FORM EO-470

03-12-84

WEST VIRGINIA DIVISION OF HIGHWAYS

DBE CONTRACTOR'S PERFORMANCE REPORT

----------------------------------------------------------------------------CONTRACTOR: NAME AND ADDRESS DATE

----------------------------------------------------------------------------

PROJECT NO. COUNTY TYPE OF WORK

----------------------------------------------------------------------------

 CIRCLE RATING

----------------------------------------------------------------------------WORKMANSHIP OUTSTANDING SATISFACTORY FAIR UNSATISFACTORY

PERFORMANCE OUTSTANDING SATISFACTORY FAIR UNSATISFACTORY

SUPERVISION OUTSTANDING SATISFACTORY FAIR UNSATISFACTORY

COORDINATION OF WORK OUTSTANDING SATISFACTORY FAIR UNSATISFACTORY

LABOR OUTSTANDING SATISFACTORY FAIR UNSATISFACTORY

EQUIPMENT OUTSTANDING SATISFACTORY FAIR UNSATISFACTORY

RELATION BETWEEN

CONTRACTOR & ENGINEER OUTSTANDING SATISFACTORY FAIR UNSATISFACTORY

RELATION BETWEEN

CONTRACTOR & PUBLIC OUTSTANDING SATISFACTORY FAIR UNSATISFACTORY

----------------------------------------------------------------------------REMARKS: EXPLAIN FULLY ANY IMPAIRMENT OF FUNCTION AND ASSIGN CAUSE. IF MORE SPACE IS NEEDED, USE THE REVERSE SIDE.

----------------------------------------------------------------------------

PROJECT SUPERVISOR CONSTRUCTION ENGINEER DATE

cc: PC District, Project