



12 South Center Street  
Bensenville, IL 60106

Office: 630.350.3404  
Fax: 630.350.3438  
[www.bensenville.il.us](http://www.bensenville.il.us)

VILLAGE BOARD

September 11, 2025

President

Frank DeSimone

Mr. Albert Lomeli

28600 Bella Vista Parkway

Warrenville, Illinois 60555

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Re: August 5, 2025 FOIA Request

Village Clerk

Nancy Quinn

Dear Mr. Lomeli:

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

Village Manager

Daniel Schulze

*"Please provide a copy of all building permit applications for 800 W. Irving Park Rd. between the dates of 1/1/2025 - 8/5/2025. 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. 14979. (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 compiled 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](mailto: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) 393-1701

E-Mail alomeli@ibew701.org

19103

**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 800 W. Irving Park Rd. from 1/1/2025-8/5/2025. Also include a list of contractors associated with the mentioned address along with the electrical 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.

8/5/2025

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.

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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\*\*\*

9/8/25  
Date Request  
Received

9/12/25  
Date Response  
Due

9/19/25  
Date Extended  
Response Due

\$0 -  
Total Charges

9/11/25  
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: 630.350.3449

## PERMIT APPLICATION

Application Number

14979

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

800 W IRVING PK RD.

SITE ADDRESS

UNIT No.

P.I.N.

ZONING DISTRICT

DESIGN &amp; INSTALLATION OF FIRE SPRINKLER SYSTEM

DESCRIPTION OF WORK

\$175K

ESTIMATED COST

Name of Business on Site (non-residential): 6-STORY MIXED-USE BUILDING

FIRE SPRINKLER

GENERAL CONTRACTOR:

DALY FIRE PROTECTION

CUSTOMER #

40408

ADDRESS: 12620 S HOLIDAY DR. UNIT C CITY, STATE &amp; ZIP: ALSIP IL 60803

PHONE: 312-619-3790

E-MAIL: Shannon@dalyfirepro.com

IF NECESSARY, ADDITIONAL LICENSED CONTRACTORS MUST COMPLETE &amp; ATTACH LICENSE CERTIFICATE &amp; BOND ON PAGE 2

## OWNER AND APPLICANT INFORMATION

No error or omission in either this plan 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 the plan review fee, inspection fee, and a late fee. In consideration of 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.

SHANNON LORENCZ

Applicant's Name (Print)

Applicant's Signature

Date

6-19-25

12620 S HOLIDAY DR UNIT C

Address

ALSIP IL 60803

City, State &amp; ZIP

312-619-3790

Day Time Phone

SHANNON@dalyfirepro.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.

A&amp;E LUXURY BUILDERS

Property Owner's Name (Print)

Property Owner's Signature

Date

6-19-25

55941 RADCLIFF RD

Address

NAPERVILLE IL 60563

City, State &amp; ZIP

630-696-7431

Day Time Phone

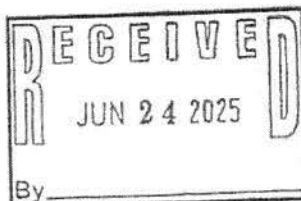
Email Address: aeluxurybuilders@gmail.com

## OFFICE USE ONLY

## BUILDING INFORMATION

☐ Accessory ☐ Addition  
☐ New Construction ☐ Alteration

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



PAID BY: \_\_\_\_\_

## Milestone Dates:

## Fees:

6-24-25 Applied

\_\_\_\_\_ Approved

\_\_\_\_\_ Issued

\_\_\_\_\_ Expires

ESCROW \$ \_\_\_\_\_

APPLICATION \$ \_\_\_\_\_

PLAN REVIEW \$ \_\_\_\_\_

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

OTHER \$ \_\_\_\_\_

OTHER \$ \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

TOTAL FEES DUE \$ \_\_\_\_\_

## 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~~ FIRE SPRINKLER

LICENSED CONTRACTOR <b>DALY FIRE PROTECTION</b>	EMAIL <b>Shannon@dalyfirepro.com</b>	Day Time Phone <b>312-619-3790</b>
ADDRESS <b>12620 S HOLIDAY DR. UNIT C</b>	City <b>ALSIP</b>	State & ZIP <b>IL 60803</b>

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