

# Exhibit “A”



April 5, 2019

[JSayers@westorange.org](mailto:JSayers@westorange.org)

John K. Sayers, Business Administrator

Township of West Orange

66 Main Street

West Orange, NJ 07052

Re: **HDSRF, NOTICE OF APPROVAL LETTER**  
**HDSRF, Public Entity Grant Program**  
Application P45524  
Applicant: Township of West Orange  
Project Site: Selecto Flash Inc.  
Grant Award: Up to \$41,934.00

Dear Mr. Sayers:

I am pleased to inform you that the New Jersey Economic Development Authority (the "Authority") approved the application of the Township of West Orange for an up to \$41,934.00 Hazardous Discharge Site Remediation Fund (the "Fund") Grant ("Grant") from the New Jersey Department of Environmental Protection (the "Department") for the Remedial Action, along with report preparation, at the Selecto Flash Inc. site (the "Project"), as stated in your request for Grant assistance.

The Authority has approved the Grant upon the terms and conditions set forth in this notice of approval letter. No act or omission by or on behalf of the Authority shall be deemed as a waiver to any of the terms and conditions contained in this letter. Such a waiver may be made only by an instrument in writing duly executed by an authorized representative of the Authority.

NAME OF GRANTEE:	Township of West Orange
PROJECT SITE:	Selecto Flash Inc. 18 Central Avenue West Orange, NJ 07052 Block 9, Lot: 36 Essex County
GRANT:	Up to \$41,934.00 from the Fund

CONDITIONS:

**The Grantee shall complete the Project substantially as set forth in its request for Grant assistance. *It is specifically understood and agreed that grant funds awarded for preliminary assessment or site investigation of a contaminated site must be expended within two (2) years after the date of the award; and grant funds awarded for remedial investigation of a contaminated site must be expended within five (5) years after the date of the award. Failure to expend an award of financial assistance or grant from the remediation fund within the time limits set forth herein shall result in cancellation of the award.***

*It is specifically understood and agreed that the Grantee is required to complete and submit to the Authority the attached schedules (Exhibit "A"), in accordance with the terms of the grant agreement. Failure to provide said schedules in accordance with the terms of the grant agreement shall be an event of default under the Grant.*

The Authority requires a valid Tax Clearance Certificate no more than 180 days old on file with the Authority at the time of closing or the Grant shall not close. Tax Clearance Certificates are issued by the Division of Taxation. To apply to receive a Tax Clearance Certificate, a Grantee must complete and submit the Application for Business Assistance Tax Clearance to the Division of Taxation.

It is specifically understood and agreed that this Grant is cross-defaulted with any other agreement entered into by the Authority and the Grantee or any other agreement entered into by the Department and the Grantee with respect to this Grant.

**The interests of the Grantee and the Authority are or may be different and may conflict. The Authority's attorney represents only the Authority and does not represent the Grantee in the Grant transaction. The Grantee, therefore, is advised to employ an attorney licensed to practice in the State of New Jersey, of the Grantee's own choice, to represent the Grantee's interest in the Grant transaction.**

The credit of the Grantee and all other features of the transaction shall be as represented to the Authority without material adverse change. The Grantee shall not be involved in any bankruptcy, reorganization or insolvency proceeding.

Counsel to the Authority must be satisfied with respect to the legality, validity, binding effect, and enforceability of all instruments, agreements, and documents used to effect and consummate the transactions contemplated herein.

Each unsatisfied covenant, term and condition of this notice of approval which is not expressly waived in writing by the Authority shall survive any closing hereunder. In case of any conflict between any unwaived and unsatisfied covenant, term or condition of this notice of approval and the provisions of the Grant documents delivered at or pursuant to any closing regarding this Grant, the unwaived and/or unsatisfied covenant, term or condition of this notice of approval shall control.

This notice of approval is subject to acceptance by the Grantee of the terms and conditions contained herein. This notice of approval letter must be signed and returned to the undersigned.

The Authority's commitment shall terminate and the Authority shall have no further obligation in connection with your application if this notice of approval is not signed and returned to the Authority by August 5, 2019. This Approval Letter may be executed and delivered by telecopier, email, PDF or other facsimile transmission of all with the same force and effect as if the same were a fully executed and delivered original manual counterpart.

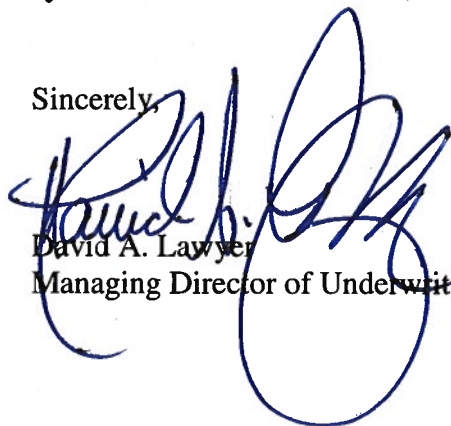
In addition, in the event that the Grant is not closed on or before 90 days from the acceptance date of the notice of approval, the Authority's obligation to provide Grant shall terminate and you will be required to submit a new application.

We are pleased to be of service to your Grant needs. If you have any questions regarding this approval letter, please contact Kathy Junghans, Finance Officer at (609) 858-6732 or [kjunghans@njeda.com](mailto:kjunghans@njeda.com).

If you have any questions regarding the closing requirements for this Grant contact Sam Guman at 609-858-6760 or [sguman@njeda.com](mailto:sguman@njeda.com).

This fully executed approval letter in its entirety should be returned to Jo Ann Walls, Administrative Assistant at [jwalls@njeda.com](mailto:jwalls@njeda.com).

Sincerely,



David A. Lawyer  
Managing Director of Underwriting

SDG

cc: J. Doyon, NJDEP

ACCEPTED AND AGREED  
THIS \_\_\_\_\_ DAY OF  
\_\_\_\_\_, 20\_\_ BY:

GRANTEE:

By: \_\_\_\_\_  
Robert D. Parisi, Mayor

# EXHIBIT "A"

P45524  
Township of West Orange  
Project Site: Selecto Flash Inc.  
Grant Award: Up to \$41,934.00

## SCHEDULE B

### PROJECT COMPLETION CERTIFICATE

The undersigned hereby certifies as follows:

1. I am an Authorized Representative of Grantee, Township of West Orange. I make this statement pursuant to Section 4 of the Agreement, by and between Grantor, the New Jersey Economic Development Authority and Grantee, dated as of [insert same date as date in Agreement]. (All undefined terms used herein shall have the same meaning ascribed to them in the Agreement).
2. The Project was completed as of \_\_\_\_\_ . (date)
3. The Project is being operated as an authorized "Project" under the Act and as substantially as proposed in the Application. The Grant proceeds were used only for the purposes for which the Grant was made, and the Grantee has adhered to all terms and conditions of the Agreement.
4. Enclosed is a check for unexpended Grant proceeds, if any as determined under the attached Calculation of Unexpended Proceeds Form, payable to the Authority in accordance with Section 4.1 of the Agreement.

(Signature): \_\_\_\_\_

Name (Print): \_\_\_\_\_

Date: \_\_\_\_\_

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

Forward to the NJ Economic Development Authority at the below address the executed Project Completion Certificate along with a check, payable to the NJEDA, for unexpended funds, if any, in the amount calculated on the **CALCULATION OF UNEXPENDED PROCEEDS FORM attached.**

New Jersey Economic Development Authority  
Underwriting  
Attn: Kathy Junghans, Finance Officer  
kjunghans@njeda.com

This Project Completion Certificate may be executed and delivered to the above Finance Officer by email with attached PDF all with the same force and effect as if the same were a fully executed and delivered original.

**SCHEDULE B**

**PROJECT COMPLETION CERTIFICATE (CONT'D.)**

**CALCULATION OF UNEXPENDED PROCEEDS FORM**

DATE PROJECT COMPLETED: \_\_\_\_\_

The following actual approved project costs have been paid:

NJ DEP Oversight ( <b>actual dollars invoiced</b> ):	\$ _____
Preliminary Assessment	\$ _____
Site Investigation	\$ _____
Remedial Investigation	\$ _____
Remedial Action	\$ _____
Contingency	\$ _____
Other costs (Itemize)	\$ _____

(A) **Total Project Costs Paid:** \$ \_\_\_\_\_

(B) Project Grant Amount (from Schedule A) \$ \_\_\_\_\_

**Amount to be Remitted to NJEDA (B) - (A)** \$ \_\_\_\_\_

Kindly make checks payable to the "New Jersey Economic Development Authority" or "NJEDA" and returned with the Project Completion Certificate. Should you prefer to wire the unexpended funds instead you may do so by using the following instructions:

Wells Fargo Bank, N.A.  
1 West State Street  
Trenton, NJ 08608

ABA #121 000 248

ACCT # 2100009100456

New Jersey Economic Development Authority  
36 West State Street  
P.O. Box 990  
Trenton, NJ 08625

Re: \_\_\_\_\_ Fee  
(type of fee)

\_\_\_\_\_  
(Project Name) (P \_\_\_\_\_)  
(Project #)

**SCHEDULE E**

**Hazardous Discharge Site Remediation Fund (HDSRF)  
Public Entity Project Status Summary**

Public Entity: \_\_\_\_\_ Latest Project #: \_\_\_\_\_

Site Name: \_\_\_\_\_ Site Location: \_\_\_\_\_

Size of Site: \_\_\_\_\_ Current Zoning of Site: \_\_\_\_\_

Who owns the site: Public Entity Redeveloper Private Other

Contact: \_\_\_\_\_ County: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Latest Application Closing Date: \_\_\_\_\_ Total grant funding to date: \_\_\_\_\_

Has the Preliminary Assessment (PA), Site Investigation (SI) and Remedial Investigation (RI) studies been completed? If not, what is the status of the work?

	<b>Yes</b>	<b>No</b>	
PA	—	—	_____
SI	—	—	_____
RI	—	—	_____

Does the site have contamination? Yes / No If yes, describe \_\_\_\_\_  
\_\_\_\_\_

Has the site been remediated? Yes / No If no, when will it be done \_\_\_\_\_

What are the projected cleanup costs? (Please circle estimated costs)

**0-\$100,000**      **\$100,000 -\$ 500,000**      **\$500,000 -\$1,000,000**      **\$1,000,000 & over**

How was the site used previous to contamination? \_\_\_\_\_

Has the site been redeveloped? Yes / No If yes, what is the current use? \_\_\_\_\_  
\_\_\_\_\_

If the site **has not been** redeveloped, what are the plans for redeveloping the site? \_\_\_\_\_

\_\_\_\_\_.

TOWNSHIP OF WEST ORANGE

By: \_\_\_\_\_

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

Date: \_\_\_\_\_

New Jersey Economic Development Authority  
Underwriting  
Attn: Kathy Junghans, Finance Officer  
[kjunghans@njeda.com](mailto:kjunghans@njeda.com)

**This Public Entity Project Status Summary may be executed and delivered to the above Finance Officer by email with attached PDF all with the same force and effect as if the same were a fully executed and delivered original.**