

ANNEXURE - VII (Refer Rule 19)

PERFORMANCE REPORT OF WORKS FOR REVALIDATION

PART I

(To be filled in by the contractor in duplicate in respect of each work cost of which falls within the range prescribed for eligibility as per Enlistment Rules read with Rule-12. One copy be submitted to Reporting Officer and other, containing acknowledgement of receipt and seal of office of reporting officer, be submitted to Enlistment Authority).

1. Period
2. Name & Address of contractor
- 2.1 Name(s) of Proprietor/partners
3. Class and Enlistment No.
4. Name & address of enlisting authority.....
5. (A) Name of Work

- 5(B) Services included (for composite works only) :
 - i. Civil works included (Water supply and sanitary installation, Drainage work and Water proofing work)
 - ii. Internal Electrical Installation included Yes/No
 - iii. E&M services included (Fire fighting, Fire alarm, HVAC, Lift, Electrical Sub Station and DG Set).

6. Agreement No.
7. Name & Address of P.W.D. Division
- 8.1. Estimated Cost
- 8.2. Tendered amount
- 8.3. Stipulated date of Commencement
- 8.4. Stipulated date of Completion
- 8.5. Actual date of completion
- 8.6. Percentage progress with date, if work not complete
- 8.7. Gross amount of final bill/work done
- 8.8. Amount of compensation levied, if any
- 8.9. Amount of reduced rate items, if any
- 8.10. Did the contractor go for arbitration?

8.11. If yes, total amount claimed and amount awarded.

9. Designation and email address of

- 9.1. Reporting officer
- 9.2. Reviewing officer
- 9.3. Enlistment Authority

Signature of the Contractor

PART II (To be filled by the department)

Certified that details given by the contractor in Part - I have been verified and found to be correct/have been corrected wherever necessary. Delay is partly /not/ fully attributable to contractor.

Signature of Executive Engineer

10.0 **Note :** After submission of Annexure VII by contractor, Reporting officer shall write the Report and forward to Reviewing officer within a week’s time. Reviewing officer shall then forward the report to the Enlisting authority within a week’s time.

Class	I	II	III	IV(A)	IV(B)	V
Reporting Officer	EE	EE	EE	EE	EE	AE
Reviewing Officer	SE	SE	SE	SE	SE	EE
Report to be sent to o/o	CE, PWD	CE, PWD	CE, PWD	CE, PWD	CE, PWD	SE, PWD

PART III
(To be filled by the department)

- a. Period
- b. Name & Address of contractor
- b.1 Name(s) of Proprietor/partners
- c. Class and Enlistment No.
- d. Name & address of enlisting authority

1. Name of work	
2. Services included (for composite works only)	
(iii) Whether Internal Electrical Installation included (Yes/No)	
(iv) Name of E&M services included (Fire fighting, Fire alarm, HVAC, Lift, Electrical Sub Station and DG Set)	
3. Agreement No. And date	
4. Agreement amount	
5. Date of commencement of work	
6. Stipulated date of completion	
7. Actual date of completion	
8. Details of compensation levied for delay (indicate amount) if any	
9. Gross amount of the work completed and paid	
10. Name and address of the authority (PWD division) under whom works executed	
11. Did the contractor go for arbitration? (Yes or No)	
(iii) If yes, total amount of claim	
(iv) Total amount awarded	
12. Performance of the Contractor	
i. Technical proficiency	Excellent/Very good/Good /Fair
ii. Financial soundness	Excellent/Very good/Good /Fair
iii. Mobilization of adequate T&P	Excellent/Very good/Good /Fair
iv. Mobilization of manpower	Excellent/Very good/Good /Fair
v. Quality of Works	Excellent/Very good/Good/Fair

vi. General behaviour	Excellent/Very good/Good /Fair
13. Overall Grade (A/B/C/D) A: Excellent B: Very good C: Good D: Fair	

Signature of Reporting Officer (Designation & Address)

11.0 Grading on Capability of Contractor:

i. Technical proficiency	Excellent/Very good/Good /Fair
ii. Financial soundness	Excellent/Very good/Good /Fair
iii. Mobilization of adequate T&P	Excellent/Very good/Good /Fair
iv. Mobilization of manpower	Excellent/Very good/Good /Fair
v. Quality of Works	Excellent/Very good/Good/Fair
vi. General behaviour	Excellent/Very good/Good /Fair
13. Overall Grade (A/B/C/D) A: Excellent B: Very good C: Good D: Fair	

Signature of Reviewing Officer (Designation & Address)

PART IV

(To be filled by the department)

Appeal and Review (if any)

1. Reference of Appeal
2. Decision of the Appellant Authority

Signature of Appellant Authority (Designation and Address)