		// / OMB APPRO	·	/ /				
		/ / OMB Number: / Expires: Septemb / Estimated averag / hours per respon	3235-0287 er 30, 1998 e burden se 0.5	/ / /				
++ FORM 4 ++		TIES AND EXCHANGE COMMINGTON, D.C. 20549	IISSION					
[_] Check this box if		MMFRSHTD						
to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities obligations may Exchange Act of 1934, Section 17(a) of the							
1. Name and Address of								
Willis,	Michael		Т.					
(Last)	(First)		(Middle)					
1360 Post Oak Blvd., Sui								
	(Street)							
Houston	TX		77056					
(City)	(State)		(Zip)					
2. Issuer Name and Ticke	er or Trading Symbol							
Quanta Services, Inc		WR"						
3. IRS Identification No. (voluntary)4. Statement For Month/	 Year March 2001	erson, if an Entity						
5. If Amendment, Date of				-				
6. Relationship of Repo	rting Person(s) to Is	suer (Check all appli	cable)					
X Director	Officer _	10% Owner C	ther					
(give	title below)	(speci	fy below)					
7. Individual or Joint/	Group Filing (Check A	applicable Line)						
X Form Filed By O	ne Reporting Person							
Form Filed By M	ore Than One Reportin	g Person						
Table INon-Derivative	Securities Acquired,	Disposed of, or Benef	icially Owned					
<table> <caption></caption></table>								
				5. Amount of				
7. Nature		or Disposed of						
of In-		(Instr. 3, 4 a		Beneficially	_			
direct	(Month/ (Instr. 8			Owned at	Direct			
Bene-	,, \	•			211000			

End of

(D) or

Day/

ficial								- 11
Owner-	Year)						Month	Indirect
ship		Code	V	Amount	(A) or	Price	(Instr. 3 a	nd 4) (I)
					(D)			(Instr.
4) (Instr. 4)								
<s><c></c></s>	<c></c>	<c></c>	<c></c>	<c></c>	<c></c>	<c></c>	<c></c>	<c></c>
Limited Vote Common Stock	03/07/01	S		47,042	D	26.8957	10,253	D
Common Stock	03/23/01			15,000	A	6.00		
Common Stock	03/23/01	S 		15,000 	D	23.8772	-0-	
./manan								

								Reminder: Report on a owned direct * If the form if file 4(b)(v).	tly or indi	rectly.						
() () ((Over)										
					SEC 14	174 (7-96)										
Form 4 (continued) Table IIDerivativ (e.g., puts,						y Owned										
	,	ando, or or			,											
1. Title of Derivati Security (Instr. Securities		2. Conv	ver- n or		Trans- action	4. Trans tion		5. Number of Derivative								
			rcise ce of		Date (Month/	(Inst	r. 8)	Acquired (A) or Disposed of								
(D)		Deri	iv-		Day/			(Instr. 3, 4,								
and 5)		ativ			Year)											
		Secu	ırity													
(D)						Code	V	(A)								
Stock Option		\$6.0	00		03/23/01	М										
15,000																
	._			**-**	·	**_**	·**-**									

·							

Table IIDerivative Securities, puts, calls, warrand TABLE>	_			_	ned									
	6. Date E	ker-	7. Title and	l Amount of	8. Price	9. Number	10. Owner-							
l1. Na-	0. Date E	101			0. 11100	J. Wallaser	10. Owner							
-11.00	cisable	e and	Underlyin	g Securities	of	of Deriv-	ship							
cure	Expirat	cion	(Instr. 3	and 4)	Deriv-	ative	Form							
of In-	-						6.5							
direct	Date				ative	Secur-	of De-							
	(Month,	/Day/			Secur-	ities								
civative Bene-	Year)				ity	Bene-								
Securities ficial	rear,				ıcy	Delle								
					(Instr.	ficially	Bene-							
Owner-					- 5)	Owned								
ficially ship							_ ,							
at (Instr.	Date	Expira	_	Amount or		at End	Owned							
(-33-52-1	Exer-	tion	Title	Number of		of	End of							
1)	cisable	Dato		Shares		Month								
Month(1)	CISADIE	Date		Silares		Monten								
(7)						(Instr. 4)								
(Instr. 4)														
<\$>														
Stock Option	08/11/98	02/10/	08 Common Stoc	k 15,000		-0-	D							

</TABLE>

Explanation of Responses:

/s/ Michael T. Willis 4/9/01
-----**Signature of Reporting Person Date

 $\ensuremath{^{**}}$ Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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 thee form displays a currently valid OMB Number.

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