## New Jersey Public Employment Relations Commission NON-POLICE AND FIRE FORTING NECOTIATIONS ACREEMENT SUMMARY FOR

## **COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line	#					
	SECTION I: Parties					
1	Public Employer: BOI	ROUGH OF ALLEI	NDALE	County: BERGEN		
2	Employee Organizatio	DEDT OF BUR		Number of Employee	s in Unit: 9	
3	Base Year Contract Te	rm: 1/1/2016 - 12/	31/2010	New Contract Term:	1/1/2020 - 12/31/2	023
	SECTION II: Type of		ent (please check	only one)		
4	ПЛ	tled without neutral				
5	Contract sett	led with assistance o	of mediator			
6	Contract sett	led with assistance o	of fact-finder			
7	Contract sett	led with assistance o	of super-conciliator			
8	If contract was settled		•	a report with recomn	nendations?	
•	Yes No No					
	SECTION III: Salary	Base				
	The salary base is the the parties negotiate			pired or expiring agre	eement. This is the b	ase cost from which
9	Salary Costs in Base Yo	ear	\$ 562,885			
10	Longevity Costs in Bas	se Year	<b>\$</b> 0			
11	Total Salary Base		<sub>\$</sub> 562,885			
	SECTION IV: Salary	Increases for Each	Year of New Agre	eement*		
42	Effective Date	Year 1	Year 2	Year 3	Year 4	Year 5
12	(month/day/year)	1/1/2020	1/1/2021	1/1/2022	1/1/2023	<u> </u>
13	Cost of Salary Increments (\$)	7,650	7,650	7,650	7,650	
14	Salary Increase Above Increments (\$)	11,411	11,792	12,182	12,577	
15	Longevity Increase (\$)	0	0	0	0	
16	Total \$ Increase (sum of lines 13-15)	19,061	19,442	19,832	20,227	
17	New Salary Base (\$)	581,946	601,388	621,220	641,447	
18	Percentage increase over prior year	3.39 %	3.34 %	3.30 %	3.26 %	<u></u> %
	*If contract duration i	s longer than five ye	ars, please add an ac	dditional page.		

## SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items\*

19	STANDBY	Base Year Cost (\$) 22,425	Year 1 Increase (\$) 1725	Year 2 Increase (\$) 1725	Year 3 Increase (\$) 1725	Year 4 Increase (\$) 1725	Year 5 Increase (\$)
	CLOTHING ALLOWANCE	8,100	225	450	450	225	
20	Totals(\$):	30,525	1,950	2,175	2,175	1,950	

<sup>\*</sup>If contract duration is longer than five years, please add an additional page.

	SECTION VI: Medical Costs		
		Base Year	Year 1
21	Health Plan Cost	<sub>\$</sub> 183,473	ş 191,656
22	Prescription Plan Cost	şN/A	şN/A
23	Dental Plan Cost	ş <mark>9,332</mark>	ş 9,424
24	Vision Plan Cost	şN/A	\$N/A
25	Total Cost of Insurance	\$ 192,805	ş 201,080
26	Employee Insurance Contributions	<sub>\$</sub> 39,700	ş <mark>39,793</mark>
27	Employee Contributions as % of Total Insurance Cost	20.59	<sub>%</sub> 19.79

Page 2 of 3 (complete all pages)

Section VI: Medical Costs (continued)

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

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name:

M. ALISSA MAYER

Position/Title:

CHIEF FINANCIAL OFFICER

Signature:

10/21/2020

Date:

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

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