New Jersey Public Employment Relations Commission POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #		
	SECTION I: Parties and Term of Contracts	
1	Public Employer: Township of Rochelle Park Cou	nty: Bergen
2	Employee Organization: Police Department Num	nber of Employees in Unit: 15
3	Base Year Contract Term: 1/1/2011-12/31/2014	
4	New Contract Term: 1/1/15-12/31/2018	
E-P-2-2000-2000-2000-2000-2000-2000-2000		
	SECTION II: Type of Contract Settlement (please check	conly one)
5	Contract settled without neutral assistance	
6	Contract settled with assistance of mediator	
7	Contract settled with assistance of fact-finder	
8	Contract settled in Interest Arbitration	
9	If contract was settled in Interest Arbitration, did the Arbitrator iss	sue an Award? Yes No
	SECTION III: Base Salary Calculation	
	The "base year" refers to the final year of the expiring or expired a	ngreement.
	N.J.S.A. 34:13A-16.7(a) defines base salary as follows: "Base salar or table and any amount provided pursuant to a salary increment, it shall also include any other item agreed to by the parties, or any understood by the parties in the prior contract. Base salary shall rhealth and medical insurance costs."	including any amount for longevity or length of service. other item that was included in the base salary as
10	Salary Costs in base year	\$ 1319903.00
11	Longevity Costs in base year	\$ 32259.07
12	Other base year salary costs	
	College Pay \$ 13680.00	
	Holiday Pay \$ 179082.32	
	\$	
	\$	
	Sum of "Other" Costs Listed in Line 12.	\$ 192762.32
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	\$ 1544924.39

Employer: Township of Rochelle Park	Employee Organization: Police Department	Page 2

SECTION IV: Increase in Base Salary Cost (for each year of New CNA)

Total Base Salary Cost from Line 13: \$\square\$1544924.39

	Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	1/1/2015	1/1/2016	1/1/2017	1/1/2018		
16	Cost of Salary Increments (\$)	32487.33	48291.67	49979.17	53687.50		
17	Salary Increase Above Increments (\$)	18474.44	18797.74	19126.70	19461.42		
18	Longevity Increase (\$)	559.49	569.28	579.25	589.38		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
19	Total Increased Cost for "Other" Items (\$)	6914.41	9102.58	9376.17	9924.73	-	
20	Total Increase (\$) (sum of lines 16-19)	58435.67	76761.27	79061.28	83663.03		

SECTION V: Average Increase Over Term of New CNA

Dollar Increase Over Life of Contract \$\frac{297921.25}{19.28}\$ [Take sum of all amounts listed on Line 20 above]

Percentage Increase Over Life of Contract | 19.28 | % [Divide amount on Line 21 by amount on Line 14]

Average Percentage Increase Per Year | 4.82 | % [Divide percentage on Line 22 by number of years of the contract]

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases →

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24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
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25	Totals (\$):				The second secon		and the second s	

SECTION VII: Medical Costs

	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$ 394000.00	\$ 410000.00
27	Prescription Plan Cost	\$ 440000.00	\$ 115000.00
28	Dental Plan Cost	\$ <u></u>	\$
29	Vision Plan Cost	ş	\$
30	Total Cost of Insurance	\$ 504000.00	\$ 525000.00

Page 3 of 4 (complete all pages)

Emplo	oyer: Township of Rochelle Park	Employee Organization: Police Department	Page 4				
SECTI	ON VII: Medical Costs (continued)						
31 32	Employee Insurance Contributions Contributions as % of Total Insurance Cost	\$\frac{71040.00}{26} \frac{\$ 86170.00}{29} \frac{86170.00}{\%}					
33	Identify any insurance changes that we	Identify any insurance changes that were included in this CNA.					
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- Andrews							
			,				
	SECTION VIII. Contification and Signat						
34	SECTION VIII: Certification and Signate The undersigned certifies that the fore						
	=						
	Print Name: Roy Riggitano	helitik kerinda kendi meliti mininta itan sempula merinti ina di meliti menanda alam di ili menanda sempula berinda sempula ber					
	Position/Title: CFO						
	Position/Title.						
	Signature: Kay Kugga						
	Date: 12/26/17						
·							
	Send this completed and signed form	along with an electronic copy of the contract and th	ne sioned				
	certification form to: contracts@pere		ie signed				
v v mn-apro							
	NJ Public Employment Relations Comr Conciliation and Arbitration	mission					
	PO Box 429						
	Trenton, NJ 08625						

Revised 8/2016

Phone: 609-292-9898