

SUMMARY FORM

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

Section I: Agreement Details

Public Employer: Township of Hopewell County: Mercer
 Employee Organization: AFSCME Employees in Unit: 24
 Base Year Contract Term: 1/1/2008 12/31/2010 New Contract Term 1/1/2011 12/31/2012
 Type of Settlement: Mediated Settlement Fact-Finder Recommendation Voluntary Settlement Super Conciliation

	Column A Base Year - Total Costs <i>(Last Year of Previous agreement)</i>	Column B New Base Year - Total Costs <i>(First Year of Successor agreement)</i>
Section II: Economic		
Item 1 <u>Salary</u>	<u>\$1,357,916</u>	<u>\$1,308,876</u>
Item 2 <u>Increment</u>		
Item 3 <u>Longevity</u>	<u>\$18,400</u>	<u>\$33,500</u>
Item 4 <u>Stipends CDL/Hazmat</u>	<u>\$6,042</u>	<u>\$5,834</u>
Item 5 _____		
Item 6 _____		
Item 7 _____		
Item 8 _____		
Item 9 _____		
Item 10 _____		
Item 11 _____		
Item 12 _____		
Any additional items list on separate sheet Additional Items		
Section III: Totals - Sum of costs in each column	<u>\$1,382,358</u> (Total)	<u>\$1,348,210</u> (Total)

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year (previous agreement)	<u>\$1,382,358</u>				
Effective Date (m/d/yyyy)	<u>1/1/2011</u>	<u>1/1/2012</u>			
Percent Increase	<u>0.0%</u>	<u>2.00</u>			
Total cost of increase ..	<u>-\$34,148</u>	<u>\$30,178</u>			
Total base salary (successor agreement)	<u>\$1,348,210</u>	<u>\$1,378,387</u>			

Section V: Impact of Settlement - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 1.0
 Dollar Impact (average per year over term of agreement) -\$1,985.00

Section VI

	Health Insurance (Indicate costs associated on each line)				
	Base Year	Year 1			
Cost of Health Plan	<u>\$270,911</u>	<u>\$293,698</u>	<u>\$313,554</u>		
Employee Contributions		<u>\$10,885</u>	<u>\$25,455</u>		
Prescription	<u>\$82,148</u>	<u>\$100,655</u>	<u>\$104,667</u>		
Dental	<u>\$16,316</u>	<u>\$16,369</u>	<u>\$18,024</u>		
Vision					

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.

Section VII

Prepared by: Elaine Borges Title: CFO
 Print Name
Digitally signed by Elaine Borges
 DN: cn=Elaine Borges, o=Township of Hopewell, ou=Finance, email=eborges@hopewelltp.org, c=US
 Date: 2012.09.17 11:35:05 -0400
 Signature
 Date: 9/17/2012