

# 50/50 GRANT REHAB PROGRAM

PO# \_\_\_\_\_



## REQUEST FOR QUOTATIONS

Instructions to contractor: Return **RFQ# 25-081** by Wednesday, April 9, 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. **THIS IS A REBID FROM FEBRUARY 4, 2025**

### PROJECT INFORMATION

### CONTRACTOR INFORMATION

ADDRESS: 1842 CENTRAL AVE.	COMPANY NAME:
HOMEOWNER'S NAME/SIGNATURE: <b>EMMA MARTIN</b>	POINT OF CONTACT/CONTRACTOR:
PHONE: 618.407.9491 ALTERNATE PHONE:	MAILING ADDRESS:
EMAIL: EJMARTIN37@GMAIL.COM	CELL/BUSINESS PHONE: EMAIL:

## SCOPE OF WORK

DESCRIPTION	QUANTITY	COST <i>Labor &amp; Materials</i>
PATIO DOOR: REMOVE AND REPLACE		