



*The United States Department of Labor  
Occupational Safety and Health Administration*

*This is to certify that*

**HK Metalcraft Manufacturing Corp.** located at **Lodi, New Jersey**

*Company Name*

*Location of Worksite*

*meets the requirements of the Consultation Safety and Health  
Achievement Recognition Program  
and participation is hereby approved for the term*

**March 22, 2011**

*to*

**March 22, 2012**

*Date*

*Date*



*David Michaels, PhD, MPH  
Assistant Secretary of Labor for  
Occupational Safety and Health*



**U.S. Department of Labor**

Occupational Safety and Health  
201 Varick Street  
New York, New York 10014  
Tel: (212) 337-2378  
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OSHA Website: [www.osha.gov](http://www.osha.gov)



May 3, 2011

Mr. James Gross  
Director of Maintenance  
HK Metalcraft Manufacturing Corp.  
35 Industrial Road  
Lodi, NJ 07644

Dear Mr. Gross:

I take great pleasure in informing you that, HK Metalcraft Manufacturing Corp. located in Lodi, NJ 07644 is accepted as a participant in the 21(d) SHARP Program.

In recognition of your having taken the initiative to work with the New Jersey On-Site Consultation Program to achieve the requirements of the SHARP Program, I am enclosing a Certificate of Recognition from the Assistant Secretary of Labor.

I have also instructed Lisa Levy, Area Director of the Hasbrouck Heights Area Office, to remove your company from the Programmed Inspection Schedule from March 22, 2011 until March 22, 2012. However please be advised that your participation in the SHARP Program does not diminish any of the rights and responsibilities afforded to you and your employees under the Occupational Safety and Health Act of 1970. OSHA will continue to conduct inspections in exempted sites in the following situations: a) Imminent Danger, b) Fatality and/or Catastrophe, c) Formal Complaint.

Assistant Secretary David Michaels, and I welcome you to the SHARP Program. You and your employees are to be commended for voluntarily achieving an effective safety and health program. We look forward to cooperating with you in our mutual effort to achieve outstanding employee safety and health protection.

Sincerely,

A handwritten signature in blue ink that reads "Robert D. Kulick".

Robert D. Kulick  
Regional Administrator

cc: Lisa Levy, Area Director  
Mark Wadiak, Program Manager