

# PROJECT ENGINEER EVALUATION

This information is requested by Michigan Department of Transportation on a voluntary basis.

**Comments requested regardless of rating.**

**ORIGINAL to Engineer of Construction**

|                           |             |                         |
|---------------------------|-------------|-------------------------|
| DELIVERY/PROJECT ENGINEER | PROJECT NO. | PROJECT TYPE & LOCATION |
|---------------------------|-------------|-------------------------|

CONTRACT DESCRIPTION

| COMMENTS                          | SATISFACTORY             |                          | UNSATISFACTORY           |                          |                          |
|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|                                   | 5                        | 4                        | 3                        | 2                        | 1                        |
| SUPERVISION, PERSONNEL & ATTITUDE | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|                |                          |                          |                          |                          |                          |
|----------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| COMMUNICATIONS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|----------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

|   |                          |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| CONTROL OF WORK & COMPLIANCE WITH CONTRACT REQUIREMENTS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

|                        |                          |                          |                          |                          |                          |
|------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| TIMELINESS OF SERVICES | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

|                        |                          |                          |                          |                          |                          |
|------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| RESOLUTION OF PROBLEMS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

|                  |                          |                          |                          |                          |                          |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| PUBLIC RELATIONS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

GENERAL COMMENTS:

|                               |      |
|-------------------------------|------|
| SUBMITTED BY-<br>(CONTRACTOR) | DATE |
|-------------------------------|------|