

LAW OFFICES

**STORINO, RAMELLO & DURKIN**

9501 WEST DEVON AVENUE  
ROSEMONT, ILLINOIS 60018

(847) 318-9500

FACSIMILE (847) 318-9509

THOMAS J. HALLERAN  
ERIN C. MORIARTY  
ADAM R. DURKIN

JOSEPH G. KUSPER  
MARK R. STEPHENS  
BRYAN J. BERRY  
ANN M. WILLIAMS  
LEONARD P. DIORIO  
RICHARD F. PELLEGRINO  
DONALD J. STORINO II

OF COUNSEL

IN REPLY REFER TO FILE NO.

DONALD J. STORINO  
MICHAEL K. DURKIN  
RICHARD J. RAMELLO  
NICHOLAS S. PEPPERS  
THOMAS M. BASTIAN  
ANGELO F. DEL MARTO  
JAMES E. MACHOLL  
BRIAN W. BAUGH  
ANTHONY J. CASALE  
ANDREW Y. ACKER  
PETER A. PACIONE  
MELISSA A. MIROBALLI  
MATTHEW G. HOLMES  
MICHAEL R. DURKIN

May 6, 2014  
*Via Regular Mail*

EP-1

Ms. Jessica Healy  
350 N. LaSalle Street  
Chicago, Illinois 60654

**Re: Freedom of Information Act Request**

Dear Ms. Healy:

The Village of Elmwood Park is in receipt of your April 29, 2014 Illinois Freedom of Information Act (5 ILCS 140/1 *et seq.*) ("FOIA") request for the following records:

The owner or developer listed on records at Harlem & North Ave Walgreens project.

Enclosed are records responsive to your request. However, please be advised that certain information in the records being provided has been determined to be exempt from disclosure under FOIA, and that information has been redacted from the records being provided.

Section 7(1)(b) of FOIA provides 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." 5 ILCS 140/2(c-5). Consequently, certain unique identifiers, including a federal tax number, a home or personal telephone number, a home address, and signatures, have been redacted from the records being provided.

The person responsible for the decision to deny a portion of your request is the Village of Elmwood Park Freedom of Information Officer, Gina Pesko. In accordance with Section 9(a) of FOIA, you are hereby notified that you have the right to file a Request for Review regarding the decision made by the Village of Elmwood Park Freedom of Information Officer with the Public

**STORINO, RAMELLO & DURKIN**

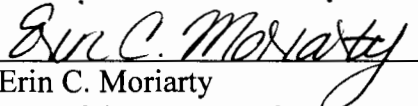
Ms. Jessica Healy  
May 6, 2014  
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Access Counselor at the Illinois Attorney General's Office. You can file your Request for Review with the Public Access Counselor by writing to:

Sarah Pratt, Acting Public Access Counselor  
Office of the Attorney General  
500 South 2<sup>nd</sup> Street  
Springfield, Illinois 62706  
Fax: 217-782-1396  
E-mail: [publicaccess@atg.state.il.us](mailto:publicaccess@atg.state.il.us)

Also, you are notified that you have the right to judicial review regarding the decision made by the Village of Elmwood Park Freedom of Information Officer pursuant to Section 11 of FOIA.

Sincerely,

  
Erin C. Moriarty  
One of the attorneys for  
the Village of Elmwood Park

Enclosures



Village of

Elmwood Park

11 CONTI PARKWAY  
ELMWOOD PARK, ILLINOIS 60707 • Phone 452-7300

**APPLICATION FOR CONTRACTOR'S LICENSE**

Date: January 27, 2014 **PAID** License Fee: \$100.00

Date Paid: January 27, 2014 **JAN 27 2014** Disapproved:

License No: #37307 **CONT0363** 12/31/14 Approved:  GE PJ PWD 1-28-14

Year Ending: 12/31/14 Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Every contractor, builder, or any person, firm or corporation engaging in the business of a contractor in the construction, maintenance or remodeling etc., of buildings shall before engaging in any such business, be licensed by the Village of Elmwood Park, be insured and bonded in compliance with Village Ordinances.

The undersigned hereby make application for the issuance of a Contractor's Business License. This license, if issued, is under the condition that I understand all regulations, including the Building, Plumbing, Fire, Health, and Electrical Codes of the Village of Elmwood Park, and agree to abide by such. **All blanks must be completed prior to submittal.**

Please print or type.

NAME OF BUSINESS: Delko Construction Co., Inc. TRADE: CARPENTRY  
General Contractor

ADDRESS: 4849 N. Milwaukee Avenue CITY Chicago STATE IL ZIP 60630

PHONE NO. (773) 202-5500 FED. TAX NO. [REDACTED]

CORPORATION  PARTNERSHIP  INDIVIDUAL  OTHER (Explain) \_\_\_\_\_

Business Owner: \_\_\_\_\_

Home Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone No. \_\_\_\_\_ S.S. No. \_\_\_\_\_

If corporation, name & title of officers: Maria Kozonis / President

Address: [REDACTED] City [REDACTED] State [REDACTED] Zip [REDACTED]

Home Phone [REDACTED]

**Bond Required: For PLUMBERS, SEWER Contractors, EXCAVATORS and DEMOLITION Only.**  
**Cancellation of bond, automatically revokes License.**

Name of Bond Co. \_\_\_\_\_ Bond No. \_\_\_\_\_ Expires: \_\_\_\_\_

**Insurance Required: Certificate of Insurance required in accordance with Village Ordinance 29-8A.**  
**Cancellation of Certificate automatically revokes License.**

Name of Insurance Co. Westfield Insurance Policy No. COMM 4263017 Expires: 2/9/14

Every contractor shall be required to exhibit his receipt showing the payment of his fee to the Commissioner of Buildings as a condition precedent to the granting of any building permit to a contractor. Permits MUST be secured for all work prior to starting.

**ELECTRICIANS, PLUMBERS, ROOFERS, ALARM INSTALLERS & EXTERMINATORS MUST SUPPLY THE FOLLOWING INFORMATION: (COPY OF LICENSE MUST BE ATTACHED)**

Registration No. \_\_\_\_\_ and/or State License No. \_\_\_\_\_ Place of Registration: \_\_\_\_\_

I understand that I am to comply with all Village Ordinances and Codes, and also will be responsible for removal of all debris, and keep premises in a clean and workmanlike manner. I acknowledge that I am signing this application under the penalty of perjury and that all information provided is true and correct.

Signature: [REDACTED] Title: President Date: \_\_\_\_\_

Address: [REDACTED] City [REDACTED] Home Phone [REDACTED]

**A NON-REFUNDABLE LICENSE FEE MUST BE PAID AT TIME OF APPLICATION AND DOES NOT CONSTITUTE APPROVAL OF LICENSE UNTIL BOND AND CERTIFICATE OF INSURANCE IS FILED AND APPROVED BY PROPER VILLAGE AUTHORITIES.**



Village of Elmwood Park

11 Conti Parkway Elmwood Park, IL 60707

PRESS HARD - YOU ARE MAKING THREE COPIES

Real Estate Transfer Declaration

For additional information, please call the Village Clerk's Office at (708) 452-7300, Monday thru Friday, 9:00 A.M. to 5:00 P.M.

For Office Use Only:

Date Issued 3-12-14

Issued By [Signature]

Check One: [X] DEED [ ] ASSIGNMENT OF BENEFICIAL INTEREST OF LAND TRUST [ ] EXEMPTION
INSTRUCTIONS:

- 1) This form must be filled out completely, signed by at least one of the grantors (sellers), and presented to the Village Clerk, 11 Conti Parkway, Elmwood Park, Illinois, or other designated agent, at the time of purchase of real estate transfer stamps as required by the Elmwood Park Real Estate Fee Ordinance. The stamps must be affixed to the deed, and this form attached when the title is recorded.
2) The full actual amount of consideration of the transaction is the amount upon which the fee is to be computed. Both the full actual consideration of the transaction and the amount of the fee stamps required must be stated on the declaration.
3) A copy of the Illinois Tax Declaration form must accompany an unsigned copy of any deed or assignee of beneficial interest at the time of application.
4) Property seller is responsible for purchase of real estate transfer stamps.
5) A five (5) working day advance notice prior to closing is required for an inspection of the property.
6) A refund of the transfer stamp fee paid by the seller is available provided the seller can comply with Section 41A-3 of the code.
TRANSFER STAMPS WILL NOT BE ISSUED UNTIL 24 HOURS PRIOR TO CLOSING.

Address of Property 1600-06 N. Harlem No. of Units

Permanent Property Index No. 12-36-431-004/005/013 Street

Type of Deed or Assignment Special Warranty Deed Date of Deed or Closing Date

Full Actual Consideration (include amount of mortgage and value of liabilities assumed) \$ 5,000,000
Amount of Fee (\$5.00 per \$1,000 or fraction thereof of full actual consideration, or \$35.00, whichever is greater) \$ 25,000

Note: The Village of Elmwood Park Real Estate Transfer Fee Ordinance specifically exempts certain transactions from payment of a transfer fee. These exemptions are enumerated in Section 41A-8 of the ordinance which is printed on the reverse side of this form. To claim one of these exemptions, complete the section below:

I hereby declare that this transaction is exempt from taxation under the Elmwood Park Real Estate Transfer Fee Ordinance by paragraph(s) of Section 41A-8 of said ordinance.

Details for exemption claimed: (explain)

Under penalty of perjury, I hereby declare the full actual consideration and above facts contained in this declaration to be true and correct.

Grantor: (Seller) (Please Print)

FirstMerit Bank, N.A. 106 S. Main St., TOW 44, Akron, OH 44308
Address Zip Code 330-384-7201 Phone

Signature [Signature] Date Signed 3/10/14
Seller or Agent

Grantee: (Buyer) (Please Print)

Midwest Elmwood Development, LLC 4849 N. Milwaukee, #302, Chicago, IL 60630
Address Zip Code 773-545-4200 Phone

Signature [Signature] Date Signed 3/10/14
Buyer or Agent

Real Estate Co. N/A Contact Phone

Water Billing Affidavit

Section 41A-7 of the Code of the Village of Elmwood Park, Illinois requires that any delinquent water and sewer assessments and penalties related thereto are to be paid in full before Transfer Stamps are issued. It also requires that this form contain full information necessary for the billing and collection of final water and sewer charges.

Send Final Bill To:

Account Number: 003202 Walgreens Balance Due: 118.32

A billing for water used from the last billing date will be determined after a final reading is obtained.

Billing Address For New Owners: