## New Jersey Public Employment Relations Commission POLICE AND FIRE

## **COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line#		ENT SOMMANT FORM						
	SECTION I: Parties and Term of Contracts							
1	Public Employer: Borough of Roseland Cour	ty: Essex						
2	Employee Organization: Roseland Patrolman's FOP 184 Num	ber of Employees in Unit: 17						
3	Base Year Contract Term: Jan. 1, 2013-Dec 31,2017							
4	New Contract Term: Jan. 1, 2018-Dec. 31, 2021							
	SECTION II: Type of Contract Settlement (please check	only 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 issu	e an Award? Yes No No						
	SECTION III: Base Salary Calculation							
	The "base year" refers to the final year of the expiring or expired agreement.							
	N.J.S.A. 34:13A-16.7(a) defines base salary as follows: "Base salary' means the salary provided pursuant to a salary guide or table and any amount provided pursuant to a salary increment, including any amount for longevity or length of service. It shall also include any other item agreed to by the parties, or any other item that was included in the base salary as understood by the parties in the prior contract. Base salary shall not include non-salary economic issues, pension and health and medical insurance costs."							
10	Salary Costs in base year	\$ 1,569,371.00						
11	Longevity Costs in base year	s 8,371.00						
12	Other base year salary costs	The second secon						
	Detective \$ 2,050.00							
	Emt Certification \$7,500.00							
	S							
	\$							
	Sum of "Other" Costs Listed in Line 12.	<b>\$</b> 9,550.00						
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	\$ 1,587,292.00						

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

1,587,292.00 Total Base Salary Cost from Line 13: 14

	Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	01/01/18	01/01/19	01/01/20	01/01/21		
16	Cost of Salary Increments (\$)	51,430.00	10,667.00	10,667.00	10,667.00		
17	Salary Increase Above Increments (\$)	41,819.00	78,110.00	37,984.00	38,634.00		
18	Longevity Increase (\$)	209.00	1,811.00	765.00	222.00		
19	Total Increased Cost for "Other" Items (\$)	1,000.00					
20	Total Increase (\$) (sum of lines 16-19)	94,459.00	90,588.00	49,416.00	49,523.00		-

## SECTION V: Average Increase Over Term of New CNA

\$ 283,985.00 21 **Dollar Increase Over Life of Contract** [Take sum of all amounts listed on Line 20 above] Percentage Increase Over Life of Contract 17.89 22 % [Divide amount on Line 21 by amount on Line 14] 4.47 23 Average Percentage Increase Per Year 28 [Divide percentage on Line 22 by number of years of the contract]

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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
	Uniform Allowance	18,000.00	3250.00	850.00	850.00	850.00	With the second	
	College Degree	4,400.00	0	0	0	0		
	Holiday Sell Back	59,960.00	3,633	3,484.00	1,901.00	1,905.00		
						Control to the specific state of the state o		
								Opinism (market party pa
25	Totals (\$):							

	SECTION VII: Medical Costs		
	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$ 356,061.00	\$377,971.00
27	Prescription Plan Cost	\$	\$
28	Dental Plan Cost	<b>\$</b> 12,180.00	\$ 20,180.00
29	Vision Plan Cost	\$ 789.00	\$ 789.00
30	Total Cost of Insurance	<b>\$</b> 377,030.00	\$ 398,981.00

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Empl	loyer: Borough of Roseland	Employee Organization: Roseland Patrolman's FOP 184	Down 4					
SECT	TION VII: Medical Costs (continued)		Page 4					
		учествення при						
31	Employee Insurance Contributions	\$\frac{115,440.00}{\\$} \frac{121,310.00}{\}						
32	Contributions as % of Total Insurance C	Cost 32 % 32 %						
33	Identify any insurance changes that	were included in this CNA.						
<u> </u>								
	SECTION VIII: Certification and Sign	ature						
34	The undersigned certifies that the fo	regoing figures are true:						
	Print Name: Maureen Chumaca	A STATE OF THE STA						
	Position/Title: Borough Administra	ator						
	Signature: Maurean Chu	imics						
	Date: 6-27-2018							
·								
	send this completed and signed form certification form to: <a href="mailto:contracts@pe">contracts@pe</a>	m along with an electronic copy of the contract and the sign	ned					
		·	*****					
	NJ Public Employment Relations Com Conciliation and Arbitration	ımission						
	PO Box 429							
	Trenton, NJ 08625							

Revised 8/2016

Phone: 609-292-9898