

| FORM 4 |

<p> <input type="checkbox"/> Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). </p>	<p>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP</p> <p>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940</p>
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(Print or Type Responses)

1. Name and Address of Reporting Person*

FOSTER	VINCENT	D.
(Last)	(First)	(Middle)
1360 POST OAK BLVD., SUITE 800		
(Street)		
HOUSTON	TX	77056
(City)	(State)	(Zip)

2. Issuer Name and Ticker or Trading Symbol	Quanta Services, Inc., "Trading Symbol "PWR"
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3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)

4. Statement for Month/Year 02-01

5. If Amendment, Date of Original (Month/Year) _____

6. Relationship of Reporting Person(s) to Issuer (Check all applicable)

X
 ___ Director ___ Officer ___ 10% Owner ___ Other
 (give title below) (specify below)

7. Individual or Joint/Group Filing (Check Applicable Line)

X
 _____ Form filed by One Reporting Person
 _____ Form filed by More than One Reporting Person

Table I--Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<TABLE>
<CAPTION>

1. Title 7. Nature of In- Security direct (Instr. 3) Bene-	2. Trans- action Date (Month/	3. Trans- action Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned at	6. Owner- ship Form: Direct
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Official	Day/	-----					End of	(D) or
Owner-	Year)						Month	Indirect
ship		Code	V	Amount	(A) or	Price	(Instr. 3 and 4)	(I)
4) (Instr. 4)					(D)			(Instr.

<S>	<C>	<C>	<C>	<C>	<C>	<C>	<C>	<C>
<C>								

Table II--Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

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(e.g., puts, calls, warrants, options, convertible securities)

<TABLE>

<CAPTION>

		6. Date Ex-	7. Title and Amount of		8. Price	9. Number	10. Owner-
11. Na-		cisable and	Underlying Securities		of	of Deriv-	ship
ture		Expiration	(Instr. 3 and 4)		Deriv-	ative	Form
of In-		Date			ative	Secur-	of De-
direct		(Month/Day/ Year)			Secur-	ities	
rivative	Bene-				ity	Bene-	
Securities	ficial				(Instr.	ficially	Bene-
Owner-					5)	Owned	
ficially	ship						
at	(Instr.	Date	Expira-	Amount or		at End	Owned
4)		Exer-	tion	Title	Number of	of	End of
Month(1)		cisable	Date		Shares	Month	
(Instr. 4)						(Instr. 4)	

<S>		<C>	<C>	<C>	<C>	<C>	<C>
<C>							

Explanation of Responses:

/s/ VINCENT D. FOSTER	02/05/01
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**Signature of Reporting Person	Date

Note: File three copies of this Form, one of which must be manually signed.
If space provided is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.