



12 South Center Street
Bensenville, IL 60106

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

VILLAGE BOARD

President
Frank DeSimone

Board of Trustees
Rosa Carmona
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Marie T. Frey
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Nicholas Panicola Jr.
Armando Perez

Village Clerk
Nancy Quinn

Village Manager
Evan K. Summers

November 2, 2023

Ms. Michele Spell
14000 South Keeler Avenue
Crestwood, Illinois 60418

Re: November 1, 2023 FOIA Request

Dear Ms. Spell:

I am pleased to help you with your November 1, 2023 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on November 1, 2023. You requested copies of the items indicated below:

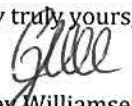
"Requesting Contractor / Subcontractor Building Permits (example - Electrical, mechanical, plumbing, HVAC, etc.) for the Dollar Tree located at 1105 S. York Road."

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

- 1) Village of Bensenville Permit Application No. 8445. (2 pgs.)
- 2) Village of Bensenville Permit Application No. 8485. (1 pg.)
- 3) Village of Bensenville Permit Application No. 8497. (2 pgs.)
- 4) Village of Bensenville Permit Application No. 8522. (2 pgs.)
- 5) Village of Bensenville Permit Application No. 8594. (2 pgs.)
- 6) Village of Bensenville Permit Application No. 8620. (1 pg.)
- 7) Village of Bensenville Permit Application No. 8694. (1 pg.)
- 8) Village of Bensenville Permit Application No. 8736. (1 pg.)

These are all the records found responsive to your request.

Very truly yours,


Corey Williamsen
Freedom of Information Officer
Village of Bensenville



VILLAGE OF BENSENVILLE
FREEDOM OF INFORMATION ACT
REQUEST FORM

TO: COREY WILLIAMSEN

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

FROM:

Name Michele Spell

Address 14000 S. Keeler Avenue
Crestwood, IL 60418

Phone 708-396-0440

E-Mail mspell@healyconstructionservices.com

14541

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

Requesting Contractor / Subcontractor Building Permits (example - electrical, mechanical, plumbing, HVAC, etc.) for the Dollar Tree located at 1105 S. York Road.

☐ 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.

11/1/2023

Date

MS
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

11/1/23
Date Request
Received

11/8/23
Date Response
Due

11/15/23
Date Extended
Response Due

0
Total Charges

11/2/23
Date Documents
Copied or Inspected

Received by Employee: _____

VILLAGE OF BENSENVILLE

Department of Community and Economic Development
12 S. Center St. Bensenville, IL 60139
Phone: 630.350.3414 Fax: 630.350.3449

PERMIT APPLICATION

Application Number
8445

CHECK ONE: ☐ RESIDENTIAL ☐ MULTI-RESIDENTIAL ☒ NON-RESIDENTIAL

SITE ADDRESS: 1105 S York Rd UNIT No: _____ P.L.N: _____ ZONING DISTRICT: C-2

DESCRIPTION OF WORK: Electrical Service upgrade ESTIMATED COST: \$ 18,000

Name of Business on Site (non residential): Vacant

GENERAL CONTRACTOR: Beery Heating and Cooling
ADDRESS: 114 D Kirkland Cir CITY, STATE & ZIP: Oswego, IL 60543
PHONE: 630-585-6444 E-MAIL: carol@4heatcool.com

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

OWNER AND APPLICANT INFORMATION

No error or omission in either the plans or application in having the work performed is any other manner than that it is compliant 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 permit process, including but not limited to cancellation fees, plan review fees, and inspection fees. I understand the preceding statements, I hereby agree to comply and adhere to the terms of my knowledge and belief the information provided is true and accurate.

Applicant's Name (Print): Carol Beery Applicant's Signature: Carol Beery Date: 8/1/2018
Address: 114 D Kirkland Cir City, State & Zip: Oswego, IL 60543 Day Time Phone: 630-585-6444
Applicant's Email Address: carol@4heatcool.com

Compliance 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.

Property Owner's Name (Print): Dan Boyle Property Owner's Signature: Dan Boyle Date: 5/13/2018
Address: 11501 Northlake Dr. City, State & Zip: Cincinnati, OH 45249 Day Time Phone: 513-824-7126

OFFICE USE ONLY

BUILDING INFORMATION		Milestone Dates:		Fees:	
☐ New Construction	☐ Addition	<u>8-02-18</u> Applied		ESCROW \$ <u>180</u>	
☐ Alteration	☐ Accessory	<u>8-23-18</u> Approved		APPLICATION \$ <u>100</u>	
Storm Water Permit Required: Yes ☐ NO ☒		<u>8-23-18</u> Issued		PLAN REVIEW \$ <u>27</u>	
		<u>2-23-19</u> Expires		INSPECTIONS (1 X \$35 (\$45)) \$ <u>45</u>	
				STOP WORK ORDER \$ <u>300</u>	
				OTHER \$ _____	
PAID BY: <u>GC</u>		APPROVED BY: <u>[Signature]</u>		TOTAL FEES DUE \$ <u>652.00</u>	

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
Beery Heating and Cooling, Inc. Carol@4Heatreed.com	OSwego	630-585-6444
114 D Kirkland Cir	IL	60543

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 IF INTENT & A COPY OF PLUMBERS LICENSE CERTIFICATE ☐



VILLAGE OF BENSENVILLE
Department of Community and Economic Development
111 Center St. Bensenville, IL 60015
Phone: 312.555.3423 Fax: 312.555.3445

PERMIT APPLICATION

Application Number

8485

CHECK ONE: ☐ RESIDENTIAL ☐ MULTI-RESIDENTIAL ☒ NON-RESIDENTIAL

1105 S YORK RD C-2
SITE ADDRESS: UNIT NO. PLAN ZONING DISTRICT
DESCRIPTION OF WORK: INSTALL NEW HVAC ROOF TOP UNITS (4)
ESTIMATED COST: \$56,820.00
Name of Business on Site (none needed):

HVAC
GENERAL CONTRACTOR: MORTIS HEATING AND COOLING
ADDRESS: 3102 HOLMAN AVE CITY, STATE & ZIP: STEGER IL 60475
PHONE: 708-754-4768 EMAIL: JAMES@MORTISHEATING.COM
ADDITIONAL LICENSED CONTRACTORS MUST COMPLETE & ATTACH LICENSE CERTIFICATE & BOND IF NECESSARY ON PAGE 2

OWNER AND APPLICANT INFORMATION

For this permit, the applicant is responsible for obtaining all necessary permits from the appropriate authorities and for obtaining all necessary approvals from the appropriate authorities. The applicant shall be responsible for all fees associated with the permit process, including but not limited to the permit fee, plan review fee, and inspection fee. The applicant shall be responsible for obtaining all necessary approvals from the appropriate authorities, including but not limited to the building department, fire department, and health department. The applicant shall be responsible for obtaining all necessary approvals from the appropriate authorities, including but not limited to the building department, fire department, and health department. The applicant shall be responsible for obtaining all necessary approvals from the appropriate authorities, including but not limited to the building department, fire department, and health department.

JOHN MUCHA
Address: 3102 HOLMAN AVE
City, State & Zip: STEGER IL 60475
Phone: 708-417-0940
Email: JAMES@MORTISHEATING.COM
Date: 15 AUG. 2018

BURNHAMMAN CONCRETE SOLUTIONS LLC
Address: 11501 NORTHERN DR.
City, State & Zip: CHICAGO IL 60642
Date: 15 AUG. 2018

OFFICE USE ONLY

BUILDING INFORMATION
☐ New Construction ☐ Addition
☐ Alteration ☐ Accessory
Stop Work Permit Requested: ☐ YES ☒ NO
PAID BY: _____

Milestone Dates:
8-15-18 Applied
8-24-18 Approved
8-27-18 Issued
2-27-19 Expires

Fees:
ESCROW \$ 180-
APPLICATION \$ 100-
PLAN REVIEW \$ 27-
INSPECTIONS (5x\$25) \$ 125-
OTHER \$ _____
OTHER \$ _____
TOTAL FEES DUE \$ 532.00

APPROVED BY: _____
24736
G.C.

VILLAGE OF BENSENVILLE

Department of Community and Economic Development
12 S. Center St. Bldg. 100, IL 60105
Phone: 630.350.3412 Fax: 630.350.5449

PERMIT APPLICATION

Application Number

8497

CHECK ONE: ☐ RESIDENTIAL ☐ MULTI-RESIDENTIAL ☒ NON-RESIDENTIAL

1105 S. York Road

3.25.100.024 C-2

SITE ADDRESS

UNIT No

P.I.N.

ZONING DISTRICT

Interior tenant build out for new Dollar Tree Store

\$ 170,000

DESCRIPTION OF WORK

ESTIMATED COST

Name of Business on Site (non-residential): Dollar Tree

TBD Out for Bids

GENERAL CONTRACTOR:

EM-RO ENTERPRISES

ADDRESS:

8 BROOK LN

CITY, STATE & ZIP:

PALOS PARK IL

PHONE:

708.925-5047

E-MAIL:

esther@emroenterprises.com

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

OWNER AND APPLICANT INFORMATION

No error or omission is 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 rules 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 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.

Lisa Donmeyer, Lingle Design Group

Lisa Donmeyer

Digitally signed by Lisa Donmeyer
DN: cn=Lisa Donmeyer, o=Lingle Design Group,
ou=emroenterprises.com, email=esther@emroenterprises.com, c=US
Date: 2018.08.14 08:43:21 -0500

8/14/18

Applicant's Name (Print)

Applicant's Signature

Date

158 W. Main Street

Lena, IL 61048

815-369-9155 x110

Address

City, State & Zip

Day Time Phone

lisadonmeyer@lingledesign.com

Applicant's Email Address

Correspondence and exterior referrals 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 transmit the premiums of the application code and address of this permit.

Dustin Pierce

Dustin Pierce

8/14/18

Property Owner's Name (Print)

Property Owner's Signature

Date

11501 Northlake Dr

Cincinnati, OH 45249

513-619-5032

Address

City, State & Zip

Day Time Phone

OFFICE USE ONLY

BUILDING INFORMATION

☐ New Construction☐ Addition☒ Alteration☐ AccessoryStorm-water Permit Required Yes ☐ No ☒

Milestone Dates:

8-20-18 Applied

9-13-18 Approved

9-13-18 Issued

3-13-19 Expires

Fees:

ESCROW \$225

APPLICATION \$400

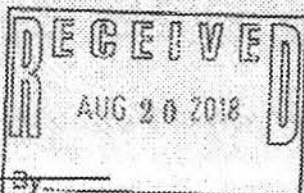
PLAN REVIEW \$235

INSPECTIONS (2x\$25 (\$45)) \$540

OTHER \$

OTHER \$

TOTAL FEES DUE \$3516.00



PAID BY:

APPROVED BY:

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 Bravo electrical services	EMAIL bravolectric@hotmail.com	Day Time Phone 708 726 4899
ADDRESS 4003 S. Albany ave	City Chicago IL	State & ZIP 60632

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

PLUMBING

LICENSED CONTRACTOR JA Pipeline plumbing	EMAIL japipelineplumbing@icloud.com	Day Time Phone 847-529-5574
ADDRESS 502 S. Owen St. Mount Prospect IL	City Mount Prospect	State & ZIP IL 60056

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

VILLAGE OF BENSENVILLE

SIGN PERMIT APPLICATION

PERMIT INFORMATION

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

1105 S. York Rd. C-2
 SITE ADDRESS UNIT NUMBER ZONING DISTRICT
 Dollar Tree
 BUSINESS / TENANT NAME
 P.I.N. (Permanent Index Number)
 \$6000
 ESTIMATED COST
 TELEPHONE NUMBER Email Address

CONTRACTOR INFORMATION

All-American Sign Company Inc. #36761 kens@allamericansign.com 708-499-3000
 SIGN INSTALLER Email Address Day Time Phone
 5501 W. 109th St. Oak Lawn, IL 60453
 Address City, State, & ZIP Code
 Dunning Electrical Services, Inc. a.wikary@dunnings.com 773-282-3330
 LICENSED ELECTRICAL CONTRACTOR Email Address Day Time Phone
 6809 W. Irving Park Rd. Chicago, IL 60634
 Address City, State, & ZIP Code
 RECEIVED
 AUG 29 2018
 By _____

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.

Ken Strzyzewski
 Applicant's Name (Print) Applicant's Signature Date
 5501 W. 109th St. Oak Lawn, IL 60453 8-29-18
 Address City, State, & ZIP Code Day Time Phone
 kens@allamericansign.com
 Applicant's Email 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.

KATHRYN JEMILLO See Contract
 Property Owner's Name (Print) Property Owner's Signature
 Address City, State, & ZIP Code Day Time Phone

DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
 PHONE: 630.350.3415 FAX: 630.350.3449

12 S. CENTER STREET
 BENSENVILLE, IL 60009

APPLICATION NUMBER 8522

SIGN I.D. NUMBER 2126

SIGN INFORMATION (PLEASE check all that apply)

TYPE OF SIGN (CHECK ONE):
☒ WALL MOUNTED ☐ FREESTANDING ☐ DIRECTORY (D)
☐ MENU BOARD ☐ BILLBOARD ☐ TEMPORARY
☒ OTHER Tenant Panels
 ILLUMINATED SIGNS:
☐ NUMBER OF LAMPS 40 Leds ☐ WATTAGE 200
☐ NUMBER OF TRANSFORMERS 2 ☐ VOLTAGE 120
☐ ELECTRICAL CIRCUITS ☐ AMPERAGE
 SITE INFORMATION:
☐ LOT FRONTAGE 100 ☐ TENANT FRONTAGE 100
 (IN LINEAR FEET) (IN LINEAR FEET)
☐ HEIGHT FROM GRADE 20' ☐ SIGN HEIGHT 6'
☐ SIGN LENGTH 26'8" ☐ SIGN HEIGHT 6'
☐ TOTAL SQUARE FOOTAGE 160

OFFICE USE ONLY

FEES: MILESTONE DATES:
 ESCROW \$ 180.00 Applied on 8-29-18
 APPLICATION \$ 135.00 Approved on 9-5-18
 PLAN REVIEW \$ - .00 Issued on 10-01-18
 INSPECTIONS (2 x \$45) \$ 90.00 Expires on 4-01-19
 OTHER \$ 73.00
 TOTAL PERMIT FEE \$ 478.00 Approved by: [Signature]

*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.

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 <i>Dunning Electrical</i>	EMAIL <i>A. Wilkery@dunnings.com</i>	Day Time Phone <i>773-282-3330</i>
ADDRESS <i>6809 W Irving Park Rd.</i>	CITY <i>Chicago</i>	State & ZIP <i>IL 60634</i>

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 IF INTENT & A COPY OF PLUMBERS LICENSE CERTIFICATE ☐

VILLAGE OF BENSENVILLE

Department of Community and Economic Development
12 S. Center St., Bensenville, IL 60106
Phone: 630 350 3411 Fax: 630 350 3448

PERMIT APPLICATION

Application Number

8594

CHECK ONE: ☐ RESIDENTIAL ☐ MULTI-RESIDENTIAL ☒ NON-RESIDENTIAL

1105 S York Road

C-2

SITE ADDRESS

UNIT No.

P.I.N.

ZONING DISTRICT

Data Cabling

\$ 2500.00

DESCRIPTION OF WORK

ESTIMATED COST

Name of Business on Site (non-residential): Doiler Tree Store

GENERAL CONTRACTOR: EMRO Enterprise

ADDRESS: 8 Brook Lane

CITY, STATE & ZIP: Palos Park IL 60464

PHONE: 708-860-6515

E-MAIL: Jim Smith <jim@emroenterprises.com>

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

OWNER AND APPLICANT INFORMATION

No error or omission to mislead the plans or specifications being the work is intended in any other manner than that it is complete and approved 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 other use of the space shall be permitted without approval in writing by the Department of Community and Economic Development. The applicant shall be responsible for all fees associated with the permit process, including but not limited to consultation fees, plan review fees, and inspection fees. By submitting this permit application, I hereby agree to comply with the Building Code to the best of my knowledge and belief the information presented is true and accurate.

D&S Telecom Inc

Applicant's Name (Print)

Jeff D Davis

Applicant's Signature

9/18/2018

Date

1062 S Center Street

Bensenville IL 60106

847-493-9600

Day Time Phone

dstelecom@comcast.net

Applicant's Email Address

Correspondence and return 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 permit at the applicable code and ordinance of this village.

Phillips Edison & Company

Andrew Schrage

Andrew Schrage

9/17/2018

Property Owner's Name (Print)

Property Owner's Signature

Date

PO Box 639345

Cincinnati, OH 60106

513-746-2637

Address

City, State & ZIP

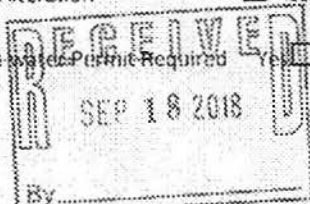
Day Time Phone

OFFICE USE ONLY

BUILDING INFORMATION

- ☐ New Construction ☐ Addition
☐ Alteration ☐ Accessory

Stormwater Permit Required

YES ☐ NO ☒

PAID BY:

Milestone Dates:

9-18-18 Applied
9-25-18 Approved
9-27-18 Issued
3-27-19 Expires

Fees:

ESCROW \$ 180-
APPLICATION \$ 100-
PLAN REVIEW \$ 27-
INSPECTIONS (1 x \$45) \$ 45
OTHER \$
OTHER \$
TOTAL FEES DUE \$ 352-00

APPROVED BY:

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

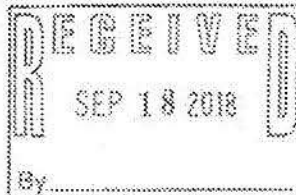
LICENSED CONTRACTOR	EMAIL	DAY TIME PHONE
D&S Telecom Services Inc (Low Volt)	dstelecom@comcast.net	847-493-9600
ADDRESS	CITY	STATE & ZIP
1062 S Center Street	Bensenville	IL 60106

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 IF INTENT & A COPY OF PLUMBERS LICENSE CERTIFICATE ☐



VILLAGE OF BENSENVILLE

Department of Community and Economic Development
17 S. Center St., Bensenville, IL 60105
Phone: 630.350.3413 Fax: 630.350.3449

PERMIT APPLICATION

Application Number

8620

CHECK ONE:

☐ RESIDENTIAL☐ MULTI-RESIDENTIAL☒ NON-RESIDENTIAL

SITE ADDRESS

1105 S. York Rd.

UNIT No.

P.L.N.

ZONING DISTRICT

C-2

DESCRIPTION OF WORK

Modification of existing sprinkler system for new Dollar Tree.

ESTIMATED COST

\$ 3300

Name of Business on Site (non-residential):

Dollar Tree

GENERAL CONTRACTOR:

E.M.-R.D. / KOTUR MECH. GRP. - 26839

ADDRESS:

CITY, STATE & ZIP:

PHONE:

E-MAIL:

LICENSED CONTRACTORS MUST COMPLETE & ATTACH LICENSE CERTIFICATE & BOND IF NECESSARY 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 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 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.

Applicant's Name (Print)

Steve Kotur #26839

Applicant's Signature

[Signature]

Date

09/21/18

Address

1381 E. Oakton, #3

City, State & Zip

Des Plaines, IL 60018

Day Time Phone

224-567-8723

Applicant's Email Address

Kotur30@yahoo.com

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.

Property Owner's Name (Print)

Property Owner's Signature

Date

See attachment

Address

City, State & Zip

Day Time Phone

OFFICE USE ONLY

BUILDING INFORMATION

☐ New Construction☐ Addition☐ Alteration☐ AccessoryStorm-water Permit Required Yes ☐ NO ☐

Milestone Dates:

9.25.18 Applied

10.01.18 Approved

10-04-18 Issued

4-04-19 Expires

Fees:

ESCROW \$ 180.00

APPLICATION \$ 100.00

PLAN REVIEW \$ 27.00

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

HYDRO OTHER \$ 150.00

OTHER \$

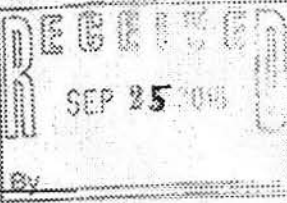
TOTAL FEES DUE \$ 457.00

PAID BY:

By

APPROVED BY:

[Signature]



VILLAGE OF BENSENVILLE

Department of Community and Economic Development
225 Center St. Bensenville, IL 60106
Phone: 630.350.3412 Fax: 630.350.3449

PERMIT APPLICATION

Application #

8694

RESIDENTIAL

MULTI-RESIDENTIAL

✓ NON-RESIDENTIAL

PERMIT INFORMATION

1105 S. YORK ROAD		P.I.N. 3-25-100-024
SITE ADDRESS	UNIT NUMBER	C-2 ZONING DISTRICT
DESCRIPTION OF WORK: FIRE ALARM		ESTIMATED COST \$ 9,600.00

GENERAL CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	CITY	State & ZIP
LICENSED PLUMBING CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	CITY	State & ZIP
LICENSED ELECTRICAL CONTRACTOR	EMAIL	Day Time Phone
Thomas Alarm #37274	jason@thomasalarm.com	630-553-4560
ADDRESS	CITY	State & ZIP
701 N Bridge St	Yorkville	IL 60560
LICENSED ROOFING CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	CITY	State & ZIP

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 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 expedited fees, plan review fees, and 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.

Jason LeGrand

Applicant's Name (Print)

701 N Bridge St

Address

jason@ardentalarm.com

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.

Property Owner's Name (Print)

Address

Property Owner's Signature

City, State & ZIP

10/08/16

Date

630-393-8078

Day Time Phone

BUILDING INFORMATION (check all that apply)

New Construction
✓ Alteration

Addition
Accessory

Name of Business on Site (non-residential)

Dollar Tree

Storm-water Permit Required Yes No

OFFICE USE ONLY

Milestone Dates

10-15-18 Applied

10-19-18 Approved

10-24-18 Issued

4-24-19 Expires

Approved by

Paid by:

FEES:

ESCROW \$ 180.00

APPLICATION \$ 100.00

PLAN REVIEW \$ 27.00

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

OTHER \$

P.A. ACCEPT TEST OTHERS \$ 150.00

TOTAL FEES DUE \$ 457.00

du # 3795

