</u>						
4. Home office participated in solving significant local problems. <u>SUPPORTING INFORMATION:</u>						
5. Manger is responsive. <u>SUPPORTING INFORMATION:</u>						
6. Provided effective quality control and/or inspection procedures to meet contract requirements. <u>SUPPORTING INFORMATION:</u>						
7. Corrected deficiencies in timely manner and pursuant to their quality control procedures. <u>SUPPORTING INFORMATION:</u>						

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The Contractor:	E	V	S	M	U	N/A
8. Provided timely resolution of contract discrepancies. <u>SUPPORTING INFORMATION:</u>						
9. Identified problems as they occurred. <u>SUPPORTING INFORMATION:</u>						
10. Suggested alternative approaches to problems. <u>SUPPORTING INFORMATION:</u>						
11. Displayed initiative to solve problems. <u>SUPPORTING INFORMATION:</u>						
12. Developed realistic performance schedules. <u>SUPPORTING INFORMATION:</u>						
13. Met established project schedules. <u>SUPPORTING INFORMATION:</u>						
14. Reserved. <u>SUPPORTING INFORMATION:</u>						
15. Was responsive to contract changes. <u>SUPPORTING INFORMATION:</u>						
16. Provided adequate project supervision. <u>SUPPORTING INFORMATION:</u>						
17. Reserved.						

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The Contractor:	E	V	S	M	U	N/A
<u>SUPPORTING INFORMATION:</u>						
18. Reserved. <u>SUPPORTING INFORMATION:</u>						
19. Reserved. <u>SUPPORTING INFORMATION:</u>						
20. Cooperated with Government personnel after award. <u>SUPPORTING INFORMATION:</u>						
21. Reserved. <u>SUPPORTING INFORMATION:</u>						
22. How would you rate the contractor's overall performance on this contract? <u>SUPPORTING INFORMATION:</u>						
23. Was the contractor ever issued a cure or show cause notice under the referenced contract? If yes, explain. <u>EXPLANATION:</u>					<input type="checkbox"/> Yes <input type="checkbox"/> No	
24. Would you award another contract to this contractor? If not, explain. <u>EXPLANATION:</u>					<input type="checkbox"/> Yes <input type="checkbox"/> No	

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Additional remarks:

Respondent's Signature

[click and pick the date]

Date

Thank you for your prompt response and assistance!

Please return this completed questionnaire to:

374 CONS/LGCB Unit 5228, Bldg 620 Yokota Air Base Fussa-shi Tokyo 197-0001 Atten: Tomko Harashima Fax: 011-8142-530-3319 Tel: 011-8142-552-3011 E-mail: tomoko.harashima.jp@us.af.mil	〒197-0001 東京都 福生市 在日米軍 横田基地内 建物番号 620 374 契約中隊 原島智子 ファックス: 042-530-3319 電話: 042-552-3011 電子メール: tomoko.harashima.jp@us.af.mil
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