New Jersey Public Employment Relations Commission **NON-POLICE AND FIRE**

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #	SECTION I: Parties and Term of Contracts							
1	Public Employer:	Township of Low	/er	County:	Cape May Coun	ty		
2	Employee Organization:	yee Organization: Lower Township To		rs Union Number of Employees in Un		40		
3	Base Year Contract Term:	1/1/2016 - 12/31/2	019	New Contract	Term:	1/1/2020 - 12/31/2023		
	SECTION II: Type of Contract Settlement (please check only one)							
4	X Contract settled without neutral assistance							
5	Contract settled with assistance of mediator							
6	Contract settled with assistance of fact-finder							
7	Contract settled with assistance of super-conciliator							
8	If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?							
	Yes No							
	SECTION III: Salary Base							
	The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.							
9	Salary Costs in Base Year		\$ 2,025,423.18					
10	Longevity Costs in Base Year		\$ -					
11	Total Salary Base	\$ 2,025,423.18						
	SECTION IV: Salary Increa	ses for Each yea	ar of New Agree	ment*				
		Year 1	Year 2	Year 3	Year 4			
12			l]		
	Effective Date (month/day/year)	1/1/2020	1/1/2021	1/1/2022	1/1/2023			
13	Effective Date (month/day/year) Cost of Salary Increments (\$)			1/1/2022 \$ 56,820.61	1/1/2023 \$ 56,648.30			
13 14	Cost of Salary Increments (\$) Salary Increase Above	\$ 73,981.68						
14	Cost of Salary Increments (\$) Salary Increase Above Increments (\$)		\$ 59,453.72	\$ 56,820.61	\$ 56,648.30			
	Cost of Salary Increments (\$) Salary Increase Above	\$ 73,981.68 \$ -	\$ 59,453.72 \$ -	\$ 56,820.61 \$ -	\$ 56,648.30 \$ -			

3.65%

Percentage increase over prior

18

year

2.83%

2.63%

2.56%

^{*}If conract duration is longer than five years, please add an additional page.

\$ 100,689.16

11.67%

\$ 105,412.56

12.80%

25

26

27

Total Cost of Insurance

Employee Insurance Contributions

Employee Contributions as % of Total Insurance Cost

Employer:	Township of Lower	Employee Organization:	Lower Township Teamsters Union	Page 3		
SECTION VI:	Medical Costs (continued)				
28	Identify any insurance changes that were included in this C.N.A.					
	SECTION VII: Certification and Signature					
29	The undersigned certifies that the foregoing figures are true:					
	Print Name:	Lauren Read				
	Position / Title:	CFO, Township of Lowe	er			
	Signature:	James Re				
	Date:	10/2/2020				
	Send this completed and si	gned form along with an electron	nic copy of the contract and the signed ce	rtification		

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016

Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective negotiations agreement for the term beginning 1/1/2020 through 12/31/2023

Employer:	Township of Lower				
County:	Cape May County				
Date:	10/2/2020				
Name:	Lauren Read				
•	Print Name				
Title:	CFO, Township of Lower				
Signature:	of Real				