

**ASSESSMENT FORM FOR CLEANING CONTRACTOR'S PERFORMANCE**

**Note:**

1. This form is to be completed by an assessing officer representing the Service Buyer (i.e. Superintending Officer/ Person-in-charge with a managerial position).
2. Please complete all fields in the form. For areas that are not applicable, please indicate "NIL" or "N.A."

Project Title/ Description of Work: Provision of Cleaning Services to Kewalynn House.		
Name of Service Buyer: The MCST Plan No. 0619		
Name of Managing Agent (if applicable): Property Facility Services Pte Ltd		
Name of Cleaning Contractor: AO ServicePro Pte Ltd.		
Name of Cleaning Sub-contractor (if applicable): N.A		
Contract Sum, \$ (entire contract period):	Contract Commencement Date (dd/mm/yyyy): 01/07/2014	Contract Completion Date (dd/mm/yyyy): 30/06/2015

Performance Assessment Criteria	Multiplier Factor (a)	Performance Factor (b) (Between 0 to 10)	Performance Score (a) × (b)
<b>MANAGEMENT (65%)</b>			
Planning and control - Adherence to cleaning schedule and standards	2	9	18
Documentation of work	0.5	8	4
Response to instructions	1.5	9	13.5
Provision of supervision	1.5	9	13.5
Administrative support	0.5	9	4.5
Internal performance monitoring system	0.5	9	4.5
<b>MANPOWER (15%)</b>			
Competent workforce	1.5	8	12
<b>EQUIPMENT (20%)</b>			
Proper tool, equipment and uniform	1	9	9
Adequate maintenance (of tools and equipment)	1	9	9
<b>TOTAL SCORE<sup>1-2</sup></b>			<b>88</b>

<sup>1</sup> Please refer to the following page for the Performance Grade.

<sup>2</sup> To qualify for Clean Mark award, the cleaning contractor must achieve an average of 65 and 75 points, or more, for Clean Mark Silver and Clean Mark Gold, respectively.



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Other comments on Contractor's performance, if any:

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<b>Name of Assessor* (Superintending Officer)</b>	:	Mike Shak
<b>Designation</b>	:	Building Manager
<b>Email Address</b>	:	mcs+614@gmail.com
<b>Contact Number</b>	:	62781202
<b>Company Stamp</b>	:	
<b>Signature</b>	:	
<b>Date</b>	:	12/02/15

Total Score	Performance Grade
81 to 100	Excellent
71 to 80	Very Good
61 to 70	Good
51 to 60	Satisfactory
0 to 50	Poor

\* Please complete the following if the Superintending Officer is not of a managerial position.

<b>Name of Counter-signing Officer (Managerial and above)</b>	:	
<b>Designation</b>	:	
<b>Email Address</b>	:	
<b>Contact Number</b>	:	
<b>Company Stamp</b>	:	
<b>Signature</b>	:	
<b>Date</b>	:	