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

## **COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Lille	TT .						
	SECTION I: Parties	and Term of Con	tracts				
1	Public Employer: To	Township of Hamilton		County: Mercer			
2	Employee Organization	on: Blue Collar		Number of Employees in Unit: 171			
3	Base Year Contract Te	July 1, 2008 -	June 30, 2013	New Contract Term	July 1 2013 - Dece	ember 31, 2018	
	SECTION II: Type o	f Contract Settler	nent (please checl	k only one)			
4	Contract set	tled without neutra	al assistance				
5	Contract sett	tled with assistance	of mediator				
6	Contract sett	tled with assistance	of fact-finder				
7	Contract sett	led with assistance	of super-conciliator				
8	If contract was settled				nmendations?		
	Yes No No						
	SECTION III: Salary Base						
	The salary base is the the parties negotiate			expired or expiring ag	reement. This is the	base cost from which	
9	Salary Costs in Base Ye	ear	<b>\$</b> 10,053,770				
10	Longevity Costs in Bas	e Year	\$ 132,230	han data material and the selection of the desired transfer of the selection of the selecti			
11	Total Salary Base		ş 10,186,000				
	SECTION IV: Salary	Increases for Eac	h Year of New Agi	reement*			
		Year 1	Year 2	Year 3	Year 4	Year 5	
12	Effective Date (month/day/year)	7-1-13	1-1-14	1/1/15	1-1-16	7-1-16	
13	Cost of Salary Increments (\$)	96,889	98,100	99,326	100,319	101,323	
14	Salary Increase Above Increments (\$)	0	117,515	118,984	120,174	121,376	
15	Longevity Increase (\$)	20,600	20,600	8,400	8,900	8,900	
16	Total \$ Increase (sum of lines 13-15)	117,489	236,215	226,711	229,394	231,599	
17	New Salary Base (\$)	9,630,356	9,750,735	9,872,619	9,971,346	10,071,059	
18	Percentage increase over prior year	0 %	1.25 %	1.25 %	1 %	1 %	

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

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## **COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line	#							
	SECTION I: Parties	and Term of Cont	racts					
1	Public Employer: To	Public Employer: Township of Hamilton			County: Mercer			
2	Employee Organization	Employee Organization: Blue Collar			es in Unit: 171	magnational colored for the state of the sta		
3	Base Year Contract To	July 1, 2008	June 30, 2013	New Contract Term:	July 1, 2013 - Dece	ember 31, 2018		
	SECTION II: Type o	f Contract Settlem	nent (please check	only one)				
4	Contract set	tled without neutra	l assistance					
5	Contract set	tled with assistance	of mediator					
6	Contract set	tled with assistance	of fact-finder					
7	Contract sett	led with assistance	of super-conciliator					
8	If contract was settled	d in fact-finding, did	the fact-finder issue	a report with recom	mendations?			
	Yes No							
	SECTION III: Salary	Base						
	The salary base is the the parties negotiate		0.53	xpired or expiring agr	eement. This is the I	base cost from wh	ıich	
9	Salary Costs in Base Y	ear	\$ 10,053,770					
10	Longevity Costs in Bas	se Year	\$ 132,230					
11	Total Salary Base		ş 10,186,000	and the second s				
	SECTION IV: Salary	Increases for Each	n Year of New Agre	eement*				
		Year 1	Year 2	Year 3	Year 4	Year 5		
12	Effective Date (month/day/year)	1-1-17	7-1-17	1/1/18	7-1-18		_	
13	Cost of Salary Increments (\$)	102,336	103,359	104,646	105,954			
14	Salary Increase Above Increments (\$)	122,590	123,816	125,357	126,924			
15	Longevity Increase (\$)	9,300	9,300	3,000	3,000			
16	Total \$ Increase (sum of lines 13-15)	234,226	236,475	233,003	225,878			
17	New Salary Base (\$)	10,171,770	10,273,487	10,401,392	10,531,410			
18	Percentage increase over prior year	1 %	1. %	1.25 %	1.25 %	9	%	

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

mpl	oyer: Township of Ha	milton	Emplo	yee Organizatior	Blue Collar		Page 2
	SECTION V: Increa	ses in Other (				onomic Items*	
19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	Sick Time Buyback	48,893	0	611	619	501	506
	Overtime	555,643	129,290	8,562	8,669	7,022	7,092
				Programmer of the programmer o	position and control of the control		
20	Totals(\$):	604,536	129,290	9,173	9,288	7,523	7,598
	*If contract duration	is longer than f	iive years, please a	dd an additional <sub>l</sub>	page.		
	SECTION VI: Medic	al Costs					and the second section of the second
				Base Year			
1	Health Plan Cost			\$ 2,311,0			
2	Prescription Plan Cost	t		\$ 609,12		2) yeli in 12 (2000)	
3	Dental Plan Cost			\$ 175,18	\$ 167,5	82	

		Base Year	Year 1
21	Health Plan Cost	\$ 2,311,020	\$ 2,065,545
22	Prescription Plan Cost	\$ 609,120	\$ <mark>740,060</mark>
23	Dental Plan Cost	\$ 175,188	\$ 167,582
24	Vision Plan Cost	\$ 16,032	<b>\$</b> 13,991
25	Total Cost of Insurance	<b>\$</b> 3,111,360	\$ 2,987,178
26	Employee Insurance Contributions	<b>\$</b> 0	\$ 548,987
27	Employee Contributions as % of Total Insurance Cost	0	<sub>%</sub> 18.4 %

Page 2 of 3 (complete all pages)

5	oyer: Township of Ha	milton	Ford	oyee Organization	Blue Collar		
Empi	SECTION V: Increa					onomic Items*	Page 2
19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	<i>Year 2</i> Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	Sick Time Buyback	48,893	511	516	649	660	
	Overtime	555,643	7,163	7,234	9,097	9,247	
		And the state of t					
20	Totals(\$):	604,536	7,674	7,750	9,746	9,907	
	*If contract duration	is longer than f	ive years, please o	add an additional <sub>l</sub>	page.		
	SECTION VI: Medic	al Costs					
21	Health Plan Cost			\$ 2,311,0		545	
22	Prescription Plan Cost	t:		\$ 609,12	0 \$ 740,00	30	
23	Dental Plan Cost			\$ 175,18			
24	Vision Plan Cost			\$ 16,032	\$ 13,99°		

25

26

27

Total Cost of Insurance

**Employee Insurance Contributions** 

Employee Contributions as % of Total Insurance Cost

\$ 3,111,360

\$ 0

0

\$ 2,987,178

\$ 548,987

18.4

Employ	yer: Township of Han	nilton	Employee Organization	Blue Collar	Page 3
	n VI: Medical Costs (				
28	Identify any insuran	ce changes that were i	included in this CNA.		
29	Print Name: Position/Title: Signature:	cation and Signature tifies that the forego vid J. Kenny siness Administration	ing figures are true:		
	Send this completed form to: contracts@		ong with an electronic c	copy of the contract and the sign	ed certification
	NI Public Employme	nt Relations Commiss	sion		

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016