



EST. 1960

# Willowbrook

835 Midway Drive  
Willowbrook, IL 60527-5549

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

## Contact Information Worksheet

### Mayor

Frank A. Trilla

### Village Clerk

Leroy R. Hansen

### Village Trustees

Sue Berglund

Umberto Davi

Terrence Kelly

Michael Mistele

Gayle Neal

Paul Oggerino

### Village Administrator

Tim Halik

### Chief of Police

Robert J. Pavelchik, Jr.

### Director of Finance

Carrie Dittman

### Owner

First Name: \_\_\_\_\_ Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

### Main Petitioner Contact (authorized agent)

#### Relationship to Project

First Name: \_\_\_\_\_ Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

### Additional Contact #1

#### Relationship to Project

First Name: \_\_\_\_\_ Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

### Additional Contact #2

#### Relationship to Project

First Name: \_\_\_\_\_ Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_



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### Additional Contact #3

#### Relationship to Project

First Name: \_\_\_\_\_ Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

### Additional Contact #4

#### Relationship to Project

First Name: \_\_\_\_\_ Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

### Additional Contact #5

#### Relationship to Project

First Name: \_\_\_\_\_ Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

### Additional Contact #6

#### Relationship to Project

First Name: \_\_\_\_\_ Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_



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