APPLICATION FOR APPROVAL OF TEN-YEAR SAFETY SURVEY REPORT

(23 IL. Adm. Code Part 180, Sections. 180.310, 180.320, 180.330, 180.340)

NAME OF SCHOOL BUILDING	*SURVEY YEAR*
BENJAMIN MIDDLE SCHOOL	2026
NAME AND NUMBER OF SCHOOL DISTRICT	*COUNTY*
Benjamin SD 25, 0250	Dupage
ARCHITECT NAME	*FIRM*
Vien-Phong Trinh	ARCON ASSOC INC.
FIRM ADDRESS	*TELEPHONE NUMBER*
2050 S. Finley Road, Suite 40, LOMBARD, IL 60148	(630) 495-1900

I certify that the survey referred to herein was prepared by me and to the best of my knowledge is a true and accurate.

☐ Building in Full Compliance.

☑ Building Not in Compliance

	Vien-Phong Trinh
Date	*Printed Name Architect/Engineer*
Date	*President of Board of Education*
Date	*Secretary of Board of Education*
11/30/2026	001-021911
Expiration Date	*License Number*

[Seal and Signature]

Failure to submit accurate and complete safety survey reports as required shall subject a school district to the recognition provisions of 23 Illinois Administrative Code 180.