



BENSENVILLE
VILLAGE CLERK'S OFFICE

12 South Center Street
Bensenville, IL 60106

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

VILLAGE BOARD

August 7, 2025

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28600 Bella Vista Parkway
Warrenville, Illinois 60555

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Re: August 4, 2025 FOIA Request

Dear Mr. Lomeli:

I am pleased to help you with your August 4, 2025 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on August 4, 2025. You requested copies of the items indicated below:

"Please provide a copy of all building permit applications for 1100 Tower Lane between the dates of 3/1/2025 - 8/4/2025. Also provide a list of all construction contractors associated with the same address along with a copy of the electrical contractors license used within the same dates."

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

- 1) Village of Bensenville Permits Application No. 14789. (2 pgs.)

At this time, the Village does not have a copy of the electrical contractors license on file.

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 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 Albert Lomeli
Address 28600 Bella Vista Pkwy
Warrenville, IL 60555
Phone 630 774 8723
E-Mail alomeli@ibew701.org

18907

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 1100 Tower Lane between the dates of 3/1/2025-8/4/2025. Also include a list of all construction contractors associated with the same address along with a copy of the electrical contractors electrical license.

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.

8/4/2025

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

8/4/25
Date Request
Received

8/11/25
Date Response
Due

8/18/25
Date Extended
Response Due

#1
Total Charges

8/7/25
Date Documents
Copied or Inspected

Received by Employee: _____

14789

CHECK ONE: RESIDENTIAL MULTI-RESIDENTIAL NON-RESIDENTIAL

1100 Tower Lane

SITE ADDRESS

UNIT No.

P.I.N.

ZONING DISTRICT

New Construction Building Permit

DESCRIPTION OF WORK

Name of Business on Site (non-residential): N/A

\$

ESTIMATED COST

GENERAL CONTRACTOR: Morgan Harbour Construction

CUSTOMER #

26906

ADDRESS: 7510 S Madison St

CITY, STATE & ZIP: Willowbrook, IL, 60527

PHONE: 630-915-6510

E-MAIL: jfiflis@morganharbour.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 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.

John Fiflis

4/17/25

Applicant's Name (Print)

7510 S Madison St.

Applicant's Signature

Date

Address

jfiflis@morganharbour.com

Willowbrook, IL, 60527

630-915-6510

Applicant's Email Address

City, State & ZIP

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.

Hamilton Partners

4/17/25

Property Owner's Name (Print)

300 Park Blvd.

Property Owner's Signature

Date

Address

jfiflis@morganharbour.com

Itasca, IL 60143

630-915-6510

Email Address:

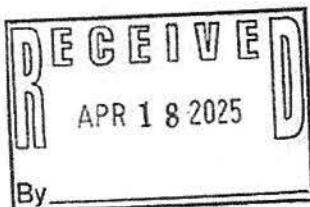
City, State & ZIP

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:

Fees:

4-18-25 Applied

ESCROW \$ _____

Approved

APPLICATION \$ _____

Issued

PLAN REVIEW \$ _____

Expires

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

APPROVED BY: _____

OTHER \$ _____

OTHER \$ _____

TOTAL FEES DUE \$ _____

LICENSED CONTRACTOR INFORMATION
COMPLETE ALL THAT APPLY

ROOFING

LICENSED CONTRACTOR Sullivan Roofing	EMAIL jacob@sullivanroofing.com	Day Time Phone 847-908-1000
ADDRESS 60 E State Pkwy.	City Schaumburg	State & ZIP IL, 60173

PROVIDE A COPY OF ROOFERS LICENSE CERTIFICATE

ELECTRICAL

LICENSED CONTRACTOR Complete Electric	EMAIL FFelix5@sbcglobal.net	Day Time Phone 630-879-1098
ADDRESS 639 Main Street	City Batavia	State & ZIP IL, 60510

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

PLUMBING

LICENSED CONTRACTOR MVP Plumbing Corp.	EMAIL Jeremy@mvplumbing.com	Day Time Phone 630-947-4654
ADDRESS 1995 Aucutt Road	City Montgomery	State & ZIP IL, 60538

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