

Authority FATS Tasking Feedback Form

Please see the FATS Customer Guidance document for further instructions on the completion of this form.

Task Number	Final Task Value	Competition /Single Source	Task Duration	Broad Capability Area(s)	Supplier, FATS Number	Customer / IPT Name
FATS3/		.		, , ,	FATS3/	

<i>1. The contracted product or service has been provided in accordance with the contract tasking requirements?</i>		
	Yes / No	Comments
Customer:		

<i>2. The contracted programme of work was completed at the agreed price?</i>		
	Yes/ No/ N/A	Comments
Customer:		

<i>3. Where cost changes have arisen, all supporting information to aid the change in price was provided right first time?</i>		
	Yes / No	Comments
Customer:		

<i>4. The contracted product or service has been provided in accordance with the timescales defined in the contract?</i>		
	Yes / No	Comments
Customer:		

<i>5. The contracted period, events and outputs (requests for provision of GFE, meetings, production of minutes, letters etc) provided in accordance with the agreed timescales?</i>		
	Yes / No	Comments
Customer:		

<i>6. Effective communication channels were established between the Customer (Business Unit /IPT) / Supplier which ensured information flowed between the parties as required?</i>		
	Yes / No	Comments
Customer:		

Protect – Commercial (When Completed)

<i>7. Supplier demonstrated good overall programme manager attributes in discharging the programme / contract?</i>		
	Yes / No	Comments
Customer:		

<i>8. Were appropriate programme risks clearly identified and appropriate management action taken?</i>		
	Yes / No / NA	Comments
Customer:		

Completed by:

Signature	
Name	
Position	
Telephone Number	
IPT/Organisation	
Date	

On completion please forward this form to the Contractor, for onward transmission to the DE&S TPAC Team.