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CONTRACTOR PERFORMANCE ASSESSMENT REPORT (CPAR)**Construction****Name/Address of Contractor:**

Company Name: AYTEKIN-SEROL INS MUTEAHHIT-MUHENDIS

Division Name:

Street Address: NO: 9/1 RESATBEY MAHALLESİ

City: ADANA

State/Province: X Zip Code:

Country: X

CAGE Code:

DUNS Number: 366452191

PSC: Z161 NAICS Code: 236116

Evaluation Type: Final**Contract Percent Complete:****Period of Performance Being Assessed:** 09/29/2008 - 09/28/2009**Contract Number:** FA568508C0036 **Business Sector & Sub-Sector:** Construction**Contracting Office:** FA5685 **Contracting Officer:** JOE REICH **Phone Number:** 676-8083**Location of Work:**

Incirlik Air Base, Military Family Housing

Award Date: 09/29/2008 **Effective Date:****Completion Date:** 07/02/2013 **Estimated/Actual Completion Date:** 05/14/2013**Total Dollar Value:** \$2,442,554 **Current Contract Dollar Value:** \$2,442,554**Complexity:** Medium **Termination Type:** None**Competition Type:** Competitive Delivery Order **Contract Type:** Firm Fixed Price**Key Subcontractors and Effort Performed:****DUNS:****Effort:****DUNS:****Effort:****DUNS:****Effort:****Project Number:** LJYC 99-1040A - B**Project Title:**

Repair Herky UOPH

Contract Effort Description:

Contractor shall provide all labor, equipment, materials, tools, parts, transportation to and from the job site, civil, structural, architectural, mechanical, and electrical work necessary to Repair Herky UOPH, Ph 3 in accordance with the Specifications and drawings.

Small Business Utilization:

Does this contract include a subcontracting plan? No

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

Evaluation Areas**Past Rating****Rating**

Quality:

N/A

Exceptional

Schedule:

N/A

Exceptional

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Cost Control:	N/A	N/A
Management:	N/A	Exceptional
Utilization of Small Business:	N/A	N/A
Regulatory Compliance:	N/A	Very Good
Other Areas:		
(1) :		N/A
(2) :		N/A
(3) :		N/A

Variance (Contract to Date):

Current Cost Variance (%): Variance at Completion (%):

Current Schedule Variance (%):

Assessing Official Comments:

QUALITY: Outstanding quality of workmanship, adequacy and implementation of the CQC plan, storage of materials, adequacy of QC testing and as-builts, use of specified materials, and identification/correction of deficient work in a timely manner. Very good with quality of QC documentation and adequacy of materials.

SCHEDULE: Outstanding adequacy of initial progress schedule, adherence to approved schedule and warranty response. Very good with submission of required documentation, and submission of updated and revised progress schedules.

MANAGEMENT: Outstanding with cooperation and responsiveness, management of resources/personnel, coordination and control of subcontractors, effectiveness of job site supervision, compliance with laws and regulations, professional conduct, review/resolution of subcontractor's issues and implementation of subcontracting plan. Very good with adequacy of site clean-up.

REGULATORY COMPLIANCE: Very good with adequacy and implementation of safety plan, and correction of noted deficiencies.

ADDITIONAL/OTHER: This contractor is from the Contracting Officer's perspective is very timely on all matters. They ensure that all issues are addressed and resolved as quickly and efficiently as possible.

RECOMMENDATION:

Given what I know today about the contractor's ability to perform in accordance with this contract or order's most significant requirements, I would recommend them for similar requirements in the future.

Name and Title of Assessing Official:

Name: Nicholas A. Northam

Title: Contracting Officer

Organization: 39th Contracting Squadron

Phone Number: 676-8083 Email Address: nicholas.northam@us.af.mil

Date: 02/11/2015

Contractor Comments:

ADDITIONAL/OTHER: Contractor agrees with the ratings assigned.

CONCURRENCE: I concur with this evaluation.

Name and Title of Contractor Representative:

Name: ZAFER BASDINKCI

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Title: PM

Phone Number: 903223161225 Email Address: zb@aytekin-serol.com

Date: 02/12/2015

Review by Reviewing Official:

Review by Reviewing Official not required.

Name and Title of Reviewing Official:

Name:

Title:

Organization:

Phone Number: Email Address:

Date:

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