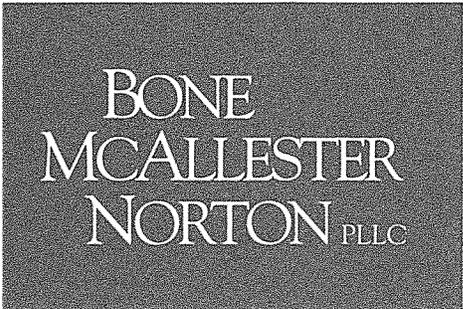


©

cc: Admin



Chris Raybeck  
615.238.6326 Phone  
615.687.6992 Fax  
craybeck@bonelaw.com

January 10, 2013

**VIA FEDEX**

Township of Mt. Olive  
Attention: Ms. Lisa Lachway, Municipal Clerk  
204 Flanders-Drakestown Road  
Budd Lake, New Jersey 07828



**Re: Copy of General Information Notice filed with the State of New Jersey regarding AERC Recycling Solutions**

Dear Ms. Lachway:

We represent a party acquiring stock in the above-referenced company, and as you may know, the State of New Jersey requires that a General Information Notice be filed with the state and that a copy be provided to the municipality in which the company is located. I enclose a copy of the General Information Notice and all attachments being filed with the state.

Thank you, and please let me know if you have any questions.

Sincerely,

Chris Raybeck

Enclosure

cc: Mr. Dan Erdman (without enclosure, via e-mail)  
Keystone E-Sciences Group, Inc.

{00865183.1 }



**New Jersey Department of Environmental Protection  
Site Remediation Program**

**GENERAL INFORMATION NOTICE (GIN)**

New     Revision/Update \*

Date Stamp  
(For Department use only)

NOTE: If more than one Industrial Establishment (business) operates at the site (multiple tenancy), and the transaction which initiates ISRA is a sale of property, then a separate General Information Notice is required for each Industrial Establishment (tenant) that uses hazardous materials and has a NAICS number within the subject realm of ISRA.

\* If the submission is a revision/update, Fill out **only** the ISRA Case Number and PI Number in Section A and then **only** the fields being revised or updated in Sections B through J. The certification, (Section K), must be also be completed.

**SECTION A. INDUSTRIAL ESTABLISHMENT**

Site Name: AERC.com, Inc. Telephone Number: (610) 433-4011

Street Address: 3 Gold Mine Road

Municipality: Flanders (Township, Borough or City)

County: Morris Zip Code: 07836

\* ISRA Case No.: \_\_\_\_\_ \* Program Interest No.: \_\_\_\_\_

State Plane Coordinates for a central location at the site: Easting: 437626 Northing: 745664

Municipal Block(s) and Lot(s):

|                     |                |               |             |
|---------------------|----------------|---------------|-------------|
| Block # <u>9001</u> | Lot # <u>1</u> | Block # _____ | Lot # _____ |
| Block # _____       | Lot # _____    | Block # _____ | Lot # _____ |
| Block # _____       | Lot # _____    | Block # _____ | Lot # _____ |
| Block # _____       | Lot # _____    | Block # _____ | Lot # _____ |

Does the Industrial Establishment include:  the Entire Site; or  
 a Leasehold Portion of the Block and Lots designated above.

Date trigger compliance with N.J.A.C. 7:26B-3.2(a) 01/09/2013

NAICS Code: 562211 (Required)

To determine your NAICS Code, please refer to the "Official NAICS Page" at <http://www.census.gov/eos/www/naics/> or contact the NJ Department of Labor at 609-292-2633.

Please provide a description of operations conducted on site by the Industrial Establishment listed in "A" above to verify the listed NAICS number as accurate.

Facility receives and recycles obsolete electronic devices, (e-scrap, lamps, other metal-containing material). Facility operations included a mercury retort system for mercury recovery. EPA ID# NJR000028506

Is this site a Federal Case?.....  Yes  No

If "Yes," check all that apply

- RCRA GPRA 2020     CERCLA/NPL     USDOD     USDOE     TSCA  
 Other (explain): \_\_\_\_\_

**SECTION B. CONTACT INFORMATION**

**Current Property Owner(s)**

Business Name: AERC Recycling Solutions/ Com-Cycle

Contact Person: Mark Kasper, VP Opereations Telephone Number: (610) 433-4011

Street Address: 2330 SW 26th Street

Municipality: Allentown State: PA Zip Code: 18103

**Current Business Owner** (complete this section even if the same as above)

Business Name: AERC Recycling Solutions/ Com-Cycle

Contact Person: Mark Kasper, VP Operations Telephone Number: (610) 433-4011

Street Address: 2330 SW 26th Street

Municipality: Allentown State: PA Zip Code: 18103

**SECTION C. MAPS TO PROVIDE**

1. A current tax map, attached as Appendix # A and
2. A scaled site map showing the entire property and all current structures located on the blocks and lots listed in Item 1A above. For NJDEP data entry and identification purposes the boundaries of each industrial establishment currently located on the site shall be highlighted and clearly labeled on the scaled site map, attached as Appendix # B.

**SECTION D. PREVIOUS ISRA/ECRA SUBMISSIONS**

1. Have there been any previous or concurrent ISRA/ECRA submissions (including Applicability Determinations or De Minimus Quantity Exemption Application) by this Industrial Establishment or another Industrial Establishment, which occupied the same tax block and lot number?.....  Yes  No
2. If "Yes," Name of Industrial Establishment(s): \_\_\_\_\_
3. ISRA/ECRA Case No(s): \_\_\_\_\_ Current Status \_\_\_\_\_

**SECTION E. NFA, RAO OR NEGATIVE DECLARATION**

Has the same property occupied by the Industrial Establishment in Section A above received a No Further Action Letter (NFA), Response Action Outcome (RAO) or Negative Declaration Approval?.....  Yes  No

If "Yes," provide :

1. A copy of the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval, attached as Appendix # \_\_\_\_\_ and
2. A scaled site map, which clearly depicts the site or portions thereof that the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval includes, attached as Appendix # \_\_\_\_\_.

**Please Note:** If the Block and Lot designation for the site on which the Industrial Establishment listed above is different than the Block and Lot listed on the prior No Further Action Letter, Response Action Outcome or Negative Declaration Approval, then please provide a brief description of when the designation change occurred and a statement supporting that the current application is for the same site. The Department will not assume the application for the current site is the same site referenced on a prior no further action approval if the Block and Lots are different.

**SECTION F. TYPE OF TRANSACTION**

Indicate the transaction(s), which initiates the ISRA review. Check all that apply (see N.J.A.C. 7:26B-3.2 & 3.3):

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Sale of Property         | <input type="checkbox"/> Foreclosure        | <input checked="" type="checkbox"/> Stock Transfer/Corporate Merger |
| <input type="checkbox"/> Cessation                | <input type="checkbox"/> Partnership Change | <input type="checkbox"/> Other (attach documentation to explain)    |
| <input type="checkbox"/> Sale of Business         | <input type="checkbox"/> Sale of Assets     |   |
| <input type="checkbox"/> Bankruptcy – Type: _____ | Date: _____                                 | Case #: _____   |

**SECTION G. CESSATION OF OPERATIONS**

If a cessation of operations is involved at this location, provide the following information:

1. Provide the date of the public release of the decision to close the facility \_\_\_\_\_, or
2. Provide the date that operations ceased \_\_\_\_\_, or
3. Provide the date that operations will cease \_\_\_\_\_

**SECTION H. PROPERTY SALE/TRANSFER OF TITLE**

If the transaction initiating an ISRA review is an agreement of sale or execution of an option to purchase, fill in the date of execution of that instrument below. If a sales agreement has not been signed, then you may not have triggered ISRA unless another trigger such as a cessation of operations has also occurred.

1. Is a sale involved? .....  Yes  No (If "No," skip to section I.)
2. Provide the date of the Agreement/Notifications of Option to Purchase \_\_\_\_\_

3. Provide the date proposed for transfer of title 12/28/2012

4. Please complete the following:

Name of Party/Purchaser: Recycling Holdings, LLC

Address: 5353 Hillsboro, Nashville, TN 37215 or c/o Bone McAllester Norton, 511 Union, Ste. 1600, Nashville, TN 37219

Phone Number: (615) 238-6326 Contact Person: Greg Daily or Chris Raybeck

**SECTION I. AUTHORIZED AGENT**

Provide the name and mailing address of an individual to be designated as the "Authorized Agent": a primary contact with the Department for all matters relating to this ISRA review. This can be a licensed site remediation professional or attorney assisting the owner or operator with their ISRA compliance obligations. The Department will copy the Authorized Agent on all written correspondence.

Name: Daniel E. Erdman, P.G., LSRP (#576314) Telephone Number: (610) 407-4002

Firm: Kesystone E-Sciences Group, Inc.

Street Address: 590 East Lancaster Road Suite 200

Municipality: Frazer State: PA Zip Code: 19355

Fax Number: (610) 407-4101 Email Address (optional): derdman@keystoneesg.com

**SECTION J. NOTIFICATIONS (To be initialed by the signatory on the certification page.)**

**Right of Entry and Inspection**

Pursuant to the Industrial Site Recovery Act rules (N.J.A.C. 7:26B-1.9), by the submission and certification of this document I give my consent to the entry of the industrial establishment by the NJDEP and its authorized representatives during any phase of remediation, upon the presentation of credentials, to inspect the site.

Initial DES

**Withdrawal Notification**

I understand that I may withdraw this notice if the transaction that initiated the filing of this General Information Notice is terminated. In accordance with the Industrial Site Recovery Act rules (N.J.A.C. 7:26B-3.4), such withdrawal, stating the reasons why compliance with ISRA no longer applies to the site referenced in Item 1A above, shall be made in writing and certified in accordance with N.J.A.C. 7:26B-1.6. I understand if the site has been confirmed to be contaminated, pursuant to the Site Remediation Reform Act, I am obligated to continue with the remediation of the site regardless of the status of my ISRA trigger.

Initial DES

**Municipal Notification**

I certify that the municipality (Municipal Clerk), in which the industrial establishment named in Item 1A above is located, has been provided a copy of this notice.

Initial DES

**SECTION K. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATION**

Full Legal Name of the Person Responsible for Conducting the Remediation: Recycling Holdings, LLC

Representative First Name: Greg Representative Last Name: Daily

Title: Sole Manager and President

Phone Number: (615) 403-4982 Ext: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: 5353 Hillsboro Drive

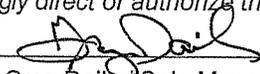
City/Town: Nashville State: Tennessee Zip Code: 37215

Email Address: gregdaily@comcast.net

Does the listed individual or firm own the:  property,  business, or  both?

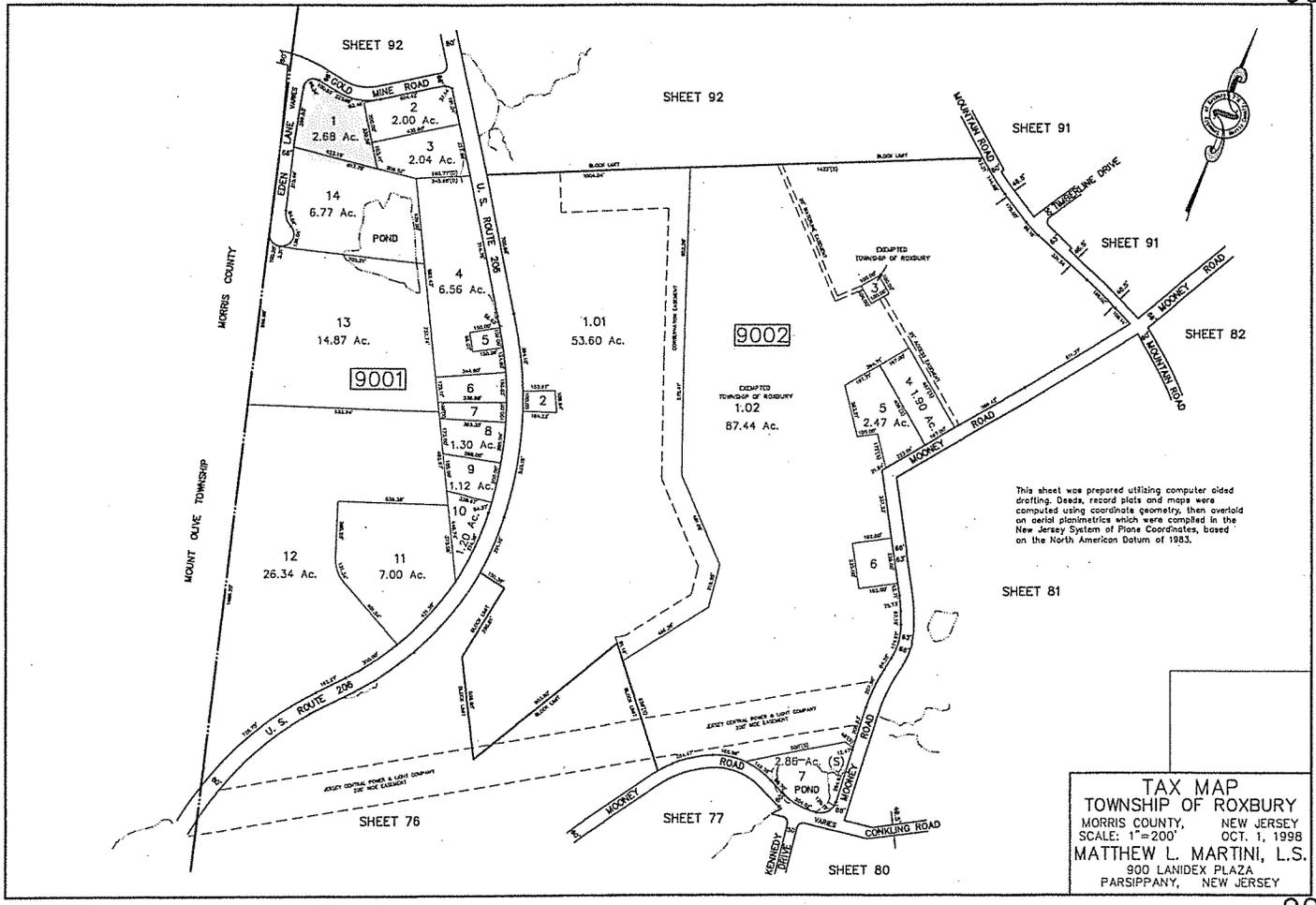
This certification shall be signed by the responsible party who is submitting this notification in accordance with Administrative Requirements for the Remediation of Contaminated Sites rule at N.J.A.C. 7:26C-1.5(a).

*I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, including all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, to the best of my knowledge, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties.*

Signature:  Date: 1/9/13

Name/Title: Greg Daily / Sole Manager and President No Changes Since Last Submittal

Completed forms should be sent to:  
Bureau of Case Assignment & Initial Notice  
Site Remediation Program  
NJ Department of Environmental Protection  
401-05H  
PO Box 420  
Trenton, NJ 08625-0420



This sheet was prepared utilizing computer aided drafting. Data, record plots and maps were compiled using coordinate geometry, then overlaid on aerial planimetrics which were compiled in the New Jersey System of Plane Coordinates, based on the North American Datum of 1983.

**TAX MAP**  
**TOWNSHIP OF ROXBURY**  
 MORRIS COUNTY, NEW JERSEY  
 SCALE: 1"=200' OCT. 1, 1998  
**MATTHEW L. MARTINI, L.S.**  
 900 LANIDEX PLAZA  
 PARSIPPANY, NEW JERSEY

Approximate Layout of Areas

183,81

Total sq. ft 23,900

80 parking sp  
1 hand. cc

BACK

Front

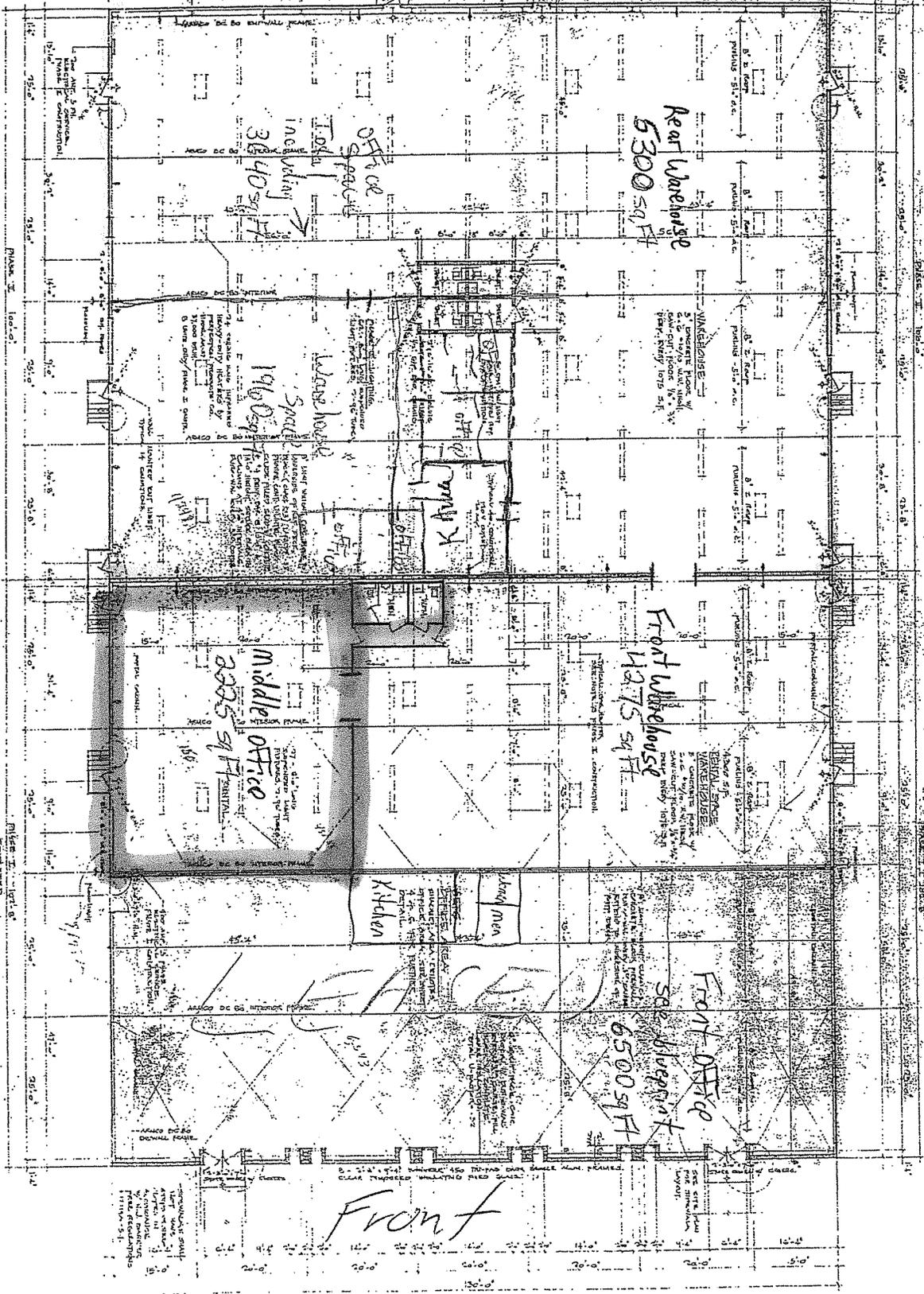
130'

12-4-76  
8:21  
964/1  
0516  
5459  
24

12.365 sq. ft  
5,000 sq. ft

AERC LEASE

Com Cycle Lease



Building use: Warehouse, S-1  
 Type of construction: 2C  
 Area of foundation: 15,345 sq. ft  
 Area of floor: 15,345 sq. ft  
 Area of roof: 15,345 sq. ft  
 Volume: 1,285,718 cu. ft  
 Weight: 1,285,718 cu. ft

HARVEY SHAFER & ASSOCIATES  
 ARCHITECTS  
 1000 ...  
 1000 ...  
 1000 ...

FLOOR PLAN  
 SCALE 1/8" = 1'-0"