

OPTIONAL – RETURN WITH BID DOCUMENTS

NYSDOT CONTRACT DOCUMENT BID-ABILITY SURVEY

NYSDOT requests your feedback on the bid-ability of contract documents to assist in prioritizing improvement opportunities. On a scale of 1 to 5 with 5 being the best score, please rate the following based on your review of the contract documents at the bid preparation stage. Please provide written comments in the space provided.

A. CONTRACT INFORMATION

1. Contract Number _____
2. Letting Date _____

B. BID-ABILITY

- | | | | | | |
|---|---|---|---|---|---|
| 1. The plans were complete, well organized, and easy to understand. | 1 | 2 | 3 | 4 | 5 |
| 2. Sufficient detail was provided for bid preparation. | 1 | 2 | 3 | 4 | 5 |
| 3. The print quality was adequate for all plan sheets. | 1 | 2 | 3 | 4 | 5 |
| 4. The specifications were clear, complete, and consistent with other contract requirements. | 1 | 2 | 3 | 4 | 5 |
| 5. All specification items required for the work were included in the contract documents. | 1 | 2 | 3 | 4 | 5 |
| 6. Special notes were clear, complete and consistent with other contract requirements. | 1 | 2 | 3 | 4 | 5 |
| 7. The estimate of quantities agreed with your independent estimate. | 1 | 2 | 3 | 4 | 5 |
| 8. The supplemental information available to bidders was complete and readily available for inspection. | 1 | 2 | 3 | 4 | 5 |
| 9. The letting date was appropriate for the type of contract work to be performed. | 1 | 2 | 3 | 4 | 5 |
| 10. The contract completion date was reasonable and achievable. | 1 | 2 | 3 | 4 | 5 |
| 11. If amendments were issued, they were clearly written and easy to understand. | 1 | 2 | 3 | 4 | 5 |

C. OVERALL RATING

1. Compared to other NYSDOT contract documents, how would you rate the overall bid-ability of this contract?
☐ Above Average ☐ Average ☐ Below Average
2. Compared to contract documents from other Agencies/Owners, how would you rate the overall bid-ability of this contract?
☐ Above Average ☐ Average ☐ Below Average

D. GENERAL COMMENTS

Please provide any additional comments regarding the contract documents. Include positive/negative comments and recommendations for improvement.

Comments/Suggestions: _____

E. CONTACT INFORMATION (OPTIONAL)

Name: _____

Company: _____

Prime Contractor ____ Subcontractor ____ Supplier ____

Address: _____

Phone: _____

e-mail: _____

The completed survey should be returned with your bid. If faced with time constraints, you may also mail the completed survey at a later date to:

New York State Department of Transportation
PS&E Section, Design Quality Assurance Bureau
50 Wolf Road, POD 23
Albany, NY 12232

or FAX to: (518) 457-6477