

Performance Evaluation Questionnaire

EMC Expansion

Please check the appropriate boxes.

	Exceptional	Above Average	Average	Unacceptable
1. How would you rate our project manager in the following categories:				
Responsive to your needs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Returned your calls promptly?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Answered questions thoroughly?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accessible when you needed him/her?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Competent in the construction process?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. How would you rate the overall quality of our work?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Rate our timeliness on punch list Completion?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Was the project completed on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Was our base price competitive?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. If there were change orders, do you feel that we were fair?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was the cleanliness of the job site to your satisfaction?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Would you recommend Solutions to others?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. May we use you as a reference?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. _____

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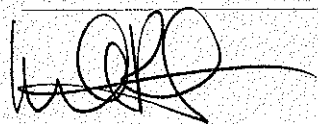
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10. What suggestions would you offer as to how we could improve our services?

11. If you have had previous experience with other general contractors, how do the services and quality of Solutions compare?

I WOULD PUT YOU UP AGAINST ANY A & B+ CONTRACTOR WITH NO HESITATION. THAT SAID, I CONSIDER YOU TO BE MEASURE TO COMPARE OTHERS AGAINST.

12. Additional Comments?



Signed

02-28-08

Date