

Subcontractor Selection Evaluation Sheet

Project Name:

Date:

Evaluator:

Subcontractor Candidates

| No. | Company Name | Contact Person | Phone/Email |
|-----|--------------|----------------|-------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |

Evaluation Criteria

| Criteria | Description | Score (1-10) |
|----------------------|---|--------------|
| Experience | Relevant project experience and expertise | |
| Technical Capability | Suitable equipment, staff qualifications | |
| Financial Stability | Solvency, performance history | |
| Reputation | References, industry standing | |
| Quality Assurance | Certifications, QA/QC procedures | |
| Price | Competitiveness of proposal | |
| Safety Record | History of safety performance | |

General Remarks:

Selection Summary

| Selected Subcontractor | Reason for Selection |
|------------------------|----------------------|
| | |