	FOR OFFICIAL USE ON	LY / SOURCE SELE	ECTION INFO	RMATION - SEE	FAR 2.101	and 3.104					
PERFORMANCE EVALUATION (CONSTRUCTION)						1. CONTRACT NUMBER GS08P10JCC0009 2. CEC NUMBER					
INCOMPLETE-REVIEW			033621645								
IN	MPORTANT: Be sure to com	plete Part III - Evalu	ation of Perfor	mance Element	s on reverse	2.					
	PAR	I - GENERAL	CONTRAC	T DATA							
3. TYPE OF EVALUATION (X one) 4. TERMINATED FOR DEFAULT											
INTERIM (List percent	tage <u>100</u> %)	X FINAL		AMENDED							
5. CONTRACTOR (Name, Ad PRO-MARK SERVICES	ddress, and ZIP Code)	6.a.	6.a. PROCUREMENT METHOD (X one)								
45 21ST AVE E STE			SEALED BID X NEGOTIATED (Design-Build)								
WEST FARGO ND 580787811		h 1	SEALED BID X NEGOTIATED (Design b.TYPE OF CONTRACT (X one)								
USA	X		·								
NAICS Code: 236220	0		OTHER (Spec	cify)							
	all provide desig ural, engineering ns/improvements t	, constructi	lon, and	other rela	ated sea	r and materials to rvices necessary to ourthouse in					
	a. AMOUNT OF BASIC CONTRACT	b. TOTAL AMO MODIFICAT	TIONS	c. LIQUIDATE DAMAGES	D ASSESSE	d. NET AMOUNT PAID D CONTRACTOR					
	\$150,275			\$0		\$432,118					
10. SIGNIFICANT	a. DATE OF AWARD	b. ORIGINAL COMPLETI		c. REVISED C COMPLET		d. DATE WORK ACCEPTED					
DATES	03/15/2010	03/15/20	11	10/31/20	011	03/15/2011					
	PART II - PERF	ORMANCE EV	ALUATION	OF CONTRA	CTOR						
11. OVERALL RATING (X a	ppropriate block)			-							
	X ABOVE AVERAGE	SATISFACT	ORY	MARGINAL		UNSATISFACTORY (Explain in Item 20 on reverse)					
12. EVALUATED BY a. ORGANIZATION (Name	and Address (Include ZID C	(ada))				IONE NUMBER (Include Area					
GSA/PBS-MTN PLAINS SER				Code)							
c. NAME AND TITLE	d. SIGNATUR	d. SIGNATURE			e. DATE						
DARLENE GONZALES CONTRACTING OFFICER	cally Signe	ed//		11/29/2011							
13. EVALUATION REVIEWE	D BY										
a. ORGANIZATION (Name	e and Address (Include ZIP C	Code))			b. TELEPH Code)	IONE NUMBER (Include Area					
c. NAME AND TITLE	d. SIGNATUR	E			e. DATE						
14. AGENCY USE (Distributi	ion etc.)										
	on, cic.j										

PART III - EVALUATION OF PERFORMANCE ELEMENTS

5. QUALITY CONTROL		0	Α	S	М	U	16. EFFECTIVENESS OF MANAGEMENT	N/A	0	Α	S	М	U
a. QUALITY OF WORKMANSHIP			Х				a. COOPERATION AND RESPONSIVENESS				Х		
b. ADEQUACY OF THE CQC PLAN			Х				b. MANAGEMENT OF RESOURCES/				Х		
c. IMPLEMENTATION OF THE CQC			Х				PERSONNEL						
PLAN							c. COORDINATION AND CONTROL OF				Х		
d. QUALITY OF QC			Х				SUBCONTRACTOR(S)						
DOCUMENTATION							d. ADEQUACY OF SITE CLEAN-UP			Х			
e. STORAGE OF MATERIALS		Х					e. EFFECTIVENESS OF JOB-SITE			Х			
f. ADEQUACY OF MATERIALS			Х				SUPERVISION						
g. ADEQUACY OF SUBMITTALS			Х				f. COMPLIANCE WITH LAWS AND		Х				
h. ADEQUACY OF QC TESTING			Х				REGULATIONS						
i. ADEQUACY OF AS-BUILTS			Х				g. PROFESSIONAL CONDUCT			Х			
j. USE OF SPECIFIED MATERIALS			Х				h. REVIEW/RESOLUTION OF			Х			
k. IDENTIFICATION/CORRECTION OF DEFICIENT WORK IN A TIMELY MANNER		Х					SUBCONTRACTOR'S ISSUES						
										Х			
							SUBCONTRACTING PLAN						
17. TIMELY PERFORMANCE			1				18. COMPLIANCE WITH LABOR STANDARDS						
a. ADEQUACY OF INITIAL PROGRESS SCHEDULE			Х										_
							a. CORRECTION OF NOTED DEFICIENCIES	Х					
b. ADHERENCE TO APPROVED SCHEDULE			Х				b. PAYROLLS PROPERLY COMPLETED AND SUBMITTED		Х				
c. RESOLUTION OF DELAYS		Х					c. COMPLIANCE WITH LABOR LAWS		Х				
d. SUBMISSION OF REQUIRED DOCUMENTATION		Х					AND REGULATIONS WITH SPECIFIC ATTENTION TO THE DAVIS-BACON ACT AND EEO REQUIREMENTS						
e. COMPLETION OF PUNCHLIST ITEMS		Х					19. COMPLIANCE WITH SAFETY STANDARDS						
f. SUBMISSION OF UPDATED AND			Х	İ			a. ADEQUACY OF SAFETY PLAN		Х				
REVISED PROGRESS SCHEDULES							b. IMPLEMENTATION OF SAFETY PLAN		Х				
a. WARRANTY RESPONSE		х					c. CORRECTION OF NOTED DEFICIENCIES	x					

20. REMARKS (Explanation of unsatisfactory evaluation is required. Other comments are optional. Provide facts concerning specific events or actions to justify the evaluation. These data must be in sufficient detail to assist contracting officers in determining the contractor's responsibility. Continue on separate sheet(s), if needed.)

Small Business Utilization

Does this contract include a subcontracting plan? No

Date of last Individual Subcontracting Report (ISR) / Summary Subcontracting Report (SSR): N/A

EVALUATOR REMARKS: ProMark was very delightful to work with. They provided quality pricing on the original project award and subsequent modifications, were easy to work with, provided professional and timely responses to any of our concerns, and ultimately provided a quality end product. We would gladly work with them again on future projects.

CONTRACTOR REMARKS: None

CONCURRENCE: I concur with this evaluation. CONTRACTOR NAME: KYLE BERG TITLE: VICE PRESIDENT PHONE: 701-356-2618 DATE: 12/01/2011