


HOW TO COMPLETE A VENDOR IMPROVEMENT REQUEST

State of Nebraska
VENDOR IMPROVEMENT REQUEST



1 SUBMITTER INFORMATION

NAME & TITLE: Jane Doe, Buyer
 AGENCY: Department of Administrative Services
 E-MAIL: Jane.Doe@nebraska.gov
 PHONE: 402-555-8147

By signing below I certify that, to the best of my knowledge, the information provided on this form is true and accurate.

Jane Doe _____ 7/31/2020
 Submitter's Signature Title Today's Date
(Type/Sign your name here)

2 Have you sent a vendor performance notice to the vendor for resolution of this issue?

NO YES

if "NO" Before submitting a Vendor Improvement Request, please contact your vendor directly using the **Vendor Performance Notice**. Agencies are often able to work with their vendor to find a mutually beneficial solution.

To download the **Vendor Performance Notice** template, or learn more about the Vendor Performance Program, please visit:
<http://das.nebraska.gov/materiel/VendorPerformance.html>

if "YES" In the Summary of Events field (*next page*), please describe your attempt(s) to resolve, including dates, and the vendor's response.

3 SEVERITY SCORE : 4

Use the chart below to find the severity score of this issue, and record the score above. The severity score is the number that best matches the levels of Impact and Urgency of this issue.

		IMPACT		
		High	Medium	Low
URGENCY	High	5	4	3
	Medium	4	3	2
	Low	3	2	1

4 VENDOR INFORMATION

COMPANY NAME: ABC Company
 CONTACT NAME/TITLE: Bob Smith
 VENDOR AB#: 4812564

5 PURCHASE INFORMATION

CONTRACT/PURCHASE ORDER #(S): 42456 OC, 9813848 OG
 DATE(S) OF OCCURRENCE: 6/5/20
 DESCRIPTION OF COMMODITY/SERVICE: 740 Hinged wall mount brackets, 370 tempered glass shelves

Revised 07/01/2020

1 Enter your information, and date. Sign VIR, confirming that the information you're providing on the form is true and accurate.

2 Select Yes or No to answer if you have already sent a Vendor Performance Notice to the vendor to attempt to resolve this issue.

3 Use the chart to consider the Urgency and Impact of the issue. Enter the severity score.

4 Enter Vendor's information and E1 Address Book number.

5 Enter purchase information

**CONTINUE TO
NEXT PAGE**
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6 REQUESTED IMPROVEMENT AREA(S)

Check all that apply

DELIVERY	QUALITY	MISCELLANEOUS
<input checked="" type="checkbox"/> Late delivery	<input type="checkbox"/> Inferior quality/Service deficiencies	<input type="checkbox"/> Unauthorized change in quantity
<input type="checkbox"/> Non-delivery	<input type="checkbox"/> Unauthorized substitution	<input type="checkbox"/> Invoice inaccuracies
<input checked="" type="checkbox"/> Delivery to incorrect address	<input type="checkbox"/> Damaged or defective	<input checked="" type="checkbox"/> Failure to respond
<input type="checkbox"/> Partial delivery - cannot deliver balance of order	<input type="checkbox"/> Unsatisfactory workmanship in installation	<input type="checkbox"/> Request to cancel order due to Quote/Bid error
<input type="checkbox"/> Failure to replace damaged goods	<input type="checkbox"/> Failure to meet specifications set forth in Quote/Bid	<input type="checkbox"/> Unauthorized price change(s)
<input type="checkbox"/> Other: _____		

7 CONTRACT REFERENCE

For each selection of non-compliance made in the Requested Improvement Area above (step 6), please provide the contract section(s) and page number(s) of the applicable Specifications and/or Terms & Conditions, and a description of how the contractor's performance has been non-compliant.

CONTRACT SECTION & PAGE #	DESCRIPTION OF NON-COMPLIANCE
Section III, A, 1 - Page 6	States delivery within 30 days of PO, received after 60 days
Section II, F, 2, e - Page 22	States delivery to address on PO, sent to incorrect address

6 Select applicable performance issue description(s). If not in list, select OTHER and write in your own description.

7 Provide contract requirement citations and how performance is non-compliant. Enter the section titles and page numbers for each issue.

CONTINUE TO NEXT PAGE
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8 SUMMARY OF EVENTS

Please provide a brief, factual explanation of the performance issue(s) experienced, including dates, in the space below. A separate sheet may be added if additional space is needed.

Please note: This is not an internal document. A copy of this form will be provided to the vendor.

4/1/20 - Purchase order 9813848 OG was placed with requested delivery by 5/15/20. Order was received on 6/5/20 - Order was received and was incorrectly sent to Chadron, NE office instead of Omaha, NE office as specified on Purchase Order.
7/1/20 - Sent a Vendor Performance Notice (VPN) to vendor describing the issue. Vendor completed and returned Vendor Acknowledgement section of VPN the same day, stating the order would be picked up on 7/2/20 and delivered same day to Omaha office.
7/7/20 - Sent e-mail to vendor requesting an update on pickup/delivery of order
7/9/20 - Sent e-mail to vendor requesting an update on pickup/delivery of order
7/15/20 - Left voicemail for vendor requesting an update on pickup/delivery of order
7/17/20 - Sent e-mail to vendor requesting an update on pickup/delivery of order
7/21/20 - Sent e-mail to vendor requesting an update on pickup/delivery of order
7/27/20 - Left voicemail for vendor requesting an update on pickup/delivery of order
7/30/20 - Left voicemail for vendor requesting an update on pickup/delivery of order

As of 7/31/20 no response has been received from vendor

9 WHAT IS YOUR AGENCY'S DESIRED OUTCOME?

Would like order to be picked up from incorrect Chadron, NE location and delivered to Omaha, NE location. If cannot be done by 8/5/20, would like to cancel purchase order and place order different contracted vendor.

10 ATTACH DOCUMENTATION, OBTAIN AGENCY APPROVAL, AND SEND

After VIR has been approved at your agency level, send completed form **AND** referenced supporting documentation to:
AS.MATERIELPURCHASING@nebraska.gov

PLEASE REDACT ANY SENSITIVE INFORMATION THAT SHOULD NOT BE MADE PUBLICLY AVAILABLE.

Examples of supporting documentation may include; contracts, purchase orders, invoices, specifications, correspondence, test results, packing slips, delivery tickets, etc.

8 Describe performance issue(s) experienced, and attempt(s) to resolve. Be objective, **factual**, and concise – be sure to include dates!

9 Describe the end result that your agency would consider an acceptable solution.

10 Attach supporting documentation.
REDACT ANY SENSITIVE INFO THAT SHOULD NOT BE MADE PUBLICLY AVAILABLE.

12 All VIRs must be approved by your agency, and should be reviewed by your agency's legal counsel.

13 Send VIR to DAS Materiel/SPB at the e-mail address listed on the form for final approval.

14 DAS Materiel/SPB will contact vendor providing instructions for next steps. A copy of the VIR may be sent to the vendor.