



12 South Center Street
Bensenville, IL 60106

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

VILLAGE BOARD

May 13, 2022

President
Frank DeSimone

Board of Trustees
Rosa Carmona
Ann Franz
Maria T. Frey
McLane Lomax
Nicholas Panicola Jr.
Armando Perez

Village Clerk
Nancy Quinn

Village Manager
Evan K. Summers

Ms. Jenifer Penge
Euro Tech, Inc.
313 West Irving Park Road
Bensenville, Illinois 60106

Re: May 11, 2022 Commercial FOIA Request

Dear Ms. Penge:

I am pleased to help you with your May 10, 2022 Commercial Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on May 10, 2022. You requested copies of the items indicated below:

"CIO w/ liability information for Core Acquisitions. They did work on building 321 W. Irving Park Rd in 2020 and caused damage to our building at 312, they will not respond or fix the issues."

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

- 1) Certificated of Liability Insurance dated 1/8/2020 for Environmental Cleansing Corporation. (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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
1/8/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERs NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER The Horton Group 10320 Orland Parkway Orland Park IL 60467	CONTACT NAME: Certificates Team PHONE: 708-845-3917 FAX (AIC, No.): E-MAIL: ConstructionCerts@thehortongroup.com INSURER(S) AFFORDING COVERAGE INSURER A: Nautilus Insurance Company NAIC # 17370 INSURER B: Great Divide Insurance Company 25224 INSURER C: Berkley Regional Insurance Co. 29580 INSURER D: INSURER E: INSURER F:
INSURED Environmental Cleansing Corporation 16612 S. Crawford Avenue Markham IL 60428 ENVICLUE-01	

COVERS **CERTIFICATE NUMBER:** 1533624955 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD'L SUBR INSD/WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	Y	ECP2005513-16	6/16/2019	6/16/2020	EACH OCCURRENCE	\$ 5,000,000
						DAMAGE TO RENTED PREMISES (Ex occurrence)	\$ 300,000
						MED EXP (Any one person)	\$ 10,000
						PERSONAL & ADV INJURY	\$ 5,000,000
						GENERAL AGGREGATE	\$ 5,000,000
						PRODUCTS - COMPI/OP AGG	\$ 5,000,000
						BL/BP Deductible	\$ 25,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	Y	BAP2005514	6/16/2019	6/16/2020	COMBINED SINGLE LIMIT (Ex accident)	\$ 1,000,000
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE		FFX2009005-14	6/16/2019	6/16/2020	EACH OCCURRENCE	\$ 5,000,000
						AGGREGATE	\$ 5,000,000
							\$
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N N/A	WCA2005515	6/16/2019	6/16/2020	<input checked="" type="checkbox"/> PER STATUTE	OTH-ER
						E.L. EACH ACCIDENT	\$ 1,000,000
						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
A C	Pollution/Professional Liability Leased or Rented Equipment		ECP2005513-16 MNP1015708	6/16/2019 6/16/2019	6/16/2020 6/16/2020	Limit \$5,000,000 Per Item Limit Prof Retro Date	Ded \$25,000 \$500,000 06-16-11

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional insured on a primary and non-contributory basis with respect to general liability and auto liability only when required by written contract. See Attached: Waivers of subrogation applies to the general liability, auto liability and workers compensation in favor of the stated additional insureds only when required by written contract. Umbrella Follows Form.

RE: 321 W Irving Park Road

RECEIVED
JAN 08 2020

CERTIFICATE HOLDER

By _____

Village of Bensenville
12 S Center Street
Bensenville IL 60106

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2014 ACORD CORPORATION. All rights reserved.