



12 South Center Street
Bensenville, IL 60106

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

VILLAGE BOARD

May 6, 2025

President

Frank DeSimone

Mr. Albert Lomeli

28600 Bella Vista Parkway

Warrenville, Illinois 60555

Board of Trustees

Rosa Carmona

Ann Franz

Marie T. Frey

McLane Lomax

Nicholas Panicola Jr.

Armando Perez

Re: April 30, 2025 FOIA Request

Village Clerk

Nancy Quinn

Dear Mr. Lomeli:

I am pleased to help you with your April 30, 2025 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on April 30, 2025. You requested copies of the items indicated below:

Village Manager

Daniel Schulze

"Please provide a copy of all building permits applications for 490 Supreme Dr. between the dates of 1/1/2025-4/30/2025. Also include a list of all contractors associated with the address listed and a copy of the electricals contracts' electrical license used within the same dates."

Records found responsive to your FOIA request are enclosed.

Signatures have been withheld under Section 7(1)(b) of FOIA.

Section 7(1)(b) of FOIA provided that "private information" is exempt from disclosure. "Private information" is defined in FOIA as, "unique identifiers, including a person's social security number, driver's license number, employee identification number, biometric identifiers, personal financial information, passwords, or other access codes, medical records, home or personal telephone numbers, and personal email addresses. Private information also includes home address and personal license plates, except as otherwise provided by law or when complied without possibility of attribution to any person." 5ILCS 140/2(c-5). Consequently, certain identifiers have been redacted from the records being provided.

Pursuant to Section 9 of the FOIA, 5 ILCS 140/9, I am required to advise you that I, the undersigned Freedom of Information Officer, reviewed and made the foregoing determination to deny a portion of your FOIA Request as indicated. Should you believe that this Response constitutes an improper denial of your request, you may appeal such by filing a request for review within sixty (60) days of the date of this letter with the Public Access Counselor of the Illinois Attorney General's Office, Public Access Bureau, 500 South Second Street, Springfield, Illinois 62706; telephone 1-887-299-FOIA; e-mail: public.access@ilag.gov. You may also have a right of judicial review of the denial under Section 11 of the FOIA, 5 ILCS 140/11.

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

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 3931701

E-Mail alomeli@ibew701.org

18267

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 490 Supreme Dr. between the dates of 1/1/2025-4/30/2025. Also include a list of all contractors associated with the address listed and a copy of the electricals contractors' electrical 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.

4/30/2025

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

4/30/25
Date Request
Received

5/1/25
Date Response
Due

5/14/25
Date Extended
Response Due

\$0-
Total Charges

5/6/25
Date Documents
Copied or Inspected

Received by Employee: _____

PERMIT APPLICATION

Application Number

14606

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

490 Supreme Drive

03_02_404_002 1-2

SITE ADDRESS

UNIT No.

P.I.N. & 03-03-404-003

ZONING DISTRICT

Alteration - modification to UPS's existing 228,250 SF warehouse facility to better server their operation

DESCRIPTION OF WORK

SEE NOTE 1 ON NEXT PAGE

\$ 530,000

ESTIMATED COST

Name of Business on Site (non-residential): United Parcel Service - Mail Innovations

GENERAL CONTRACTOR: CVM Construction Managers, Inc.

CUSTOMER #

46680

ADDRESS: 1002 W. 9th Ave.

CITY, STATE & ZIP: King of Prussia, PA 19406

PHONE: 610-283-0084

E-MAIL: rschaeffer@cvmprofessional.com

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 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 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.

Rob Schaeffer

Applicant's Name (Print)

1002 W. 9th Ave.

Address

rschaeffer@cvmprofessional.com

Applicant's Email Address

Applicant's Signature

King of Prussia, PA 19406

City, State & ZIP

1/13/2025

Date

610-283-0084

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 village.

United Parcel Service (UPS)

Property Owner's Name (Print)

490 Supreme Drive

Address

adammartin@ups.com

Email Address:

Property Owner's Signature

Bensenville, IL 60106

City, State & ZIP

1/13/2025

Date

502-435-2915

Day Time Phone

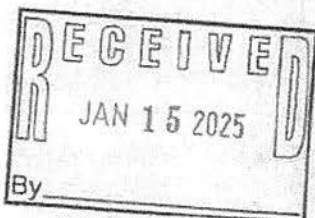
OFFICE USE ONLY

BUILDING INFORMATION

☒ Accessory ☐ Addition
☐ New Construction ☒ Alteration

☐ Pre-Construction Meeting Required

☐ Pre-Construction Meeting Completed



PAID BY:

Milestone Dates:

1-15-25 Applied

1-16-25 Approved

1-27-25 Issued

7-27-25 Expires

Fees:

ESCROW \$ 225

APPLICATION \$ 400

PLAN REVIEW \$ 27

INSPECTIONS (3 X \$45) \$ 135

OTHER \$

OTHER \$

TOTAL FEES DUE \$ 787.00

APPROVED BY: JC

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** PENDING - see note 2 below

LICENSED CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	City	State & ZIP

PROVIDE A COPY OF ELECTRICIANS LICENSE CERTIFICATE AND A SURETY BOND FOR \$10,000 ☐ PENDING - see note 2 below**PLUMBING** PENDING - see note 2 below

LICENSED CONTRACTOR	EMAIL	Day Time Phone
ADDRESS	City	State & ZIP

PROVIDE A LETTER OF INTENT & A COPY OF PLUMBERS LICENSE CERTIFICATE ☐ PENDING - see note 2 below**NOTES:**

1. THIS PERMIT APPLICATION IS FOR OUR DEMO PACKAGE ASSOCIATED WITH THIS ALTERATION PROJECT. OUR NEW WORK PACKAGE WILL BE SUBMITTED SEPARTELY FOR PERMIT, AROUND MID-FEBRUARY.

2. FOR ITEMS NOTED ABOVE AS PENDING, WE ARE OBTAINING THIS INFORMATION AND THESE ITEMS NOW, AND WILL PROVIDE THEM AS SOON AS WE HAVE THEM.

PERMIT APPLICATION

Application Number

14655

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

490 Supreme Drive

0 3 _ 0 2 _ 4 0 4 _ 0 0 2 I-2

SITE ADDRESS

UNIT No.

P.I.N. & 03-03-404-003

ZONING DISTRICT

Alteration - modification to UPS's existing 228,750 sq. ft. warehouse facility to better serve their operation

\$ 520,000

DESCRIPTION OF WORK

SEE NOTE 1 ON NEXT PAGE

ESTIMATED COST

Name of Business on Site (non-residential): United Parcel Service - Mail Innovations

GENERAL CONTRACTOR: CVM Construction Managers, Inc.

CUSTOMER #

46680

ADDRESS: 1002 W. 9th Ave.

CITY, STATE & ZIP: King of Prussia, PA 19406

PHONE: 610-283-0084

E-MAIL: rschaeffer@cvmprofessional.com

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 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.

Rob Schaeffer

2/13/24

Applicant's Name (Print)

Applicant's Signature

Date

1002 W. 9th Ave.

King of Prussia, PA 19406

610-283-0084

Address

City, State & ZIP

Day Time Phone

rschaeffer@cvmprofessional.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.

United Parcel Service (UPS)

2/13/2025

Property Owner's Name (Print)

Property Owner's Signature

Date

490 Supreme Drive

Bensenville, IL 60106

502-435-2915

Address

City, State & ZIP

Day Time Phone

Email Address: adammartin@ups.com

OFFICE USE ONLY

BUILDING INFORMATION

☐ Accessory ☐ Addition

☐ New Construction ☐ Alteration

☐ Pre-Construction Meeting Required

☐ Pre-Construction Meeting Completed

Milestone Dates:

Applied

Approved

Issued

Expires

Fees:

ESCROW \$

APPLICATION \$

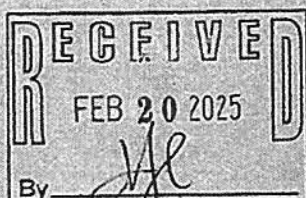
PLAN REVIEW \$

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

OTHER \$

OTHER \$

TOTAL FEES DUE \$



APPROVED BY:

PAID 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
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 ☐**NOTES:**

1. THIS PERMIT APPLICATION IS FOR OUR SITE PACKAGE ASSOCIATED WITH THIS ALTERATION PROJECT. THIE SITE PACKAGE INCLUDES THREE DISCRETE AREAS OF WORK (SW CORNER OF BLDG, SE CORNER OF BLDG, AND NE AREA OF BLDG) TO IMROVE UPS OPERATIONS AT THIS FACILITY.

PLEASE NOTE THAT WE ALREADY HAVE OUR INTERIORS DEMO PACKAGE PERMIT FOR THIS PROJECT. OUR NEW WORK INTERIOS PACKAGE WILL BE SUBMITTED SEPARTELY FOR PERMIT, EARLY DURING THE WEEK OF 2/17.

PERMIT APPLICATION

14698

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

490 Supreme Drive

03_02_404_002 I-2

SITE ADDRESS

UNIT No.

P.I.N. & 03-03-404-003

ZONING DISTRICT

Alteration - modification to UPS's existing 228,250 SF warehouse facility to better server their operation

\$ 520,000

DESCRIPTION OF WORK

SEE NOTE 1 ON NEXT PAGE

ESTIMATED COST

Name of Business on Site (non-residential): United Parcel Service - Mail Innovations

GENERAL CONTRACTOR: CVM Construction Managers, Inc.

CUSTOMER #

46680

ADDRESS: 1002 W. 9th Ave.

CITY, STATE & ZIP: King of Prussia, PA 19406

PHONE: 610-283-0084

E-MAIL: rschaeffer@cvmprofessional.com

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 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.

Rob Schaeffer

Applicant's Name (Print)

1002 W. 9th Ave.

Address

rschaeffer@cvmprofessional.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.

United Parcel Service (UPS)

Property Owner's Name (Print)

490 Supreme Drive

Address

adammartin@ups.com

Email Address:

[Redacted Signature]

Applicant's Signature

King of Prussia, PA 19406

City, State & ZIP

2/13/24

Date

610-283-0084

Day Time Phone

[Redacted Signature]

Property Owner's Signature

Bensenville, IL 60106

City, State & ZIP

2/13/2025

Date

502-435-2915

Day Time Phone

OFFICE USE ONLY

BUILDING INFORMATION

☐ Accessory ☐ Addition

☐ New Construction ☒ Alteration

☐ Pre-Construction Meeting Required

☐ Pre-Construction Meeting Completed

Milestone Dates:

2-20-25 Applied

3-13-25 Approved

3.13.25 Issued

9.13.25 Expires

Fees:

ESCROW \$ 225

APPLICATION \$ 400

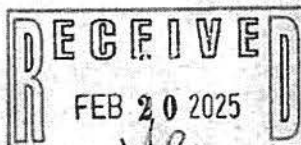
PLAN REVIEW \$ 455

INSPECTIONS (6 X \$35/\$45) \$ 270.00

OTHER \$

OTHER \$

TOTAL FEES DUE \$ 1350.00



PAID BY:

APPROVED BY:

LC

Application No. 1/28/1993

FEE \$100.00

Certificate No #63

Certificate of Registration License



Issued

By the

DEPARTMENT OF HEALTH AND INSPECTIONAL SERVICES
Of the City of Northlake
JEFFREY T. SHERWIN, MAYOR

THIS IS TO CERTIFY THAT

A.J.L. Electric, Inc. Anthony J. Leidig

Located at

165 Prairie Lake Rd., Ste. "C" East Dundee, IL 60118

Having complied with the requirements of the Ordinances passed by the City of Northlake providing for the registration of Qualified Electricians is hereby recorded as a

Registered Electrical Contractor

And is entitled to receive permits for Electrical Work provided that such permits are subject to the provisions of all the Ordinances of the City of Northlake now in force or which may be hereafter passed. This Certificate, unless sooner revoked or suspended for cause, expires December 31st.

In Witness Whereof I have hereunto set my hand this 5th Day of February A.D., 2025.

QUALIFIED ELECTRICIAN



CHIEF ELECTRICAL INSPECTOR

This Certificate Expires December 31st, 2025.



Certificate No: ECC47415-37

Brandon Johnson, Mayor

Certificate of Registration

issued by the
Department of Buildings

*This is to Certify that
located at*

**TERRANCE ELECTRIC & TECHNOLOGY - ECC47415
1003 FAIRWAY DRIVE BENSENVILLE, IL 60106-**

*having complied with the requirements of Ordinances passed by the City Council of the City of Chicago
providing for the registration of electrical contractors is hereby recorded as a*

REGISTERED ELECTRICAL CONTRACTOR

General Electrician

*and is entitled to perform electrical work in the City of Chicago under the Direction of Supervising Electrician
provided that such work permits are subject to the provisions of all the Ordinances of the City of Chicago
now in force or which may be hereafter passed. This certificate EXPIRES September 17, 2025.*

SUPERVISING ELECTRICIAN: TERRANCE M. MC CORMICK - SE2034

In Witness Whereof I have hereunto set my hand on August 15, 2024.

Marlene . Hopkins, Commissioner

License No. 25-00031634

Control No. 0030417

CITY OF ELGIN

ELECTRICAL CONTRACTOR

To

EWERT, ERIC

EWERT, ERIC
2620 DUNHAM WOODS RD

HARVARD IL 60033

Issue date: December 11, 2024

Expiration date: December 31, 2025

PERMIT APPLICATION

Application Number

14775

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

490 Supreme Dr

03 _ 02 _ 404 _ 002

SITE ADDRESS

UNIT No.

P.I.N.

ZONING DISTRICT

Installation of conveyor equipment and Tilt Tray sorter

\$ 2,630,076.00

DESCRIPTION OF WORK

ESTIMATED COST

Name of Business on Site (non-residential): UPS

GENERAL CONTRACTOR: Sortation Labs

CUSTOMER #

46791

ADDRESS: 8016 Vine Crest Ave #2

CITY, STATE & ZIP: Louisville, Ky 40222

PHONE: 224-387-6869

E-MAIL: Armando.Becerra@sortationlabs.com

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 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.

Armando Becerra

Applicant's Name (Print)

8016 Vine Crest Ave #2

Address

Armando.Becerra@sortationlabs.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.

United Parcel Service (UPS)

Property Owner's Name (Print)

490 Supreme Drive

Address

ADAMMARTIN@UPS.COM

Email Address:

Signed by:

3/19/2025

Applicant's Signature

B2B0A015530D4C1

Louisville, Ky 40222

City, State & ZIP

Date

224-387-6869

Day Time Phone

Signed by:

4/9/2025

Property Owner's Signature

A7A274F024B040B...

Bensenville, IL 60106

City, State & ZIP

Date

502-435-2915

Day Time Phone

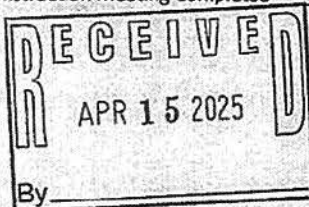
OFFICE USE ONLY

BUILDING INFORMATION

☐ Accessory ☐ Addition
☐ New Construction ☐ Alteration

☐ Pre-Construction Meeting Required

☐ Pre-Construction Meeting Completed



PAID BY: _____

Milestone Dates:

4-15-25 Applied

Approved

Issued

Expires

Fees:

ESCROW \$ _____

APPLICATION \$ _____

PLAN REVIEW \$ _____

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

OTHER \$ _____

OTHER \$ _____

APPROVED BY: _____

TOTAL FEES DUE \$ _____

Community & Economic Development Department
12 South Center Street, Bensenville IL 60106
630-350-3413

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
Automated Conveyance Tech LLC	armando.becerra@sortationlabs.com	224 387 6869
ADDRESS	City	State & ZIP
4528 Bishop LN	Louisville, KY	40218

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 ☐



License

Entity #: 2025686

THIS CERTIFIES THAT

Automated Conveyance Tech LLC

of 4528 Bishop Ln, Louisville, KY 40218

Contractor in the City of Freeport, Illinois, and has complied with the provisions of Ordinance No. 92-10, passed May 4, 1992; No. 2017-86, passed December 18, 2017 providing for the registration of Commercial Contractors.

License Type

Electric

Issue Date

03/28/2025

Expire Date

12/31/2025

A handwritten signature in cursive script, appearing to read "Wayne Duckman".

Community and Economic Development Director

03/28/2025

Date