

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
22-RC-238880

Date Filed
APRIL 2, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer AECOM		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 20 Caven Point Avenue NJ Jersey City 07035-4604	
3a. Employer Representative - Name and Title Philip Maccioli		3b. Address (If same as 2b - state same) 20 Caven Point Avenue NJ Jersey City 07035-4604	
3c. Tel. No. (201) 209-2580	3d. Cell No. (201) 206-8395	3e. Fax No.	3f. E-Mail Address Philip.Maccioli@AECOM.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Transportation		4b. Principal product or service Commuter light rail services	
5a. City and State where unit is located: Jersey City, NJ		5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details	
6a. No. of Employees in Unit: 20		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state).		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)			
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No _____ If so, approximately how many employees are participating? _____ (Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): ASAP	11c. Election Time(s): ASAP	11d. Election Location(s): Tonnel Avenue Station (51st St. at Tonnel Avenue, North Bergen, NJ) a	
12a. Full Name of Petitioner (Including local name and number) Michael Carrube Local 352		12b. Address (street and number, city, state, and ZIP code) 350 State Street NY Brooklyn 11217-1707	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) National Association of Transportation Supervisors			
12d. Tel No. (718) 858-2113	12e. Cell No.	12f. Fax No. (718) 858-2892	12g. E-Mail Address mcarrube@ssaunion.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Howard Wien Attorney Koehler & Isaacs LLP		13b. Address (street and number, city, state, and ZIP code) 61 Broadway - 25th Floor NY New York 10006-2829	
13c. Tel No. (917) 551-1331	13d. Cell No. (917) 763-4457	13e. Fax No. (212) 791-4115	13f. E-Mail Address hwien@koehler-isaacs.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Howard Wien	Signature Howard Wien	Title Attorney	Date 04/2/2019 17:03:06

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

Controller, Trainee Specialist, Clerk, Movement Clerk, and Assistant Train Master
employed at the Hudson Bergen Light Rail system

Employees Excluded

All other employees

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
22-RC-239089

Date Filed
APRIL 5, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Torcon, Inc. and Grove Construction, LLC, single employer		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 328 Newman Springs Road, Red Bank, NJ 07701	
3a. Employer Representative - Name and Title Russell J. McEwan, Esq.		3b. Address (If same as 2b - state same) Littler Mendelson, PC, One Newark Center, 1085 Blvd, 8th Floor, Newark, NJ 07102	
3c. Tel. No. 973-848-4742	3d. Cell No.	3e. Fax No. 973-741-2303	3f. E-Mail Address mcewan@littler.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Contractor		4b. Principal product or service Building and Construction	
5a. City and State where unit is located: Red Bank, NJ		6a. No. of Employees in Unit: 20	
5b. Description of Unit Involved Included: All full-time and regular part-time journeymen and apprentice carpenters, employed by the employer. Excluded: excluding office clerical employees, guards and supervisors, as defined in the Act.		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
☒ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). Keystone Mountain Lakes Regional Council of Carpenters		8b. Address 650 Ridge Road, Suite 200, Pittsburgh, PA 15205	
8c. Tel. No. 412-922-6200	8d. Cell No.	8e. Fax No.	8f. E-Mail Address bsproule@kmlcarpenters.org
8g. Affiliation, if any		8h. Date of Recognition or Certification Unknown	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) April 30, 2019	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **No** If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

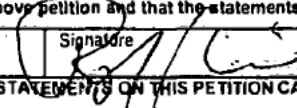
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): April 25, 2019	11c. Election Time(s): 6:30 am to 7:30 am	11d. Election Location(s): East Rutherford, NJ	
12a. Full Name of Petitioner (Including local name and number) Keystone Mountain Lakes Regional Council of Carpenters		12b. Address (street and number, city, state, and ZIP code) 650 Ridge Road, Suite 200, Pittsburgh, PA 15205	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)			

12d. Tel. No. 412-922-6200	12e. Cell No.	12f. Fax No.	12g. E-Mail Address bsproule@kmlcarpenters.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Raymond G. Heineman, Esq.		13b. Address (street and number, city, state, and ZIP code) 99 Wood Ave., South, Suite 307, Iselin, NJ, 08830	
13c. Tel. No. 732-491-2104	13d. Cell No. 732-266-8287	13e. Fax No. 732-491-2120	13f. E-Mail Address heineman@krollfirm.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Raymond G. Heineman	Signature 	Title Attorney	Date April 4, 2019
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 22-RC-239294	Date Filed APRIL 9, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.			
2a. Name of Employer Allstate Power VAC, Inc. d/b/a ACV Enviro		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 201 South 1st St NJ Elizabethport 07206-	
3a. Employer Representative - Name and Title Matt Smith		3b. Address (If same as 2b - state same) 201 South 1st St NJ Elizabethport 07206-	
3c. Tel. No. (908) 355-5800	3d. Cell No. (908) 355-5800	3e. Fax No.	3f. E-Mail Address
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Construction		4b. Principal product or service Transportation of Hazardous Waste	
		5a. City and State where unit is located: Elizabethport, NJ	
5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details			6a. No. of Employees in Unit: 11 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state).		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____ (Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): April 24, 2019	11c. Election Time(s): 4:00 am to 6:00 am and 4:00 pm to 6:00 pm		11d. Election Location(s): Employer Facility - Locker Room 1st Floor
12a. Full Name of Petitioner (including local name and number) Kevin Young International Union of Operating Engineers, Local 825		12b. Address (street and number, city, state, and ZIP code) 65 Springfield Avenue NJ Springfield 07081-	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union of Operating Engineers			
12d. Tel No. (732) 713-5049	12e. Cell No. (732) 713-5049	12f. Fax No.	12g. E-Mail Address kyoung@iuoelocal825.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Lauren Bonaguro Esq. Attorney DeCotiis Fitzpatrick Cole & Giblin LLP		13b. Address (street and number, city, state, and ZIP code) 500 Fank W. Burr Boulevard, 5th Floor NJ Teaneck 07666-	
13c. Tel No. (646) 210-0132	13d. Cell No. (646) 210-0132	13e. Fax No.	13f. E-Mail Address lbonaguro@decotiislaw.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Lauren Bonaguro Esq.	Signature Lauren Bonaguro	Title Attorney	Date 04/8/2019 16:47:52

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Attachment

Employees Included

All full-time and part-time drivers

Employees Excluded

all other employees, office clerical employees, managerial employees, professional employees, guards, and supervisors as defined in the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 22-RC-239302	Date Filed APRIL 9, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Sunbelt Rentals		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 80 Arlington Avenue NJ Kearny 07032-	
3a. Employer Representative - Name and Title Francis Hassis		3b. Address (If same as 2b - state same) 2341 Deerfield Dr. SC Fort Mill 29715-	
3c. Tel. No. (817) 821-9584	3d. Cell No.	3e. Fax No.	3f. E-Mail Address Francis.Hassis@sunbeltrentals.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Construction Services	4b. Principal product or service Equipment Rentals		5a. City and State where unit is located: Kearny, NJ

5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details		6a. No. of Employees in Unit: 4	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
☒ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).		8b. Address	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): April 23, 2019	11c. Election Time(s): 5:00pm	11d. Election Location(s): Back office next to locker room.
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12a. Full Name of Petitioner (including local name and number) Pat Hjelm International Union of Operating Engineers Local 825	12b. Address (street and number, city, state, and ZIP code) 65 Springfield Ave. 3rd Floor NJ Springfield 07081-
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Union of Operating Engineers

12d. Tel. No. (973) 671-6962	12e. Cell No. (201) 572-6658	12f. Fax No. (973) 671-9257	12g. E-Mail Address PHjelm@iuoe825.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Vipin Varghese Esq. Partner DeCotiis, FitzPatrick, Cole & Giblin, LLP		13b. Address (street and number, city, state, and ZIP code) 500 Frank W. Burr Boulevard 5th Floor NJ Teaneck 07666-	
13c. Tel. No. (201) 347-2137	13d. Cell No. (516) 510-7952	13e. Fax No. (201) 928-5088	13f. E-Mail Address varghese@decotiislaw.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Vipin Varghese Esq.	Signature Vipin Varghese	Title Partner	Date 04/9/2019 10:08:51
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

All full-time and regular part-time technicians/mechanics and drivers employed by the employer at its 80 Arlington Ave, Kearny, NJ location

Employees Excluded

All other employees, office clericals, guards, and supervisors as defined in the Act.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

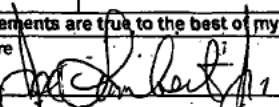
22-RC-239297

Date Filed

APRIL 9, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

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2a. Name of Employer: Altice Technical Services		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 683 Rt. 10, Randolph, N.J. 07869	
3a. Employer Representative - Name and Title: Mary Beth Bower, Sr. Director Operations		3b. Address (if same as 2b - state same): 275 Centennial Ave., Piscataway, N.J. 08854	
3c. Tel. No. 732-215-8229	3d. Cell No. 732-215-8229	3e. Fax No. 516-803-3004	3f. E-Mail Address marybeth.bower@alticetechservicesusa.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Work Center		4b. Principal Product or Service Cable TV, Phone, Internet	5a. City and State where unit is located: Randolph, N.J.
6b. Description of Unit Involved: Included: Full Time & Regular Part Time Field Service Technicians Excluded: Managers, Supervisors, Guards, Warehouse, OSP, FTTH & Construction			6a. Number of Employees in Unit: 34 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 4/9/2019 and Employer declined recognition on or about (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state)		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? If so, approximately how many employees are participating? (Name of Labor Organization) has picketed the Employer since (Month, Day, Year)			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state)			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election:		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): 4/25/2019		11c. Election Time(s): Normal Work Hours	
11d. Election Location(s): 683 Rt. 10 East, Randolph, N.J. 07869			
12a. Full Name of Petitioner (including local name and number): Joseph C. Lambert Jr. IBEW, Local 827		12b. Address (street and number, city, State and ZIP code): 263 Ward St., East Windsor, N.J. 08520	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Brotherhood of Electrical Workers			
12d. Tel. No. 609-443-4100	12e. Cell No.	12f. Fax No. 609-443-8273	12g. E-Mail Address
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Kevin D. Jarvis, Attorney		13b. Address (street and number, city, State and ZIP code): 1526 Berlin Rd., Cherry Hill, N.J. 08003	
13c. Tel. No. 856-795-2181	13d. Cell No.	13e. Fax No. 856-795-2182	13f. E-Mail Address kjarvis@obbbllaw.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Joseph C. Lambert Jr.	Signature 	Title Business Agent	Date 4/9/2019

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
22-RC-239388

Date Filed
APRIL 10, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Prestige Toyota of Ramsey		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1096 NJ Rt 17, Ramsey, NJ 07446	
3a. Employer Representative - Name and Title Carlos Girard, General Manager		3b. Address (if same as 2b - state same) same	
3c. Tel. No. 844-838-7075	3d. Cell No.	3e. Fax No.	3f. E-Mail Address
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Automobile Dealership		4b. Principal product or service Auto Service	
5a. City and State where unit is located: Mahwah, NJ		5b. No. of Employees in Unit: 30	
5b. Description of Unit Involved Included: All FT and regular PT service technicians working at the 16 McKee Drive, Mahwah, NJ, service location. Excluded: All other employees including service writers, salesman, parts dept employees, guards and supervisors as defined in the Act.		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 4/5/19 and Employer declined recognition on or about 4/9/19 (Date) (If no reply received, so state).			
<input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state). None		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)			

9. Is there now a strike or picketing at the Employer's establishment(s) involved? ☐ If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

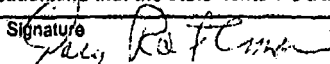
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): May 2, 2019	11c. Election Time(s): 11:00 - 1:00 pm	11d. Election Location(s):	

12a. Full Name of Petitioner (including local name and number) United Service Workers Union, Local 355, IUJAT	12b. Address (street and number, city, state, and ZIP code) 138-50 Queens Blvd., Briarwood, NY 11435
---	--

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union of Journeyman and Allied Trades			
12d. Tel No. 718-658-4848 x1263	12e. Cell No.	12f. Fax No. 718-523-4732	12g. E-Mail Address maryh@uswa.net

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title		13b. Address (street and number, city, state, and ZIP code)	
13c. Tel No.	13d. Cell No.	13e. Fax No.	13f. E-Mail Address

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Gary Rothman	Signature 	Title Attorney for Local 355	Date 4/10/19

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

Date Filed

22-RC-239499

4/12/19

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer

THE KINTOCK GROUP

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)

650 Fenwick Street, Newark, New Jersey 07114

3a. Employer Representative - Name and Title

JASON BRANCIFORTE, ESQ.

3b. Address (If same as 2b - state same)

815 CONNECTICUT AVENUE, NW, SUITE 400, WASHINGTON, DC 20006-4046

3c. Tel. No.

(202) 414-6867

3d. Cell No.

3e. Fax No.

(202) 318-7767

3f. E-Mail Address

jbranciforte@littler.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)

DETENTION FACILITY

4b. Principal product or service

REHABILITATION

5a. City and State where unit is located:

NEWARK, NEW JERSEY

5b. Description of Unit Involved

Included: Full-time and regular part-time and per diem employees in the titles of Employment Counsellor, Computer Instructor, Case Manager.

Excluded:

All other employees under the Act

6a. No. of Employees in Unit:

3

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One:



7a. Request for recognition as Bargaining Representative was made on (Date) 4/10/2019 and Employer declined recognition on or about (Date) (If no reply received, so state). Employer never responded.



7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. If so, approximately how many employees are participating? (Name of labor organization) has picketed the Employer since (Month, Day, Year)

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
4/25/2019

11c. Election Time(s):
2:30 - 3:30 P.M. AND 6:30 - 7:30 P.M.

11d. Election Location(s):
THE KINTOCK GROUP

12a. Full Name of Petitioner (including local name and number)

DISTRICT 1199J, NUHCE, AFSCME, AFL-CIO

12b. Address (street and number, city, state, and ZIP code)

9-25 ALLING STREET, 3RD FLOOR, NEWARK, NJ 07102

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
AFSCME

12d. Tel No.

(973) 624-1199

12e. Cell No.

12f. Fax No.

(973) 622-0801

12g. E-Mail Address

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title ARNOLD SHEP COHEN, ATTORNEY

13b. Address (street and number, city, state, and ZIP code)

60 PARK PLACE, 6 TH FLOOR, NEWARK, NJ 07102

13c. Tel No.

(973) 642-0161

13d. Cell No.

13e. Fax No.

(973) 802-1055

13f. E-Mail Address

ASC@OXFELDCOHEN.COM

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)

ARNOLD SHEP COHEN

Signature



Title

ATTORNEY

Date

4/10/2019

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Case No.
22-RC-239806Date Filed
APRIL 16, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, employer concerned is located. The petition must be accompanied by both a showing of interest (see bb below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Sunbelt Rentals, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 80 Arlington Avenue, Kearny, NJ 07032	
3a. Employer Representative - Name and Title: Patricia J. Hill, Esq.		3b. Address (if same as 2b - state same): 50 N. Laura Street, Suite 2600, Jacksonville, FL 32202	
3c. Tel. No. 904-598-6140	3d. Cell No. 404-815-3500	3e. Fax No. 904-598-6240	3f. E-Mail Address pjhill@sgrlaw.com
4a. Type of Establishment (factory, mine, wholesaler, etc.) Construction Services		4b. Principal Product or Service Equipment Rentals	4c. City and State where unit is located: Kearny, NJ
5b. Description of Unit Involved: Included: All full-time and regular part-time technicians/mechanics and drivers employed at the Employer's Flooring division located at its 80 North Arlington Avenue, Kearny, NJ 07032 Excluded: All Office Clerical employees, Mechanical employees, Managerial employees, Guards, and Supervisors as defined in the Act, and all other employees			5a. Number of Employees in Unit: 2 <input type="checkbox"/> <input type="checkbox"/> 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) _____ (If no reply received, so state).

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state) N/A		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____

If so, approximately how many employees are participating? _____

(Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name International Union of Operating Engineers, AFL-CIO, Local 825	10b. Address 65 Springfield Ave, 3rd Floor, Springfield, NJ 0708	10c. Tel. No. (973) 671-6962	10d. Cell No. (201) 572-6658
		10e. Fax No. (973) 671-9257	10f. E-Mail Address phjelm@iuoe825.org

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election:

11a. Election Type: Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail <input type="checkbox"/>	11b. Election Date(s): Monday, April 29, 2019	11c. Election Time(s): 7:45am	11d. Election Location(s): Back office next to locker room.
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12a. Full Name of Petitioner (including local name and number): Pat Hjelm, Business Representative

12b. Address (street and number, city, State and ZIP code):
65 Springfield Ave, 3rd Floor, Springfield, NJ 07081

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
International Union of Operating Engineers, AFL-CIO, Local 825

12d. Tel. No. 973) 671-6962	12e. Cell No. (201) 572-6658	12f. Fax No. (973) 671-9257	12g. E-Mail Address phjelm@iuoe825.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title: Vipin Varghese Esq	13b. Address (street and number, city, State and ZIP code): 500 Frank W. Burr Boulevard 5th Floor, Teaneck, NJ 07666-
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13c. Tel. No. (201) 347-2137	13d. Cell No. (516) 510-7952	13e. Fax No. (201) 928-5088	13f. E-Mail Address vvarghese@decotiislaw.com
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Vipin Varghese	Signature <i>Vipin Varghese</i>	Title Partner	Date 4/16/19
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Case No.

22-RC-239836

Date Filed

APRIL 16, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

I. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Sunbelt Rentals, Inc. 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 80 Arlington Avenue, Kearny, NJ 07032

3a. Employer Representative - Name and Title: Patricia J. Hill, Esq. 3b. Address (if same as 2b - state same): 50 N. Laura Street, Suite 2600, Jacksonville, FL 32202

3c. Tel. No. 904-598-6140 3d. Cell No. 404-815-3500 3e. Fax No. 904-598-6240 3f. E-Mail Address pihill@sgrlaw.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Construction Services 4b. Principal Product or Service Equipment Rentals 5a. City and State where unit is located: Kearny, NJ

5b. Description of Unit Involved:
Included: All full-time and regular part-time technicians/mechanics and drivers employed at the Employer's Industrial Tool division located at its 80 North Arlington Avenue, Kearny, NJ, 07032 ☐
Excluded: All Office Clerical employees, Technical employees, Managerial employees, Guards, and Supervisors as defined in the Act, and all other employees

6a. Number of Employees in Unit: 2 ☐ ☐
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) _____ (If no reply received, so state).

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state) N/A 8b. Address:

8c. Tel. No. 8d. Cell No. 8e. Fax No. 8f. E-Mail Address

8g. Affiliation, if any: 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____

If so, approximately how many employees are participating? _____

(Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name International Union of Operating Engineers, AFL-CIO, Local 825 10b. Address 65 Springfield Ave, 3rd Floor, Springfield, NJ 07081 10c. Tel. No. (973) 671-6962 10d. Cell No. (201) 572-6658 10e. Fax No. (973) 671-9257 10f. E-Mail Address phjelm@iuoe825.org

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: 11a. Election type: Manual ☒ Mail ☐ Mixed Manual/Mail ☐

11b. Election Date(s): Monday, April 29, 2019 11c. Election Time(s): 6:45am 11d. Election Location(s): Back office next to locker room.

12a. Full Name of Petitioner (including local name and number): Pat Hjelm, Business Representative 12b. Address (street and number, city, State and ZIP code): 65 Springfield Ave, 3rd Floor, Springfield, NJ 07081

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Union of Operating Engineers, AFL-CIO, Local 825

12d. Tel. No. 973) 671-6962 12e. Cell No. (201) 572-6658 12f. Fax No. (973) 671-9257 12g. E-Mail Address phjelm@iuoe825.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title: Vipin Varghese Esq. 13b. Address (street and number, city, State and ZIP code): 500 Frank W. Burr Boulevard 5th Floor, Teaneck, NJ 07666-

13c. Tel. No. (201) 347-2137 13d. Cell No. (516) 510-7952 13e. Fax No. (201) 928-5088 13f. E-Mail Address vvarghese@decotiislaw.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Vipin Varghese

Signature
Vipin Varghese

Title
Partner

Date
4/16/19

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RM PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 22-RM-240442	Date Filed APRIL 29, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB Office in the Region in which the employer concerned is located. The petition must be accompanied by a certificate of service showing service on all parties named in the petition of the following: (1) the petition; (2) Statement of Position form; and (3) Description of Procedures in Certification and Decertification Cases (Form NLRB 4812). The petition must also be accompanied by evidence supporting the statement that a labor organization has made a demand for recognition on the employer or that the employer has good faith uncertainty about majority support for an existing representative. However, if the evidence reveals the names and/or number of employees who no longer wish to be represented, the evidence shall not be served on any party.

1. PURPOSE OF THIS PETITION: RM-CERTIFICATION OF REPRESENTATIVE - One or more individuals or labor organizations have presented a claim to the Employer/Petitioner to be recognized as the representative of employees of the Employer/Petitioner or the Employer/Petitioner has a good faith uncertainty about majority support for an existing representative. If a charge under Section 8(b)(7) of the Act has been filed involving the Employer/Petitioner named in this petition, this statement shall not be deemed made. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer/Petitioner Cascades Containerboard Packaging		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1 Turner Place NJ Piscataway 08854-	
3a. Employer/Petitioner Representative - Name and Title Mathieu Cote Regional Human Resources Manager		3b. Address (If same as 2b - state same) 1 Turner Place NJ Piscataway 08854-	
3c. Tel. No. (631) 247-0404	3d. Cell No.	3e. Fax No.	3f. E-Mail Address mathieu_cote@cascades.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Containers & Packaging		4b. Principal product or service Manufacturing of corrugated products	
5a. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details			5b. City and State where unit is located: Piscataway, NJ
			6. No. of Employees in Unit: 133

Unless a charge alleging a violation of Section 8(b)(7) is pending, check EITHER item 7a. or 7b, whichever is applicable

7a. ☒ A labor organization made a demand for recognition on the Employer/Petitioner on (Date) 03/20/2019

7b. ☐ The Employer/Petitioner has a good faith uncertainty about majority support for an existing representative.

8a. Recognized or Certified Bargaining Agent - Name Luke H. Gordon United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied-Industrial and Service Workers International Union, AFL-CIO/CLC		8b. Affiliation, if any District 4 of the United Steelworkers (USW) AFL-CIO	
8c. Address 2025 Lincoln Highway Suite 130 NJ Edison 08817-		8d. Tel. No. (732) 287-4011	8e. Cell No.
		8f. Fax No.	8g. E-Mail Address LGordon@usw.org

9. Date of Recognition or Certification _____ **10. Expiration Date of Current or Most Recent Contract, if any** (Month, Day, Year) _____

11. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____

(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____

12. Organizations or individuals other than those named in item 8, which have a contract with the Employer/Petitioner or represent employees of the Employer/Petitioner or demanded recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5 above. (If none, so state)

12a. Name and affiliation if any	12b. Address	12c. Tel. No.	12d. Cell No.
		12e. Fax No.	12f. E-Mail Address

13. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

13b. Election Date(s): May 14 & 15, 2019	13c. Election Time(s): 4:00 p.m. - 6:00 p.m. each day	13d. Election Location(s): Second Floor Future Gym
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14. Representative of the Employer/Petitioner who will accept service of all papers for purposes of the representation proceeding.

14a. Name and Title Ian B. Bogaty Esq. Attorney for Cascades Containerboard Packaging Jackson Lewis P.C.		14b. Address (street and number, city, state, and ZIP code) 58 South Service Road Suite 250 NY Melville 11747-	
14c. Tel. No. (631) 247-0404	14d. Cell No.	14e. Fax No.	14f. E-Mail Address ian.bogaty@jacksonlewis.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Ian B. Bogaty Esq.	Signature Ian B. Bogaty, Esq.	Title Attorney for Cascades Containerboard	Date 04/24/2018 10:08:59
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Validation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included
Production & Maintenance employees

Employees Excluded
All other employees including supervisors, managers, office clericals, professional employees, confidential employees and guards as defined by the Act.