

DAV-COM ELECTRIC, INC.
18404 S 116th Avenue Ste. A
Orland Park, IL 60462
PHONE 708-444-2056
FAX 708-444-2057



Contract #02-139
RQN #2024-1447

SUBMITTED TO: Village of Orland Park	ATTN: Scott Hiland	PHONE 708-403-6108	FAX	DATE 11/11/2024
ADDRESS: 15655 S. Ravinia Avenue #4634	EMAIL: shiland@orlandpark.org	JOB NAME: 2025 Yearly Electrical Maintenance		
CITY, STATE, AND ZIP CODE Orland Park, IL. 60462		JOB LOCATION: Orland Park , IL.		

TO WHOM IT MAY CONCERN:

WE ARE PLEASED TO PROVIDE A PROPOSAL FOR THE ABOVE MENTIONED PROJECT, AND OUR COST FOR THE ELECTRICAL WORK IS AS FOLLOWS: ****\$77,640.00****

THE FOLLOWING PERTAINS TO OUR PROPOSAL:

Maintenance:

1. Provide monthly maintenance at various Village of Orland Park sites January, 2025 through December, 2025.
2. All materials supplied by Customer.
3. All work performed during normal working hours.

We trust the above meets with your approval, however, should you have any questions, please call.
Sincerely,

Dave Schmidt

DAVE SCHMIDT
Project Manager

We propose hereby to furnish material and labor – complete in accordance with the above specifications, for the sum of:
.....Seventy-Seven Thousand Six Hundred Forty and 00/100 dollars..... ****\$77,640.00****
Payment to be made as follows: If payments are not received by Dav-Com within 45 days of each invoice date, Dav-com reserves the right to payment being due in accordance with the Local Government Prompt Act (50 ILCS505).

All material is guaranteed to be specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extras costs will be executed only upon written orders and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control. Owner fully covered by workers compensation insurance.

Acceptance of Proposal The above prices, specifications
And conditions are satisfactory and are hereby accepted.
You are authorized to do work as specified. Payment will
be made as outlined above.
Date of Acceptance: _____

Authorized
Signature *Dave Schmidt*
NOTE: This proposal may be withdrawn by us of if not
accepted within 30 days.
Signature: _____