

SECTION IV: Increase in Base Salary Cost (for each year of New CNA)14 Total Base Salary Cost from Line 13: \$ 1,274,592

Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15 Effective Date (month/day/year)	<u>1/1/2018</u>	<u>1/1/2019</u>	<u>1/1/2020</u>	<u>1/1/2021</u>	<u>1/1/2022</u>	<u></u>
16 Cost of Salary Increments (\$)	<u>25,358</u>	<u>5,723</u>	<u>5,866</u>	<u>4,810</u>	<u>4,906</u>	<u></u>
17 Salary Increase Above Increments (\$)	<u>40,072</u>	<u>26,145</u>	<u>26,799</u>	<u>21,975</u>	<u>22,415</u>	<u></u>
18 Longevity Increase (\$)	<u>249</u>	<u>214</u>	<u>219</u>	<u>180</u>	<u>183</u>	<u></u>
19 Total Increased Cost for "Other" Items (\$)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u></u>
20 Total Increase (\$) (sum of lines 16-19)	<u>65,679</u>	<u>32,082</u>	<u>32,884</u>	<u>26,965</u>	<u>27,504</u>	<u></u>

SECTION V: Average Increase Over Term of New CNA

21 Dollar Increase Over Life of Contract \$ 126,014 [Take sum of all amounts listed on Line 20 above]

22 Percentage Increase Over Life of Contract 9.88 % [Divide amount on Line 21 by amount on Line 14]

23 Average Percentage Increase Per Year 1.97 % [Divide percentage on Line 22 by number of years of the contract]

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases→

24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	None							
25	Totals (\$):							

SECTION VII: Medical Costs

Insurance Costs		Base Year	Year 1
26	Health Plan Cost	\$ 294,948	\$ 294,948
27	Prescription Plan Cost	\$ N/A	\$
28	Dental Plan Cost	\$ 0	\$
29	Vision Plan Cost	\$ 0	\$ 0
30	Total Cost of Insurance	\$ 294,948	\$ 294,948

Employer: Borough of Mountain Lakes

Employee Organization: PBA #310

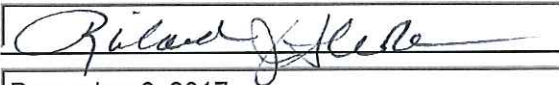
SECTION VII: Medical Costs (continued)

31	Employee Insurance Contributions	\$ <u>91,469</u>	\$ <u>101,640</u>
32	Contributions as % of Total Insurance Cost	<u>31</u> %	<u>34</u> %

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

SECTION VIII: Certification and Signature

34 The undersigned certifies that the foregoing figures are true:

Print Name: Richard J. Sheola
Position/Title: Borough Manager
Signature: 
Date: December 6, 2017

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission
Conciliation and Arbitration
PO Box 429
Trenton, NJ 08625
Phone: 609-292-9898

Revised 8/2016