



TEXAS SOUTHERN UNIVERSITY
VENDOR PERFORMANCE FORM

**Reporting of vendor performance is mandated by
The Texas Government Code (TGC), §2262.055, and 34 Texas Administrative Code (TAC), §20.108.**

VENDOR NAME: _____	
Contact Name: _____	
Address: _____	City / State: _____
Phone #: _____	Email Addy: _____
Fax #: _____	
TYPE OF PURCHASE: ☐ Commodity Purchase OR ☐ Service Purchase	
WHAT TYPE: ☐ CPA Open Market ☐ CPA Term Contract ☐ CISV ☐ Schedule ☐ TXMAS ☐ Delegated ☐ Exempt ☐ CPA Blanket PO / Other	
Purchase Order# _____ PO Date (mm/dd/yyyy) _____ Requisition # (Solicitation) _____	
CONTRACT TYPE/ACTION: ☐ New Agreement ☐ Renewal ☐ Modification/Amendment ☐ Extension	

DELIVERY ISSUES

Note: You must enter a Resolution Code (see below) if any Delivery Issues are checked.

- | | |
|--|---|
| ☐ (005) Late Delivery | ☐ (008) Failure to deliver |
| ☐ (006) 1st Written notice issued for late delivery | ☐ (010) Delivery made at wrong destination |
| ☐ (007) 2nd Written notice issued for late delivery | |

PERFORMANCE ISSUES

Note: You must enter a Resolution Code (see below) if any Performance Issues are checked.

- | | |
|--|--|
| ☐ (016) Short/over weight or count | ☐ (100) Unsatisfactory installation |
| ☐ (018) Vendor shipped incorrect merchandise | ☐ (102) Service not performed within specifications |
| ☐ (020) Failure to replace damaged goods | ☐ (110) Incorrect invoices |
| ☐ (021) Slow replacement of damaged goods | ☐ (113) Failure to comply with terms/conditions of contract |
| ☐ (022) Failure to pick up incorrect shipment | ☐ (114) Failure to comply with requirements of HUB Subcontracting Plan (HSP) (Give details below) |
| ☐ (023) Improper product packaging or palletizing | ☐ (120) Failure to provide proof of insurance or maintain insurance |
| ☐ (038) Poor product quality and/or performance | ☐ (121) Failure to provide report(s) |
| ☐ (040) Failure to promptly notify CPA/Agency/Co-op Member concerning manufacturer discontinuation of an item | ☐ (122) Misrepresentation of qualifications (Give details below) |
| ☐ (042) Repair parts not available | ☐ (123) Falsification of/fraudulent submittals (Give details below) |



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- | | |
|--|---|
| ☐ (083) Failure to meet specifications (Give details below) | ☐ (126) Failure to respond to emergencies as required (Give details below) |
| ☐ (087) Failure to respond to letter, phone call, or email | ☐ (127) Failure to close out project as specified |
| ☐ (090) Poor customer service (Give details below) | ☐ (130) Failure to pay administrative fees |
| ☐ (091) Unauthorized substitution | ☐ (131) Other (Give details below) |
| ☐ (095) Failure to supply performance bond within required time | |

RESOLUTION CODES

Please enter at least one Resolution Code for the Delivery or Performance issues selected above.

Satisfactory Resolution Codes

(Does not negatively effect the score(s))

- ☐ (205) Item met specification via inspection
- ☐ (207) Delivery made after vendor was notified
- ☐ (208) Service met specifications
- ☐ (209) Performance corrected
- ☐ (210) Material or item replaced
- ☐ (212) Equipment performance corrected
- ☐ (217) Performance bond received
- ☐ (220) Invoice corrected
- ☐ (230) Item canceled from contract (No fault of vendor)
- ☐ (234) Item/entire order canceled (No fault of vendor)
- ☐ (236) Entire contract canceled (No fault of vendor)
- ☐ (249) Order completed
- ☐ (251) Correct shipment received
- ☐ (255) Substitution approved by awarding agency
- ☐ (256) Insurance requirements received
- ☐ (259) Resolved and documented (No fault of vendor - Give reason below)
- ☐ (261) Paid administrative fees
- ☐ (299) Other (Give reason below)

Unsatisfactory Resolution Codes

(Negatively effects the score(s))

- ☐ (201) Late Delivery
- ☐ (211) Damages Assessed
- ☐ (213) Failure to pay assessed damages
- ☐ (225) Shipment rejected (Give reason below)
- ☐ (228) Item canceled from contract (Vendor failure-vendor initiated)
- ☐ (229) Item canceled from contract (Vendor failure-state initiated)
- ☐ (235) Entire contract canceled (Vendor fault)
- ☐ (237) Damages paid
- ☐ (262) Order not complete (Give reason below)
- ☐ (263) Manufacturer fault (Give reason below)
- ☐ (264) Resolved and documented (Vendor fault -give reason below)
- ☐ (265) Substitution not approved by awarding agency
- ☐ (266) Item/entire order cancelled (Vendor fault)
- ☐ (267) Delivery not corrected by vendor
- ☐ (268) Hub Subcontracting plan rejected
- ☐ (269) Failure to provide required documentation (vendor fault)
- ☐ (270) Vendor Failed to Respond to Complaint
- ☐ (271) Administrative fees not paid - vendor on warrant hold
- ☐ (298) Other (Give reason below)



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Resolution Date (mm/dd/yyyy) _____

EXCEPTIONAL PERFORMANCE

Please enter a detailed explanation of the exceptional performance.

- | | |
|--|--|
| ☐ (301) Shipment made early upon agency/co-op member request | ☐ (310) order or service completed satisfactorily |
| ☐ (303) Product upgrade substitution suggested and accepted at no additional cost to the agency | ☐ (311) Voluntary Price reduction for large order |
| ☐ (305) Exceptional customer service response | ☐ (399) Vendor commended |
| ☐ (309) Provided technical/training/set-up assistance when not required | |

Detailed explanation (Please be specific):

Resolution Comment:

Additional E-mail recipients

These will be added to the addresses above if an e-mail is sent to the vendor. Separate multiple addresses with a comma, no spaces

To: _____
Copy: _____



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Yes_____ | No_____ - Send a E-mail Notice to Vendor and Your Agency

If you wish to email the form to the vendor, please select the E-mail option. Note that you are still required to fax or mail a copy of the Vendor Performance Form to the Vendor so that they can respond.

Initiating Department / Contract Manager **Date**

SVP / Official w/Delegated Authority **Date**