# 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 bargaining agreement for the term beginning 1/1/2025 thru 12/31/2027.

Employer: Borough of Pompton Lakes

County: Passaic

Date: 1/22/2025

Name: Michael Carelli
Print Name

5 111 ....

Signature

# New Jersey Public Employment Relations Commission

### **NON-POLICE AND FIRE**

## **COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line #	<b>‡</b>							
	SECTION I: Parties a							
1	Public Employer: Bor	Public Employer: Borough of Pompton Lakes		County: Passaic				
2	Employee Organization	Employee Organization: Teamsters Local 11		Number of Employees in Unit: 36				
3	Base Year Contract Ter	January 1, 2020 - December 31, 2024		New Contract Term: January 1 2025 - December 31, 2025				
	SECTION II: Type of	Contract Settleme	nt (please check o	nly one)				
4	Contract sett	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 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 Ye	ar \$ 1,452,524						
10	Longevity Costs in Base Year		<b>\$</b> 0					
11	Total Salary Base	Total Salary Base \$		3				
	SECTION IV: Salary	Increases for Each	Year of New Agre	ement*				
12	Effective Date	Year 1 1/1/2025	Year 2 1/1/2026	Year 3 1/1/2027	Year 4	Year 5		
13	(month/day/year) Cost of Salary	164300	94500	94500				
14	Increments (\$) Salary Increase Above	0	0	0				
15	Increments (\$) Longevity Increase (\$)	0	0	0				
16	Total \$ Increase	164300	94500	94500				
17	(sum of lines 13-15) New Salary Base (\$)	1,616,824.64	1,711,324.6	1,805,824.6				
18	Percentage increase over prior year	10.71 %	5.68 %	5.68 %	%	<u>%</u>		
*If contract duration is longer than five years, please add an additional page.								

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mpl	over: Borough of Por	mpton Lakes	Empl	oyee Organization:	Teamsters	Local 11	Page 2
	SECTION V: Increas	ses in Other Co					
19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
						j	
20	Totals(\$):						
	. • • • • • • • • • • • • • • • • • • •				1 = =		E
	*If contract duration	is longer than fiv	e years, please	add an additional p	oage.		
	SECTION VI: Medic	cal Costs					
				Base Year			
21	Health Plan Cost			\$ 620,59	3.00 <b>\$</b> 696	,596	
22	Prescription Plan Cos	t		\$ 0	\$ <sup>0</sup>		
23	Dental Plan Cost			<b>\$</b> 0	<b>\$</b> 0		
24	Vision Plan Cost			\$ O	\$ <sup>0</sup>		
25	Total Cost of Insurance	ce		<b>s</b> 620,59	3.00 s 696	,596.00	

26

27

Employee Insurance Contributions

Employee Contributions as % of Total Insurance Cost

\$ 17,886.00

1.5

\$ 20,127.00

% 1.5

Employer: Borough of Pompton Lakes	Employee Organization: Teamsters Local 11	Page :
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Section VI: Medical Costs (continued)

### 28 Identify any insurance changes that were included in this CNA.

The Borough of Pompton Lakes negotiated a voluntary switch to the State Health Benefits Plan NJ2035 plan, by supplementing the copays, coinsurances, and out of pockets by implementing the Difference Card, which is a reimbursement savings account for the employee. No changes to the minimum contribution of 1.5% of the employees salary were made this round. The Borough anticipates a change for both active and retirees for the next contract beginning on January 1, 2028.

### **SECTION VII: Certification and Signature**

29 The undersigned certifies that the foregoing figures are true:

Print Name:

Position/Title:

Borough Administrator

Signature:

January 22, 2025

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: <a href="mailto:contracts@perc.state.nj.us">contracts@perc.state.nj.us</a>

NJ Public Employment Relations Commission Conciliation and Arbitration PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

**Revised 8/2016**