THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

## Supplier/Product Evaluation Form

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

### Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

For assistance with this form contact us at

(754) 321-0505 or CLICK HERE to send us an email (include the words Supplier/Product Evaluation Form in the subject)

(101)022 0000 01	CENER COSENIA US AIT ETHAIN		-	/1 Todact Eve	iluduloi i i o i i i i	r the subject,
Did #. 16 1077	The state of the s	AL INFORMA	ITION			
Bid #: 16-107T	Bid Title: Bleacher Repair Serv	The second secon	+/Comico D	varidad. All	Diazaharranair	_
Purchase Order #:		Produc	t/Service P	roviaea: All	Bleacher repair	S
	) Name: Lyle Bleachers Inc.			10121000	2522	
Contact Name: Day		Target Committee	ct Phone #:	(813)968	- 3629	
		SUPPLIER EV	ALUATION			
1.) How would you	ı rate the supplier in the follo	wing areas?				
		1	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Overall customer s	ervice		Ш		$\checkmark$	
Delivery as schedul	led or promised				abla	
Signification resident protection. ■ Consideration resident to the Consideration of the Consideration and the Consideration of the Con	•	1	_2	25,00		
		Not	Somewh	at c	3	4
		Satisfied	Satisfie	d Sati	isfied Ver	y Satisfied
2.) How satisfied a	re you with the supplier?			Γ	7	V
3.) Will you use thi		Yes			_	ш
or, triii you use uiii		ш_				
	SECTION 2: PROD			177,016 177		
4.) Based on the ar	reas below, how would you ra	ite the produ	cts/service	s provided	with this Bid?	
		1	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Compliance with sp	pecifications				$\checkmark$	
Quality as compare	ed to similar products/services	s П				
1.00	to similar products/services	=	Ħ	7	Ħ	Ħ
rrices as compared	to similar products/services	ш	,—	2	Ļ	
		Ver	/ Unlikely	Unlikely	Probably	Definitely
5 ) Would you pure	chase this product/service aga					
5., Would you pure	chase this product, service age			ш		V
	SECTION 3:	END USER CO	MMENTS			
Please share any a	dditional information regarding t	his supplier or	the products	/ services p	rovided. If this s	supplier's
1	nce is unsatisfactory, please tell u					
Lyle Bleachers is a resp	ponsive vendor. They have held t	heir labor rate	s fixed during	g this bid, bu	t pricing for me	tal repair
The state of the s	d as a result of recent trade tariff			560 E	6 - <b>2</b> 1000000000	
	EVALUATION					
Name: David Mamm	el Title: Supervisor	II		Contact Pho	one #: (954)	778 - 9981
School/Department	t: Custodial/Grounds Department	t				
Participant's Signat		)	D	ate: 02/28/	/2020	

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

# **Supplier/Product Evaluation Form**

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

### Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

(754) 321-0505 or <u>CLICK HERE</u> t	o send us an email (inc	lude the w	ords <b>Supplie</b>	r/Product Ev	aluation Form	in the subject)
	GENERAL					
	leacher Repair Service:	s				
Purchase Order #:		Produc	ct/Service P	rovided:		
Supplier (Company) Name: Char	ron Sports Services, In					
Contact Name: Matt Kinight		Conta	ct Phone #	(864)26	1 - 6750	
	SECTION 1: SU	PPLIER EV	ALUATION			
1.) How would you rate the sup	plier in the followin	g areas?				
		1	2	3	4	5
0		Poor	Fair	Good	Very Good	Excellent
Overall customer service			Ш		$\checkmark$	
Delivery as scheduled or promis	ed				$\nabla$	
		1	2	Section 1		
		Not	Somewh	at sat	3 isfied Ve	4 
		atisfied	Satisfied	d 301	isileu ve	ry Satisfied
2.) How satisfied are you with t	PROGRAM SALVES COLUMN SAME THORNESS AND SALVESS SA			[		abla
3.) Will you use this supplier aga	ain?	✓ Yes	☐ No			
S	ECTION 2: PRODUCT	T / SERVICE	E EVALUAT	ION		
4.) Based on the areas below, he					with this Rid?	
	revisione vali i i produce application consistente i colonida de la colonida como acomo acomo acomo acomo acomo	1	2	3	1	5
		Poor	Fair	Good	Very Good	Excellent
Compliance with specifications				П	į, į	П
Quality as compared to similar p	roducts/services	Ħ	Ħ	Ħ	岗	H
Prices as compared to similar pro		Ħ	H	H		H
production and the second production of the se	oddets/ services	Ш	,⊔	Ļ	ΙŽΊ	Ш
		Very	Unlikely	2 Unlikely	3 Probably	4
5.) Would you purchase this pro-	duct/service again?	very			РГОВАВТУ	Definitely
16 In Adm - 1 2 (COUNT) + (COUNT)				ш	ш	<b>I</b> ✓
	SECTION 3: END					
Please share any additional inform	nation regarding this su	upplier or t	he products	/ services pr	ovided. <u>If this s</u>	upplier's
performance is unsatisfac						
Charron Sports is the primary awarde	e for repair of basketb	all backsto	ps. In 2016, I	PPO updated	this bid and in	serted fixed
pricing line items for typical basketba	ll backstop repairs - wh	nich has res	sulted in sub	stantial savir	ngs to the distri	ct.
	EVALUATION FO	RM COMP	LETED BY:	STEEL STATE	etalla, et rippipamie	
Name: David Mammel	Title: Supervisor II		The state of the s	ontact Pho	ne #: (954) 7	779 - 0001
School/Department: Custodial/Gro					1954/ /	19 - 3381
Custodial/Gro						
Participant's Signature:	unds Department					

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

# **Supplier/Product Evaluation Form**

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

### Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

(754) 321-0505 or <u>CLICK HERE</u> to	senu us an emaii (inc	lude the w	oras <b>Supplier</b> ,	Product Ev	<i>r</i> aluation Form	in the subject)
	GENERAL	INFORM	ATION			
Bid #: 16-107T Bid Title: Ble	acher Repair Services	3				
Purchase Order #:		Produ	ct/Service Pr	ovided: BI	eacher Repair	
Supplier (Company) Name: Lyle Bl	eachers Inc.					
Contact Name: Jeff/David Lyle		Conta	act Phone #:	( )		
	SECTION 1: SUI					
1.) How would you rate the supp	lier in the followin	g areas?			manual de la companya	
		1	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Overall customer service		Ш			Ш	$\checkmark$
Delivery as scheduled or promise	d					
		1	2	S=S		
		Not	Somewha	t cat	3 isfied Ve	4 (2-4)(1-1
10 H		atisfied	Satisfied	Sat	isilea ve	ry Satisfied
2.) How satisfied are you with the						abla
3.) Will you use this supplier agai	n?	<b>✓</b> Yes	No			
SE	CTION 2: PRODUCT	/ SERVI	CE EVALUATI	ON		
4.) Based on the areas below, how	The second secon		And the second s			
in, based on the areas below, not	w would you rate t				with this Bid?	
		1 Poor	2 Fair	3 Good	4 Van: Card	5
Compliance with specifications				Good	Very Good	Excellent
		님	닏	닏		$\overline{\mathbf{A}}$
Quality as compared to similar pro	Walter					$\checkmark$
Prices as compared to similar proc	lucts/services					7
		). <del></del> /	1	2	3	4
		Very	Unlikely	Unlikely	Probably	Definitely
5.) Would you purchase this prod	uct/service again?			П		
		NO CONTRACTOR				لتا
Please share any additional to	SECTION 3: END					
Please share any additional informa performance is unsatisfactor	tion regarding this su	upplier or t	the products /	services pr	ovided. <u>If this s</u>	upplier's
periorialise is unsatisfact	ory, picase ten us wi	iy. Tou ma	y attach an at	uitionai sn	eet if necessary	
	<b>EVALUATION FO</b>	RM COM	PLETED BY:	ALC: NO		
	itle: Foreman			ntact Pho	ne #: (754) 3	321 - 1460
School/Department: PPO, Zone 2						
Participant's Signature:	01//	1000	Dad	te: 03/03/	2020	

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

# Supplier/Product Evaluation Form

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

#### Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

(754) 321-0505 or <u>CLICK HERE</u> to send us an email (include	e the words <b>Supp</b> l	ier/Product Ev	aluation Form	in the subject)
GENERAL IN	erimiation			
Bid #: 16-107T Bid Title: Bleacher Repair Services				
Purchase Order #:	Product/Service	Provided:	Indor	Ex Rpa
Supplier (Company) Name: Charron Sports Services, Inc.				v
Contact Name:	Contact Phone	#:( )	- (	
SECTION 1: SUPPL	e i e i ve ve ve ve ve ve ve ve	N		
1.) How would you rate the supplier in the following a	areas?			
	1 2	3	4	5
<u> </u>	Poor Fair	Good	Very Good	Excellent
Overall customer service				/ <b>□</b>
Delivery as scheduled or promised	<b>一</b> 一			
·			لكا	
N	lot Some	vhat	3	4
	sfied Satis	Sa	tisfied Ve	ery Satisfied
2.) How satisfied are you with the supplier?	7/ 6	1		
3.) Will you use this supplier again?	Yes IN		<b>I</b>	
SECTION 2: PRODUCT /				
4.) Based on the areas below, how would you rate the	e products/servi	ces provided	with this Bid	?
	1 2	3 .	4	5
	Poor Fair	Good	Very Good	Excellent
Compliance with specifications				
Quality as compared to similar products/services				
Prices as compared to similar products/services			П	u
	1	2	3	4
	Very Unlikel	y Unlikely	Probably	Definitely
5.) Would you purchase this product/service again?			П	
		_	—	
SECTION 3./ END U	HER AND INSTRUMENTAL AND A STATE OF THE	Sentent to a series was a series		
Please share any additional information regarding this sup performance is unsatisfactory, please tell us why				
performance is unsatisfactory, piease tell us why	· jou may attacis	an saantona: :	meet ii Hetessa	, y.
EVALUATION FOR	MI COMMINICATION	:17		
Name: Gustare Joseph Brinch Title: Foreperson	en e	Contact Pi	10ne#: (752/)	371-420
School/Department: 1/ / /		. )	, , , ,	J. J.
UstodiA1 Groups			11	
Participant's Signature: Susta 18		Date: 3	13 por	,

### **PROCUREMENT & WAREHOUSING SERVICES** THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

# **Supplier/Product Evaluation Form**

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

#### Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

(754) 321-0505 or CLICK HERE to send us an email (includ	ie the words Supplie	er/Product Evalu	ation Form ir	the subject)
GENERAL IN	EORMATTION			
Bid #: 16-107T Bid Title: Bleacher Repair Services			a 1	
Purchase Order #:	Product/Service	Provided: 🖉	Hood	ROATR
Supplier (Company) Name: Lyle Bleachers Inc.				<b>"</b>
Contact Name:	Contact Phone #	<b>#: (</b> )	•	
SECTION 1: SUPP	INIER EVALUATION			
1.) How would you rate the supplier in the following:	areas?			
	1 2	3	4	5
	Poor Fair	Good	Very Good	Excellent
Overall customer service				
Delivery as scheduled or promised		一		a a l
	1 7	Li	<u> </u>	
.0	Not Somew	hat 3	1	4
•	isfied Satisfic	Satic	fied Ver	y Satisfied
2.) How satisfied are you with the supplier?		Г	7	
3.) Will you use this supplier again?	TYes I No	-		<b>-</b>
SECTION 2: PRODUCT	***************************************			
4.) Based on the areas below, how would you rate th	e products/servic	es provided w	ith this Bid?	
	1 2	3	4	5
	Poor Fair	Good	Very Good	Excellent.
Compliance with specifications				
Quality as compared to similar products/services				
Prices as compared to similar products/services				
	1	2	3	4
	Very Unlikely	Unlikely	Probably	Definitely
5.) Would you purchase this product/service again?				
Sac Helius, and Please share any additional information regarding this su	esates and the areal was	an day a substitution of the substitution of t	uided Ifthia	sunnliar's
performance is unsatisfactory, please tell us who				
	<u> </u>			
				70 mm
				2.00
EVALUATION FOR			Harles and the second	
Name: Gustani Bross Title: Forepers	·	Contact Pho	ne#: (794)	521-4309
Name: Gustant Brown Title: Foregress School/Department: Custod M Grounds		·		· · · · · · · · · · · · · · · · · · ·
CUSTOCINI GIOCODOS		2	101	
Participant's Signature: Susful AB		Date:	1 2/20	20

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

# **Supplier/Product Evaluation Form**

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

### Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

For assistance with this form contact us at

(754) 521 6565 61	CEICK FIERE CO	send us an email (ii		100070 02	Product Ev	aluation Form II	i the subject)
Did #.16 107T	Did Tide, Di		AL INFORMA	TION			
Bid #: 16-107T Purchase Order #:	Bid Title: Bid	eacher Repair Servic		. /C i D			
	\ Alamadul - D	d t t	Produc	t/Service Pr	oviaea:		
Supplier (Company	) Name: Lyle E	leacners inc.		. 01			
Contact Name:		SECTION 1: S		ct Phone #:	( )	-	
1.) How would you	unto the own	The second secon		ALUATION			
1.) How would you	rate the sup	piler in the follow	1921	-	_	20	<u> 122</u>
			1 Poor	2	3	4	5
Overall customer se			Poor	Fair	Good	Very Good	Excellent
			닏	Щ	닏	닏	
Delivery as schedul	ed or promis	ed	LJ			Ш	~
			1	2		3	Δ
			Not	Somewha	Sat	_	y Satisfied
			Satisfied	Satisfied		<b>—</b>	——————————————————————————————————————
2.) How satisfied a			<u>Ц</u>	L	L		
3.) Will you use thi	s supplier aga	ain?	✓ Yes	No			
	S	ECTION 2: PRODU	JCT / SERVI	CE EVALUAT	ION		
4.) Based on the ar	eas below, h	ow would you rat	e the produ	cts/services	provided	with this Bid?	
			1	2	3	4	5
			Poor	Fair	Good	<b>Very Good</b>	Excellent
Compliance with sp	ecifications					П	
Quality as compare	d to similar p	roducts/services	Ħ	Ħ	Ħ	Ħ	
Prices as compared	-conservation - communication in the sec-	7950 1000 1000 1000 557	Ħ	H	H	H	
riices as compareu	to similar pro	Juucts/services	Ш	,⊔	Ļ	Ļ	
			Von	Unlikely	Unlikely	3 Probably	4 Definitely
5.) Would you pure	hase this pro	duct/service agai					
,,-u.p			•••	Ш			
		SECTION 3: E	ND USER CO	MMENTS		UNE / 1915	
Please share any ac							
performan	ce is unsatisfa	ctory, please tell us	why. You ma	y attach an a	dditional sh	eet if necessary	<b>/.</b>
		EVALUATION	FORM COM	PI FTED BY	A. Espain		
Name: James Rechke	mmer	Title: carpenter/m	The property of the second second		ontact Pho	one #: (754) 3	221 - 2027
	ANGUNES S.		iason ibreiña			V54/3	27 7371
School/Department							
Participant's Signate	ure: Deus	CKech ale	_	Da	ite: 02/28/	2020	
	1	33.0	Salayan				

02.2017. V. PWS #1 Page 1 of 1

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

## **Supplier/Product Evaluation Form**

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

### Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

For assistance with this form contact us at

(754) 321-0505 o	r <u>CLICK HERE</u> to send us an email (i	nclude the w	ords <b>Supplier/</b> l	Product Ev	aluation Form in	n the subject)
	GENERA	L INFORMA	TION			
Bid #: 16-107T	Bid Title: Bleacher Repair Service	es				
Purchase Order #:		Produc	t/Service Pro	ovided:		
Supplier (Compan	y) Name: Lyle Bleachers Inc.					
Contact Name:		Conta	ct Phone #: (	)		
	SECTION 1: S	<b>UPPLIER EV</b>	ALUATION			
1.) How would yo	ou rate the supplier in the follow	ing areas?				
Overall customer Delivery as schedu	service	1 Poor  I Not Satisfied	2 Fair 2 Somewhat Satisfied No	3 Good S t Sat	4 Very Good  3 isfied Ver	5 Excellent
.,,		120				
	SECTION 2: PRODU					
4.) Based on the a	areas below, how would you rat	e the produ	cts/services	provided	with this Bid?	
	specifications red to similar products/services d to similar products/services	Poor	2 Fair  □ □ □ 1	Good  C	4 Very Good	5 Excellent
5.) Would you pu	rchase this product/service agai		Unlikely	Unlikely	Probably	Definitely
	SECTION 3: El additional information regarding thi ance is unsatisfactory, please tell us	s supplier or	the products /			
	EVALUATION	FORM COM	PLETED BY:			
Name: Lichard School/Department Participant's Signa	Slusser Title: FOREN		Co	te: 3/	one #: (254):	0 0

Page 1 of 1 02.2017. V. PWS #1

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

## **Supplier/Product Evaluation Form**

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

#### Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

For assistance with this form contact us at

(754) 321-0505 or CLICK HERE to send us an email (include the words Supplier/Product Evaluation Form in the cubioct)

	GENERA	L INFORMA	500			
Bid #: 16-107T	Bid Title: Bleacher Repair Service	STREET, STREET	A CONTRACTOR OF THE PARTY OF TH	Table of the second		and the Parkers of the Parkers
Purchase Order #:	La transfer de la constante de		t/Service Pi	rovided:		
Supplier (Company	Name: Charron Sports Services, I					
Contact Name:			ct Phone #:	( )	•	
	SECTION 1: S	The Court of	A Charles of the Line of the Charles of the Charles			
1.) How would you	rate the supplier in the follow					
•	ado en sententra o antigramenta de de la . ■ Mossentra de vido esperto o consular estable en como de destruto El 1	1	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Overall customer s	ervice			П		П
Delivery as schedul	ed or promised	Ħ	Ħ	Ħ		Ħ
, 40 00110441	premiera	1	Ц,			
		Not	Somewha	at	3	4
		Satisfied	Satisfied	Sat	isfied Ver	y Satisfied
2.) How satisfied a	re you with the supplier?	П		Г	7	
3.) Will you use thi	70 (18) 2000 2000 W REAL TO	Yes				
	72.7 M-73.0			1011		
A) Recod on the	SECTION 2: PRODU	CONTRACTOR OF STREET	STATE OF THE PERSON NAMED IN			
4.) based on the al	reas below, how would you rate	e the produ	1029	provided	with this Bid?	9 <u>0</u> 3
		1	2	3	4	5
Compliance with	and if in the same	Poor	Fair	Good	Very Good	Excellent
Compliance with sp		Щ	닏	닏		Ш
Quality as compare	ed to similar products/services		Ш			
Prices as compared	to similar products/services	100			<b>V</b>	
		0	1	2	3	4
			y Unlikely	Unlikely	Probably Probably	Definitely
5.) Would you pure	chase this product/service agai	n?			V	
	SECTION 3: E	ND LISER CO	OMMENTS			
Please share any a	dditional information regarding thi	Design of the last street of the last		/ services n	rovided If this	supplier's
	nce is unsatisfactory, please tell us					
		, one explosited to 2001 at 120 TO 400 T	n en er er en		n garagan ng katalang ng mga pathina ang pangang ng pangang ng pangang ng pangang ng pangang ng pangang ng pan	5 - SOF
The state of the s						
Names	EVALUATION	Political District and solid applications				us in thirty
Name: Ron Eggenber		anager	(	Contact Pho	one #: (754) 3	321 -4317
School/Departmen	t: PPO Custodial/Grounds					
Participant's Signat	ture: Kon S	la.	~ D	ate: 03/03/	/2000	
	The same of the sa	- vary		_30. 00,00,		
02.2017. V. PWS #1		0			Da	ge 1 of 1

Page 1 of 1