## **SUMMARY FORM**

## COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

Section I: Agreement Deta Public Employer:	Freehold Township Board of Education  County: Monmouth  Freehold Township Education - Custodial, Maintenance & Grounds  Employees in Unit:					
Employee Organization						
Base Year Contract Term:	7/1/2010 6/30/2013		New Contract Term 7/1/2013 6/30/2016			
Type of Settlement:	☐ Mediated Settl		Fact-Finder Recommendation			
				umn A - Total Costs	Column B New Base Year - Total Costs	
			(Last Year of Pr	revious agreement)	(First Year of Successor agreement)	
Section II: Economic			£1 200 040		£4.003.500	
Item 1         Sal           Item 2         Incl	rement		\$1,268,040 \$20,660		\$1,293,560 \$20,660	
	ngevity		\$8,650		\$10,000	
Item 4	igovity					
Item 5						
Item 6		<del></del>		· · · · · · · · · · · · · · · · · · ·		
Item 7		<del></del>				
Item 8						
Item 9	•					
Item 10						
Item 11						
Item 12						
Any additional items list on separate sh	neet	Additional Items				
Section III: TotalS - Sum of costs in each column			\$1,297,350		\$1,324,220	
			,	Total)	(Total)	
				A fair and a second at the second		
Section IV: Analysis of new succes	sor agreement		<u>NEW AGRE</u>	EMENT ANALYSIS		
Total Base Year(previous agreement)	\$1,297,350	<u> </u>				
Effective Date (m/d/yyyy)		7/1/2013	7/1/2014	7/1/2015		
Percent Increase		2.01	1.93	1.85		
Total cost of increase		\$25,520	\$24,980	\$24,440		
Total base salary (successor agreemen	nt)	\$1,293,560	\$1,318,540	\$1,342,980		
Section V: Impact of Settlen	nent - average annual	increase over term of agi	reement	•		
Percentage Impact (average per year o	over term of agreement)	1.93				
Dollar impact (average per year over te	erm of agreement)	\$24,980.00				
Section VI						
Health Insurance (Indicate costs assoc	rigted on each (ine)	Toda is				
Tradition was affect to the costs assure	ance on cachancy	Base Year	Year 1			
Cost of Health Plan		\$412,571	\$402,033			
Employee Contributions		\$19,021	\$19,403			
Prescription		*******				
Dental		\$30,063	\$30,063			
Vision				-		
The undersigned certifies to	hat the foregoing figu	res are true and is awai	re that if any of the i	foregoing items are fals	se, s/he is subject to punisment.	
Section VII						
Prepared by:	Brian P. I	Boyle		Title	School Business Administrate	or
		Print Name		-		
	Brian P.	Boyle	P Brigo a time make 1 beamen. Provide of Education, of the make make make 2.27 by the color- gist 45 (8).	Date	11/4/2014	
		Signature				