



Village of
Elmwood Park

Angelo "Skip" Saviano
Village President
Gina Pesko
Village Clerk
Paul A. Volpe
Village Manager
Michael Durkin
Village Attorney

Trustees
Alan T. Kaminski
Jeff Sargent
Angela Stranges
Anthony Del Santo
Angelo J. Lollino
Jonathan L. Zivojnovic

Mr. Al Silvestro
7505 W. Diversey
aldocella49@aol.com

September 3, 2019

RE: Freedom of Information Act Request

Dear Mr. Silvestro,

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

"Agent or owner of LoLo's Sub 7501 W. Diversey, Elmwood Park, Ill"

Your request has been granted in part and denied in part. Enclosed are records responsive to your FOIA 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 such as signatures, driver's license numbers, home or personal telephone numbers, and personal license plates have been redacted from the records being provided.

The person responsible for the decision to deny a portion of your FOIA 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 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
Public Access Counselor
Office of the Attorney General
500 South 2nd Street
Springfield, Illinois 62706
Fax: 217-782-1396
E-Mail: publicaccess@atg.state.il.us

If you choose to file a Request for Review with the Public Access Counselor, you must do so within 60 calendar days of the date of this letter. Please note that you must include a copy of your original FOIA request and this letter when filing a Request for Review with the Public Access Counselor.

You are also 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.

Should you have any questions, please do not hesitate to contact my office.

Sincerely,



Gina Pesko, Village Clerk
Freedom of Information Officer
Village of Elmwood Park
708-452-3948



Village of
Elmwood Park

Elmwood Park Municipal Building

11 Conti Parkway, Elmwood Park, IL 60707
Phone: 708-452-7300 Fax: 708-453-8816

Elmwood Park Police Department

7420 W. Fullerton Avenue, Elmwood Park, IL 60707
Emergency: Dial 9-1-1 Non-Emergency: 708-453-2137

**BUSINESS EMERGENCY CONTACT
INFORMATION FORM**

- Proprietorship Partnership
- Limited Partnership Corporation

Trade Name of Business: LO-LO'S SUBSIDOR Bus. Phone: 708-453-2209
 Address of Business: 7501 W. DISPERSEY ELMWOOD IL 60707
City State Zip Code
 Owners Name: Jeff Hernandez
 Address: NOCCIDGE IL 60706
City State Zip Code
 Telephone: 773-750-7996 Email: _____

**The following information on Partners, Officers and Managers Must Be Given
 Please Check Emergency Contacts other than Owner – Must be a keyholder
 Additional pages may be added if necessary**

1st Contact: Jeff Hernandez
 Address: _____ IL 60706
City State Zip Code
 Telephone: 773-750-7996 Email: _____

2ND Contact: Tracy Hernandez
 Address: _____ IL 60706
City State Zip Code
 Telephone: 312-661-2239 Email: _____

BUILDING RECORD

Owner's Full Name: ALEX DISINVEST RI Telephone: 312-907-8909
 Address of Owner: 6388 N. NOKAMIS CHG IL 60646
City State Zip Code
 Insured By: (Company and Agent) _____ Telephone: _____
 Agents Address: _____
City State Zip Code

Security Protection (Check all that apply)

- Burglary Hold Up
- Fire Complete System

Alarm Company: FOREST SECURITY
 Address: _____
 Telephone: _____

- Security VIDEO System: Yes No
- Interior Coverage: Yes No
- Exterior Coverage: Yes No

System Contact Person: _____
 Telephone: _____

Fire Protection (Check all that apply)

- Smoke Detectors Heat Detector
- Sprinkler System Complete System

Alarm Company: _____
 Address: _____
 Telephone: _____

- Hazardous Materials On Site: Yes No

Material List: _____



INDIVIDUAL HISTORY FORM

FORM REQUIRED: For any individual undergoing a background check in relation to a Village of Elmwood Park business license.

INSTRUCTIONS: Provide the information requested below. This form must be signed by the individual whose information is provided, and A PHOTOCOPY OF CURRENT GOVERNMENT-ISSUED PHOTO ID MUST ALSO BE INCLUDED FOR THE INDIVIDUAL.

PERSONAL INFORMATION										PROVIDE THE FOLLOWING PERSONAL INFORMATION																			
FIRST NAME <i>Jeff</i>					MIDDLE NAME					LAST NAME <i>HERMANO</i>					MAIDEN NAME (IF APPLICABLE)					SUFFIX									
CURRENT RESIDENTIAL STREET ADDRESS										SUITE/APT					CITY					STATE <i>IL</i>					ZIP CODE <i>60706</i>				
HOME PHONE ()					WORK PHONE <i>(708) 453-2209</i>					MOBILE PHONE <i>(713) 750-7926</i>					EMAIL ADDRESS														
SSN OR ITIN					PLACE OF BIRTH <i>CHGO</i>					AGE					DATE OF BIRTH					JOB TITLE					RELATIONSHIP TO APPLICANT				
HEIGHT FT IN			WEIGHT LBS			HAIR COLOR <i>Brown</i>			EYE COLOR <i>Green</i>			SEX <i>Male</i>			DRIVER'S LICENSE OR STATE ID NUMBER														
HAVE YOU EVER BEEN FINGERPRINTED FOR A BUSINESS LICENSE?										<input type="checkbox"/> NO <input checked="" type="checkbox"/> YES*					* IF YES, PROVIDE YEAR FINGERPRINTED <i>2005</i>														

MARITAL HISTORY										PROVIDE THE FOLLOWING INFORMATION ABOUT YOUR MARITAL HISTORY														
CURRENT MARITAL STATUS					<input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> WIDOWED <input type="checkbox"/> MARRIED* <input type="checkbox"/> DIVORCED*					* IF MARRIED/DIVORCED, PROVIDE SPOUSE/EX-SPOUSE NAME BELOW:														
[SPOUSE OR EX-SPOUSE] FIRST NAME					MIDDLE NAME					CURRENT LAST NAME					MAIDEN NAME/MARRIED NAME					SUFFIX				

CRIMINAL HISTORY										PROVIDE THE FOLLOWING INFORMATION ABOUT YOUR CRIMINAL HISTORY AN ATTACHMENT, IF NECESSARY)										(INCLUDE									
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE?										<input type="checkbox"/> NO <input checked="" type="checkbox"/> YES*					* IF YES, PROVIDE ALL CRIMINAL CONVICTIONS BELOW:														
TYPE OF OFFENSE <i>NONE</i>					CONVICTION DATE					PENALTY/SENTENCE					JURISDICTION (STATE & COUNTY)														

EMPLOYMENT HISTORY										PROVIDE YOUR COMPLETE EMPLOYMENT HISTORY FOR THE PAST 5 YEARS (INCLUDE AN ATTACHMENT, IF NECESSARY)														
EMPLOYER NAME (MOST RECENT)					IMMEDIATE SUPERVISOR					EMPLOYER'S PHONE ()														
EMPLOYER'S STREET ADDRESS					SUITE					CITY					STATE					ZIP CODE				
JOB TITLE					TYPE OF WORK					EMPLOYED FROM					EMPLOYED TO									
EMPLOYER NAME (SECOND MOST RECENT)					IMMEDIATE SUPERVISOR					EMPLOYER'S PHONE ()														
EMPLOYER'S STREET ADDRESS					SUITE					CITY					STATE					ZIP CODE				
JOB TITLE					TYPE OF WORK					EMPLOYED FROM					EMPLOYED TO									

ACKNOWLEDGEMENT REVIEW THE FOLLOWING STATEMENT AND SIGN YOUR ACKNOWLEDGEMENT BELOW

I hereby certify that the information supplied in this form is true and complete, and hereby authorize the Village of Elmwood Park to make all necessary inquiries to verify its accuracy. A false statement of material fact made on this form may violate federal, state and/or local law, and may subject any person making such a statement to a range of civil and criminal penalties, such as a period of incarceration, fines and an award to the Village of Elmwood Park of up to three times any damages incurred. In addition, persons who submit false information are subject to denial of the requested Village of Elmwood Park action.

PRINTED NAME OF APPLICANT <i>Jeff Hermano</i>					SIGNATURE OF APPLICANT <i>X</i>					DATE <i>5/1/18</i>				
--	--	--	--	--	------------------------------------	--	--	--	--	-----------------------	--	--	--	--