



12 South Center Street
Bensenville, IL 60106

Office: 630.350.3404
Fax: 630.350.3438
www.bensenville.il.us

VILLAGE BOARD

July 26, 2018

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Mr. Sergio A. Burciaga
470 Oak Avenue
Aurora, Illinois 60506

Re: July 24, 2018 FOIA Request

Dear Mr. Burciaga:

I am pleased to help you with your July 24, 2018 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on July 24, 2018. You requested copies of the items indicated below:

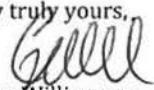
"With the purpose to prove to OSHA that I do not have any business or liability in construction and roofing job, regarding work safety at 811 E. Grand Ave., Bensenville, IL 60106. 1. Please I need General Contractor and Roofing Contractor permit application approved by the City for 811 E. Grand Ave., Bensenville, IL 60106. 2. Please I need a copy of Roofing license certificate for the roof contractor authorized to do job at 811 E. Grand Ave., Bensenville, IL 60106."

After a search of Village files, the following documents are enclosed to fulfill your request:

1) Village of Bensenville Permit Application No. 5606. (1 pg.)

These are all of the documents that can be discovered responsive to your request.

Do not hesitate to contact me if you have any questions or concerns in connection with this response.

Very truly yours,

Corey Williamsen
Freedom of Information Officer
Village of Bensenville

VILLAGE OF BENSENVILLE

NON-RESIDENTIAL PERMIT APPLICATION

PERMIT INFORMATION

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

811, E. Grand Ave Bensenville

UNIT NUMBER

RSI - PUD

SITE ADDRESS

ZONING DISTRICT

03.25.200.07

P.I.N. (Parcel Identification Number)

\$ 5,000,000.00

DESCRIPTION OF WORK 1

ESTIMATED COST

DESCRIPTION OF WORK 2

CONTRACTOR INFORMATION

Jayendra Patel

SonnyShah @ Hotmail.com 8476668177

SSC Construction LLC
KMS Investments LLC

Email Address jay@ssclcon.com

765.532.2867

GENERAL CONTRACTOR

Day Time Phone

3252 Cassopolis Street

Elkhart IN

46514

Address

Father & Son's Plumbing
& sewer repair

City, State, & ZIP Code

708 253 2122

LICENSED PLUMBING CONTRACTOR

5714 W. 65th st Chicago IL 60638

Email Address

Day Time Phone 616 262 1539

Address

Bodo Electric

City, State, & ZIP Code

616 162 1539

LICENSED ELECTRICAL CONTRACTOR

2925 Four st Waukegan MI 49348

Email Address

Day Time Phone

Address

Continued Safe-T Roofing LLC

City, State, & ZIP Code

LICENSED ROOFING CONTRACTOR

170 Oak Ave, Aurora IL 60508

Email Address

Day Time Phone

Address

City, State, & ZIP Code

OWNER & APPLICANT INFORMATION

No error or omission in either the plans or application shall relieve the applicant in having the work completed in any other manner than that which is in compliance with the approved plans and the applicable codes and ordinances of the Village of Bensenville and the State of Illinois. All work shall be completed, inspected, and approved as required and no occupancy or use of the space shall be permitted until approved in writing by the Department of Community and Economic Development. The Applicant shall be responsible for all fees associated with the instant permit, including but not limited to cancellation fees, plan review fees, and reinspection fees. Understanding the preceding statements, I hereby agree to comply and declare that to the best of my knowledge and belief the information provided is true and accurate.

S. SHAIK

Signature

10/21/15

Applicant's Name (Print)

777 E. GRAND AVE.

Applicant's Signature

Date

BENSENVILLE, IL 60193

Day Time Phone

Address

Correspondence and escrow refunds can only be completed if the address of the applicant is kept current, which is the applicant's responsibility.

I hereby authorize the above listed applicant to complete the provisions of the applicable code and ordinances for this permit.

Applicant's Email Address

Date

V.O.B.

Property Owner's Name (Print)

Property Owner's Signature

Date

Address

City, State, & ZIP Code

Day Time Phone

DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
PHONE: 630.350.3413 FAX: 630.350.344912 S. CENTER STREET
BENSENVILLE, IL 60105Stormwater Permit Required? Yes No

APPLICATION NUMBER

5606

BUILDING INFORMATION (PLEASE check all that apply)

 New Construction Addition Alteration Accessory

INTENDED USE:

 Assembly / Restaurant Institutional / Medical Factory / Industrial

 Mercantile / Retail Storage / Warehouse Business / Office

 Other HOTEL & PARKING

 Single Tenant Building Multiple Tenant Building # of Tenants 200+

 Existing Fire Alarm? Yes No

 Existing Sprinkler System? Yes No

 Full Building Coverage? Yes No (% of coverage _____)

Name of Business on Site HOLIDAY INN EXPRESS

Description of Operations HOTEL

Existing Sq.Ft. _____ New Sq.Ft. _____ Total Sq.Ft. _____

OFFICE USE ONLY

FEES:

\$ 900.00

ESCROW*

MILESTONE DATES:

Applied on: 10-22-15

\$ 200.00

APPLICATION

Approved on: 5-2-16

\$ 2760.00

PLAN REVIEW

Issued on: 11-15-16

\$ 5200.00

INSPECTIONS 104 X \$50

Expires on: 5-15-17

\$ 0.00

WATER CONNECTION

Approved by: 

\$ 0.00

WATER METER

\$ 0.00

SEWER CONNECTION

\$ 0.00

FIRE METER

\$ 0.00

OTHER

\$ 8860.00

*All failed inspections will be charged against the escrow at the standard inspection rates. After final approvals and occupancy have been issued, the remaining escrow will be refunded to the payee via first class mail. In the event the cost of failed inspections exceeds the escrow amount, no further inspections will be completed until an additional escrow has been received.