



12 South Center Street
Bensenville, IL 60106

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

VILLAGE BOARD

September 15, 2023

President
Frank DeSimone

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Nicholas Panicola Jr.
Armando Perez

Village Clerk
Nancy Dunn

Village Manager
Evan K. Summers

Mr. Albert Lomeli
28600 Bella Vista Parkway
Warrenville, Illinois 60555

Re: September 13, 2023 FOIA Request

Dear Mr. Lomeli:

I am pleased to help you with your September 13, 2023 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on September 13, 2023. You requested copies of the items indicated below:

"Please provide a copy of all building permit applications for 220 N York Rd. Logistics + between the dates of 6/1/23 – 9/13/23. Also include a list of all contractors associated with the address listed above and a copy of the electrical contractors license used within the same dates."

After a search of Village files, the following information was found responsive to your request:

- 1) Village of Bensenville Permit Application. (2 pgs.)
- 2) Village of Bensenville Permit Application No. 13175. (2 pgs.)

These are all the records found 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 FREEDOM OF INFORMATION ACT REQUEST FORM

BENSENVILLE
VILLAGE CLERK'S OFFICE

TO: COREY WILLIAMSEN

Freedom of Information Officer
Village of Bensenville
12 S. Center Street
Bensenville, IL 60106

FROM:

Name Albert Lomeli

Address 28600 Bella Vista Pkwy
Warrenville, IL 60555
Phone 630-393-1701
E-Mail alomeli@ibew701.org

14243

TITLES OR DESCRIPTION OF RECORDS REQUESTED (Please Include Date of Birth and Case Number for Police Records):

Please provide a copy of all building permit applications for 220 N York Rd. Logistics + between the dates of 6/1/23-9/13/23. Also include a list of all contractors associated with the address listed above and a copy of the electrical contractors license used within the same dates. Thank you

THIS REQUEST IS FOR A COMMERCIAL PURPOSE (You must state whether your request is for a commercial purpose. A request is for a "commercial purpose" if all or any part of the information will be used in any form for sale, resale, or solicitation or advertisement for sales or services. Failure to disclose whether a request is for a commercial purpose is a prosecutable violation of FOIA.)

Would like your request delivered via: E-Mail U.S. Mail Pick-Up*

*Pick-Up is available by appointment at Village Hall Monday thru Friday; between 8:00 a.m. – 5:00 p.m.

I understand that any payment need be received before any documents are copied and/or mailed.

9/13/23

Date

Signature

All FOIA responses are posted on the Village's website. Name and address of the requestor will be made public.

The first fifty (50) pages of the request are free. The fee charge is fifteen (15) cents after the first fifty (50) pages.

Unless otherwise notified, your request for public records will be compiled within five (5) working days.

Unless otherwise notified, any request for commercial purposes will be compiled within twenty-one (21) days working days.

COREY WILLIAMSEN, FREEDOM OF INFORMATION OFFICER

Telephone: (630) 350-3404 Facsimile: (630) 350-3438

E-mail Address: FOIArequest@bensenville.il.us

For Freedom of Information Officer Use Only

9/13/23
Date Request Received

9/20/23
Date Response Due

9/27/23
Date Extended Response Due

#0-
Total Charges

9/15/23
Date Documents Copied or Inspected

Received by Employee: _____

VILLAGE OF BENSENVILLE

Department of Community and Economic Development
2 S. Center St. Bensenville, IL 60106
Phone: 630.350.3413 Fax: 630.350.3449

PERMIT APPLICATION

Application Number

CHECK ONE: RESIDENTIAL MULTI-RESIDENTIAL NON-RESIDENTIAL

220 North York Rd. Bensenville, IL 60106

03 - 14 - 209 - 045 0000

SITE ADDRESS

UNIT No.

P.I.N.

ZONING DISTRICT

Install Pallet Racking per included attachments

\$71,000.00

DESCRIPTION OF WORK

Name of Business on Site (non-residential): Logistics Plus, Inc.

ESTIMATED COST

GENERAL CONTRACTOR: Koppco Material HandlingADDRESS: 541 Bruner PlaceCITY, STATE & ZIP: Hinsdale, IL 60521PHONE: 630-286-0659E-MAIL: matt@koppco.net

IF NECESSARY, ADDITIONAL LICENSED CONTRACTORS MUST COMPLETE & ATTACH LICENSE CERTIFICATE & BOND ON PAGE 2

OWNER AND APPLICANT INFORMATION

No error or omission in either the plans or application in having the work completed in any other manner than that it 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 limited to cancellation fees, plan review fees, and re-inspection 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.

Matt Kapfhammer

Applicant's Name (Print)

Matt Kapfhammer

06-20-2023

Applicant's Signature

519 Bruner Place

Hinsdale, IL 60521

Date

Address

City, State & ZIP

630-286-0659

matt@koppco.net

Applicant's Email Address

Day Time Phone

Correspondence and escrow refunds can only be completed if the address of the applicant is kept current, which is applicant's responsibility.
I hereby authorize the above listed applicant to complete the provisions of the applicable code and ordinances of this permit.

MetLife c/o Stream Realty Partners, LP

Property Owner's Name (Print)

Chris Pfeifer

6/20/2023

6250 N. River Road, Suite 6025

Rosemont, IL 60018

Date

Address

708-667-8473

Day Time Phone

OFFICE USE ONLY

BUILDING INFORMATION

New Construction Addition
 Alteration Accessory

Storm-water Permit Required Yes NO

Milestone Dates:

Fees:

Applied

ESCROW \$ _____

Approved

APPLICATION \$ _____

Issued

PLAN REVIEW \$ _____

Expires

INSPECTIONS (X \$35/\$45) \$ _____

OTHER \$ _____

OTHER \$ _____

PAID BY: _____

APPROVED BY: _____

TOTAL FEES DUE \$ _____

LICENSED CONTRACTOR INFORMATION
COMPLETE ALL THAT APPLY

ROOFING

LICENSED CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	City	State & ZIP

PROVIDE A COPY OF ROOFERS LICENSE CERTIFICATE

ELECTRICAL

LICENSED CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	City	State & ZIP

PROVIDE A COPY OF ELECTRICIANS LICENSE CERTIFICATE AND A SURETY BOND FOR \$10,000

PLUMBING

LICENSED CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	City	State & ZIP

PROVIDE A LETTER OF INTENT & A COPY OF PLUMBERS LICENSE CERTIFICATE

VILLAGE OF BENSENVILLE

Department of Community and Economic Development
125 Center St, Bensenville, IL 60105
Phone: 630.350.3413 Fax: 630.350.3445

PERMIT APPLICATION

Application Number

13175

CHECK ONE: RESIDENTIAL MULTI-RESIDENTIAL NON-RESIDENTIAL

220 N. York Rd

T-2

SITE ADDRESS

UNIT NO.

P.I.N.

ZONING DISTRICT

Add new fire sprinklers from existing outlets in accordance with NFPA 13 and Local Fire Code.

\$ 10,204

DESCRIPTION OF WORK

Logistics Plus

ESTIMATED COST

Name of Business on Site (non-residential):

GENERAL CONTRACTOR: Logistics Plus

CUSTOMER #

ADDRESS: 220 N. York Rd.

CITY, STATE & ZIP: Bensenville, IL

PHONE: 773-892-4660

E-MAIL: christian.marz@logisticsplus.net

IF NECESSARY, ADDITIONAL LICENSED CONTRACTORS MUST COMPLETE & ATTACH LICENSE CERTIFICATE & BOND ON PAGE 2

OWNER AND APPLICANT INFORMATION

No error or omission in either the plan or application in having the work completed in any other manner than that it 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 limited to cancellation fees, plan review fees, and re-inspection 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.

United States Alliance Fire Protection

Applicant's Name (Print)

28427 N. Ballard, Unit H

30588

Applicant's Signature

7/27/23

Address

jane.martens@usafp.us

Lake Forest, IL 60045

Date
224-433-5663

City, State & ZIP

Day Time Phone

Applicant's Email Address

Correspondence and escrow refunds can only be completed if the address of the applicant is kept current, which is applicant's responsibility.
I hereby authorize the above listed applicant to complete the provisions of the applicable code and ordinances of this permit.

Casey Polmanski c/o MCP 220 York LLC

Property Owner's Name (Print)

6250 N. River Road, Suite 6025

Casey Polmanski

7/27/23

Property Owner's Signature

Date

Rosemont, IL 60018

708-667-8473

Address

City, State & ZIP

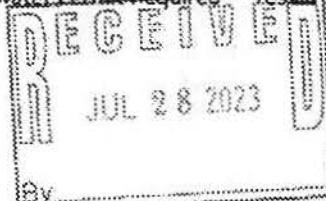
Day Time Phone

Email Address:

OFFICE USE ONLY

BUILDING INFORMATION

New Construction Addition
 Alteration Accessory

Storm-water Permit Required Yes NO

PAID BY:

USAfp

Milestone Dates:

06-30-23 Applied

Fees:

ESCROW \$ 100.00

07-24-23 Approved

APPLICATION \$ 100.00

07-24-23 Issued

PLAN REVIEW \$ 37.00

22-24 Expires

INSPECTIONS (1 X \$35 / \$45) \$ 45

OTHER \$

OTHER \$

TOTAL FEES DUE \$ 352.00

APPROVED BY:

VILLAGE OF BENSENVILLE

Department of Community and Economic Development
12 S. Center St., Bensenville, IL 60106
Phone: 630.250.3413 Fax: 630.250.3449

PERMIT APPLICATION

Application Number

13175

PERMIT INFORMATION

RESIDENTIAL

MULTI-RESIDENTIAL

NON-RESIDENTIAL

220 N. York Road

P.I.N. _____

SITE ADDRESS

UNIT NUMBER

ZONING DISTRICT

DESCRIPTION OF WORK: Add new fire sprinklers from existing outlets in accordance with NFPA 13 and Local Fire Code.

ESTIMATED COST \$ 10,204

GENERAL CONTRACTOR	EMAIL	Day Time Phone
Logistics Plus	christian.marz@logisticsplus.net	773-892-4660
ADDRESS	City	State & ZIP
LICENSED PLUMBING CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	City	State & ZIP
LICENSED ELECTRICAL CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	City	State & ZIP
XXXXXXXXXX CONTRACTOR Fire Sprinkler	EMAIL	Day Time Phone
United States Alliance Fire Protection	jane.martens@usafp.us	224-433-5663
ADDRESS	City	State & ZIP

RECEIVED

JUN 3 0 2023

34101

OWNER AND APPLICANT INFORMATION

Permit or issuance is given the power or application in having the work completed in any other manner than that it 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 same 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 issuance permit, including but limited to application fees, plan review fees, and re-inspection fees. Understanding the preceding statements, I hereby agree to certify and declare that to the best of my knowledge and belief the information provided is true and accurate.

Jane Martens
Applicant's Name (Print)
28427 N. Ballard, Unit H
Address
jane.martens@usafp.us

Jane Martens
Applicant's Signature
Lake Forest, IL 60045
City, State & ZIP

6/23/23
Date
224-433-5663
Day Time Phone

Applicant's Email Address
Date of original and any refund(s) can only be completed if the address of the applicant is kept current, which is applicant's responsibility.
I hereby authorize the above listed applicant to complete the provisions of the applicable code and ordinances of this permit.

Casey Polmanski c/o MCP 220 York LLC
Property Owner's Name (Print)
6250 N. River Road, Suite 6025
Address

Casey Polmanski
Property Owner's Signature
Rosemont, IL 60018
City, State & ZIP

6/28/2023
Date
708-667-8473
Day Time Phone

BUILDING INFORMATION (check all that apply)		OFFICE USE ONLY
New Construction	Additional	Milestone Dates
Alteration	Accessory	6/30/23 Applied
Name of Business on Site (non-residential)		Approved
Storm-water Permit Required	Yes	Issued
	No	Expires
Approved by _____		INSPECTIONS (X \$35/S45) \$ _____
		OTHERS \$ _____
		OTHERS \$ _____
		TOTAL FEES DUE \$ _____
		Paid by: _____