



12 South Center Street
Bensenville, IL 60106

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

VILLAGE BOARD

June 26, 2025

President
Frank DeSimone

Mr. Steven Harczos
4979 Indiana Avenue
Lisel, Illinois 60532

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

Re: June 20, 2025 FOIA Request

Village Clerk
Nancy Quinn

Dear Mr. Harczos:

I am pleased to help you with your June 20, 2025 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on June 20, 2025. You requested copies of the items indicated below:

Village Manager
Daniel Schulze

"I am looking for all permits and permits application for Primavera Daycare at 1347 W Irving Park Rd."

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.)
- 2) Village of Bensenville Permit Application No. 14871. (2 pgs.)

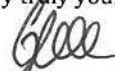
Signatures, Home Addresses, Personal Email Addressed and Personal Phone Numbers have been withheld under Section 7(1)(b) of FOIA.

Section 7(1)(b) of FOIA provided that "private information" is exempt from disclose. "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 Steven Harczos

Address 4979 Indiana Ave

Lisle IL 60532

Phone 773-818-4224

E-Mail Sharczos@carpentersunion.org

18603

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

I am looking for all permits and permit applications for Primavera Daycare at 1347 W Irving Park Rd

☐

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.

June 20 2025

Date

Steven Harczos

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

6/20/25

Date Request
Received

6/27/25

Date Response
Due

7/7/25

Date Extended
Response Due

\$0-

Total Charges

6/26/25

Date Documents
Copied or Inspected

Received by Employee: _____

VILLAGE OF BENSENVILLE
Department of Community and Economic Development
12 S. Center St, Bensenville, IL 60106
Phone 630 350 3413 Fax 630 350 3448

PERMIT APPLICATION

Application Number

14439

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

1347 Irving Park Rd, Bensenville, IL, 60106

N/A

03-15-214-045

C-2
Special Use

SITE ADDRESS

UNIT No.

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

ZONING DISTRICT

Childcare Center

\$2,500,000.00

ESTIMATED COST

DESCRIPTION OF WORK

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

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@visioncostruction.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 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.

Rocio Olvera

10/22/2024

Applicant's Name (Print)

Applicant's Signature

Date

Address

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.

Olvera Investments LLC

10/22/2024

Property Owner's Name (Print)

Property Owner's Signature

Date

Address

City, State & ZIP

Day Time Phone

Email Address

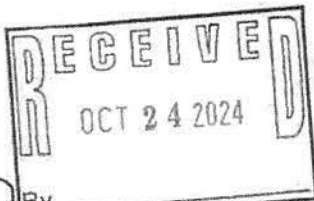
OFFICE USE ONLY

BUILDING INFORMATION

☐ Accessory ☐ Addition
☒ New Construction ☐ Alteration

☒ Pre-Construction Meeting Required

☒ Pre-Construction Meeting Completed 3-19-25



PAID BY

By [Signature]

Milestone Dates:

Fees:

10-24-24 Applied

3-6-25 Approved

3-18-25 Issued

9-19-25 Expires

ESCROW \$ 900.00

APPLICATION \$ 1,000.00

PLAN REVIEW \$ 11,382.70

INSPECTIONS (4 x \$361.645) \$ 2,115.00

meter / Radio OTHER \$ 1,776.00

Taps OTHER \$ 10,000.00

Row Bond \$ 1500.00

Total - \$ 28,673.70

APPROVED BY: JC

PERMIT APPLICATION

14871

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

1347 W Irving Park Rd. Bensenville, IL 60191

SITE ADDRESS

UNIT No.

P.I.N.

ZONING DISTRICT

Fire Sprinkler

\$ 50,000.00

DESCRIPTION OF WORK

ESTIMATED COST

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

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: mark@visionconstruction.us matt@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 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 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.

Olvera Investments, LLC

5/13/2025

Applicant's Name (Print)

Applicant's Signature

Date

Address

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.

Olvera Investments, LLC

5/13/2025

Property Owner's Name (Print)

Property Owner's Signature

Date

Address

City, State & ZIP

Day Time Phone

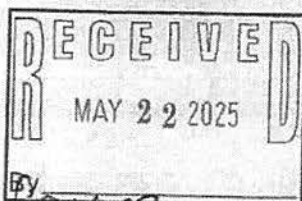
Email Address:

OFFICE USE ONLY

BUILDING INFORMATION

☐ Accessory ☐ Addition
☐ New Construction ☐ Alteration

☐ Pre-Construction Meeting Required
☐ Pre-Construction Meeting Completed



PAID BY:

CONTR

Milestone Dates:

5-22-25 Applied

06-19-25 Approved

6-23-25 Issued

12-23-25 Expires

Fees:

ESCROW \$ 180⁰⁰

APPLICATION \$ 100⁰⁰

PLAN REVIEW \$ 27⁰⁰

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

OTHER \$ 150⁰⁰

OTHER \$

TOTAL FEES DUE \$ 457⁰⁰

APPROVED BY:

[Signature]

LICENSED CONTRACTOR INFORMATION
COMPLETE ALL THAT APPLY

ROOFING

LICENSED CONTRACTOR	EMAIL	Day Time Phone
N/A	N/A	N/A
ADDRESS	City	State & ZIP
N/A	N/A	N/A

PROVIDE A COPY OF ROOFERS LICENSE CERTIFICATE ☐

ELECTRICAL

LICENSED CONTRACTOR	EMAIL	Day Time Phone
N/A	N/A	N/A
ADDRESS	City	State & ZIP
N/A	N/A	

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

PLUMBING

LICENSED CONTRACTOR	EMAIL	Day Time Phone
N/A	N/A	N/A
ADDRESS	City	State & ZIP
N/A	N/A	N/A

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

FIRE SPRINKLER

21876

LICENSED CONTRACTOR	EMAIL	Day Time Phone
dnD Fire Protection, Inc	kpintal@dndfp.com	847-759-8872
ADDRESS	City	State & ZIP
4310 Regency Drive	Glenview	IL 600025

PROVIDE A COPY OF FIRE SPRINKLER LICENSE CERTIFICATE

