

Vendor Performance Assessment

Date: [Insert Date]

To: [Vendor Name]

[Vendor Address]

[City, State, Zip Code]

Dear [Vendor Contact Name],

We are conducting a performance assessment of our vendors and would like to take this opportunity to evaluate our working relationship with [Vendor Name]. Your cooperation in providing the necessary information will help us ensure continued success.

Assessment Areas

- Quality of Products/Services
- Timeliness of Deliveries
- Customer Service
- Pricing Competitiveness
- Compliance with Contracts

Rating Scale

Please rate each category on a scale of 1 to 5, with 1 being unsatisfactory and 5 being excellent.

Comments

Feel free to provide any additional comments or suggestions regarding our partnership.

Response Deadline

Please submit your assessment by [Insert Deadline Date]. Your feedback is essential for us to enhance our collaboration.

Thank you for your attention to this matter. We look forward to your prompt response.

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Contact Information]