CERTIFICATE OF COMPLETION

VILLAGE OF SOUTH ELGIN 10 NORTH WATER STREET • SOUTH ELGIN, IL 60177

DATE: May 05 2023

GRP SOUTH ELGIN LLC

740 SCHNEIDER DR

SOUTH ELGIN, IL 60177

PERMIT #: 2021-00000619 PERMIT TYPE: INTERIOR DEMO

This Certificate of Completion is to certify that the building permit number 2021-00000619 has passed the final inspection. The permit has now been closed; no further action is required. Please retain this Certificate of Completion for your records.





VILLAGE OF SOUTH ELGIN COMMUNITY DEVELOPMENT DEPARTMENT

10 NORTH WATER STREET • SOUTH ELGIN, IL 60177 • PHONE (847) 741-3894 • FAX (847) 741-3959

INTERIOR DEMO PERMIT

PERMIT # 2021-00000619

ISSUE DATE: 4/20/2021

EXPIRATION DATE: 10/17/2021

PROPERTY ADDRESS: 740 SCHNEIDER DR SOUTH ELGIN, IL 60177

PARCEL NUMBER: 0626303009

PROPERTY OWNER NAME: SCHNEIDER EXCHANGE LLC

ISSUED TO NAME: TESSLER CONSTRUCTION CO

ISSUED TO ADDRESS: 7705 SURINI LANE CRYSTAL LAKE, IL 60012

DESCRIPTION OF WORK: INTERIOR DEMO OF PANEL COOLERS

PERMIT FEE: \$30.00

REQUIRED INSPECTIONS

CALL BY 4PM TO SCHEDULE AN INSPECTION FOR THE FOLLOWING BUSINESS DAY

To request an inspection, call with the permit type, permit number, property address, and type of inspection. Inspections will be scheduled on a first come, first serve basis & failure to schedule inspections will result in penalties.

(847) 741-3894

Inspection Type

DEMO

GENERAL

Village of South Elgin Community Development Department

10 N. Water Street 847-741-3894 847-741-3959 FAX Monday – Friday 8:30 a.m. – 5:00 p.m. www.southelgin.com

DEMOLITION PERMIT APPLICATION

PROPERTY I	NFORMATION	
Address	740 Scheider Drive	South Elgin, IL 60177
PROPERTY (OWNER INFORMATION	
Name:	GRP South Elgin, LLC	
Address	740 Schneider Drive South Elgin, IL 60177	enter programme de la companya de la
Email:	rossmorreale@att.net	
Phone:	(<u>312</u>) <u>909</u> - <u>6980</u> Fax: () Cell: ()
CONTRACTO	OR INFORMATION (If applicable) Contractor Type: General Contra	actor
Business N	lame: TESSLER Construction Co Inc Contact Person: Ronald Tessle	r
Address:	7705 Surini Lane Bull Valley, IL 60012	(0.00) - 400 (0.00)
Email:	ron@tesslerinc.com	
Phone:	() Fax: () Cell: (815) 276 _ 3470
OTHER CON	TACT INFORMATION (If applicable) Contact Type:	
Business N	lame: Contact Person:	
Email:		
Phone:	() Fax: () Cell: (
ADDITIONAL	INFORMATION	
Estimated '	Value of Work: 42,000.00 Applicant (check): ☐ Property Owner ☑ Cont	tractor Tenant
I have read & u	nderstand the attached fact sheet. Initial: RT Date: 4.16.2021	
the Village of South specifications and Village of South Ele is covered up, and	this application and attached forms being made a part thereof and the issuance of permit, I will conform Elgin Codes and Ordinances. I also agree that all work performed under said permit will be in accordant diagram which may accompany this application, except for such changes as may be necessary a gin. No work shall be conducted until a permit is issued and obtained. I will submit this work to the reprohibit the occupancy of any space until a Certificate of Occupancy or Letter of Completion has been the information contained herein. Date: 4.16.2	rdance with the approved plans, nd authorized or required by the equired inspections, before work in obtained from the Community
Applicant N	lame & Title (please print); Ronald Tessler	
	(OVER – Go to Page 2)	The second distriction of the second
Submittal Ch	(10)	l Worksheet

DEMOLITION PERMIT WORKSHEET

DESCRIPTION	
Type: Interior only	☐ Principal Structure ☐ Accessory Structure ☐ Other:
Additional Comments:	emoval of insulated metal panel coolers.
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DOND ON OUR ATION (I	in within the Digital of May and a shared anima utilities.
Bond Requirements Calculation by	ing within the Right of Way, e.g. abandoning utilities) ased on the following unit prices:
Culvert:	\$
Street Patch:	\$
Excavation / Fill:	\$
Parkway Tree:	\$
Sidewalk:	\$
Landscaping:	\$
Driveway Approach:	\$
Curb & Gutter:	\$
Subtotal:	\$
120% multiplier	\$
Bond Amount (minimum \$10,000	0*) \$
* Bond amount must be at least \$^	10,000, increasing depending on the costs associated with the work.
SUBMITTAL CHECKLIST	
Plat of Survey, indicating the si	ze and location of all existing structures and wells, all utilities and proposed method of
capping, sealing off.	
Provide IEPA Asbestos Abaten	nent Permit, as needed.
Provide all necessary Kane Co	unty Permits for well or septic removal
Provide a copy of the Illinois St	ate Plumbing License
Provide a copy of the Plumbing	Contractors Registration
Provide a letter of intent for plui	mbing work
If working within the Village Rig	tht of Way provide a bond and certificate of insurance.