

50/50 GRANT REHAB PROGRAM

PO# _____



REQUEST FOR QUOTATIONS

Instructions to contractor: Return **RFQ# 25-023** by Wednesday, January 15, 2025, at 10:00 a.m.; include a minimum of three (3) sealed copies, Attn: Debra Hamilton Tidwell, City Clerk, 301 River Park Drive, East St. Louis, IL 62201. FAILURE TO ATTEND MANDATORY PRE-BID MEETING IS AUTOMATIC DISQUALIFICATION TO SUBMIT BIDS

PROJECT INFORMATION

CONTRACTOR INFORMATION

ADDRESS: 575 NORTH 23RD STREET, ESL, 62205	COMPANY NAME:
HOMEOWNER'S NAME/SIGNATURE: RAMON WILLIAMS	POINT OF CONTACT/CONTRACTOR:
PHONE: 618.530.3703 ALTERNATE PHONE: 618.274.4364	MAILING ADDRESS:
EMAIL: RAMON55@CHARTER.NET	CELL/BUSINESS PHONE: EMAIL:

SCOPE OF WORK

DESCRIPTION	QUANTITY	COST <i>Labor & Materials</i>
FRONT PORCH: REMOVE AND REPLACE, REPAIR CANOPY REAR PORCH: REMOVE AND REPLACE, REPAIR CANOPY REMOVE AND INSTALL PORCH COLUMNS, RAILS, STEPS WINDOWS: REMOVE AND REPLACE 5 WINDOWS, REPAIR WOOD FRAMES		