



12 South Center Street

Bensenville, IL 60106

Office: 630.350.3404

Fax: 630.350.3438

www.bensenville.us

VILLAGE BOARD

May 6, 2025

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Mr. Patrick Blazer
831 North Central Avenue
Wood Dale, Illinois 60191

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Re: May 5, 2025 Commercial FOIA Request

Dear Mr. Blazer:

I am pleased to help you with your May 5, 2025 Commercial Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on May 5, 2025. You requested copies of the items indicated below:

"I'd like to get contact information for the GC at Primavera School or a contact for the property directly/"

After a search of Village files, the following records were found responsive to your request:

- 1) Village of Bensenville Permit Application No. 14439. (1 pg.)

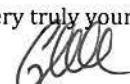
Signatures, Home Addresses and Personal Phone Numbers have been withheld under Section 7(1)(b) of FOIA.

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 with possibility of attribution to any person." 5 ILCS 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

BENSENVILLE
VILLAGE CLERK'S OFFICE

TO: COREY WILLIAMSEN
Freedom of Information Officer
Village of Bensenville
12 S. Center Street
Bensenville, IL 60106

FROM: Name Patrick Blazer
Address 831 N Central Ave
Wood Dale, IL 60191
Phone 773-550-5973
E-Mail pblazer@kdnsigns.com

18269

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

I'd like to get contact information for the GC at Primavera School or a contact for the property directly.

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.

5/5/25

Date

Patrick Blazer

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

5/5/25
Date Request Received

6/4/25
Date Response Due

7/7/25
Date Extended Response Due

Bo
Total Charges

5/6/25
Date Documents Copied or Inspected

Received by Employee: _____

VILLAGE OF BENSENVILLE

Department of Community and Economic Development
125 Center St, Bensenville, IL 60106
Phone 630 350 3413 Fax 630 350 3449

PERMIT APPLICATION

Application Number
14439CHECK ONE: RESIDENTIAL MULTI-RESIDENTIAL NON-RESIDENTIAL

C-2

1347 Irving Park Rd, Bensenville, IL, 60106

N/A

03-15-214-045

Special Use

UNIT No.

P.I.N. 03-15-214-044

ZONING DISTRICT

SITE ADDRESS
Childcare Center

\$ 2,500,000.00

DESCRIPTION OF WORK

Name of Business on Site (non-residential): Primavera School

ESTIMATED COST

GENERAL CONTRACTOR: Vision Construction & Consulting, Inc

CUSTOMER #

46567

ADDRESS: 1733 N 33rd Ave

CITY, STATE & ZIP: Stone Park, Illinois 60165

PHONE: 708-488-1926

E-MAIL: pete@visionconstruction.us

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, application fees, inspection 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.

Rocio Olvera

10/22/2024

Applicant's Name (Print)

Address

olvera.rocio17@gmail.com

Applicant's Signature

City, State & Zip

Date

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.

Olvera Investments LLC

10/22/2024

Property Owner's Name (Print)

Property Owner's Signature

Address

olvera.rocio17@gmail.com

City, State & Zip

Date

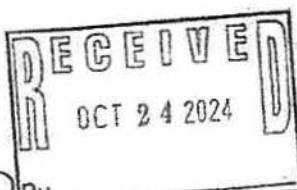
Day Time Phone

Email Address

OFFICE USE ONLY

BUILDING INFORMATION

Accessory Addition
 New Construction Alteration

 Pre-Construction Meeting Required Pre-Construction Meeting Completed 3-19-25

PAID BY

By
Olivera

Milestone Dates:

10-24-24 Applied

3-6-25 Approved

3-19-25 Issued

9-19-25 Expires

Fees:

ESCROW \$ 900.00

APPLICATION \$ 1,000.00

PLAN REVIEW \$ 11,382.70

INSPECTIONS (4) \$ 2,115.00

meter/ Radio OTHER \$ 1,776.00

TAPS OTHER \$ 10,000.00

ROW Bond \$ 1500.00

Total - \$ 28,673.70

APPROVED BY: J.C.