

A G E N D A

REGULAR MEETING OF THE MAYOR AND BOARD OF TRUSTEES OF THE VILLAGE OF WILLOWBROOK TO BE HELD ON MONDAY, SEPTEMBER 26, 2011, AT 6:30 P.M. AT THE VILLAGE HALL, 7760 QUINCY STREET, IN THE VILLAGE OF WILLOWBROOK, DUPAGE COUNTY, ILLINOIS

1. CALL TO ORDER
2. ROLL CALL
3. PLEDGE OF ALLEGIANCE
4. OMNIBUS VOTE AGENDA
 - a. Waive Reading of Minutes (APPROVE)
 - b. Minutes - Regular Board Meeting - September 12, 2011 - (APPROVE)
 - c. Minutes - Executive Session - June 13, 2011 (APPROVE)
 - d. Minutes - Executive Session - June 27, 2011 (APPROVE)
 - e. Minutes - Executive Session - July 11, 2011 (APPROVE)
 - f. Minutes - Executive Session - July 18, 2011 (APPROVE)
 - g. Minutes - Executive Session - July 25, 2011 (APPROVE)
 - h. Minutes - Executive Session - July 25, 2011 (APPROVE)
 - i. Warrants - \$201,656.65 - September 26, 2011 - (APPROVE)
 - j. Resolution - A Resolution Proclaiming Red Ribbon Week in the Village of Willowbrook (ADOPT)
 - k. Resolution - A Resolution Creating Set Hours for Halloween Solicitation (ADOPT)
 - l. Resolution - A Resolution Authorizing the Mayor and Village Clerk to Accept a Proposal for the Completion of a Water Storage Tank Washing Project - Water Tower Clean and Coat, Inc. (ADOPT)
 - m. Resolution - A Resolution Authorizing the Mayor and Village Clerk to Accept a Proposal for the 2011 Fall Brush Collection Program - Homer Tree Care, Inc. (ADOPT)
 - n. Ordinance - An Ordinance Authorizing the Sale of Personal Property Owned by the Village of Willowbrook (APPROVE)
 - o. Application to Hold a Raffle - Lions Club of Woodridge (APPROVE)

NEW BUSINESS

5. DELINQUENT WATER BILLS
6. RESOLUTION - A RESOLUTION AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR THE 2011 PARK IDENTIFICATION SIGN REPLACEMENT PROJECT - WOODMASTER GRAPHICS
7. RESOLUTION - A RESOLUTION WAIVING THE COMPETITIVE BIDDING PROCESS AND AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR APPRAISAL SERVICES - REALTY VALUE CONSULTANTS, INC.
8. ORDINANCE - AN ORDINANCE AUTHORIZING THE AMENDMENT OF THE ELIGIBILITY FOR BENEFIT PROVISIONS IN THE VILLAGE'S EXISTING GROUP BASIC LIFE & ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE POLICY BY ADDING TO THE LIST OF SAID POLICY'S BENEFITTED CLASSES A FIFTH CLASSIFICATION CONSISTING OF ALL THOSE PERSONS APPOINTED TO CERTAIN OF ITS APPOINTIVE OFFICES

PRIOR BUSINESS

9. COMMITTEE REPORTS
10. ATTORNEY'S REPORT
11. CLERK'S REPORT
12. ADMINISTRATOR'S REPORT
13. MAYOR'S REPORT
14. VISITOR'S BUSINESS - Public comment is limited to three minutes per person
15. EXECUTIVE SESSION
 - a. To Discuss Collective Negotiating Matters Between the Village and Its Employees and Their Representatives Pursuant to Chapter 5 ILCS 120/1(c)(2)

b. Consideration of Pending Litigation Against
the Village Pursuant to Chapter 5 ILCS 120/2
(c)(11)

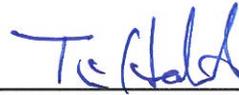
C. Consideration of Probable Litigation Against
the Village Pursuant to Chapter 5 ILCS 120/2
(c)(11)

16. ADJOURNMENT

WARRANTS

September 26, 2011

GENERAL CORPORATE FUND	-----	\$120,113.68
WATER FUND	-----	81,542.97
TOTAL WARRANTS	-----	\$201,656.65



Tim Halik, Village Administrator

APPROVED:

Robert A. Napoli, Mayor

VILLAGE OF WILLOWBROOK

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BILLS PAID REPORT FOR SEPTEMBER, 2011

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GENERAL CORPORATE FUND

CHECKS & DIR. DEBITS

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
ACCURINT (21)	09/27 CK# 78387	\$144.25
1009686/AUG 11 FEES-DUES-SUBSCRIPTIONS 01-451-307	01-30-630-307	144.25
ACE STORE NO. 11 (17)	09/27 CK# 78388	\$112.16
317949/3 ROAD SIGNS 01-540-333	01-35-755-333	63.69
317958/3 ROAD SIGNS 01-540-333	01-35-755-333	48.47
AFFY TAPPLE COMPANY (40)	09/27 CK# 78390	\$277.50
2011 APPLES CHILDRENS SPECIAL EVENTS 01-625-150	01-20-585-150	277.50
AFLAC (46)	09/27 CK# 78391	\$1,823.80
SEPT 2011 EMP DED PAY - AFLAC/ACCIDENT 01-210-217	01-210-217	338.36
SEPT 2011 EMP DED PAY - AFLAC/OTHER INS 01-210-218	01-210-218	1,485.44
AL WARREN OIL CO (2205)	09/27 CK# 78392	\$5,074.33
10682692 GASOLINE INVENTORY 01-190-126	01-190-126	5,074.33
ROBERT BAKSHIS (171)	09/27 CK# 78394	\$1,750.00
2011 SURVEY FINANCIAL SERVICES 01-430-252	01-10-471-252	1,750.00
BATTERIES PLUS 286 OR 288 (179)	09/27 CK# 78395	\$300.00
288-226642 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	300.00
BLACK GOLD SEPTIC (208)	09/27 CK# 78396	\$310.00
51031 MAINTENANCE - PW BUILDING	01-35-725-418	310.00
BLUE LINE LEARNING GROUP, INC. (203)	09/27 CK# 78397	\$558.00
10B9053R11 SCHOOLS-CONFERENCE TRAVEL 01-451-304	01-30-630-304	558.00
CASE LOTS INC (300)	09/27 CK# 78398	\$167.83
034669 MAINTENANCE - PW BUILDING	01-35-725-418	167.83
CATHERINE KUBICKI (586)	09/27 CK# 78399	\$40.00
215A YOGA FALL RECREATION FEES 01-310-818	01-310-818	40.00
CINDI VIMONT (586)	09/27 CK# 78400	\$55.00
255 2011-6 FALL RECREATION FEES 01-310-818	01-310-818	55.00
COMMONWEALTH EDISON (370)	09/27 CK# 78401	\$751.92
0423085170SP11 RED LIGHT - COM ED	01-30-630-248	67.30
0791026027SEP11 RED LIGHT - COM ED	01-30-630-248	54.48
4215105154SP11 ENERGY - STREET LIGHT 01-530-207	01-35-745-207	486.47
4403140110/SP11 ENERGY - STREET LIGHT 01-530-207	01-35-745-207	68.96
6863089003SEP11 RED LIGHT - COM ED	01-30-630-248	74.71
CRAIN'S CHICAGO BUSINESS (407)	09/27 CK# 78402	\$97.95
1YR SUBSCRPTN FEES DUES SUBSCRIPTIONS 01-420-307	01-10-455-307	97.95
DELTA DENTAL PLAN OF ILLINOIS (468)	09/27 CK# 78403	\$3,743.76
SEPTEMBER 2011 EMP DED PAY-INS 01-210-204	01-210-204	1,013.52
SEPTEMBER 2011 EMPLOYEE BENEFIT - MEDICAL INSURANC	01-10-455-141	120.03
SEPTEMBER 2011 EMPLOYEE BENEFITS - MEDICAL 01-15-510-141	01-15-510-141	51.53
SEPTEMBER 2011 EMPLOYEE BENEFIT - MEDICAL INS 01-25-610-141	01-25-610-141	103.05
SEPTEMBER 2011 EMPLOYEE BENEFIT - MEDICAL INSURANC	01-30-630-141	2,158.00
SEPTEMBER 2011 EMPLOYEE BENEFITS - MEDICAL 01-501-141	01-35-710-141	143.06
SEPTEMBER 2011 EMPLOYEE BENEFITS - MEDICAL 01-551-141	01-40-810-141	154.57
DUPAGE COUNTY PUBLIC WORKS (514)	09/27 CK# 78404	\$73.10
5/31-7/31/11 SANITARY USER CHARGE 01-405-385	01-10-466-385	59.65
5/31-7/31/11 SANITARY USER CHARGE	01-35-725-417	13.45
DUPAGE COUNTY E.T.S.B. 911 (513)	09/27 CK# 78405	\$468.37
78/AUG 11 PHONE - TELEPHONES 01-451-201	01-30-630-201	468.37

VILLAGE OF WILLOWBROOK

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GENERAL CORPORATE FUND

CHECKS & DIR. DEBITS

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
ELMHURST-CHICAGO STONE CO (550) 378856 STREET & ROW MAINTENANCE 01-535-328	09/27 CK# 78407 01-35-750-328	\$100.00 100.00
EXTREME GLOW (570) B0912-131 COMMODITIES 01-482-331	09/27 CK# 78409 01-30-670-331	\$420.00 420.00
FIRE & SECURITY SYSTEMS INC. (601) 110437 BALANCE MAINTENANCE - PW BUILDING	09/27 CK# 78410 01-35-725-418	\$97.50 97.50
FIRESTONE TIRE & SERVICE (603) 175329 MAINTENANCE - VEHICLES 01-451-409	09/27 CK# 78411 01-30-630-409	\$773.12 773.12
GABRIELLA RIOS (586) 255 - 2011 FALL RECREATION FEES 01-310-818	09/27 CK# 78412 01-310-818	\$55.00 55.00
GADDIS DAVID (652) 11 UNIFORMS UNIFORMS 01-451-345 11 UNIFORMS-2 UNIFORMS 01-451-345	09/27 CK# 78413 01-30-630-345 01-30-630-345	\$83.89 39.94 43.95
W.W. GRAINGER (1999) 9633783981 PARK LANDSCAPE SUPPLIES 01-610-341	09/27 CK# 78414 01-20-565-341	\$37.80 37.80
HOME DEPOT COMMERCIAL (808) 0020850 MAINTENANCE SUPPLIES 01-615-331 2020592 MAINTENANCE SUPPLIES 01-615-331 3020380 MAINTENANCE SUPPLIES 01-615-331 4020103 MAINTENANCE SUPPLIES 01-615-331 5034565 PARK LANDSCAPE SUPPLIES 01-610-341 6021424 OFFICE SUPPLIES 01-420-301 6021430 STREET & ROW MAINTENANCE 01-535-328	09/27 CK# 78415 01-20-570-331 01-20-570-331 01-20-570-331 01-20-570-331 01-20-565-341 01-10-455-301 01-35-750-328	\$551.73 215.48 69.88 68.64 124.84 23.19 44.38 5.32
HOMER TREE CARE INC. (810) 18488 TREE MAINTENANCE 01-535-338	09/27 CK# 78416 01-35-750-338	\$3,200.00 3,200.00
HOMER INDUSTRIES (2416) S41612 LANDSCAPE MAINTENANCE SERVICES 01-610-342	09/27 CK# 78417 01-20-565-342	\$1,125.00 1,125.00
GARRETT HUMMEL (2167) SPRNGFLD 9/8 SCHOOLS-CONFERENCE TRAVEL 01-420-304	09/27 CK# 78418 01-10-455-304	\$143.20 143.20
I.M.R.F. PENSION FUND (917) SEPT 2011 SLEP PENSION 01-420-155	09/27 CK# 78419 01-10-455-155	\$2,627.33 2,627.33
INT. INST.OF MUNICIPAL CLERKS (956) HAHN 2011 FEES DUES SUBSCRIPTIONS 01-05-410-307 HANSEN 2011 FEES DUES SUBSCRIPTIONS 01-05-410-307	09/27 CK# 78420 01-05-410-307 01-05-410-307	\$225.00 75.00 150.00
JACK PHELAN DODGE (2285) DOCS61807 MAINTENANCE - VEHICLES 01-451-409	09/27 CK# 78421 01-30-630-409	\$314.00 314.00
JEFFREY MCELROY (586) 255 2011-3 FALL RECREATION FEES 01-310-818	09/27 CK# 78422 01-310-818	\$55.00 55.00
JUDY MONTI (586) 255 2011-4 FALL RECREATION FEES 01-310-818	09/27 CK# 78423 01-310-818	\$55.00 55.00
JULIE PFEIFFER (586) PILATES FALL RECREATION FEES 01-310-818	09/27 CK# 78424 01-310-818	\$72.00 72.00
KALE UNIFORMS, INC. (1027) 579695 UNIFORMS 01-451-345	09/27 CK# 78425 01-30-630-345	\$9.99 9.99
KELLI FRANK (586) 225 - 2011-2 FALL RECREATION FEES 01-310-818	09/27 CK# 78426 01-310-818	\$55.00 55.00

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DESCRIPTION	ACCOUNT NUMBER	AMOUNT
KING CAR WASH (1057) #60 AUG 2011 GAS-OIL-WASH-MILEAGE 01-451-303	09/27 CK# 78427 01-30-630-303	\$696.50 696.50
KOCHUTHRESIA NEDUMGOTTIL (1466) PERMIT #12 2011 PARK PERMIT FEES 01-310-814	09/27 CK# 78428 01-310-814	\$100.00 100.00
KONICA MINOLTA BUSINESS SOLUTIONS (2319) 218811802 COPY SERVICE 01-451-315 218840705 COPY SERVICE 01-451-315 218857875 COPY SERVICE 01-420-315	09/27 CK# 78429 01-30-630-315 01-30-630-315 01-10-455-315	\$1,106.65 541.56 39.21 525.88
LAGRANGE CAMERA & VIDEO (1098) 29774 OPERATING SUPPLIES 01-451-331	09/27 CK# 78430 01-30-630-331	\$207.95 207.95
LASERCRAFT INC (2300) 369/AUG 11 RED LIGHT CAMERA FEES 01-30-630-247	09/27 CK# 78431 01-30-630-247	\$22,475.00 22,475.00
MARQUARDT & BELMONTE P.C. (2259) 4355/AUG 11 RED LIGHT ADJUDICATOR 01-30-630-246	09/27 CK# 78432 01-30-630-246	\$420.00 420.00
MARY EILEEN MCNALLY (1466) PERMIT#32 2011 PARK PERMIT FEES 01-310-814	09/27 CK# 78433 01-310-814	\$200.00 200.00
MIDWEST LASER SPECIALISTS, INC (1276) 1066726 OPERATING SUPPLIES 01-451-331	09/27 CK# 78435 01-30-630-331	\$54.99 54.99
MINUTEMAN PRESS (1289) 43280 OFFICE SUPPLIES 01-551-301	09/27 CK# 78436 01-40-810-301	\$175.87 175.87
NIMCO INC (2179) 419747 DRUG FORFEITURE EXP. - STATE 01-465-348	09/27 CK# 78437 01-30-650-348	\$1,177.50 1,177.50
ILL. NOTARY DISCOUNT BONDING (861) SVEHLA FEES-DUES-SUBSCRIPTIONS 01-451-307	09/27 CK# 78438 01-30-630-307	\$42.90 42.90
NUTOYS LEISURE PRODUCTS (1400) 37348 MAINTENANCE SUPPLIES 01-615-331	09/27 CK# 78439 01-20-570-331	\$206.00 206.00
ORKIN EXTERMINATING (1439) D26043060 SEP11 MAINTENANCE - BUILDING 01-405-228	09/27 CK# 78440 01-10-466-228	\$70.53 70.53
P.F. PETTIBONE & CO. (1491) 23457 PRINTING & PUBLISHING 01-451-302	09/27 CK# 78441 01-30-630-302	\$42.00 42.00
PARTYKA MARY (1465) 2ND PLACE SUMMER PROGRAM MATERIALS & SERVICES	09/27 CK# 78442 01-20-575-119	\$90.00 90.00
PAUL HOBBS (1792) 1ST PLACE SUMMER PROGRAM MATERIALS & SERVICES	09/27 CK# 78443 01-20-575-119	\$150.00 150.00
PETTY CASH C/O TIM HALIK (1492) 9/20/11 SCHOOLS-CONFERENCE TRAVEL 01-420-304 9/20/11 PUBLIC RELATIONS 01-435-365 9/20/11 FALL PROGRAM MATERIALS & SERVICES 01-622-118 9/20/11 GAS-OIL-WASH-MILEAGE 01-451-303	09/27 CK# 78444 01-10-455-304 01-10-475-365 01-20-580-118 01-30-630-303	\$192.60 64.85 42.99 64.50 20.26
PHOENIX DISTRIBUTORS (2415) 2887 FIRING RANGE 01-451-245	09/27 CK# 78445 01-30-630-245	\$3,165.00 3,165.00
THE PILATES BODY INC (2297) 17695 SUMMER PROGRAM MATERIALS & SERVICES	09/27 CK# 78446 01-20-575-119	\$150.00 150.00
PUBLIC SAFETY DIRECT INC (2309) 22292 MAINTENANCE - VEHICLES 01-451-409	09/27 CK# 78447 01-30-630-409	\$75.75 75.75

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DESCRIPTION	ACCOUNT NUMBER	AMOUNT
RAY O'HERRON (1593)	09/27 CK# 78448	\$91.80
42297 OPERATING EQUIPMENT 01-451-401	01-30-630-401	91.80
SCOTT CONTRACTING INC (1682)	09/27 CK# 78449	\$4,885.00
2058 ST & ROW MAINTENANCE OTHER 01-540-328	01-35-755-328	1,725.00
2059 ST & ROW MAINTENANCE OTHER 01-540-328	01-35-755-328	940.00
2060 STREET & ROW MAINTENANCE 01-535-328	01-35-750-328	2,220.00
SCUKANEC GEORGE (1685)	09/27 CK# 78450	\$200.00
ADV SUPPLIES CHILDRENS SPECIAL EVENTS 01-625-150	01-20-585-150	200.00
SERVICE SANITATION INC (1697)	09/27 CK# 78451	\$136.00
6597247 RENT - EQUIPMENT 01-615-234	01-20-570-234	136.00
SIKICH LLP (1722)	09/27 CK# 78452	\$11,730.00
131931/AUG 11 FINANCIAL SERVICES 01-25-620-252	01-25-620-252	11,730.00
JOHN SKIBA (1728)	09/27 CK# 78453	\$35.71
2011 UNIFORMS UNIFORMS 01-451-345	01-30-630-345	35.71
SOUTHWEST UNITED FIRE DISTRICTS (1749)	09/27 CK# 78454	\$2,378.79
20090959 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	1,008.05
20090975 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	394.14
20091043 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	207.00
20091044 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	281.46
2091045 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	488.14
SOUTHWEST CENTRAL DISPATCH (1751)	09/27 CK# 78455	\$20,992.12
OCTOBER 2011 RADIO DISPATCHING 01-483-235	01-30-675-235	20,992.12
STIPES PUBLISHING L.L.C. (1783)	09/27 CK# 78456	\$80.88
9/1/11 PRINTING & PUBLISHING 01-451-302	01-30-630-302	80.88
SUSANA RUANO (586)	09/27 CK# 78457	\$55.00
255 2011-5 FALL RECREATION FEES 01-310-818	01-310-818	55.00
SUSANA RUANO (1792)	09/27 CK# 78458	\$60.00
3RD PLACE SUMMER PROGRAM MATERIALS & SERVICES	01-20-575-119	60.00
TAMELING GRADING (1836)	09/27 CK# 78459	\$3,940.00
TG5 - AUG 2011 LANDSCAPE MAINTENANCE SERVICES 01-610-342	01-20-565-342	3,940.00
TAMELING INDUSTRIES (1844)	09/27 CK# 78460	\$66.00
75060 PARK LANDSCAPE SUPPLIES 01-610-341	01-20-565-341	66.00
THOMPSON ELEV. INSPECT. SERVICE (1873)	09/27 CK# 78461	\$100.00
11*-3182 ELEVATOR INSPECTION 01-565-117	01-40-830-117	100.00
TOM & JERRY'S SHELL SERVICES (1883)	09/27 CK# 78462	\$2,100.52
44517 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	504.24
44712 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	83.06
44717 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	107.05
44720 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	25.45
44728 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	25.45
44736 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	254.37
44742 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	415.31
44760 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	25.45
44771 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	40.01
44774 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	147.03
44787 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	30.50
44805 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	25.45
44806 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	25.45

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GENERAL CORPORATE FUND

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DESCRIPTION	ACCOUNT NUMBER	AMOUNT
44808 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	80.00
44825 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	254.60
44834 MAINTENANCE - VEHICLES 01-451-409	01-30-630-409	57.10
TRAFFIC CONTROL & PROTECTIONS (2337)	09/27 CK# 78463	\$493.01
70505 PARK LANDSCAPE SUPPLIES 01-610-341	01-20-565-341	248.16
70564 ROAD SIGNS 01-540-333	01-35-755-333	244.85
TREE TOWNS (1894)	09/27 CK# 78464	\$90.00
165139 PRINTING & PUBLISHING 01-551-302	01-40-810-302	30.00
165611 PRINTING & PUBLISH 01-420-302	01-10-455-302	30.00
165613 PRINTING & PUBLISH 01-420-302	01-10-455-302	30.00
UNIFIRST (1926)	09/27 CK# 78466	\$217.38
0610623540 MAINTENANCE - BUILDING 01-405-228	01-10-466-228	166.95
0610623658 MAINTENANCE - PW BUILDING	01-35-725-418	50.43
VEDDER, PRICE, KAUFMAN & KAMMHOLZ PC (1971)	09/27 CK# 78467	\$687.20
409020 AUG 2011 FEES - LABOR COUNSEL 01-425-242	01-10-470-242	687.20
VILLA PARK MATERIAL CO. INC (1974)	09/27 CK# 78468	\$740.00
94947 STREET & ROW MAINTENANCE 01-535-328	01-35-750-328	493.00
94961 STREET & ROW MAINTENANCE 01-535-328	01-35-750-328	247.00
WALZ GROUP LLC (1998)	09/27 CK# 78469	\$347.19
18747 OFFICE SUPPLIES 01-420-301	01-10-455-301	347.19
WAREHOUSE DIRECT (2002)	09/27 CK# 78470	\$447.34
1267029-0 OFFICE SUPPLIES 01-420-301	01-10-455-301	148.99
1267029-0 OFFICE SUPPLIES 01-25-610-301	01-25-610-301	160.15
1267029-0 OFFICE SUPPLIES 01-501-301	01-35-710-301	138.20
WESTFIELD FORD (2028)	09/27 CK# 78471	\$2,060.70
123087 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	25.60
314382 MAINTENANCE - VEHICLES 01-551-409	01-40-810-409	682.30
315588 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	1,352.80
WESTOWN AUTO SUPPLY COMPANY (2026)	09/27 CK# 78472	\$41.74
38348 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	27.46
38686 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	3.92
39029 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	2.10
39240 MAINTENANCE - VEHICLES 01-520-409	01-35-735-409	8.26
WOLF & COMPANY LLP (2340)	09/27 CK# 78473	\$11,500.00
94119 AUDIT SERVICES 01-25-620-251	01-25-620-251	11,500.00
ZEP MANUFACTURING COMPANY (2115)	09/27 CK# 78474	\$89.53
30465644 OPERATING EQUIPMENT 01-451-401	01-30-630-401	89.53
TOTAL GENERAL CORPORATE FUND		\$120,113.68

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WATER FUND

CHECKS & DIR. DEBITS

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
ACLARA (26) 10331924 NEW - METERING EQUIPMENT 02-435-461	09/27 CK# 78389 02-50-435-461	\$1,000.00 1,000.00
APOLLO CONSTRUCTION C/O G. SAN ROMAN (1243) WR 09/15/11 DEPOSITS SENT TO CUSTOMER-DM APOLLO CONSTRUCTION UT# 701115.000 DEPOSIT SENT TO CUSTOMER	09/27 CK# 78393 02-280-130	\$80.00 80.00
DELTA DENTAL PLAN OF ILLINOIS (468) SEPTEMBER 2011 EMPLOYEE BENEFITS - MEDICAL	09/27 CK# 78403 02-50-401-141	\$143.06 143.06
DUPAGE WATER COMMISSION (521) 9299/AUG 2011 PURCHASE OF WATER 02-420-575	09/27 CK# 78406 02-50-420-575	\$78,969.63 78,969.63
ENVIRO TEST INC (555) 11-128569 AUG11 SAMPLING ANALYSIS 02-420-362	09/27 CK# 78408 02-50-420-362	\$87.50 87.50
W.W. GRAINGER (1999) 1138888695 MATERIALS, SUPPLIES, STANDPIPE, PUM	09/27 CK# 78414 02-50-425-475	\$83.90 83.90
HOME DEPOT COMMERCIAL (808) 9029204 WATER DISTRIBUTION REPAIR-MAINTENAN	09/27 CK# 78415 02-50-430-277	\$33.88 33.88
METROPOLITAN INDUSTRIES INC (1248) 250207 EDP EQUIPMENT MAINTENANCE 02-417-263	09/27 CK# 78434 02-50-417-263	\$445.00 445.00
U.S. POSTMASTER (1948) DEP SEP 11 POSTAGE & METER RENT 02-401-311	09/27 CK# 78465 02-50-401-311	\$700.00 700.00
TOTAL WATER FUND		\$81,542.97

VILLAGE OF WILLOWBROOK

BILLS PAID REPORT FOR SEPTEMBER, 2011

RUN DATE: 09/21/11

SUMMARY ALL FUNDS

RUN TIME: 03:06PM

BANK ACCOUNT	DESCRIPTION	AMOUNT	
01-110-105	GENERAL CORPORATE FUND-CHECKING - 0010330283	120,113.68	*
02-110-105	WATER FUND-CHECKING 0010330283	81,542.97	*
	TOTAL ALL FUNDS	201,656.65	**

VILLAGE OF WILLOWBROOK

BOARD MEETING

AGENDA ITEM - HISTORY/COMMENTARY

ITEM TITLE:

A RESOLUTION PROCLAIMING RED RIBBON WEEK IN THE VILLAGE OF WILLOWBROOK

AGENDA NO.

4j

AGENDA DATE: 09/26/11

STAFF REVIEW: Mark Shelton

SIGNATURE: 

LEGAL REVIEW:

SIGNATURE: N/A

RECOMMENDED BY VILLAGE ADMIN.:

SIGNATURE: 

REVIEWED & APPROVED BY COMMITTEE: YES NO N/A

ITEM HISTORY (PREVIOUS VILLAGE BOARD REVIEWS, ACTIONS RELATED TO THIS ITEM, OTHER PERTINENT HISTORY)

ITEM COMMENTARY (BACKGROUND, DISCUSSION, KEY POINTS, RECOMMENDATIONS, ETC.)

Gower Elementary School District 62 and Holmes Elementary School District 60 are hosting the national "Red Ribbon" campaign during the week of October 22 - 30, 2011. This campaign is a community involvement for a Drug Free America.

The Public Safety Committee and the Village Staff recommend the Mayor and Board of Trustees adopt the attached Resolution proclaiming October 22 - 30, 2011 as "Red Ribbon Week".

ACTION PROPOSED: ADOPT THE RESOLUTION

RESOLUTION NO. 11-R-_____

A RESOLUTION PROCLAIMING RED RIBBON WEEK IN THE
VILLAGE OF WILLOWBROOK

WHEREAS, cities across America have been plagued by the numerous problems associated with alcohol, tobacco, and other drug use; and

WHEREAS, there is hope in winning the War on Drugs, and the hope lies in the hard work and determination of our communities to create a drug free environment; and

WHEREAS, success will not occur overnight, our patience and continued commitment to drug education and prevention are imperative;

WHEREAS, the Red Ribbon Campaign was established by Congress in 1988 to promote this belief and encourage a drug-free lifestyle and involvement in drug prevention efforts; and

WHEREAS, October 22 - 30, 2011, has been designated National Red Ribbon Week calling on all Americans to show their support for a drug-free state by wearing a red ribbon and participating in drug-free activities during that week;

NOW, THEREFORE, BE IT RESOLVED, that the Mayor and Board of Trustees of the Village of Willowbrook, DuPage County, Illinois do hereby proclaim the week of October 22 through October 30, 2011, as Red Ribbon Week in the Village of Willowbrook and encourage all citizens, businesses, public and private agencies to wear and display red ribbons and participate in drug-free activities throughout that week, joining the rest of the state in promoting the Red Ribbon Celebration and a drug-free.

ADOPTED AND APPROVED by the Mayor and Board of Trustees of
the Village of Willowbrook on this 26th day of September
2011.

APPROVED:

Mayor

ATTEST:

Village Clerk

ROLL CALL VOTE:

AYES: _____

NAYS: _____

ABSTENTIONS: _____

ABSENT: _____

VILLAGE OF WILLOWBROOK

BOARD MEETING

AGENDA ITEM - HISTORY/COMMENTARY

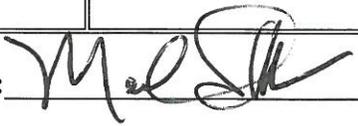
ITEM TITLE:

A RESOLUTION CREATING SET HOURS FOR HALLOWEEN SOLICITATION

AGENDA NO. 4k

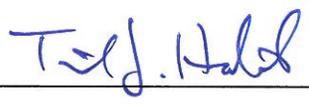
AGENDA DATE: 09/26/11

STAFF REVIEW: Mark Shelton

SIGNATURE: 

LEGAL REVIEW: N/A

RECOMMENDED BY VILLAGE ADMIN.:

SIGNATURE: 

REVIEWED & APPROVED BY COMMITTEE: YES NO N/A

ITEM HISTORY (PREVIOUS VILLAGE BOARD REVIEWS, ACTIONS RELATED TO THIS ITEM, OTHER PERTINENT HISTORY)

During the Public Safety Committee meeting on January 9, 1994 the need for solicitation hours was discussed. It was decided that the Village did not need an ordinance regulating Halloween solicitation. However, the idea of a Resolution passed yearly to set solicitation hours was discussed and endorsed. The resolution would accommodate the day of the week that Halloween fell upon. A resolution has been passed by the President and Board of Trustees since this date. The hours for Halloween solicitation set by the resolution would be published in the Village newsletter as well as the local paper and also posted on the Village web-site.

ITEM COMMENTARY (BACKGROUND, DISCUSSION, KEY POINTS, RECOMMENDATIONS, ETC.)

The recommended hours for the Halloween solicitation are Monday, October 31st, 2011 from 4:00 p.m. to 8:00 p.m.

ACTION PROPOSED:

Adopt Resolution.

RESOLUTION NO. 11-R-_____

A RESOLUTION CREATING SET HOURS FOR
HALLOWEEN SOLICITATION

WHEREAS, the Village of Willowbrook is interested in protecting the safety and welfare of young children soliciting on the holiday of Halloween and in preserving the spirit of Halloween for young children; and

WHEREAS, the holiday of Halloween usually leads to an increase in vandalism due to the presence of unsupervised juveniles roaming through the Village of Willowbrook; and

WHEREAS, the Village of Willowbrook is interested in reducing vandalism and crime and in protecting the property and peace of mind of Willowbrook residents; and

WHEREAS, a need for set solicitation hours was identified by the Village Staff in recognition that Village action is needed but that an Ordinance is unnecessary; and

WHEREAS, it was recommended by the Village Staff to set solicitation hours between the hours of 4:00 p.m. and 8:00 p.m. on Monday, October 31, 2011; and

NOW, THEREFORE, BE IT RESOLVED, that the Mayor and Board of Trustees of the Village of Willowbrook set the hours of Halloween solicitation to be 4:00 p.m. to 8:00 p.m. on Monday, October 31, 2011.

ADOPTED AND APPROVED by the Mayor and Board of Trustees of the
Village of Willowbrook on this _____ day of September 2011.

APPROVED:

Mayor

ATTEST:

Village Clerk

ROLL CALL VOTE: AYES: _____

NAYS: _____

ABSTENTIONS: _____

ABSENT: _____

VILLAGE OF WILLOWBROOK

BOARD MEETING AGENDA ITEM - HISTORY/COMMENTARY

ITEM TITLE:

A RESOLUTION AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR THE COMPLETION OF A WATER STORAGE TANK WASHING PROJECT – WATER TOWER CLEAN AND COAT, INC.

AGENDA NO. 41

AGENDA DATE: 9/26/11

STAFF REVIEW: Tim Halik,
Village Administrator

SIGNATURE: _____

Tim Halik

LEGAL REVIEW: N/A

SIGNATURE: _____

N/A

RECOMMENDED BY: Tim Halik,
Village Administrator

SIGNATURE: _____

Tim Halik

REVIEWED & APPROVED BY COMMITTEE:

YES on 9/12/11

NO

N/A

ITEM HISTORY (PREVIOUS VILLAGE BOARD REVIEWS, ACTIONS RELATED TO THIS ITEM, OTHER HISTORY)

The Fiscal Year 2011/12 Budget includes \$12,000 to pressure wash all three (3) of the Village's above grade water storage structures. This is routine preventative maintenance work that is performed to remove the mildew that tends to build on the outside of the structures as a result of the cool surface temperature of the tank and the prevailing moist conditions as a result of condensation. The mildew is primarily unsightly, but if left in place, could eventually negatively impact the protective surface paint coating of the tanks. The pressure washing that is performed is done using a disinfectant solution to inhibit future mildew growth.

ITEM COMMENTARY (BACKGROUND, DISCUSSION, RECOMMENDATIONS, ETC.)

The last time the tanks were washed was in 2008. At that time, staff obtained proposals from three (3) reputable tank washing companies. A very competitive proposal was received from Water Tower Clean & Coat, Inc. in the amount of \$10,600. Therefore, staff contacted the same company again to request another proposal and also asked that they consider not increasing their price from the 2008 project. On August 31, 2011 we received their proposal (copy attached) to perform the washing at the same price they offered in 2008.

Staff would recommend that the proposal received from Water Tower Clean & Coat be accepted. Funds to complete this project are available within the FY 11/12 Budget:

<u>FUND</u>	<u>ACCOUNT</u>	<u>DESCRIPTION</u>	<u>BUDGET</u>
Water	02-50-440-643	Painting – Water Towers	\$12,000.00

If approved, the work would be performed in late September or early October.

ACTION PROPOSED:

Adopt Resolution.

RESOLUTION NO. 11-R-_____

A RESOLUTION AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR THE COMPLETION OF A WATER STORAGE TANK WASHING PROJECT – WATER TOWER CLEAN AND COAT, INC.

BE IT RESOLVED by the Mayor and Board of Trustees of the Village of Willowbrook, DuPage County, Illinois, that the Mayor and Village Clerk be and the same are hereby authorized and directed to accept the proposal from Water Tower Clean and Coat, Inc. for the completion of the Water Storage Tank Washing Project in an amount not to exceed \$10,600.00, as set forth in the proposal attached hereto as Exhibit "A" which is, by this reference, expressly incorporated herein.

ADOPTED and APPROVED this 26th day of September, 2011.

APPROVED:

Mayor

ATTEST:

Village Clerk

ROLL CALL VOTE:

AYES: _____

NAYS: _____

ABSTENTIONS: _____

ABSENT: _____

Water Tower Clean and Coat, Inc

Proposal For Services



8/30/2011

Prepared For:
Don Beusse
Willowbrook, IL
Water Utility

Prepared By:
Russ Fiene
Water Tower Clean & Coat, Inc.
608-592-7574 office
608-279-3438 cell

Water Tower Clean and Coat
W11822 Reynolds Rd.
Lodi, WI 53555

EIN # 391-851002

Phone # (608) 592-7574
Fax # (608) 592-7574

Customer Phone #
Customer Fax #
Customer Cell #
Customer Email:

Customer P.O. #
Customer Tax Exempt #



Description	Quote
Exterior cleaning of the two (2) 500k gallon spheroid water towers and the 3 million gallon standpipe.	\$ 10,600.00
Notes:	

Please sign, date and fax this proposal to (608) 592-7574

Total \$10,600.00

Customer Signature _____ Date Accepted _____

Water Tower Clean and Coat Inc. utilizes a ground operated, remote controlled robotic cleaning machine that relies on pressure spraying for cleaning the external surfaces of the spheroid towers. We wash above your logo to ground level. WTCC is not liable for the repair or refinishing of any surface areas as a result of our work on or in your tower. If it is determined that your existing paint might incur damage following the initial wash test strip, we reserve the right to cancel this contract and rescind the work order. Full access to your tower is required. We welcome an open inspection

VILLAGE OF WILLOWBROOK

BOARD MEETING AGENDA ITEM - HISTORY/COMMENTARY

ITEM TITLE:

A RESOLUTION AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR THE 2011 FALL BRUSH COLLECTION PROGRAM – HOMER TREE CARE, INC.

AGENDA NO. 4m

AGENDA DATE: 9/26/11

STAFF REVIEW: Tim Halik,
Village Administrator

SIGNATURE: _____

Tim Halik

LEGAL REVIEW: N/A

SIGNATURE: _____

N/A

RECOMMENDED BY: Tim Halik,
Village Administrator

SIGNATURE: _____

Tim Halik

REVIEWED & APPROVED BY COMMITTEE: YES on 9/12/11 NO N/A

ITEM HISTORY (ACTIONS RELATED TO THIS ITEM, OTHER PERTINENT HISTORY, ETC.)

Earlier this year, the Village staff requested proposals from reputable tree maintenance contractors to conduct a Village-wide brush collection program. At that time, the low proposal was submitted by Homer Tree Care, Inc. and they ultimately completed the Brush Collection Program in May. The program was completed on-time and without complaints. Later, on two (2) occasions this Spring and Summer, as a result of significant storm events, the Village decided to conduct additional Village-wide emergency brush collection programs to assist residents in the removal of the large amount of downed limbs and debris. At that time we contacted Homer Tree, and they agreed to offer the same low hourly rate for chipping services as they offered us in May. Once again, the programs were completed on-time and without complaints. Homer Tree worked closely with many of our residents and was very responsive to their requests.

The Village-wide Fall Brush Collection Program typically occurs in mid-October. We again contacted Homer Tree Care, Inc. to request a proposal. They agreed to offer the same low rate, \$99.00 per hour per crew, as they offered to us in May. This year's Fall Brush Collection Program would be conducted the week of October 17th.

ITEM COMMENTARY (BACKGROUND, DISCUSSION, RECOMMENDATIONS, ETC.)

Staff anticipates that two (2) chipping crews would be required to work approximately 40 hours time to complete the Fall program. Therefore, the estimated cost of the program is \$7,920. The F.Y. 2011/12 Budget includes the following funding to conduct this program:

<u>FUND</u>	<u>ACCOUNT</u>	<u>DESCRIPTION</u>	<u>UNEXPENDED</u>
PW – Street Maint.	01-35-755-284	Reimb. Exp. – Brush Pick-Up	\$14,080.00

ACTION PROPOSED:

Adopt resolution.

RESOLUTION NO. 11-R-_____

A RESOLUTION AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR THE 2011 FALL BRUSH COLLECTION PROGRAM – HOMER TREE CARE, INC.

BE IT RESOLVED by the Mayor and Board of Trustees of the Village of Willowbrook, DuPage County, Illinois, that the Mayor and Village Clerk be and the same are hereby authorized and directed to accept the proposal from Homer Tree Care, Inc. on a time and material basis for the 2011 Fall Brush Collection Program in an amount set forth in the proposal attached hereto as Exhibit "A" which is, by this reference, expressly incorporated herein.

ADOPTED and APPROVED this 26th day of September, 2011

APPROVED:

Mayor

ATTEST:

Village Clerk

ROLL CALL VOTE: AYES: _____

NAYS: _____

ABSTENTIONS: _____

ABSENT: _____

EXHIBIT "A"



To: Don with the Village of Willowbrook **From:** Rich Reposh

Fax: 630-920-2431 **Date:** 9/1/11

Phone: 630-920-2261 **Pages:** 2 including cover

Re: Brush Pickup October 2011 **Sent by:** Sheryl

Urgent For Review Please Comment Please Reply

● **Comments:**

Please find the following our proposal for the above stated project. Should you have any questions or concerns, please do not hesitate to contact us here at the office or via email. Thank you for choosing Homer Tree and have a wonderful afternoon!

Sheryl A. Leslie

Homer Tree Care, Inc.

14000 S. Archer Avenue

Lockport, IL 60441

Sheryl@homertree.com



PROPOSAL



We accept



Proposal Submitted to:

Village of Willowbrook
 7760 Quincy Street
 Willowbrook, IL 60527

Phone: (630) 920-2261
Work : (630) 920-2431
Cell :

Date: 8/31/2011
Fax: (630) 920-2431
Work Order: 38882

Contacts: Tim Halik (630) 920-2261 Don Beusse (630) 918-5285

Clients Request: Debris Removal **PEN/SAL**
 Brush pickup October 17th, 2011 **WILLOW-7760**

Description of Work:

Please find enclosed our bid proposal for brush pick up:

Provide 4 men and 2 chipper truck units for the October 17th brush collection program.
 Men and equipment will form 2 brush chipping crews for 40 hours.
 COST: \$99.00 hour per crew hour

TOTAL \$: 0.00

Additional Services:

NOTE: ALL WORK TO BE PAID UPON COMPLETION

Customer Signature: _____ **Date:** _____

Your signature is required prior to the start of any work and indicates acceptance of all the Terms and Conditions on the reverse side of this document.

Arborist : _____ **Estimate is valid for :** _____



**Village of Willowbrook
Attn: Don Beusse
7760 Quincy Street
Willowbrook, IL 60527**

WO#38882

PROPOSAL DATE: 8/31/11

Please find enclosed our bid proposal for brush pick up:

Provide 4 men and 2 chipper truck units for the October 17th brush collection program.

Men and equipment will form 2 brush chipping crews for 40 hours.

COST: \$99.00 hour per crew hour

Customer Signature:

Date:

Arborist: Rich Reposh

Estimate is valid for: 30 Days

BOARD MEETING

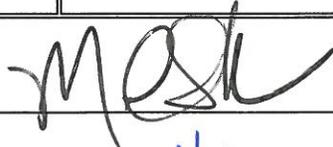
AGENDA ITEM - HISTORY/COMMENTARY

AN ORDINANCE AUTHORIZING THE SALE OF PERSONAL PROPERTY OWNED BY THE VILLAGE OF WILLOWBROOK

AGENDA NO. 4n

AGENDA DATE: 09/26/11

STAFF REVIEW: MARK SHELTON

SIGNATURE: 

LEGAL REVIEW: N/A

SIGNATURE: 

RECOMMENDED BY VILLAGE ADMIN.:

SIGNATURE: 

REVIEWED & APPROVED BY COMMITTEE: YES N/A

ITEM HISTORY (PREVIOUS VILLAGE BOARD REVIEWS, ACTIONS RELATED TO THIS ITEM, OTHER PERTINENT HISTORY)

ITEM COMMENTARY (BACKGROUND, DISCUSSION, KEY POINTS, RECOMMENDATIONS, ETC.)

Staff has compiled a list of Village owned vehicles deemed surplus ready for disposal. Staff will use the services of Insurance Auto Auctions:

VIN	Year	Make	Model
1GNDT13S052284938	2005	CHEVROLET	TRAILBLAZER

Staff recommends the Mayor and Board of Trustees pass the ordinance authorizing the sale of the vehicle listed above.

ACTION PROPOSED:

PASSAGE OF THE ORDINANCE

ORDINANCE NO. 11-O-___

AN ORDINANCE AUTHORIZING THE DISPOSAL OF
PERSONAL PROPERTY OWNED BY THE VILLAGE OF
WILLOWBROOK

WHEREAS, in the opinion of a majority of the corporate authorities of the Village of Willowbrook, it is no longer necessary or useful or for the best interests of the Village of Willowbrook, to retain ownership of the personal property hereinafter described; and

WHEREAS, it has been determined by the Mayor and Board of Trustees of the Village of Willowbrook to dispose of said personal property.

NOW, THEREFORE, BE IT ORDAINED by the Mayor and Board of Trustees of the Village of Willowbrook as follows:

SECTION ONE: Pursuant to 65 ILCS 5/11-76-4, the Mayor and Board of Trustees of the Village of Willowbrook find that the property legally described on Exhibit "A" attached hereto and made a part of, now owned by the Village of Willowbrook, is no longer necessary or useful to the Village of Willowbrook and the best interests of the Village of Willowbrook will be served by its disposal.

SECTION TWO: Pursuant to 65 ILCS 5/11-76-4, the Village Administrator is hereby authorized and directed to dispose of the property set forth on Exhibit "A" now owned by

the Village of Willowbrook in any manner he deems appropriate, with or without advertisement.

SECTION THREE: The Village Administrator is hereby authorized to dispose of the property set forth on Exhibit "A" to the recipient thereof.

SECTION FOUR: This ordinance shall be in full force and effect from and after its passage and approval in the manner provided by law.

PASSED and APPROVED this _____ day of _____, 2011.

APPROVED:

Mayor

ATTEST:

Village Clerk

ROLL CALL VOTE: AYES: _____

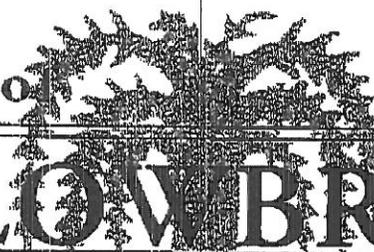
NAYS: _____

ABSTENTIONS: _____

ABSENT: _____

EXHIBIT "A"

VIN	Year	Make	Model
1GNDT13S052284938	2005	CHEVROLET	TRAILBLAZER



The Village of
WILLOWBROOK

7760 Quincy Street • Willowbrook, Illinois 60527-5594 • Phone: (630) 323-8215 • Fax: (630) 323-0787

Village President

Robert A. Napoli

APPLICATION FOR LICENSE TO HOLD A RAFFLE

Village Clerk

Leroy R. Hansen

- Name, age and address of the applicant in the case of an individual or in such other case of the duly authorized representative of the applicant, the date of incorporation of any corporation, the date of formation of any other organization, the object for which an organization or corporation was formed, the names and addresses of the officers and directors of any organization or corporation.

Village Trustees

Dennis Baker

Terrence Kelly

Timothy McMahon

Michael Mistele

Sandra O'Connor

Paul Schoenbeck

Name	Address	Age
Lions Club-Woodridge	P.O. Box 5062 Woodridge, IL	60517

Sherri Holquist President

Tony Fowler Vice-President

Joel Kagann Treasurer

Gail Waters Secretary

Date of incorporation, if corporation: 3/31/1969

Date of formation of organization: 3/31/1969

Object for which organization or corporation was formed: _____

Fraternal and Community Service Organization

Not for Profit

- The area or areas within the Village in which raffle chances will be sold or issued and the time period during which raffle chances will be sold or issued.

Willowbrook Lanes 735 Plainfield Road, Willowbrook, IL 60527

- The date on which the drawing is to be held

9/30/11

- The place at which the drawing is to be held.

Willowbrook Lanes 735 Plainfield Road, Willowbrook, IL 60527

5. Has the applicant ever been convicted of a felony and been disqualified to receive a license by reason of any matter or thing contained in Chapter 3-17 of the Village of Willowbrook Code of Ordinances, laws of the State or of the United States of America.

Yes: _____ No: XX

If yes, explain: _____

6. The aggregate retail value of all prizes or merchandise awarded by the licensee in a single raffle.
 about \$150.00

7. The maximum retail value of each prize awarded by the licensee in a single raffle.
 about \$50.00

8. The maximum price which may be charged for each raffle chance issued or sold.
 \$1.00

9. Has a previous license issued by any state or subdivision thereof or by the Federal government ever been revoked:

Yes: _____ No: XX

If yes, state reasons: _____

10. Affirm that the applicant will not violate any of the laws of the State or of the United States or any ordinances of this Village in the conduct of raffles.

Sharon Kesler Helgeson

- 11. Affirm that the applicant will not allow gambling devices or gambling on the premises where the drawing will be held.

Shawn Kessler Helfert

- 12. Attach a sworn statement attesting to the not-for-profit character of the prospective licensee organization signed by the presiding officer and secretary of that organization.

Signature:

Shawn Kessler Helfert

Date

9/21/11

CORP/LLC - File Detail Report

Page 1 of 1



SERVICES PROGRAMS PRESS PUBLICATIONS DEPARTMENTS CONTACT

CORPORATION FILE DETAIL REPORT

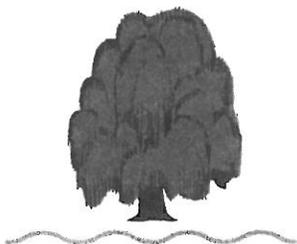
Entity Name	LIONS CLUB OF WOODRIDGE	File Number	51851641
Status	ACTIVE		
Entity Type	CORPORATION	Type of Corp	NOT-FOR-PROFIT
Incorporation Date (Domestic)	09/12/1979	State	ILLINOIS
Agent Name	JOEL A KAGANN	Agent Change Date	08/14/2003
Agent Street Address	2628 MITCHELL DR	President Name & Address	
Agent City	WOODRIDGE	Secretary Name & Address	
Agent Zip	60517	Duration Date	PERPETUAL
Annual Report Filing Date	08/12/2010	For Year	2010

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(One Certificate per Transaction)

[BACK TO CYBERDRIVEILLINOIS.COM HOME PAGE](#)



Village of Willowbrook

7760 Quincy Street
Willowbrook, IL 60527-5594

Phone: (630) 323-8215 • Fax: (630) 323-0787 • www.willowbrookil.org

August 26, 2011

Mayor

Robert A. Napoli

Ms. Khamika Cooper
101 W 75th St
Willowbrook Il 60527

Village Clerk

Leroy R. Hansen

Re: Account No. 111470.004
Delinquent Water Bill

Dear Ms. Cooper:

Please be advised that your water bill is now delinquent in the amount of \$128.01. This amount now includes a \$25.00 fee pursuant to Section 6-8-5 of the Village of Willowbrook Code. This \$25.00 is added to all accounts delinquent 45 or more days after the billing date. This amount also includes all other penalties pursuant to Section 6-8-5 of the Village Code. Your failure to satisfy the total amount of this delinquency on or before September 26, 2011, will result in the immediate termination of your water service.

Should your water service be terminated, Section 6-8-8 of the Village Code provides that a \$70.00 non-refundable reinstatement fee be charged. Said \$70.00 reinstatement fee shall be paid in addition to all delinquent bills and all penalties thereon before water service will be reinstated.

If you have any questions concerning your water bill, or if you wish to arrange a hearing before the President and Board of Trustees to contest the termination of your water service, please contact me at the Village of Willowbrook by writing to 7760 Quincy Street, Willowbrook, Il 60527 or call 920-2238 not later than five (5) days prior to the scheduled termination date.

If you do not satisfy the bill or contact me, your water service will be automatically terminated.

Sincerely,

Timothy J. Halik
Director of Municipal Services

TJH:pkp



"A Place of American History"



Village of Willowbrook

7760 Quincy Street
Willowbrook, IL 60527-5594

Phone: (630) 323-8215 • Fax: (630) 323-0787 • www.willowbrookil.org

August 26, 2011

Mayor

Robert A. Napoli

Village Clerk

Leroy R. Hansen

Ms. Oana Gabriel
7632 Virginia Ct
Willowbrook Il 60527

Re: Account No. 111865.001
Delinquent Water Bill

Dear Ms. Gabriel:

Please be advised that your water bill is now delinquent in the amount of \$120.30. This amount now includes a \$25.00 fee pursuant to Section 6-8-5 of the Village of Willowbrook Code. This \$25.00 is added to all accounts delinquent 45 or more days after the billing date. This amount also includes all other penalties pursuant to Section 6-8-5 of the Village Code. Your failure to satisfy the total amount of this delinquency on or before September 26, 2011, will result in the immediate termination of your water service.

Should your water service be terminated, Section 6-8-8 of the Village Code provides that a \$70.00 non-refundable reinstatement fee be charged. Said \$70.00 reinstatement fee shall be paid in addition to all delinquent bills and all penalties thereon before water service will be reinstated.

If you have any questions concerning your water bill, or if you wish to arrange a hearing before the President and Board of Trustees to contest the termination of your water service, please contact me at the Village of Willowbrook by writing to 7760 Quincy Street, Willowbrook, Il 60527 or call 920-2238 not later than five (5) days prior to the scheduled termination date.

If you do not satisfy the bill or contact me, your water service will be automatically terminated.

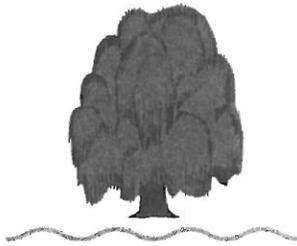
Sincerely,

Timothy J. Halik
Director of Municipal Services

TJH:pkp



"A Place of American History"



Village of Willowbrook

7760 Quincy Street
Willowbrook, IL 60527-5594

Phone: (630) 323-8215 • Fax: (630) 323-0787 • www.willowbrookil.org

August 26, 2011

Mayor

Robert A. Napoli

Mr. & Mrs. Robert Leone
7630 Eleanor Pl
Willowbrook Il 60527

Village Clerk

Leroy R. Hansen

Re: Account No. 111395.000
Delinquent Water Bill

Dear Mr. & Mrs. Leone:

Please be advised that your water bill is now delinquent in the amount of \$139.57. This amount now includes a \$25.00 fee pursuant to Section 6-8-5 of the Village of Willowbrook Code. This \$25.00 is added to all accounts delinquent 45 or more days after the billing date. This amount also includes all other penalties pursuant to Section 6-8-5 of the Village Code. Your failure to satisfy the total amount of this delinquency on or before September 26, 2011, will result in the immediate termination of your water service.

Should your water service be terminated, Section 6-8-8 of the Village Code provides that a \$70.00 non-refundable reinstatement fee be charged. Said \$70.00 reinstatement fee shall be paid in addition to all delinquent bills and all penalties thereon before water service will be reinstated.

If you have any questions concerning your water bill, or if you wish to arrange a hearing before the President and Board of Trustees to contest the termination of your water service, please contact me at the Village of Willowbrook by writing to 7760 Quincy Street, Willowbrook, Il 60527 or call 920-2238 not later than five (5) days prior to the scheduled termination date.

If you do not satisfy the bill or contact me, your water service will be automatically terminated.

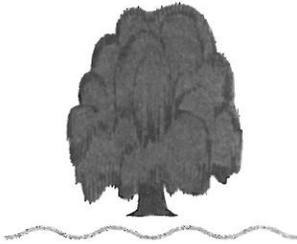
Sincerely,

Timothy J. Halik
Director of Municipal Services

TJH:pkp



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August 26, 2011

Mayor

Robert A. Napoli

Village Clerk

Leroy R. Hansen

Mr. James Mandros
7546 Clarendon Hills Rd #1D
Willowbrook Il 60527

Re: Account No. 110990.000
Delinquent Water Bill

Dear Mr. Mandros:

Please be advised that your water bill is now delinquent in the amount of \$99.16. This amount now includes a \$25.00 fee pursuant to Section 6-8-5 of the Village of Willowbrook Code. This \$25.00 is added to all accounts delinquent 45 or more days after the billing date. This amount also includes all other penalties pursuant to Section 6-8-5 of the Village Code. Your failure to satisfy the total amount of this delinquency on or before September 26, 2011, will result in the immediate termination of your water service.

Should your water service be terminated, Section 6-8-8 of the Village Code provides that a \$70.00 non-refundable reinstatement fee be charged. Said \$70.00 reinstatement fee shall be paid in addition to all delinquent bills and all penalties thereon before water service will be reinstated.

If you have any questions concerning your water bill, or if you wish to arrange a hearing before the President and Board of Trustees to contest the termination of your water service, please contact me at the Village of Willowbrook by writing to 7760 Quincy Street, Willowbrook, Il 60527 or call 920-2238 not later than five (5) days prior to the scheduled termination date.

If you do not satisfy the bill or contact me, your water service will be automatically terminated.

Sincerely,

Timothy J. Halik
Director of Municipal Services

TJH:pkp



"A Place of American History"



Village of Willowbrook

7760 Quincy Street
Willowbrook, IL 60527-5594

Phone: (630) 323-8215 • Fax: (630) 323-0787 • www.willowbrookil.org

August 26, 2011

Mayor

Robert A. Napoli

Village Clerk

Leroy R. Hansen

Ms. Colleen O'Connell
6648 Snug Harbor Dr
Willowbrook Il 60527

Re: Account No. 112215.003
Delinquent Water Bill

Dear Ms. O'Connell:

Please be advised that your water bill is now delinquent in the amount of \$126.91. This amount now includes a \$25.00 fee pursuant to Section 6-8-5 of the Village of Willowbrook Code. This \$25.00 is added to all accounts delinquent 45 or more days after the billing date. This amount also includes all other penalties pursuant to Section 6-8-5 of the Village Code. Your failure to satisfy the total amount of this delinquency on or before September 26, 2011, will result in the immediate termination of your water service.

Should your water service be terminated, Section 6-8-8 of the Village Code provides that a \$70.00 non-refundable reinstatement fee be charged. Said \$70.00 reinstatement fee shall be paid in addition to all delinquent bills and all penalties thereon before water service will be reinstated.

If you have any questions concerning your water bill, or if you wish to arrange a hearing before the President and Board of Trustees to contest the termination of your water service, please contact me at the Village of Willowbrook by writing to 7760 Quincy Street, Willowbrook, Il 60527 or call 920-2238 not later than five (5) days prior to the scheduled termination date.

If you do not satisfy the bill or contact me, your water service will be automatically terminated.

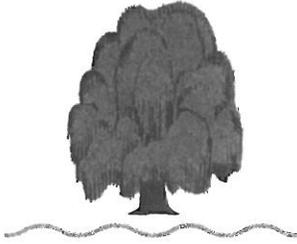
Sincerely,

Timothy J. Halik
Director of Municipal Services

TJH:pkp



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Village of Willowbrook

7760 Quincy Street
Willowbrook, IL 60527-5594

Phone: (630) 323-8215 • Fax: (630) 323-0787 • www.willowbrookil.org

August 26, 2011

Mayor

Robert A. Napoli

Village Clerk

Leroy R. Hansen

Mr. & Mrs. Richard Pena
7742 Blackberry Ln
Willowbrook Il 60527

Re: Account No. 110400.001
Delinquent Water Bill

Dear Mr. & Mrs. Pena:

Please be advised that your water bill is now delinquent in the amount of \$136.30. This amount now includes a \$25.00 fee pursuant to Section 6-8-5 of the Village of Willowbrook Code. This \$25.00 is added to all accounts delinquent 45 or more days after the billing date. This amount also includes all other penalties pursuant to Section 6-8-5 of the Village Code. Your failure to satisfy the total amount of this delinquency on or before September 26, 2011, will result in the immediate termination of your water service.

Should your water service be terminated, Section 6-8-8 of the Village Code provides that a \$70.00 non-refundable reinstatement fee be charged. Said \$70.00 reinstatement fee shall be paid in addition to all delinquent bills and all penalties thereon before water service will be reinstated.

If you have any questions concerning your water bill, or if you wish to arrange a hearing before the President and Board of Trustees to contest the termination of your water service, please contact me at the Village of Willowbrook by writing to 7760 Quincy Street, Willowbrook, Il 60527 or call 920-2238 not later than five (5) days prior to the scheduled termination date.

If you do not satisfy the bill or contact me, your water service will be automatically terminated.

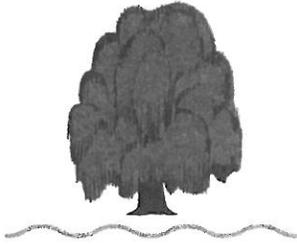
Sincerely,

Timothy J. Halik
Director of Municipal Services

TJH:pkp



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Village of Willowbrook

7760 Quincy Street
Willowbrook, IL 60527-5594

Phone: (630) 323-8215 • Fax: (630) 323-0787 • www.willowbrookil.org

August 26, 2011

Mayor

Robert A. Napoli

Village Clerk

Leroy R. Hansen

Mr. & Mrs. Reynaldo Robles
7613 Arlene Ave
Willowbrook Il 60527

Re: Account No. 112695.000
Delinquent Water Bill

Dear Mr. & Mrs. Robles:

Please be advised that your water bill is now delinquent in the amount of \$160.17. This amount now includes a \$25.00 fee pursuant to Section 6-8-5 of the Village of Willowbrook Code. This \$25.00 is added to all accounts delinquent 45 or more days after the billing date. This amount also includes all other penalties pursuant to Section 6-8-5 of the Village Code. Your failure to satisfy the total amount of this delinquency on or before September 26, 2011, will result in the immediate termination of your water service.

Should your water service be terminated, Section 6-8-8 of the Village Code provides that a \$70.00 non-refundable reinstatement fee be charged. Said \$70.00 reinstatement fee shall be paid in addition to all delinquent bills and all penalties thereon before water service will be reinstated.

If you have any questions concerning your water bill, or if you wish to arrange a hearing before the President and Board of Trustees to contest the termination of your water service, please contact me at the Village of Willowbrook by writing to 7760 Quincy Street, Willowbrook, Il 60527 or call 920-2238 not later than five (5) days prior to the scheduled termination date.

If you do not satisfy the bill or contact me, your water service will be automatically terminated.

Sincerely,

Timothy J. Halik
Director of Municipal Services

TJH:pkp



"A Place of American History"

Village of Willowbrook

BOARD MEETING

AGENDA ITEM - HISTORY/COMMENTARY

ITEM TITLE:

A RESOLUTION AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR THE 2011 PARK IDENTIFICATION SIGN REPLACEMENT PROJECT – WOODMASTER GRAPHICS

AGENDA NO.

6

AGENDA DATE: 09/26/11

STAFF REVIEW: Kristin L. Violante,
Supt. of Parks & Recreation

SIGNATURE:

Kristin L. Violante

LEGAL REVIEW: N/A

SIGNATURE:

N/A

RECOMMENDED BY: Tim Halik,
Village Administrator

SIGNATURE:

Tim Halik

REVIEWED & APPROVED BY COMMITTEE: YES on 9/12/11 NO N/A

ITEM HISTORY (ACTIONS RELATED TO THIS ITEM, OTHER PERTINENT HISTORY, ETC.)

During the FY 2011/12 Budget Workshop there was discussion of funding the replacement of park identification signs within the capital improvement budget. This discussion was based on pictures and input received from past Superintendent of Parks and Recreation, Wally Righton. He determined that 1/3 of the park signs (5 out of 15) were in poor condition and approximately 1/2 (7 out of 14) in fair condition. \$20,500 was ultimately added in the current capital budget for replacement of the existing signs with new signs.

After lengthy discussions at commission meetings since January of 2011, the Parks and Recreation Commission have decided on a final sign design and has recommended acceptance of a proposal. The Commission has chosen Woodmaster Graphics to design and complete the signs at a total cost of \$18,507. The proposal includes thirteen (13) new signs having an overall size of 30”h x 56”w, two (2) new signs for Borse Community Park at 29”h x 120”w, and four (4) new cedar posts for signs that do not currently have posts. To reduce labor fees, the Public Services Department will take down the existing signs and put up the new signs. Woodmaster Graphics will deliver the new signs and haul away the old signs which will save the Village delivery and disposal fees.

This project was presented to the Municipal Services Committee on Monday, September 12 and recommended for approval.

ITEM COMMENTARY (BACKGROUND, DISCUSSION, RECOMMENDATIONS, ETC.)

Based upon the current condition and appearance of the current park signs, staff recommends entering into a contract with Woodmaster Graphics to complete the sign replacement project in the amount of \$18,507. This company has received positive references; and a review of recent projects display excellent quality and craftsmanship on behalf of the manufacturer. The funds for this project will be expended from the following:

<u>FUND</u>	<u>ACCOUNT</u>	<u>DESCRIPTION</u>	<u>BUDGET</u>
Parks – Cap. Improve.	01-20-595-695	Park Improve. – Neighborhood. Parks	\$46,000.00

ACTION PROPOSED:

Adopt resolution.

RESOLUTION NO. 11-R-_____

A RESOLUTION AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR THE 2011 PARK IDENTIFICATION SIGN REPLACEMENT PROJECT-WOODMASTER GRAPHICS.

BE IT RESOLVED by the Mayor and Board of Trustees of the Village of Willowbrook, DuPage County, Illinois, that the Mayor and Village Clerk be and the same are hereby authorized and directed to accept the proposal from Woodmaster Graphics on a material basis for the 2011 Park Identification Sign Replacement Project in an amount set forth in the proposal attached hereto as Exhibit "A" which is, by this reference, expressly incorporated herein.

ADOPTED and APPROVED this 26th day of September, 2011

APPROVED:

Mayor

ATTEST:

Village Clerk

ROLL CALL VOTE: AYES: _____
 NAYS: _____
 ABSTENTIONS: _____
 ABSENT: _____



WoodMaster Graphics™

Excellence in wood signage since 1971

PROPOSAL

8/26/2011 _____ This proposal is valid for 30 days from this date

**Willowbrook Parks & Recreation Dept.
Attn: Kristin Violante**

Kristin:

We propose to furnish you two (2) 29"h x 120"w one sided sandblasted wooden signs for parks per the attached layout. Final copy and colors to be determined. The cost for these signs is \$2013 each.

We also propose to furnish thirteen (13) 30"h x 56"w 1 sided sandblasted wooden signs for parks per the previously submitted layouts. Final copy and colors to be determined. The cost for these signs is \$1097 each. All of the above signs to be manufactured from clear heart vertical grained western red cedar and finished with Sherwin Williams highest quality wood finishes and also One Shot and Chromatic sign enamels. The text *PARK CLOSES AT DUSK* to be applied with reflective vinyl on all signs. Exact color to be determined.

Two (2) 4" x 4" x 10 foot treated posts, and two (2) 4" x 4" x 12 foot treated posts painted to match sign borders are \$55 each.

Prices do not include delivery or installation. Call if you have any questions.

Chuck Schepel

This is a legally binding contract. Contractual laws of the State of Illinois apply.

I accept the proposal as shown above.

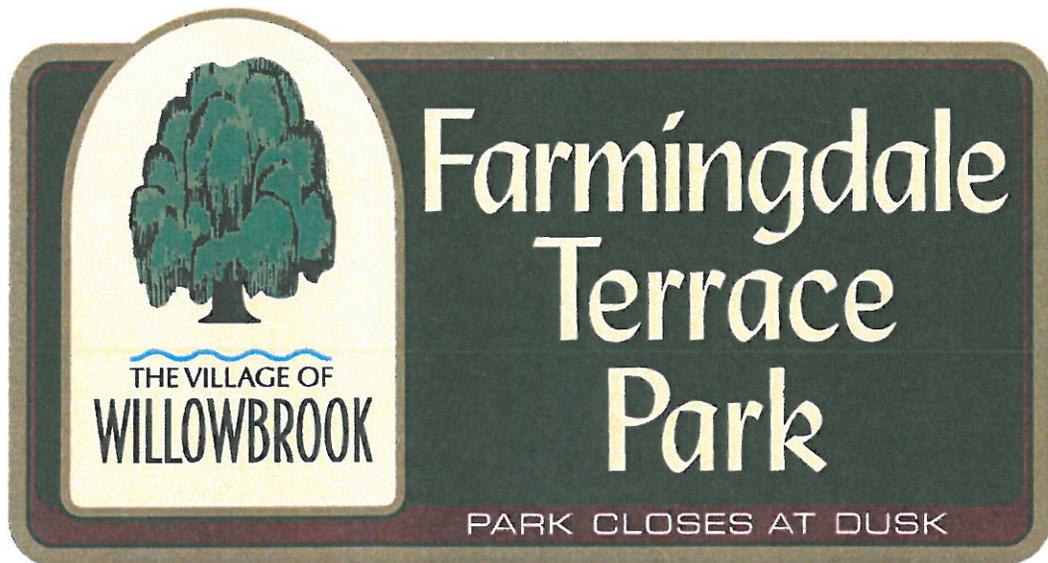
X

_____ authorized signature

_____ date

_____ printed name of signatory

**3149 Glenwood Dyer Road Lynwood Illinois 60411
708/758-1441 email: woodsignman@yahoo.com**



**WoodMaster
Graphics**

This artwork
is the sole property
of WoodMaster Graphics.

Unauthorized use may
result in prosecution.

customer _____ date _____

scale _____ drawn by _____ drawing no. _____

approved by _____

3149 Glenwood Dyer Rd Lynwood IL 60411 708/758-1441

Recommendation #1
Woodmaster Graphics

Doug Boehm – Superintendent of Parks & Planning, Homewood-Flossmoor Park District

Comments from Doug:

The Homewood Flossmoor Park District's golf course used Woodmaster Graphics for 7 golf course signs and has had no issues. The signs are approximately 3 years old, are of a great quality and have shown no evidence of color fade. After seeing the excellent signs the golf course had, Doug decided to use Woodmaster Graphics for park signs. The HFPD is currently in the 3rd year of a 5 year sign replacement plan with Woodmaster Graphics. Doug said Chuck Schepel is "incredible to work with", does "fantastic work" and is budget conscious. He stated Chuck is concerned about the quality of the sign and therefore provides an "awesome" quality of sign. The park signs have shown no evidence of fading. Doug stated there is section of town where park signs were continually having graffiti spray painted on them. Doug indicated that Chuck worked with the park district to find the appropriate material that allows graffiti to be easily washed off. **See attached picture for Apollo Park.**

Recommendation #2
Woodmaster Graphics

Angela Ferrentino – Division Manager – Facilities, Elmhurst Park District

Comments from Angela:

Angela stated she recently started using Chuck because the in-house signs Elmhurst had created were constantly being vandalized and broken by neighborhood kids. She stated that the signs Chuck manufactures are of a better quality and harder to destroy. She stated Woodmaster Graphics is a great company to work with, produce high quality of signs, and work within an agency's budget. She also stated that the "turn around" time is quick. **See attached pictures for Ben Allison Park.**

Recommendation #2
Woodmaster Graphics

Mary Joan Dickson – Park Director – Cedar Lake, Indiana, Parks and Recreation

Comments from Mary Joan:

Mary Joan indicated that their old park signs were the old routed, wood kind. She said they gave no identification to the parks. They blended in with the parks. She stated the new signs stand out and give a true identification to the parks. She said they are very durable. They are turquoise, brown and white with the Village Logo at the top. During the past four years they have had the signs there have been no

problems. She says their Parks and Recreation Department is on a tight budget and Woodmaster Graphics worked within their budget. The Department orders 3 new signs a year. She said the turnaround time is "pretty quick". She stated that Chuck Schepel from Woodmaster Graphics held her signs for approximately 3 months at his shop while Ms. Dickson was in the hospital and until her maintenance department could install the signs. **See attached pictures for Bartlett and Potawatomi Parks.**



Homewood-Flossmoor
Park District

Apollo
Park

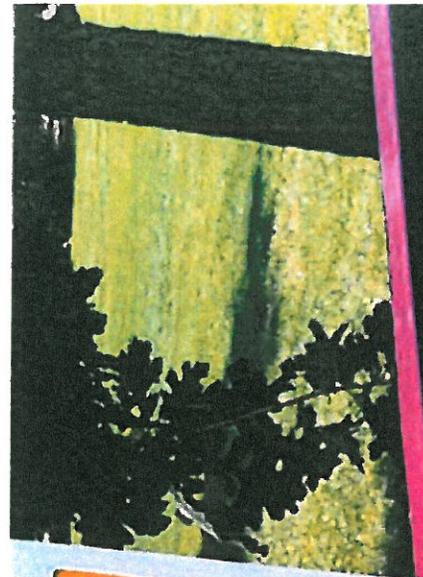
THIS PARK LAND WAS ACQUIRED
THROUGH THE FEDERAL
LANDS TO PARKS PROGRAM
OF THE UNITED STATES
DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE
FOR USE BY THE GENERAL PUBLIC



**Elmhurst
Park District**

BEN ALLISON PARK

Park Open Sunrise to Sunset



Ein Park

ALLES







POTAWATOMI
PARK

BETTER LAKE PARKS

PERMISSION UNIT



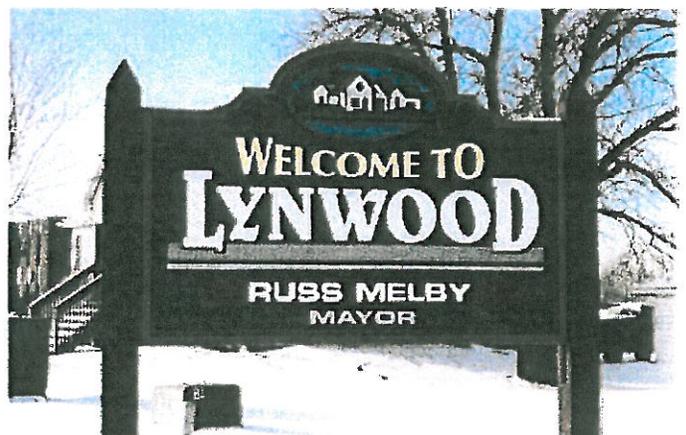
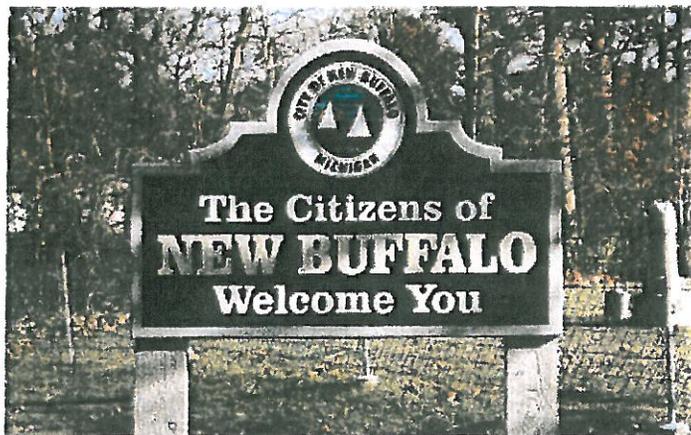
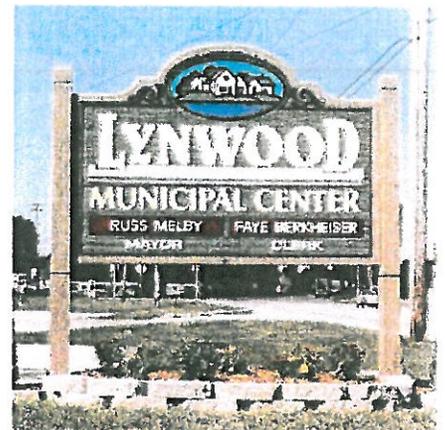
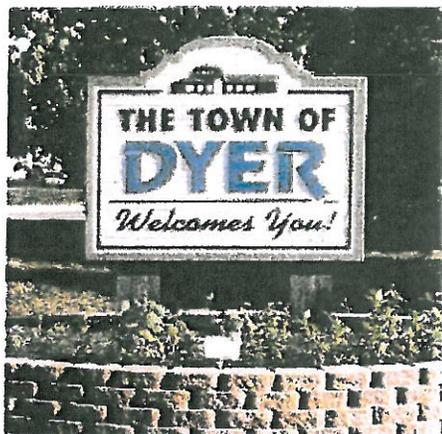


Call Park

TOWN OF LEESVILLE RECREATION DEPARTMENT
BARTLETT PARK



DISTINCTIVE Municipal Signage



WoodMaster Graphics is a leader in wood signage technology. Since 1971 we have been designing and manufacturing award winning signs that not only look great, but stand the test of time.

If you are looking for a new identity for your community, parks department or any other community identification, look no further. Join the thousands of satisfied customers who have specified WoodMaster Graphics quality signage since 1971.



WoodMaster
Graphics™

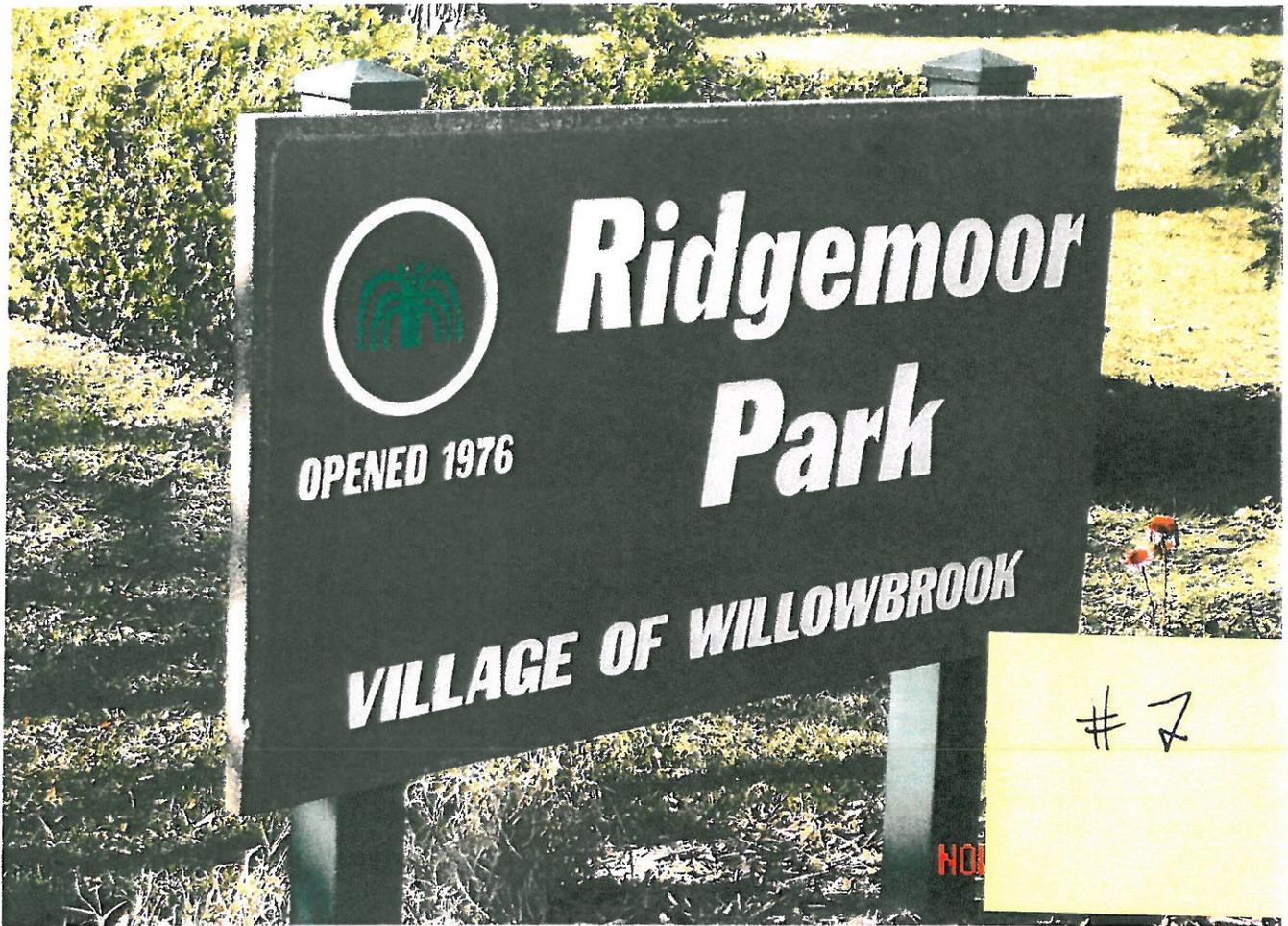
3149 GLENWOOD DYER ROAD LYNWOOD ILLINOIS 60411
708/758-1441 800/223-5888 FAX 708/758-1322

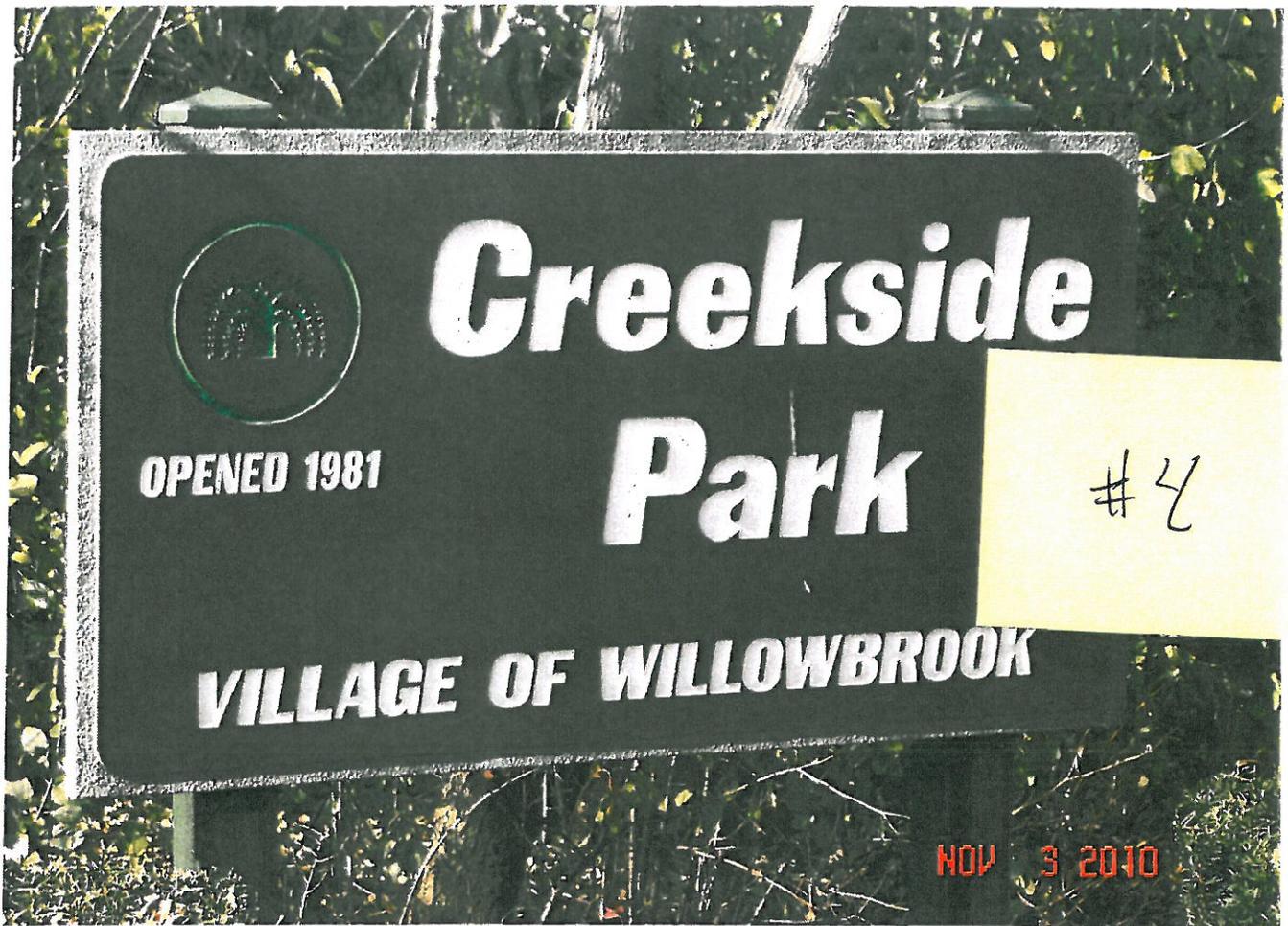
Signage Replacement Project

<u>30" x 56" signs</u>	<u>Condition</u>	1 – good; 2 – fair; 3- poor
1. Roger's Glen Park	3	
2. Ridgemoor Park	2	
3. Ridgemoor Park	3	
4. Creekside Park	1	
5. Creekside Park	3	
6. Waterford Park	3	
7. Farmingdale Terrace Park	3	
8. Willow Pond	2	
9. Willow Pond	2	
10. Prairie Trail Park	2	
11. Prairie Trail Park	2	
12. Lake Hinsdale Park	1	
13. Midway Park (new sign)	-	(will need 2 posts similar to other signs)
<u>120" x 29" signs (2)</u>		
14. Borse Community Park	2	
15. Borse Community Park	2	

Summary: Good (2); Fair (7); Poor (5)









#6

NOV 3 2010



#8

NOV 3 2010



#12

NOV 3 2010



#3

NOV 3 2010

10



11



#9

VILLAGE OF WILLOWBROOK

BOARD MEETING AGENDA ITEM - HISTORY/COMMENTARY

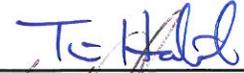
ITEM TITLE:

A RESOLUTION WAIVING THE COMPETITIVE BIDDING PROCESS AND AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR APPRAISAL SERVICES – REALTY VALUE CONSULTANTS, INC.

AGENDA NO. 7

AGENDA DATE: 9/26/11

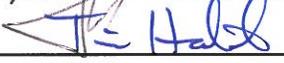
STAFF REVIEW: Tim Halik,
Village Administrator

SIGNATURE: 

LEGAL REVIEW: William Hennessy, Village Attorney

SIGNATURE: 

RECOMMENDED BY: Tim Halik,
Village Administrator

SIGNATURE: 

REVIEWED & APPROVED BY COMMITTEE: YES NO N/A

ITEM HISTORY (ACTIONS RELATED TO THIS ITEM, OTHER PERTINENT HISTORY, ETC.)

On September 13, 2010, the Village Board received a recommendation from the Plan Commission to support Village efforts to work with various private property owners to secure interests in their properties in an effort to enhance the Village's open space opportunities. Among the list of identified first priority parcels included the properties located west of Community Park. The Village Board then adopted a Resolution (No. 10-R-37 dated October 25, 2010) authorizing staff to investigate and negotiate ownership interests in the identified properties.

On November 5, 2010, certified letters were sent to nine (9) individual property owners requesting a meeting to discuss the eventual acquisition of the identified parcels. Between December 2010 and May 2011, staff made contact with and/or arranged meetings with the various property owners to discuss the potential acquisition of the parcels. Several owners were open to considering various acquisition alternatives. However, during our discussions, several of the property owners requested that the Village provide appraisals of their properties to assist them in making a decision.

Throughout the month of July 2011, the Village Attorney and Village Administrator met with four (4) individual appraisal firms to share the specifics of our project and to solicit feedback on the proper methodology that should be used in performing the appraisals. Using this information, a Request for Proposal (RFP) document was drafted by staff and reviewed by the Village Attorney. The RFP was distributed on August 9th and proposals were due back on August 22nd. Three (3) proposals were submitted prior to the deadline, which are summarized on the attached sheet.

ITEM COMMENTARY (BACKGROUND, DISCUSSION, RECOMMENDATIONS, ETC.)

Staff recommends that the proposal received from Realty Value Consultants, Inc. in the amount of \$25,000 be accepted for this project. The proposal amount is not open-ended, the vendor was quick to grasp the details of our project, and very helpful in identifying a proper appraisal methodology that could be used. Although not budgeted for, funds for this project may be expended from the following account:

<u>FUND</u>	<u>ACCOUNT</u>	<u>DESCRIPTION</u>	<u>BUDGET</u>
Admin – Capital Expend.	01-10-485-651	Land Acquisition	\$0

ACTION PROPOSED: Adopt resolution.

Land Acquisition RFPs

- Distributed: Tuesday, August 9, 2011
- Due: Monday, August 22, 2011
- Three (3) received:

VENDOR	ADDRESS	PROPOSAL AMOUNT	QUALIFIED SUBMITTAL?
Associated Property Counselors, Ltd.	15028 S. Cicero Avenue, Suite L Oak Forest, IL 60452	\$12,000 Plus hourly fees as required	Yes
Realty Value Consultants, Inc.	6915 W. Cermak Road, Suite C Berwyn, IL 60402	\$25,000	Yes
Lorenz and Associates, Ltd.	5901 N. Cicero Avenue, Suite 601 Chicago, IL 60646	\$44,500	Yes

RESOLUTION NO. 11-R-_____

A RESOLUTION WAIVING THE COMPETITIVE BIDDING PROCESS AND AUTHORIZING THE MAYOR AND VILLAGE CLERK TO ACCEPT A PROPOSAL FOR APPRAISAL SERVICES – REALTY VALUE CONSULTANTS, INC.

BE IT RESOLVED by the Mayor and Board of Trustees of the Village of Willowbrook, DuPage County, Illinois, that the competitive bidding process be waived and that the Mayor and Village Clerk be and the same are hereby authorized and directed to accept the proposal from Realty Value Consultants, Inc. for the completion of a series of property appraisals in the amount of \$25,000.00, as set forth in the proposal attached hereto as Exhibit "A" which is, by this reference, expressly incorporated herein.

ADOPTED and APPROVED this 26th day of September, 2011

APPROVED:

Mayor

ATTEST:

Village Clerk

ROLL CALL VOTE:

AYES: _____

NAYS: _____

ABSTENTIONS: _____

ABSENT: _____



Village of Willowbrook, Illinois
APPRAISAL PROPOSAL FORM

RECEIVED
AUG 22 2011
By T. HALIK
@ 11:00 AM

Proposal Amount for Appraisal Reports:

For Residentially Zoned Properties as Described: \$ 25,000 (See attached)

Firm Name: Realty Value Consultants, Inc.

Contact Person: John H. Urubek

Telephone Number: 708-788-7272

Fax Number: 708-788-5088

Address: 6915 W. Cermak, Ste C, Berwyn, IL 60402

Authorized Signature: John H. Urubek

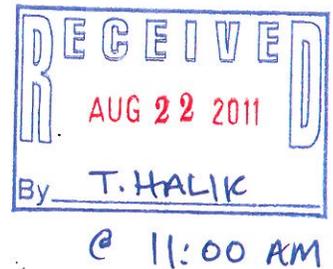
Title: President

Date and Time: 9/21/2011 9:00AM

Please include as ATTACHMENT C, a copy of the appraiser's certification certificate and a statement by the appraiser, certified by the appraiser as true and correct, setting forth the appraiser's qualifications, general appraisal experience, special experience in appraising properties involved in this proposal and other information pertinent to establishing his/her qualifications, including professional membership.



SUMMARY
REQUEST FOR PROPOSALS (RFP)
Village of Willowbrook, Illinois



Proposals Due: On or before Monday, August 22, 2011 at 12:00 p.m. by hand delivery or certified mail to:

Tim Halik, Village Administrator
Village of Willowbrook
7760 Quincy Street
Willowbrook, IL 60527
(630) 920-2261

Scope of Work: To appraise residentially zoned properties within the Village of Willowbrook, Illinois, at their Fair Market Value within the project area depicted on ATTACHMENT A. The appraisal shall be structured to include values of each of the following acquisition options:

- A. One market value opinion for each of the following: Eight (8) individual parcels identified later herein on ATTACHMENT A as Parcels 215, 221, 229, 233, 222, 230, 234, and 7601. Each valuation should include all the land for one specific parcel and any existing single-unit residence.
- B. One contributory value opinion for each of the following: Approximately the rear half of six (6) individual parcels identified later herein on ATTACHMENT A as Parcels 221, 229, 233, 222, 230, and 234. Each of these six valuations should include all the land for one parcel except a portion that measures 150 feet along the street frontage to a 200 foot depth. In essence, these six valuations should include roughly the rear half of the land for one specific parcel; no residence now exist on this land.
- C. One market value opinion for the following: All the land that constitutes the rear half of six (6) parcels identified later herein on ATTACHMENT A as Parcels 221, 229, 233, 222, 230, and 234 plus all the land for parcel 7601. This single valuation should be based on the assumption that all the land,
 - i. is vacant,
 - ii. is assembled under one ownership, and
 - iii. is suitable for a new subdivision intended for single-unit, detached residences.

(Note: No existing or proposed residences should be included in valuation "C".)

A hypothetical subdivision site plan depicting 6 to 7 individual home sites along with associated costs for public improvements will be provided to the appraiser within 3 weeks following the award of this valuation project to an appraisal company. Public improvements include but are not limited to street paving, curbs, sewer main extension, water main extension, storm sewer extension, public sidewalks, street lights, etc.

The detailed appraisal shall reflect nationally recognized appraisal standards. An appraisal must contain sufficient documentation, including valuation data and the appraiser's analysis of that data, to support his or her opinion of value. At a minimum, a detailed appraisal report shall contain the items listed in ATTACHMENT B.

Timeline:

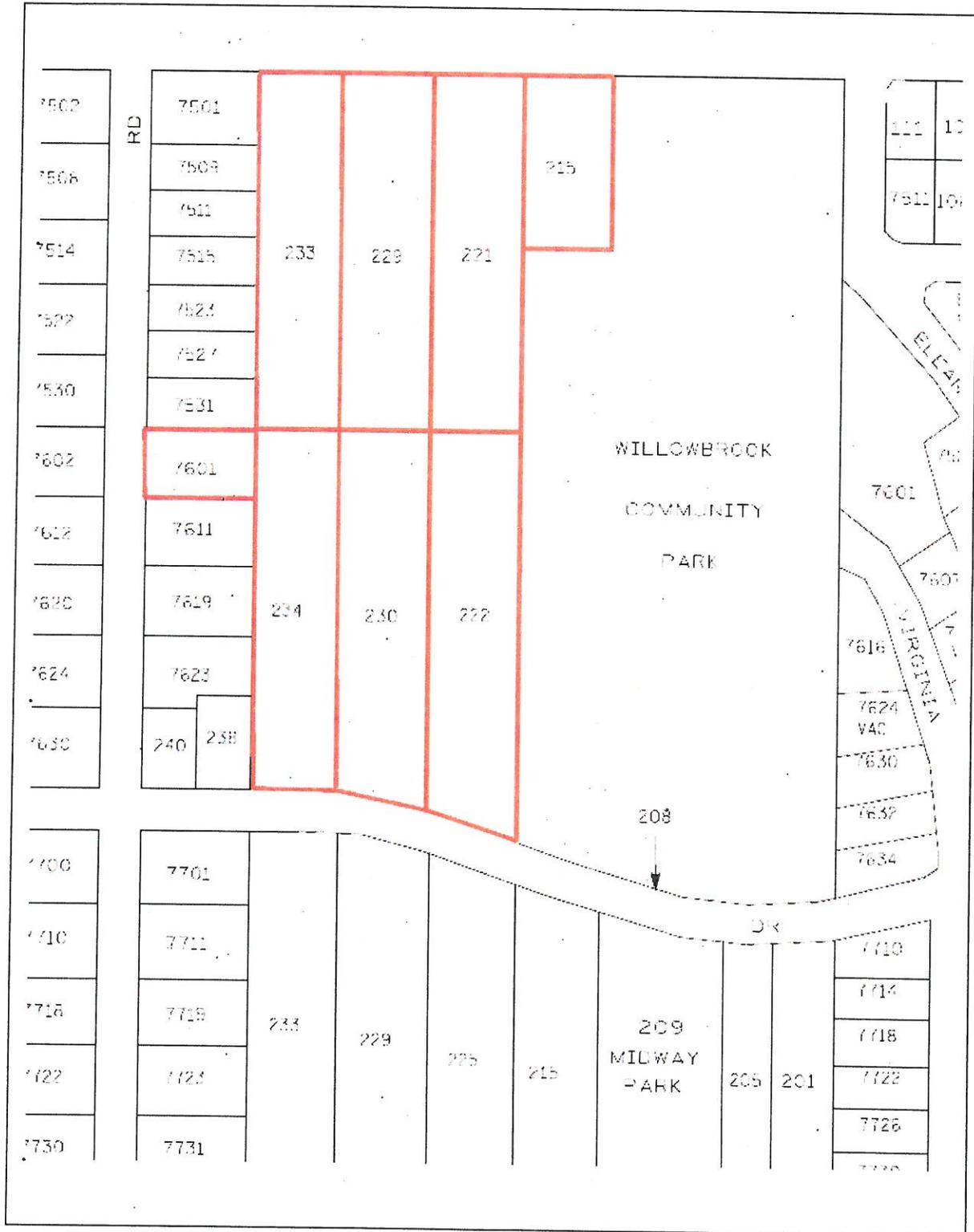
Upon acceptance by the Village of a Proposal for Services, the Appraiser shall prepare and deliver completed appraisal reports for all identified properties to the Village within 45 days. If the reports are not completed and delivered within the required time, a late charge of 5% of the Agreement will be assessed each day the reports are not completed and delivered, unless arrangements are made in writing with the Village before the required time has expired.

**Appraiser's
Qualifications:**

The Appraiser and members of their firm shall be a State Certified Residential or General Appraiser within the State of Illinois. The individual and their firm must be in good standing with the Illinois Office of Banks and Real Estate (OBRE). The Appraiser and members of their firm must complete the appraisals in a **Complete Summary** or **Complete Self-Contained Report** as identified and described by the Uniform Standards of Professional Appraisal Practice (USPAP) as outlined and defined in the 2010/11 Edition of USPAP. Each appraisal should meet at **an absolute minimum** Standards Rule #1 and #2 in the case of Real Estate Property Appraisal. Preference will be given to those recognized by appropriate Professional Organizations.

A contract (fee) appraiser making a detailed appraisal under a contract executed after December 31, 1992, must be certified under State Law implementing Title XI of the Financial Institutions Reform, Recovery and Enforcement Act of 1989 (FIRREA).

ATTACHMENT A





ATTACHMENT B

State of Illinois
Village of Willowbrook, Illinois

SPECIFICATIONS FOR UNIFORM RESIDENTIAL APPRAISAL REPORT

GENERAL

In the preparation of the report, the appraiser shall follow current professional practices giving consideration to three approaches to value, unless specified in these instructions:

- 1 - COST LESS DEPRECIATION APPROACH
- 2 - INCOME APPROACH
- 3 - COMPARATIVE (OR MARKET) APPROACH

Should certain approaches or requirements covered in these specifications not be applicable to the assignment, the obligation can be fulfilled by identifying that approach or requirement together with a brief explanation for its omission (i.e. an appraisal involving land value only). Of necessity, supplementary specifications will be furnished requiring additional data in the appraisal of highly specialized properties or other unusual circumstances.

FORMAT

The report shall be bound, in book-fashion, by the left margin, in a durable cover with the identification of the proposed property on the face thereof. The paper used shall be of good grade bond (8 1/2 x 11 inches). All pages shall be numbered consecutively, including all exhibits, and each important heading shall be shown in the Table of Contents. To provide uniformity, the text shall be divided into four parts as outlined below.

PART I – INTRODUCTION

1. Title Page. This shall include:
 - a. Project identification, County, and Parcel identification of the property proposed for acquisition;
 - b. Name of the individual making the report;
 - c. Effective date of the appraisal; and
 - d. Property owner's name, address, and telephone number.
2. Table of Contents.
3. Letter of Transmittal.
4. Photographs. Pictures shall show a front, rear and street grade for the subject and at least the front elevation of the major improvements, plus any unusual features. There should also be views of the abutting properties on either side and the property directly opposite. When a large

number of buildings are involved, including duplicates, one picture may be used for each type. Views of the best comparables should be included whenever possible. Front views of all comparable sales should be included. All photographs shall include captions and be in color.

5. Statement of Limiting Conditions. The appraiser should provide concise statements of all assumptions including the following specifics:

- a. That the Title to the property is marketable;
- b. That the appraiser assumes no responsibility for legal matters;
- c. That all data furnished by others are presumed correct; and
- d. Any other assumptions and/or limitations. These assumptions must not be hidden in the report so as to mislead the reader of the report.

6. References. If preferred, these can be shown with the applicable approach.

PART II - FACTUAL DATA

7. Purpose of the Appraisal. This shall include the reason for the appraisal, and a definition of both Market Value (and any other values required) and property rights appraised.

8. Legal Description. This description shall be so complete as to properly identify the total holding and the portion which is to be acquired. If lengthy, it should be referenced and included in Part IV.

9. Area, City and Neighborhood Data. These data (mostly social and economic) should be kept to a minimum and should include only those facts which are considered to be essential in formulating the appraiser's conclusions as to significant trends. There should be sufficient data to support highest and best use.

10. Project Data.

- a. Site - Describe the soils on the site, the topography, mineral deposits, etc. (a statement must be made concerning the existence or nonexistence of mineral deposits, whether they have commercial value, if mineral rights will be acquired and if not, whether the right to mine and remove same are surface rights).
- b. Improvements and Conditions - This shall be by narrative description, including dimensions of principal buildings and/or improvements. The current physical condition and relative use and obsolescence shall be stated for each item or group appraised and whenever applicable, the repair or replacement requirements to bring the property to usable conditions.
- c. History - State briefly the purpose for which the improvements were designed, dates of original construction and major renovation and/or additions. Include for privately-owned property a TEN YEAR RECORD for each parcel, identifying all sales, recent leases, and if possible offers to buy or sell. If no sale occurred in the past ten years, include a report of the last sale, if available, or advise that there have been no sales in the past ten years.

- d. Assessed Value and Annual Tax Load - Include the current assessment and dollar amount of real estate taxes. If the property is not taxed, the appraiser shall estimate the assessment. In case it is not based upon the tax roll, state the rate and give the dollar amount of the tax estimate.
- e. Utilities/Easements/Restrictions - Give a detailed description of all utilities, easements and/or title restrictions affecting the property and the resultant impact they may have, if any on the site's value and/or use.
- f. Zoning - Describe the zoning for the subject (R-1 Residential) and comparable properties.

PART III - ANALYSIS AND CONCLUSIONS

- 11. Definition and Analysis of Highest and Best Use. The report shall state the highest and best use that can be reasonably made of the property (land and improvements) for which there is a current market. The valuation shall be based on this use. In no case shall the land be appraised on highest and best use and the value of the improvements added when they do not contribute to the fair value of the land under the highest and best use. Such special purpose appraisals are not allowable.
- 12. Land Value. The appraiser's opinion of the value of the land shall be supported by confirmed sales of comparable, or nearly comparable, land having like optimum (highest and best) uses. Differences shall be weighted and explained to show how they indicate the value of the land being appraised. This is usually done in a narrative form wherein adjustments are made for location, time, size, site characteristics, etc. and result in an adjusted sales price. If one or more of the comparables influence the final determination of value, it should be so stated. (It is preferable to include a chart showing each adjustment and the final adjusted sales price.)
- 13. Value Estimate:
 - a. Cost Approach - This section shall be in the form of computative data arranged in sequence, beginning with reproduction or replacement cost, and shall state the source (book and page if a national cost service) of all figures used. The dollar amounts of physical deterioration and functional and economic obsolescence, or the omission of same, shall be explained in narrative form. This procedure may be omitted on improvements, both real and personal, for which only a salvage or scrap value is estimated.
 - b. Income Approach - This shall include adequate factual data to support each figure and factor used and shall be arranged in detail form to show at least:
 - 1. Estimated gross economic rent or income;
 - 2. Allowance for vacancy and credit losses; and
 - 3. An itemized estimate of total expenses including reserves for replacements.

Capitalization of net income shall be the rate prevailing for this type of property and location. The capitalization technique, method and rate used shall be explained in narrative form supported by a statement of sources of rate and factors.

c. Comparative (Market) Approach - All comparable sales used shall be confirmed by the buyer, seller, broker, or other person having knowledge of the price, terms and conditions of sale. Each comparable shall be weighted and explained in relation to the subject property to indicate the reasoning behind the appraiser's final value estimate from this approach.

NOTE: Each comparable sale shall have the same Highest and Best Use as the subject, or, if not, a full explanation is needed.

14. Interpretation and Correlation of Estimates. The appraiser shall interpret the foregoing estimates and shall state his reasons why one or more of the conclusions reached in items 13 (a), (b) and (c) are indicative of the market value of the property.

When correlating two or three approaches, take into account the type of property in relation to the adequacy of the data processed in each approach. This summary should explain the strength and weakness of each approach and influence the weight given to each one. Do not obtain a final estimate of value by averaging the individual indications. Place the greatest emphasis on the approach which most reliably reflects local thinking and marketability. The appraiser shall give the final estimate of value in a definite statement.

15. Affidavit of Appraiser. (Form attached)

PART IV - EXHIBITS AND ADDENDA

16. Location Map. * (Within the project area) this map should be in such detail to clearly identify access to the site and adjacent boundaries.

17. Comparative Sales Data Map. (Show geographic location of the appraised property and the comparative parcels analyzed on one map.) This map must be of sufficient detail as on a county/community map, with the subject property and each comparable property clearly identified to allow the properties to be easily located during the potential on-site inspections by the State Review Appraiser.

18. Details of the Comparative Sales Data. Sales must be identified by data taken from the recorded instrument (if recorded) AND from information obtained from the parties involved. In all cases, the comparable sales properties considered within the appraisal report must be personally visited/inspected (see appraiser affidavit) and color photographs provided for these properties. The following items must be part of the sales identification/description:

- a. Name of grantor and grantee;
- b. Legal/size description of comparable and street address or location description;
- c. Deed book, page number, and county;
- d. Type of instrument (warranty deed, land contract, etc.);
- e. Date of instrument;
- f. Date of sale;
- g. Reservation, descriptions, and deeded restrictions, if noted;
- h. Value of State Transfer Tax Stamps affixed to the instrument;
- i. Sales consideration and terms;

- j. Zoning; classification and comparable sales;
- k. Soil types of comparable sales;
- l. Verification (either buyer, seller, broker, other knowledgeable person); and
- m. Highest and Best Use analysis of comparable sale property.

Additional documented data having a major bearing on valuation of the subject property may include:

- n. Quantity and quality of attached mineral rights;
- o. Quantity and quality of attached water rights; and
- p. Quantity and quality and legal description (or maps of functional boundary) of attached premises, leases, allotments, etc.

19. Plot Plan. *Plan showing the configuration of the property being acquired.

20. Floor Plans. *(When needed to explain the value estimates.)

21. Other Pertinent Exhibits. (Such as location sketches of easements or other fee interests on subject property.)

22. Qualifications. (of all Appraisers and/or Technicians contributing to the report.)

*All maps and plans may be bound as facing pages opposite the description, tabulation, or discussions they concern.

APPRAISER CHECKLIST

PART III - ANALYSIS AND CONCLUSIONS:

- 11. Definition and Analysis of Highest and Best Use
- 12. Land Value
- 13. Value Estimate
 - A. Cost Approach
 - B. Income Approach
 - C. Comparative (Market) Approach
- 14. Interpretation and Correlation of Estimates
- 15. Affidavit of Appraiser (Statement of owner notification, accompaniment, valuation data and value established)
- 16. Location Map (within the project area)
- 17. Comparative Sales Date Map (This map must be of sufficient detail as on a regional map, community map, neighborhood map, with both the subject property and each comparable property clearly identified to allow the properties to be easily found during the potential on-site inspections by the State Review Appraiser.)
- 18. Details of the Comparative Sales Data (All sales must be verified either by the buyer, seller, broker or other knowledgeable person.)

The following items must be a part of the comparable sales identification:

- A. Name of grantor and grantee
- B. Legal/size description of comparable and street address or location description
- C. Deed book, page number and county
- D. Type of instrument
- E. Date of instrument
- F. Date of sale
- G. Reservation, descriptions, deed restrictions, if noted
- H. Value of State Transfer Tax Stamps affixed to the instrument
- I. Sales consideration and terms
- J. Zoning classification and comparable sales
- K. Soil types of comparable sale
- L. Verification (either buyer, seller, broker, other knowledgeable person)
- M. Highest and Best Use of comparable sale property

Additional documentation data having a major bearing on valuation of the subject property may include:

- Quantity and quality of attached mineral rights
- Quantity and quality of attached water rights
- Quantity, quality and legal description (or maps of functional boundary) of attached permits, leases, allotments, etc.

- 19. Plot Plan *
- 20. Floor Plan *
- 21. Other pertinent exhibits (location sketches of easements, other fee interests, etc.)
- 22. Qualifications

* All maps and plans may be bound as facing pages opposite the description, tabulation, or discussions that they concern.

AFFIDAVIT OF APPRAISER

STATE OF ILLINOIS)
) SS
JURISDICTION)

_____, being duly sworn, deposes and says:

That on _____ (date) I personally inspected the property herein appraised. The owner, or his/her representative, was advised of my mission and (did) (did not) accompany me. I personally inspected the comparable sales property considered within this report.

That to the best of my knowledge and belief, the statements contained in this appraisal are true, and the information upon which the opinions expressed therein are based upon is correct, subject to the limiting conditions therein set forth.

That I understand that this appraisal is to be used in connection with the acquisition of said property by the Village of Willowbrook, and that to the best of my knowledge and belief, this appraisal has been made in conformity with the Uniform Appraisal Standards for Federal Land Acquisition's instructions provided me and which are applicable to the appraisal of property involving federal and/or state funding; and that no portion of the value assigned to such property consists of items which are non-compensable under the established law of said State, and that value does not reflect influences of the proposed project.

That neither my employment, nor my compensation for making this appraisal and report are in any way contingent upon the values reported therein.

That I have no direct, indirect, present, or contemplated future personal interest in this property, or in any way benefit from its acquisition.

That I will not reveal the findings and results of this appraisal to anyone other than the proper officials of the Village of Willowbrook, unless authorized by the Village to do so, or unless I am required to do so by due process of law, or until I am released from this obligation by having publicly testified to such findings.

That my opinion of the market value of the property as of _____ is \$ _____ (valuation date)

Signature

(Date report submitted)

Subscribed and sworn to by me this _____ day of _____, 2011.

Notary Public

SEAL

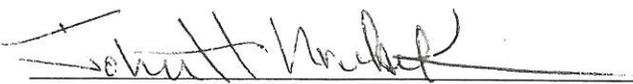


REALTY VALUE CONSULTANTS, INC.
 6915 W. Cermak Road, Suite 2
 Berwyn, IL 60402
 (Bus) 708-788-7272
 (Fax) 708-788-5088
RVCappr@aol.com

Attachment C



Pursuant to the Request for Proposals (RFP) for the Village of Willowbrook, I, John H. Urubek, certify that the following qualifications are true and correct.


 John H. Urubek, MAI, CCIM
 Dated: August 21, 2011



REALTY VALUE CONSULTANTS, INC.
 6915 W. Cermak Road, Suite 2
 Berwyn, IL 60402
 (Bus) 708-788-7272
 (Fax) 708-788-5088
RVCappr@aol.com

Qualifications of John H. Urubek, MAI, CCIM

Overview Over 30 years of extensive experience in the real estate appraisal and consulting profession including commercial, industrial, multi-family, mixed-use, special purpose, and residential properties.

- Unique Qualifiers**
- MAI designation, awarded in 1982.
 - National faculty member for the Appraisal Institute.
 - Extensive valuation experience in many types of real estate up to \$17 million
 - Experienced in expert witness testimony.

Professional Background

Realty Value Consultants
Founder / President
 Berwyn, IL
 (1986 - Present)

Provide appraisal and consulting services on varied residential, commercial, and industrial properties. Developed business to a level requiring a 30 person staff. Successfully completed many assignments with unusual complex challenges.

Priority Valuation Services
Partner / Founder
 Atlanta, GA
 (1999 - 2004)

Affiliated with an established residential appraisal company to establish a premier commercial division. Developed a mission to provide service to individuals and institutions requiring accurate, high quality property evaluations on a diverse range of commercial, industrial, multifamily, and mixed-use properties.

Muriello-Meyer & Assoc
Staff Appraiser
 Elk Grove Village, IL
 (1977 - 1986)

Began as an associate appraiser and quickly progressed to a senior position. Developed broad background in valuing a myriad of different property types. Based on proven record of accomplishment, obtained responsibility of managing investment property division.

Instructorships

- National Instructor for the Appraisal Institute*
- Appraisal Principles
 - Appraisal Procedures
 - Advanced Residential Case Studies
 - Standards of Professional Practice (Certified AQB Instructor)
 - General Appraiser Sales Comparison Approach
 - General Appraiser Site Valuation & Cost Approach
 - General Appraiser Income Approach I
 - General Appraiser Income Approach II
 - Advanced Income Capitalization
 - Advanced Sales and Cost Approaches
 - Advanced Case Studies
 - Computer Enhanced Cash Flow Modeling
 - Real Estate Finance, Statistics, and Valuation Modeling
 - Residential Market Analysis and Highest and Best Use
 - Discount Cash Flow Analysis - Concepts, Issues, and Applications

(Page 2)

Education

- | | |
|---------------------|---|
| <i>Academic</i> | <ul style="list-style-type: none"> • University of Illinois at Chicago, B.A. Degree in Economics |
| <i>Professional</i> | |
| 2009 | <ul style="list-style-type: none"> • General Appraiser Sales Comparison • Using Spreadsheets In Real Estate Appraisals • 7-Hr National USPAP Update Course |
| 2008 | <ul style="list-style-type: none"> • ACO Instructor Training |
| 2007 | <ul style="list-style-type: none"> • General Market Analysis and Highest & Best Use • USPAP Instructor's Recertification Course |
| 2006 | <ul style="list-style-type: none"> • Advanced Residential Report Writing, Parts I & II |
| 2005 | <ul style="list-style-type: none"> • General Market Analysis and Highest & Best Use |
| 2004 | <ul style="list-style-type: none"> • Basic Appraisal Principles |
| 2003 | <ul style="list-style-type: none"> • Real Estate Finance, Statistics, and Valuation Modeling |
| 2003 | <ul style="list-style-type: none"> • Separating Real & Personal Property From Intangible Business Assets |
| 2002 | <ul style="list-style-type: none"> • Advanced Case Studies - Course 550 |
| 2002 | <ul style="list-style-type: none"> • Standards of Professional Practice (AQB Instructor's Program) |
| 2000 | <ul style="list-style-type: none"> • Highest & Best Use and Market Analysis |
| 1999 | <ul style="list-style-type: none"> • Regression Analysis: Concepts & Applications (Seminar) |
| 1999 | <ul style="list-style-type: none"> • General Case Studies: Course 320 |
| 1998 | <ul style="list-style-type: none"> • Fair Lending and the Appraiser (Seminar) |
| 1998 | <ul style="list-style-type: none"> • Standards of Professional Practice: Course I410 |
| 1997 | <ul style="list-style-type: none"> • Appraisal Principles: Course I110 |
| 1994 | <ul style="list-style-type: none"> • Standards of Professional Practice: Course I430 |
| 1994 | <ul style="list-style-type: none"> • Standards of Professional Practice: Course I420 |
| 1994 | <ul style="list-style-type: none"> • Residential Case Studies: Course I210 |
| 1994 | <ul style="list-style-type: none"> • Appraisal Procedures: Course I120 |
| 1992 | <ul style="list-style-type: none"> • Advanced Income Capitalization: Course I510 |
| 1992 | <ul style="list-style-type: none"> • Reviewing Appraisals (Seminar) |
| 1991 | <ul style="list-style-type: none"> • Easement Valuation (Seminar) |
| 1991 | <ul style="list-style-type: none"> • FIRREA & Its Meaning to the Appraiser (Seminar) |

Professional Affiliations, Licenses & Designations

- Certified General Real Estate Appraiser
- State of Illinois, License #553.000403
- MAI Designation - Appraisal Institute, Certificate #06542
- CCIM Designation - Commercial Investment Real Estate Institute, #6604
- Registered Real Estate Salesperson - State of Illinois, License #476-191013
- Illinois Association of Realtors - Member #R9641579687

Related Experience

- Bought and renovated several, small multi-family residences
- Acquired land, then developed new townhomes
- Sold building products for Georgia-Pacific Corp
- Extensive construction background; worked for a contractor for more than 10 yrs
- Ability to read architectural plans



(Page 3)

Committees & Participations

- 2008-Present Member of the Appraisal Institute's National Education Committee
- 2004 Member of project team that designed and developed Appraisal Institute Course 810 - Computer-Enhanced Cash Flow Modeling
- 2001 - 2004 Member of the Appraisal Institute's National Curriculum Committee
- 2001 - 2004 Member of the Appraisal Institute's National Body of Knowledge Committee
- 2002 Member of the Appraisal Institute's National Demonstration Report Grading Committee
- 2002 Participated in a project team that updated Appraisal Institute Course 320 - General Applications

Appraisal Experience

Detailed reports prepared for the following appraisal assignments (partial list)

- \$12,300,000 102 unit, proposed, subsidized, senior citizen's housing center
- 15,500,000 910 unit, existing multi-family development
- 16,800,000 600,000 sq.ft. warehouse
- 9,500,000 320 unit, single family residential subdivision
- 5,400,000 Renovation of 24 up-scale, residential dwellings
- 9,300,000 168 multi-family apartments
- 5,800,000 83,000 sq.ft. office campus
- 1,600,000 Single family detached residence

- Hotels Partial Interests
- Restaurants Airport Hangars
- Car Washes Insurable Values
- Gas Stations Feasibility Studies
- Vacant Land Leasehold Interests
- Funeral Homes Obsolescence Studies
- Nursing Homes Manufacturing Plants
- Rental Surveys Condemnation Appraisals
- Mixed Use Bldgs Special Purpose Facilities
- Shopping Centers Condominiums Conversions

Expert Witness Testimony

Previous court testimony given as an expert witness in the following matters

- Bankruptcy
- Real estate tax protests
- Condemnation
- Zoning
- Divorce



Proposal Breakdown for 15 Reports					
A *	Existing Homes	8 Reports	@	\$950 / Report	\$7,600
B	Research to find contributory value of for surplus land	40 Hours	@	\$150 / Hour	6,000
	Report Writing	6 Reports @	4 Hours Each @	\$150 / Hour	3,600
C	Research and analysis of retail single- family lots for discounted cash flow analysis, research and analysis of raw lots for sales comparison	40 Hours	@	\$150 / Hour	6,000
	Report Writing	1 Report @	12 Hours	@ \$150 / Hour	1,800
					25,000

* Note - For existing single-family home appraisals, only the Sales Comparison Approach will be developed because other 2 approaches do not apply. Assumes access to the interior homes within 15 days of award of contract.

VILLAGE OF WILLOWBROOK

BOARD MEETING AGENDA ITEM - HISTORY/COMMENTARY

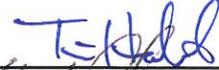
ITEM TITLE:

AN ORDINANCE AUTHORIZING THE AMENDMENT OF THE ELIGIBILITY FOR BENEFITS PROVISIONS IN THE VILLAGE'S EXISTING GROUP BASIC LIFE & ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE POLICY BY ADDING TO THE LIST OF SAID POLICY'S BENEFITTED CLASSES A FIFTH CLASSIFICATION CONSISTING OF ALL THOSE PERSONS APPOINTED TO CERTAIN OF ITS APPOINTIVE OFFICES.

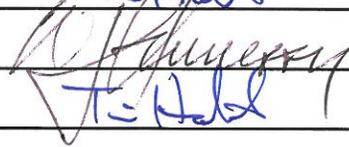
AGENDA NO. 8

AGENDA DATE: 9/26/11

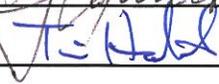
STAFF REVIEW: Tim Halik,
Village Administrator

SIGNATURE: 

LEGAL REVIEW: William Hennessy, Village Attorney

SIGNATURE: 

RECOMMENDED BY: Tim Halik,
Village Administrator

SIGNATURE: 

REVIEWED & APPROVED BY COMMITTEE: YES NO N/A

ITEM HISTORY (ACTIONS RELATED TO THIS ITEM, OTHER PERTINENT HISTORY, ETC.)

Both Village staff and elected officials are cognizant of the unfortunate tragic events which have occurred throughout the nation at community meetings open to the public. In some of the most violent incidents, injuries and loss of life resulted from senseless acts by disgruntled employees and angry members of the general public. Although the Village strives to ensure adequate security during all of our public meetings, we are also aware that such tragic events cannot realistically be avoided in all cases.

Out of concern for our own commission volunteers, potential methods to provide these individuals some level of additional peace-of-mind have been under consideration. This led staff to contact our insurance provider to inquire of life insurance coverage for appointed officials. We learned that our current insurance provider, Reliance Standard, could add a class for appointed officials under our existing Group Basic Life and Accidental Death & Dismemberment policy for employees at a very competitive rate; \$100,000 in life and AD&D coverage could be made available to appointed officials at a cost of \$108/year each (\$9.00/month each). There are a total of sixteen (16) Park Commissioner, Plan Commissioner, and Board of Police Commissioner volunteers that would potentially be offered this benefit. Therefore, the total annual cost to the Village would be \$1,728/year.

These individuals are not otherwise compensated for their time investment to the community. Staff believes that this benefit would represent a very economical way in which to provide our commission volunteers added peace-of-mind when serving the community in their appointed capacity.

ITEM COMMENTARY (BACKGROUND, DISCUSSION, RECOMMENDATIONS, ETC.)

Attached is a Plan Highlight Sheet received from Reliance Standard describing the details of the coverage along with a copy of the Village's current policy for employees. Although not budgeted for, if the Village Board decided to offer this new benefit to appointed officials, funds could be expended from the following account:

<u>FUND</u>	<u>ACCOUNT</u>	<u>DESCRIPTION</u>	<u>BUDGET</u>
Admin - Risk Manage.	01-10-480-274	Insurance - other	\$0

ACTION PROPOSED: Pass ordinance.

Plan Highlights

Village of Willowbrook

Group Basic Life & AD&D Insurance



Eligibility

All Appointed Officials

Coverage

Basic Life & AD&D:

\$100,000

Exclusions

For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to receive a benefit.

Benefit Reductions Due to Age

Age	Original Benefit Reduced to:
70	65%
75	45%
80	30%

Terminates at Retirement

Contribution Requirements

Basic Life & AD&D Coverage is 100% employer paid.

Provisions

- Living Benefit Rider
- Conversion
- Waiver of Premium
- Critical Illness Benefit
- FMLA Benefit
- Bereavement Counseling

WorldNet Travel Assistance is offered in this policy.

This Plan Highlights is a brief description of the important features of the RSL insurance plan. It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-6564, et al.

RELIANCE STANDARD

Life Insurance Company

Home Office: Chicago, Illinois • Administrative Office: Philadelphia, Pennsylvania

POLICYHOLDER: Village of Willowbrook

POLICY NUMBER: GL 673909

EFFECTIVE DATE: July 1, 2010

ANNIVERSARY DATES: July 1, 2011 and each July 1st thereafter.

PREMIUM DUE DATES: The first premium is due on the Effective Date. Further premiums are due monthly, in advance, on the first day of each month.

The Policy is delivered in Illinois and is governed by its laws.

We agree to provide insurance to you in exchange for the payment of premium and a signed Application. The Policy provides benefits for loss of life from injury or sickness. It insures the eligible persons for the amount of insurance shown on the Schedule of Benefits. The insurance is subject to the terms and conditions of the Policy.

The effective date of the Policy is shown above. Insurance starts and ends at 12:01 A.M., Local Time, at your main address. It stays in effect as long as premium is paid when due. The "TERMINATION OF THE POLICY" section of the GENERAL PROVISIONS explains when the insurance can be ended.

The Policy is signed by the President and Secretary.


Secretary


President

Countersigned _____
Licensed Resident Agent

**GROUP LIFE INSURANCE
NON-PARTICIPATING**

RELIANCE STANDARD LIFE INSURANCE COMPANY
Philadelphia, Pennsylvania

GROUP POLICY NUMBER: GL 673909

POLICY EFFECTIVE DATE: July 1, 2010

POLICY DELIVERED IN: Illinois

ANNIVERSARY DATE: July 1st in each year

Application is made to us by: Village of Willowbrook

This Application is completed in duplicate, one copy to be attached to your Policy and the other returned to us.

It is agreed that this Application takes the place of any previous application for your Policy.

Signed at _____ this _____ day of _____

Policyholder: _____ Agent: _____

By: _____ (Signature) _____ (Licensed Resident Agent)

(Title)

Please sign and return.





*BC1COAPGL 67390907/01/2010*RSL

*BC2COAPVillage of Willowbrook

RELIANCE STANDARD LIFE INSURANCE COMPANY
Philadelphia, Pennsylvania

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Policyholder: _____ Agent: _____

By: _____ (Signature) _____ (Licensed Resident Agent)

(Title)

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SCHEDULE OF BENEFITS

NAME OF SUBSIDIARIES, DIVISIONS OR AFFILIATES TO BE COVERED: None

ELIGIBLE CLASSES: Each active, Full-time employee, except any person employed on a temporary or seasonal basis, according to the following classifications:

CLASS 1: Deputy Chief

CLASS 2: Police Commander and Sergeant

CLASS 3: union Employee

CLASS 4: Employee not covered in any other class

INDIVIDUAL EFFECTIVE DATE: The day the person becomes eligible.

MINIMUM PARTICIPATION REQUIREMENTS: Percentage: 100% Number of Insureds: 10

AMOUNT OF INSURANCE:

Basic Life and Accidental Death and Dismemberment:

CLASS 1, 2 & 3: 1.75 times Earnings, rounded to the next higher \$1,000, subject to a maximum of \$200,000.

CLASS 4: 1.75 times Earnings, rounded to the next higher \$1,000, subject to a maximum of \$150,000.

For Insureds age 70 and over, the Amount of Basic Life and Accidental Death and Dismemberment Insurance is subject to automatic reduction. Upon the Insured's attainment of the specified age below, the Amount of Basic Life and Accidental Death and Dismemberment Insurance will be reduced to the applicable percentage. This reduction also applies to Insureds who are age 70 or over on their Individual Effective Date.

Age	Percentage of available or in force amount at age 69
70-74	65%
75-79	45%
80+	30%

The Life amount will be reduced by any benefit paid under the Accelerated Benefit Rider.

CHANGES IN AMOUNT OF INSURANCE: Increases and decreases in the Amount of Insurance because of changes in age, class or earnings (if applicable) are effective on the date of the change.

With respect to increases in the Amount of Insurance, the Insured must be Actively At Work on the date of the change. If an Insured is not Actively At Work when the change should take effect, the change will take effect on the day after the Insured has been Actively At Work for one full day.

CONTRIBUTIONS: Persons: Basic Insurance: 0%

DEFINITIONS

"We," "us" and "our" means Reliance Standard Life Insurance Company.

"You," "your" and "yours" means the employer, union or other entity to which the Policy is issued and which is deemed the Policyholder.

"Eligible Person" means a person who meets the eligibility requirements of the Policy.

"Insured" means a person who meets the eligibility requirements of the Policy and is enrolled for this insurance.

"Actively at work" and "active work" means the person actually performing on a Full-time basis each and every duty pertaining to his/her job in the place where and the manner in which the job is normally performed. This includes approved time off such as vacation, jury duty and funeral leave, but does not include time off as a result of injury or illness.

"Full-time" means working for you for a minimum of 32 hours during a person's regularly scheduled work week.

"The date he/she retires" or "retirement" means the effective date of an Insured's:

- (1) retirement pension benefits under any plan of a federal, state, county or municipal retirement system, if such pension benefits include any credit for employment with you;
- (2) retirement pension benefits under any plan which you sponsor, or make or have made contributions; or
- (3) retirement benefits under the United States Social Security Act of 1935, as amended, or under any similar plan or act.

"Earnings", as used in the SCHEDULE OF BENEFITS section, means the Insured's annual salary received from you on the day just before the date of loss, prior to any deductions to a 401(k) or Section 125 plan. Earnings does not include commissions, overtime pay, bonuses or any other special compensation not received as basic salary.

If hourly employees are insured, the number of hours worked during a regularly scheduled work week, not to exceed 40 hours per week, times 52 weeks, will be used to determine annual earnings.

"Total Disability", as used in the WAIVER OF PREMIUM IN EVENT OF TOTAL DISABILITY section, means an Insured's complete inability to engage in any type of work for wage or profit for which he/she is suited by education, training or experience.

"Loss" as used in the ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE section, with respect to:

- (1) hand or foot, means the complete severance through or above the wrist or ankle joint;
- (2) the eye, speech or hearing, means total and irrecoverable loss thereof.

"Injury" means accidental bodily injury which is caused directly by accidental means and which occurs while the Insured's coverage under this Policy is in force.

GENERAL PROVISIONS

ENTIRE CONTRACT

The entire contract between you and us is the Policy, your application (a copy of which is attached at issue), and any endorsements and amendments.

CHANGES

No agent has authority to change or waive any part of the Policy. To be valid, any change or waiver must be in writing. It must also be signed by one of our executive officers and attached to the Policy.

INCONTESTABILITY

Any statement made in your application will be deemed a representation, not a warranty. We cannot contest this Policy after it has been in force for two (2) years from the date of issue, except for non-payment of premium.

Any statements made by you, any Insured, or on behalf of any Insured to persuade us to provide coverage, will be deemed a representation, not a warranty. This provision limits our use of these statements in contesting the amount of insurance for which an Insured is covered. The following rules apply to each statement:

- (1) No statement will be used in a contest unless:
 - (a) it is in a written form signed by the Insured, or on behalf of the Insured; and
 - (b) a copy of such written instrument is or has been furnished to the Insured, the Insured's beneficiary or legal representative.
- (2) If the statement relates to an Insured's insurability, it will not be used to contest the validity of insurance which has been in force, before the contest, for at least two years during the lifetime of the Insured.

RECORDS MAINTAINED

You must maintain records of all Insureds. Such records must show the essential data of the insurance, including new persons, terminations, changes, etc. This information must be reported to us regularly. We reserve the right to examine the insurance records maintained at the place where they are kept. This review will only take place during normal business hours.

CLERICAL ERROR

Clerical errors in connection with the Policy or delays in keeping records for the Policy, whether by you, us, or the Plan Administrator:

- (1) will not terminate insurance that would otherwise have been effective; and
- (2) will not continue insurance that would otherwise have ceased or should not have been in effect.

If appropriate, a fair adjustment of premium will be made to correct a clerical error.

MISSTATEMENT OF AGE

If an Insured's age is misstated, the premium will be adjusted. If the Insured's insurance is affected by the misstated age, it will also be adjusted. The insurance will be changed to the amount the Insured is entitled to at his/her correct age.

ASSIGNMENT

Ownership of any benefit provided under the Policy may be transferred by assignment. An irrevocable beneficiary must give written consent to assign this insurance. Written request for assignment must be made in duplicate at our Administrative Offices. Once recorded by us, an assignment will take effect on the date it was signed. We are not liable

for any action we take before the assignment is recorded.

CONFORMITY WITH STATE LAWS

Any section of the Policy, which on its effective date, conflicts with the laws of the state in which the Policy is issued, is amended by this provision. The Policy is amended to meet the minimum requirements of those laws.

CERTIFICATE OF INSURANCE

We will send to you an individual certificate for each Insured. The certificate will outline the insurance coverage and to whom benefits are payable.

POLICY TERMINATION

You may cancel the Policy at any time. The Policy will be cancelled on the date we receive your letter or, if later, the date requested in your letter.

We may cancel the Policy if:

- (1) the premium is not paid at the end of the grace period; or
- (2) the number of Insureds is less than the Minimum Participation Number on the Schedule of Benefits; or
- (3) the percentage of eligible persons insured is less than the Minimum Participation Percentage on the Schedule of Benefits.

If we cancel because of (1) above, the Policy will be cancelled at the end of the grace period. If we cancel because of (2) or (3) above, we will give you thirty-one (31) days written notice prior to the date of cancellation.

You will still owe us any premium that is not paid up to the date the Policy is cancelled. We will return, pro-rata, any part of the premium paid beyond the date the Policy is cancelled.

INDIVIDUAL ELIGIBILITY, EFFECTIVE DATE AND TERMINATION

GENERAL GROUP: The general group will be your employees and employees of any subsidiaries, divisions or affiliates named on the Schedule of Benefits.

ELIGIBLE CLASSES: The eligible classes will be those persons described on the Schedule of Benefits.

EFFECTIVE DATE OF INDIVIDUAL INSURANCE: If you pay the entire premium, the insurance for an eligible Person will go into effect on the date stated on the Schedule of Benefits. If an eligible Person pays a part of the premium, he/she must apply in writing for the insurance to go into effect. He/she will become insured on the date stated on the Schedule of Benefits, except that the insurance will go into effect:

- (1) on the date he/she applies, if he/she applies within thirty-one (31) days of the date he/she is first eligible; or
- (2) on the date we approve any required proof of good health. We require proof of good health if a person applies:
 - (a) after thirty-one (31) days from the date he/she first becomes eligible; or
 - (b) after he/she terminated this insurance but he/she remained in a class eligible for this insurance.

Changes in an Insured's amount of insurance are effective as shown on the Schedule of Benefits.

If the person is not actively at work on the day his/her insurance is to go into effect, the insurance will go into effect on the day he/she returns to active work for one full day.

TERMINATION OF INDIVIDUAL INSURANCE: The insurance of an Insured will terminate on the first of the following to occur:

- (1) the date the Policy terminates; or
- (2) the date the Insured ceases to be in a class eligible for this insurance; or
- (3) the end of the period for which premium has been paid for the Insured; or
- (4) the date the Insured enters military service (not including Reserve or National Guard).

CONTINUATION OF INDIVIDUAL INSURANCE: The insurance of an Insured may be continued, by payment of premium, beyond the date the Insured ceases to be eligible for this insurance, but not longer than:

- (1) twelve (12) months, if due to illness or injury; or
- (2) one (1) month, if due to temporary lay-off or approved leave of absence.

CONVERSION PRIVILEGE

An Insured can use this privilege when his/her insurance is no longer in force. It has several parts. They are:

- A. If the insurance ceases due to termination of employment or membership in any of this Policy's classes, an individual Life Insurance Policy may be issued. The Insured is entitled to a policy without disability or supplemental benefits. A written application for the policy must be made by the Insured within thirty-one (31) days after he/she terminates. The first premium must also be paid within that time. The issuance of the policy is subject to the following conditions:
 - (1) The policy will, at the option of the Insured, be on any one of our forms, except for term life insurance. It will be the standard type issued by us for the age and amount applied for;
 - (2) The policy issued will be for an amount not over what the Insured had before he/she terminated;
 - (3) The premium due for the policy will be at our usual rate. This rate will be based on the amount of insurance, class of risk and the Insured's age at date of policy issue; and
 - (4) Proof of good health is not required.
- B. If the insurance ceases due to the termination or amendment of this Policy, an individual Life Insurance Policy can be issued. An Insured must have been insured for at least five (5) years under this Policy. The same rules as in A above will be used, except that the face amount will be the lesser of:
 - (1) The amount of the Insured's Group Life benefit under this Policy. This amount will be less any amount he/she is entitled to under any group life policy issued by us or another insurance company; or
 - (2) \$10,000.
- C. If the insurance reduces, as may be provided in this Policy, an individual Life Insurance Policy can be issued. The same rules as in A above will be used, except that the face amount will not be greater than the amount which ceased due to the reduction.
- D. If an Insured dies during the time in which he/she is entitled to apply for an individual policy, we will pay the benefit under the Group Policy that he/she was entitled to convert. This will be done whether or not the Insured applied for the individual policy or the first premium was paid.
- E. Any policy issued with respect to A, B or C above will be put in force at the end of the thirty-one (31) day period in which application must be made.
- F. If an Insured is entitled to have an individual policy issued to him/her without proof of health, then he/she must be given notice of this right at least fifteen (15) days before the end of the period specified above. Such notice must be:
 - (1) in writing; and
 - (2) presented or mailed to the Insured by you. If not, the Insured will have an additional period in order to do so. This additional period will end fifteen (15) days after the Insured is given notice. This period will not extend beyond sixty (60) days after the expiration date of the period provided above. This insurance will not be continued beyond the period provided above.

PREMIUMS

PREMIUM PAYMENT: All premiums are to be paid by you to us, or to an authorized agent, on or before the due date. The premium due dates are stated on the Policy face page.

PREMIUM RATE: The premium due will be the rate per \$1,000 of benefit multiplied by the entire amount of benefit volume then in force. We will furnish to you the premium rate on the Policy effective date and when it is changed. We have the right to change the premium rate:

- (1) on any premium due date after the Policy is in force for 48 months; or
- (2) when the extent of coverage is changed by amendment.

We will not change the premium rate due to (1) above more than once in any twelve (12) month period. We will tell you in writing at least thirty-one (31) days before the date of a change due to (1) above.

GRACE PERIOD: You may pay the premium up to 60 days after the date it is due. The Policy stays in force during this time. If the premium is not paid during the grace period, the Policy will be cancelled at the end of the grace period. You will still owe us the premium up to the date the Policy is cancelled.

BENEFICIARY AND FACILITY OF PAYMENT

BENEFICIARY: The beneficiary will be as named in writing by the Insured to receive benefits at the Insured's death. This beneficiary designation must be on file with us or the Plan Administrator and will be effective on the date the Insured signs it. Any payment made by us before receiving the designation shall fully discharge us to the extent of that payment.

If the Insured names more than one beneficiary to share the benefit, he/she must state the percentage of the benefit that is to be paid to each beneficiary. Otherwise, they will share the benefit equally.

The beneficiary's consent is not needed if the Insured wishes to change the designation. His/her consent is also not needed to make any changes in this Policy.

If the beneficiary dies at the same time as the Insured, or within fifteen (15) days after his/her death but before we receive written proof of the Insured's death, payment will be made as if the Insured survived the beneficiary, unless noted otherwise.

If the Insured has not named a beneficiary, or the named beneficiary is not surviving at the Insured's death, any benefits due shall be paid to the first of the following classes to survive the Insured:

- (1) the Insured's legal spouse;
- (2) the Insured's surviving children (including legally adopted children), in equal shares;
- (3) the Insured's surviving parents, in equal shares;
- (4) the Insured's surviving siblings, in equal shares; or, if none of the above,
- (5) the Insured's estate.

We will not be liable for any payment we have made in good faith.

FACILITY OF PAYMENT: If a beneficiary, in our opinion, cannot give a valid release (and no guardian has been appointed), we may pay the benefit to the person who has custody or is the main support of the beneficiary. Payment to a minor shall not exceed \$1,000.

If the Insured has not named a beneficiary, or the named beneficiary is not surviving at the Insured's death, we may pay up to \$2,000 of the benefit to the person(s) who, in our opinion, have incurred expenses in connection with the Insured's last illness, death or burial.

The balance of the benefit, if any, will be held by us, until an individual or representative:

- (1) is validly named; or
- (2) is appointed to receive the proceeds; and
- (3) can give valid release to us.

The benefit will be held with interest at a rate set by us.

We will not be liable for any payment we have made in good faith.

SETTLEMENT OPTIONS

The Insured may elect a different way in which payment of the Amount of Insurance can be made. He/she must provide a written request to us, for our approval, at our Administrative Office. If the option covers less than the full amount due, we must be advised of what part is to be under an option. Amounts under \$2,000 or option payments of less than \$20.00 each are not eligible.

If no instructions for a settlement option are in effect at the death of the Insured, the beneficiary may make the election, with our consent.

OPTION A – FIXED TIME PAYMENT OPTION

Equal monthly payments will be made for any period chosen, up to thirty (30) years. The amount of each payment depends on the amount applied, the period selected and the payment rates we are using when the first payment is due. The rate of any monthly payment will not be less than shown in the table below. We reserve the right to change it. This change will apply only to requests for settlement elected after this change.

**Option A Table
Minimum Monthly Payment Rates for each \$1,000 Applied**

Years	Monthly Payment								
1	\$84.47	7	\$13.16	13	\$7.71	19	\$5.73	25	\$4.71
2	42.86	8	11.68	14	7.26	20	5.51	26	4.59
3	28.99	9	10.53	15	6.87	21	5.32	27	4.47
4	22.06	10	9.61	16	6.53	22	5.15	28	4.37
5	17.91	11	8.86	17	6.23	23	4.99	29	4.27
6	15.14	12	8.24	18	5.96	24	4.84	30	4.18

OPTION B – FIXED AMOUNT PAYMENT OPTION

Each payment will be for an agreed fixed amount. The amount of each payment may not be less than \$10.00 for each \$1,000 applied. Interest will be credited each month on the unpaid balance and added to it. This interest will be at a rate set by us, but not less than the equivalent of 3% per year. Payments continue until the amount we hold runs out. The last payment will be for the balance only.

OPTION C – INTEREST PAYMENT OPTION

We will hold any amount applied under this section. Interest on the unpaid balance will be paid each month at a rate set by us. This rate will not be less than the equivalent of 3% per year.

If a beneficiary dies while receiving payments under one of these options and there is no contingent beneficiary, the balance will be paid in one sum to the proper representative of the beneficiary's estate, unless otherwise agreed to in the instructions for settlement.

Requests for settlement options other than the three (3) set out above may be made. A mutual agreement must be reached between the individual entitled to elect and us.

WAIVER OF PREMIUM IN EVENT OF TOTAL DISABILITY

We will extend the Amount of Insurance during a period of Total Disability for one (1) year if:

- (1) the Insured becomes totally disabled prior to age 60;
- (2) the Total Disability begins while he/she is insured;
- (3) the Total Disability begins while this Policy is in force;
- (4) the Total Disability lasts for at least 6 months;
- (5) the premium continues to be paid; and
- (6) we receive proof of Total Disability within one (1) year from the date it began.

After proof of Total Disability is approved by us, neither you or the Insured is required to pay premiums. Also, any premiums paid from the start of the Total Disability will be returned.

We will ask the Insured to submit annual proof of continued Total Disability. The Amount of Insurance may then be extended for additional one (1) year periods. The Insured may be required to be examined by a Physician approved by us as part of the proof. We will not require the Insured to be examined more than once a year after the insurance has been extended two (2) full years.

The Amount of Insurance extended will be limited to the amount of basic group life coverage on the life of the Insured that was in force at the time that Total Disability began excluding any additional benefits. This amount will not increase. This amount will reduce or cease at any time it would reduce or cease if the Insured had not been totally disabled. If the Insured dies, we will be liable under this extension only if written proof of death is received by us.

The Amount of Insurance extended for an Insured will cease on the earliest of:

- (1) the date he/she no longer meets the definition of Total Disability; or
- (2) the date he/she refuses to be examined; or
- (3) the date he/she fails to furnish the required proof of Total Disability; or
- (4) the date he/she becomes age 65; or
- (5) the date he/she retires.

The Insured may use the conversion privilege when this extension ceases. Please refer to the Conversion Privilege section for rules. An Insured is not entitled to conversion if he/she returns to work and is again eligible for the insurance under this Policy. If the Insured uses the conversion privilege, benefits will not be payable under the Waiver of Premium in Event of Total Disability provision unless the converted policy is surrendered to us.

If the Insured qualifies for benefits in accordance with the Waiver of Premium in Event of Total Disability provision because he/she has been diagnosed by a Physician as totally disabled due to the following Condition(s) or Procedure(s), as later defined;

- (1) Life Threatening Cancer; or
- (2) Heart Attack (Myocardial Infarction); or
- (3) Kidney (Renal) Failure; or
- (4) Receipt of Major Organ Transplant; or
- (5) Stroke,

we will pay to the Insured an additional, one time, lump sum benefit in an amount equal to 10% of the death benefit under the basic life portion of this Policy up to a maximum of \$100,000.

This lump sum benefit applies only to the first Condition or Procedure to occur among those hereinafter defined which qualifies the Insured for waiver of premium benefits. No further lump sum benefits will be payable under this provision during the same or any subsequent periods of Total Disability, or as a result of the occurrence of any other Condition or Procedure.

Definition(s):

“Condition(s) or Procedure(s)” mean only the following:

“Life Threatening Cancer” means a malignant neoplasm (including hematologic malignancy), as diagnosed by a Physician who is a board certified oncologist, and which is characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue, and which is not specifically excluded. The following types of cancer are not considered a Life Threatening Cancer: (1) early prostate cancer diagnosed as T2c or less according to the TNM scale; (2) colorectal cancer diagnosed as T2, N1, M0 or less according to the TNM scale; (3) breast cancer diagnosed as T3, N2, M0 or less according to the TNM scale; (4) First Carcinoma in Situ; (5) pre-malignant lesions (such as intraepithelial neoplasia); (6) brain glioma; (7) benign tumors or polyps; (8) tumors in the presence of the Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS); or (9) any skin cancer other than invasive malignant melanoma in the dermis or deeper, or skin malignancies that have become Life Threatening Cancers.

“First Carcinoma in Situ” means the first diagnosis of cancer in which the tumor cells still lie within the tissue of the site of origin without having invaded neighboring tissue. First Carcinoma in Situ must be diagnosed pursuant to a pathological diagnosis or clinical diagnosis.

“Heart Attack (Myocardial Infarction)” means the death of a segment of the heart muscle as a result of a blockage of one or more coronary arteries. In order to be covered under this provision, the diagnosis by a Physician of Heart Attack (Myocardial Infarction) must be based on:

- (1) new electrocardiographic changes consistent with and supporting a diagnosis of Heart Attack (Myocardial Infarction); and
- (2) a concurrent diagnostic elevation of cardiac enzymes; and
- (3) therapeutic and functional classifications, 3 or above and C or above respectively, according to the New York Heart Association.

“Kidney (Renal) Failure” means the chronic irreversible failure of both of the kidneys (end stage renal disease), which requires treatment with dialysis on a regular basis. Kidney Failure is covered under this provision only if the diagnosis has been made by a Physician who is a board certified nephrologist.

“Physician” means a duly licensed practitioner who is recognized by the law of the jurisdiction in which treatment is received as qualified to treat the type of condition for which claim is made. The Physician may not be the Insured or a member of his/her immediate family and must be approved by us.

“Receipt of Major Organ Transplant” means that the Insured has been the recipient of a major organ transplant and that there is clinical evidence of an Insured’s major organ(s) failure which, according to the diagnosis of a Physician, required the failing organ(s) or tissue of the Insured to be replaced with organ(s) or tissue from a suitable donor under generally accepted medical procedures. Organs or tissues covered by this definition are limited to liver, kidney, lung, entire heart, pancreas, or pancreas-kidney.

“Stroke” means a cerebrovascular accident or infarction (death) of brain tissue, as diagnosed by a Physician, which is caused by hemorrhage, embolism, or thrombosis producing measurable, neurological deficit persisting for at least one hundred eighty (180) days following the occurrence of the Stroke. Stroke does not include Transient Ischemic Attack (TIA) or other cerebral vascular events.

Receipt of this additional lump sum payment may be taxable. The Insured should seek assistance from his/her own personal tax advisor.

ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

Nothing in this section will change or affect any of the terms of the Policy other than as specifically set out in this section. All the Policy provisions not in conflict with these provisions shall apply to this section.

If an Insured suffers any one of the losses listed below, as a result of an Injury, we will pay the benefit shown. The loss must be caused solely by an accident that occurs while the person is insured, and must occur within 365 days of the accident. Only one benefit (the larger) will be paid for more than one loss resulting from any one accident. The Amount of Insurance can be found on the Schedule of Benefits.

LOSS OF:	AMOUNT OF INSURANCE:
Life	The Full Amount
Both Hands	The Full Amount
Both Feet	The Full Amount
The Sight of Both Eyes	The Full Amount
Speech and Hearing	The Full Amount
One Hand and One Foot	The Full Amount
One Hand and the Sight of One Eye	The Full Amount
One Foot and the Sight of One Eye	The Full Amount
One Hand	One-Half of the Amount
One Foot	One-Half of the Amount
Speech or Hearing	One-Half of the Amount
The Sight of One Eye	One-Half of the Amount

EXCLUSIONS

A benefit will not be payable for a loss:

- (1) caused by suicide or intentionally self-inflicted injuries; or
- (2) caused by or resulting from war or any act of war, declared or undeclared; or
- (3) caused by sickness or disease; or
- (4) sustained during the Insured's commission or attempted commission of an assault or felony; or
- (5) caused by the Insured's acute or chronic alcoholic intoxication; or
- (6) caused by the Insured's voluntary consumption of an illegal or controlled substance or a non-prescribed narcotic or drug.

SEAT BELT AND AIR BAG BENEFIT

Seat Belt Benefit

We will pay an additional Seat Belt Benefit if, due to an Injury sustained while driving or riding in a private passenger Four-Wheel Vehicle, the Insured suffers loss of life for which an Accidental Death Benefit is payable under the Policy.

Once we receive the police accident report which confirms that the Insured was properly strapped in a Seat Belt at the time of the accident, we will pay a benefit equal to 10% of the Accidental Death Benefit payable under the Policy.

If the police report does not clearly establish that the Insured was or was not wearing a Seat Belt at the time of the accident which caused the Insured's death, the benefit payable will be \$1,000 in lieu of the benefit described above.

"Seat Belt" means an unaltered factory-installed lap and/or shoulder restraint designed to keep a person steady in a seat.

Air Bag Benefit

In addition to the Seat Belt Benefit, we will also pay an Air Bag Benefit if such private passenger Four-Wheel Vehicle is equipped with a factory-installed Air Bag and the police accident report clearly establishes that the Insured was positioned in a seat which is designed to be protected by an Air Bag and was properly strapped in the Seat Belt when the Air Bag inflated.

Once we receive the police accident report which confirms that the Air Bag inflated properly upon impact, we will pay a benefit equal to 5% of the Accidental Death Benefit payable under the Policy.

"Air Bag" means an unaltered factory-installed supplemental restraint system designed to inflate upon impact to protect a person from bodily injury during an accident.

"Four-Wheel Vehicle" means a private passenger automobile, a truck-type vehicle which has a manufacturer's rated load capacity of 2,000 pounds or less, or a self-propelled motor home, all of which are registered for private passenger use and designated for transportation on public roadways.

Maximum Benefit Payable - The total combined maximum benefit payable under the Seat Belt and Air Bag Benefit is \$25,000.

EXCLUSIONS

No benefit is payable for any loss sustained by the Insured:

- (1) if he/she was driving or riding in any private passenger Four-Wheel Vehicle which was being used in a race, speed or endurance test, or for acrobatic or stunt driving at the time of the accident;
- (2) if the Insured was not wearing a Seat Belt for any reason;
- (3) while the Insured was sharing a Seat Belt.

CLAIMS PROVISIONS

NOTICE OF CLAIM: Written notice must be given to us within thirty-one (31) days after the Loss occurs, or as soon as reasonably possible. The notice should be sent to us at our Administrative Offices or to our authorized agent. The notice should include the Insured's name, the Policy Number and your name.

CLAIM FORMS: When we receive written notice of a claim, we will send claim forms to the claimant within fifteen (15) days. If we do not, the claimant will satisfy the requirements of written proof of loss by sending us written proof as shown below. The proof must describe the occurrence, extent and nature of the loss.

PROOF OF LOSS: For any covered Loss, written proof must be sent to us within ninety (90) days. If it is not reasonably possible to give proof within ninety (90) days, the claim is not affected if the proof is sent as soon as reasonably possible. In any event, proof must be given within 1 year, unless the claimant is legally incapable of doing so.

PAYMENT OF CLAIMS: Payment will be made as soon as proper proof is received. All benefits will be paid to the Insured if living. Any benefits unpaid at the time of death, or due to death, will be paid to the beneficiary.

Reliance Standard Life Insurance Company shall serve as the claims review fiduciary with respect to the insurance policy and the Plan. The claims review fiduciary has the discretionary authority to interpret the Plan and the insurance policy and to determine eligibility for benefits. Decisions by the claims review fiduciary shall be complete, final and binding on all parties.

PHYSICAL EXAMINATION: At our own expense, we will have the right to have an Insured examined as reasonably necessary when a claim is pending. We can have an autopsy made unless prohibited by law.

LEGAL ACTION: No legal action may be brought against us to recover on this Policy within sixty (60) days after written proof of loss has been given as required by this Policy. No action may be brought after three (3) years (Kansas, five (5) years; South Carolina and Michigan, six (6) years) from the time written proof of loss is required to be submitted.

FAMILY AND MEDICAL LEAVE OF ABSENCE EXTENSION

We will allow the Insured's coverage to continue for up to twelve (12) weeks in a twelve (12) month period, if the Insured is eligible for, and you have approved, a Family and Medical Leave of Absence under the terms of the Family and Medical Leave Act of 1993 for any of the following reasons:

- (1) To provide care after the birth of a son or daughter; or
- (2) To provide care for a son or daughter upon legal adoption; or
- (3) To provide care after the placement of a foster child in the Insured's home; or
- (4) To provide care to a spouse, son, daughter, or parent due to serious illness; or
- (5) To take care of his/her own serious health condition as explained below.

If the Insured, due to his/her own serious health condition, meets the definition of Total Disability in this Policy, he/she will be considered Totally Disabled and eligible for Waiver of Premium benefits according to the Waiver of Premium in Event of Total Disability provision. If the Insured, due to his/her own serious health condition, is on a Family and Medical Leave of Absence, but not eligible for Waiver of Premium benefits under this Policy, insurance coverage will be continued under this extension.

The Insured will not qualify for the Family and Medical Leave of Absence Extension unless we have received proof from you, in a form satisfactory to us, that the Insured has been granted a leave under the terms of the Family and Medical Leave Act of 1993. Such proof: (1) must outline the terms of the Insured's leave; and (2) give the date the leave began; and (3) the date it is expected to end; and (4) must be received by us within thirty-one (31) days after a claim for benefits has been filed with us.

If you grant the Insured a Family and Medical Leave of Absence, the following applies to the Insured who has been granted the leave:

- (1) While the Insured is on an approved Family and Medical Leave of Absence, the required premium must be paid according to the terms specified in this Policy to keep the insurance in force.
- (2) Coverage will terminate for any Insured if the Insured does not return to work as scheduled according to the terms of his/her agreement with you; however, the Insured is eligible to convert his/her coverage under the Conversion Privilege. In no case will coverage be extended under this benefit beyond twelve (12) weeks in a twelve (12) month period. Insurance will not be terminated for an Insured who becomes Totally Disabled during the period of the leave and who is eligible for Waiver of Premium benefits, if any, according to the terms of this Policy.
- (3) This extension is not available if the Insured converts his/her coverage under the Conversion Privilege.
- (4) While the Insured is on an approved Family and Medical Leave of Absence, he/she will be considered Actively at Work in all instances unless such leave is due to his/her own illness, injury, or disability. Changes such as revisions to coverage because of age, class or salary changes will apply during the leave except that increases in amount of insurance, whether automatic or subject to election, are not effective for an Insured who is not Actively at Work until such time as he/she returns to Active Work for one full day.

All other terms and conditions of this Policy will remain in force while an Insured is on an approved Family and Medical Leave of Absence.

MILITARY SERVICES LEAVE OF ABSENCE COVERAGE

We will allow the Insured's coverage to continue for up to twelve (12) weeks in a twelve (12) month period, if the Insured enters the military service of the United States. While the Insured is on a Military Services Leave of Absence, the required premium must be paid according to the terms specified in this Policy to keep the insurance in force. Changes such as revisions to coverage because of age, class or salary changes will apply during the leave except that increases in amount of insurance, whether automatic or subject to election, are not effective for such an Insured until he/she has returned to work from Military Services Leave of Absence for one full day. All other terms and conditions of this Policy will remain in force during this continuation period. The Insured's continued coverage will cease on the earliest of the following dates:

- (1) the date this Policy terminates; or
- (2) the date ending the last period for which any required premium was paid; or
- (3) twelve (12) weeks from the date the Insured's continued coverage began.

This Policy, however, does not cover any loss which occurs while on active duty in the military service if such loss is caused by or arises out of such military service, including but not limited to war or act of war (whether declared or undeclared).

GROUP TERM LIFE INSURANCE ACCELERATED BENEFIT RIDER

THIS RIDER ADDS AN ACCELERATED BENEFIT PROVISION. RECEIPT OF THIS ACCELERATED BENEFIT WILL REDUCE THE DEATH BENEFIT AND MAY BE TAXABLE. IN ADDITION, RECEIPT OF THIS BENEFIT MAY AFFECT THE INSURED'S ELIGIBILITY FOR MEDICAID OR OTHER GOVERNMENT BENEFITS OR ENTITLEMENTS. INSUREDS SHOULD SEEK ASSISTANCE FROM THEIR PERSONAL TAX ADVISOR.

Attached to Group Policy Number: GL 673909
Issued to Group Policyholder: Village of Willowbrook

This Rider is attached to and made a part of the Policy indicated above. The Policy is hereby amended, in consideration of the application for this coverage, by the addition of the following benefit. In this Rider, Reliance Standard Life Insurance Company will be referred to as "we", "us", "our".

DEFINITIONS: This section gives the meaning of terms used in this Rider. The Definitions of the Policy and Certificate also apply unless they conflict with Definitions given here.

"Certified" or "Certification" refers to a written statement, made by a Physician on a form provided by us, as to the Insured's Terminal Illness.

"Certificate" means the document, issued to each Insured, which explains the terms of his coverage under the Group Life Insurance Policy.

"Death Benefit" means the insurance amount payable under the Policy at the death of the Insured. It does not include any amount that is only payable in the event of Accidental Death.

"Insured" means only a primary Insured. Dependents are not eligible for coverage under this Accelerated Benefit Rider.

"Physician" means a duly licensed practitioner, acting within the scope of his license, who is recognized by the law of the state in which diagnosis is received. The Physician may not be the Insured or a member of his immediate family.

"Policy" means the Group Life Insurance Policy issued to the Group Policyholder under which the Insured is covered.

"Terminally Ill" or "Terminal Illness" refers to an Insured's illness or physical condition that is Certified by a Physician to reasonably be expected to result in death in less than 24 months.

"Written Request" means a request made, in writing, by the Insured to us.

All pronouns include either gender unless the context indicates otherwise.

DESCRIPTION OF COVERAGE: This benefit is payable to the Insured if, the Insured's coverage is in force and the Insured is Certified as Terminally Ill: at any time for loss resulting from accidental injury; or after having been insured under this Rider for at least 30 days prior to a loss resulting from sickness. In order for this benefit to be paid:

- (1) the Insured must make a Written Request; and
- (2) we must receive from any assignee or irrevocable beneficiary their signed acknowledgment and agreement to payment of this benefit.

We may, at our option, confirm the terminal diagnosis with a second medical exam performed at our own expense.

AMOUNT OF THE ACCELERATED BENEFIT: The Accelerated Benefit will be an amount equal to 75% of the Death Benefit applicable to the Insured under the Policy on the date of the Certification of Terminal Illness, subject to a maximum benefit of \$500,000. This benefit may be paid as a single lump sum or in installment payments mutually agreed to by us and the Insured. The Accelerated Benefit is payable one time only for any Insured under this Rider.

EFFECT OF BENEFIT: If an Insured becomes eligible for, and elects to receive this benefit, it will have the following effects:

- (1) The Death Benefit payable for such Insured will be reduced by the amount equal to the Accelerated Benefit paid such Insured. Such reduced amount of insurance will be subject to all Policy provisions dealing with changes in the amount of insurance and reductions or termination for age or retirement. The amount of the Accelerated Benefit plus the corresponding Death Benefit will not exceed the amount that would have been paid as the Death Benefit in the absence of this Rider.
- (2) Any amount of insurance that would otherwise be continued under a Waiver of Premium provision will be reduced proportionately, as will the maximum Face Amount available under the Conversion Privilege.

MISSTATEMENT OF AGE OR SEX: The Accelerated Benefit will be adjusted to reflect the amount of benefit that would have been purchased by the actual premium paid at the correct age and sex.

TERMINATION OF AN INDIVIDUAL'S COVERAGE UNDER THIS RIDER: The coverage of any Insured under this Rider will terminate on the first of the following:

- (1) the date his coverage under the Policy terminates;
- (2) the date of payment of the Accelerated Benefit for his Terminal Illness; or
- (3) the date he attains age 75.

ADDITIONAL PROVISIONS: This Rider takes effect on the Effective Date shown. It will terminate on the date the Group Policy terminates. It is subject to all the terms of the Group Policy not inconsistent herewith.

In witness whereof, we have caused this Rider to be signed by our Secretary.


Secretary

**ILLINOIS
LIFE AND HEALTH INSURANCE GUARANTY
ASSOCIATION LAW**

Residents of Illinois who purchase health insurance, life insurance, and annuities should know that the insurance companies licensed in Illinois to write these types of insurance are members of the Illinois Life and Health Insurance Guaranty Association. The purpose of this Guaranty Association is to assure that policyholders will be protected, within limits, in the unlikely event that a member insurer becomes financially unable to meet its policy obligations. If this should happen, the Guaranty Association will assess its other member insurance companies for the money to pay the covered claims of policyholders that live in Illinois (and their payees, beneficiaries, and assignees) and, in some cases, to keep coverage in force. The valuable extra protection provided by these insurers through the Guaranty Association is not unlimited, however, as noted below.

**ILLINOIS LIFE AND HEALTH
INSURANCE GUARANTY ASSOCIATION**

DISCLAIMER

The Illinois Life and Health Insurance Guaranty Association provides coverage of claims under some types of policies if the insurer becomes impaired or insolvent. COVERAGE MAY NOT BE AVAILABLE FOR YOUR POLICY. Even if coverage is provided, there are substantial limitations and exclusions. Coverage is generally conditioned on continued residence in Illinois. Other conditions may also preclude coverage.

You should not rely on availability of coverage under the Life and Health Insurance Guaranty Association Law when selecting an insurer. Your insurer and agent are prohibited by law from using the existence of the Association or its coverage to sell you an insurance policy.

The Illinois Life and Health Insurance Guaranty Association or the Illinois Department of Insurance will respond to any questions you may have which are not answered by this document. Policyholders with additional questions may contact:

**Illinois Life and Health Insurance Guaranty Association
8420 West Bryn Mawr Avenue
Chicago, Illinois 60631
(773) 714-8050**

**Illinois Department of Insurance
320 West Washington Street
4th Floor
Springfield, Illinois 62767
(217) 782-4515**

(please refer to next page)

SUMMARY OF GENERAL PURPOSES AND CURRENT LIMITATIONS OF COVERAGE

The Illinois law that provides for this safety-net coverage is called the Illinois Life and Health Insurance Guaranty Association Law ("Law") (215 ILCS 5/531.01, et seq.). The following contains a brief summary of the Law's coverages, exclusions, and limits. This summary does not cover all provisions, nor does it in any way change anyone's rights or obligations under the Law or the rights or obligations of the Guaranty Association. If you have obtained this document from an agent in connection with the purchase of a policy, you should be aware that its delivery to you does not guarantee that your policy is covered by the Guaranty Association.

A. Coverage:

The Illinois Life and Health Insurance Guaranty Association provides coverage to policyholders that reside in Illinois for insurance issued by members of the Guaranty Association, including:

- (1) life insurance, health insurance, and annuity contracts;
- (2) life, health or annuity certificates under direct group policies or contracts;
- (3) unallocated annuity contracts; and
- (4) contracts to furnish health care services and subscription certificates for medical or health care services issued by certain licensed entities. The beneficiaries, payees, or assignees of such persons are also protected, even if they live in another state.

B. Exclusions from Coverage:

- (1) The Guaranty Association does not provide coverage for:
 - (a) any policy or portion of a policy for which the individual has assumed the risk;
 - (b) any policy of reinsurance (unless an assumption certificate was issued);
 - (c) interest rate guarantees which exceed certain statutory limitations;
 - (d) certain unallocated annuity contracts issued to an employee benefit plan protected under the Pension Benefit Guaranty Corporation and any portion of a contract which is not issued to or in connection with a specific employee, union or association of natural persons benefit plan or a government lottery;
 - (e) any portion of a variable life insurance or variable annuity contract not guaranteed by an insurer; or
 - (f) any stop loss insurance.
- (2) In addition, persons are not protected by the Guaranty Association if:
 - (a) the Illinois Director of Insurance determines that, in the case of an insurer which is not domiciled in Illinois, the insurer's home state provides substantially similar protection to Illinois residents which will be provided in a timely manner; or
 - (b) their policy was issued by an organization which is not a member insurer of the Association.

C. Limits on Amount of Coverage:

- (1) The Law also limits the amount the Illinois Life and Health Insurance Guaranty Association is obligated to pay. The Guaranty Association's liability is limited to the lesser of either:
 - (a) the contractual obligations for which the insurer is liable or for which the insurer would have been liable if it were not an impaired or insolvent insurer; or
 - (b) with respect to any one life, regardless of the number of policies, contracts, or certificates:
 - (i) in the case of life insurance, \$300,000 in death benefits but not more than \$100,000 in net cash surrender or withdrawal values;
 - (ii) in the case of health insurance, \$300,000 in health insurance benefits, including net cash surrender or withdrawal values; and
 - (iii) with respect to annuities, \$100,000 in the present value of annuity benefits, including net cash surrender or withdrawal values, and \$100,000 in the present value of annuity benefits for individuals participating in certain government retirement plans covered by an unallocated annuity contract. The limit for coverage of unallocated annuity contracts other than those issued to certain governmental retirement plans is \$5,000,000 in benefits per contract holder, regardless of the number of contracts.
- (2) However, in no event is the Guaranty Association liable for more than \$300,000 with respect to any one individual.

ORDINANCE NO. 11-O-_____

AN ORDINANCE AUTHORIZING THE AMENDMENT OF THE ELIGIBILITY FOR BENEFITS PROVISIONS IN THE VILLAGE'S EXISTING GROUP BASIC LIFE & ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE POLICY BY ADDING TO THE LIST OF SAID POLICY'S BENEFITTED CLASSES A FIFTH CLASSIFICATION CONSISTING OF ALL THOSE PERSONS APPOINTED TO CERTAIN OF ITS APPOINTIVE OFFICES.

NOW THEREFORE, BE IT ORDAINED by the Mayor and Board of Trustees of the Village of Willowbrook, Du Page County, Illinois as follows:

SECTION ONE: That the eligibility for benefits provisions set forth in the Village's existing Group Basic Life & Accidental Death and Dismemberment Insurance Policy No. GL673909 with Reliance Standard Life Insurance Company shall hereby be amended by adding to the list of said policy's eligible for benefits classes a fifth class consisting of all those persons appointed to certain of the Village of Willowbrook's appointive public offices, to-wit: the appointed and qualified members of the Willowbrook Parks and Recreation Commission; the appointed and qualified members of the Village's Board of Police Commissioners; and, the appointed and qualified members of the Village's Plan Commission.

SECTION TWO: That all ordinances and resolutions, or parts thereof, in conflict with any of the provisions of this Ordinance are, to the extent of such conflict, expressly repealed.

SECTION THREE: That this Ordinance shall be in full force and effect from and after its passage and approval as provided by law.

PASSED and APPROVED this 26th day of September, 2011.

APPROVED:

Mayor

ATTEST

Village Clerk

ROLL CALL VOTE:

AYES: _____

NAYES: _____

ABSTENTIONS: _____

ABSENT: _____