

Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective bargaining agreement for the term beginning 6/1/2018 thru 5/31/2020.

Employer: Old Bridge Municipal Utilities Authority

County: Middlesex

Date: 5/24/2019

Name: Michelle Smith

Print Name

Title: Comptroller

Michelle Smith Digitally signed by Michelle Smith
Date: 2019.05.24 09:36:52 -04'00'

Signature

New Jersey Public Employment Relations Commission
NON-POLICE AND FIRE
COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #

SECTION I: Parties and Term of Contracts

1 Public Employer: Old Bridge Municipal Utilities Authority County: Middlesex
 2 Employee Organization: Association of the OBMUA Number of Employees in Unit: 41
 3 Base Year Contract Term: 06/01/2018 New Contract Term: 05/31/2020

SECTION II: Type of Contract Settlement (please check only one)

4 Contract settled without neutral assistance
 5 Contract settled with assistance of mediator
 6 Contract settled with assistance of fact-finder
 7 Contract settled with assistance of super-conciliator
 8 If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?
 Yes No

SECTION III: Salary Base

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9 Salary Costs in Base Year \$ 2668762
 10 Longevity Costs in Base Year \$ 131126
 11 Total Salary Base \$ 2799888

SECTION IV: Salary Increases for Each Year of New Agreement*

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	<u>06/01/2018</u>	<u>06/01/2019</u>			
13 Cost of Salary Increments (\$)	<u>54205</u>	<u>55348</u>			
14 Salary Increase Above Increments (\$)					
15 Longevity Increase (\$)	<u>2607</u>	<u>2659</u>			
16 Total \$ Increase (sum of lines 13-15)	<u>56812</u>	<u>58007</u>			
17 New Salary Base (\$)	<u>2856700</u>	<u>2914707</u>			
18 Percentage increase over prior year	<u>2.0</u> %	<u>2.0</u> %			

**If contract duration is longer than five years, please add an additional page.*

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

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	CDL	83200	33280	33280			
	License	33800	9880	9880			
	Meals	120	30	0			
	Shift Differential	10950	2190	0			
20	Totals(\$):	128070	45380	43160			

**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	\$ 930340	\$ 1071552
22	Prescription Plan Cost	\$ 0	\$ 0
23	Dental Plan Cost	\$ 64274	\$ 66478
24	Vision Plan Cost	\$ 12371	\$ 13022
25	Total Cost of Insurance	\$ 1006986	\$ 1151052
26	Employee Insurance Contributions	\$ 205150	\$ 263853
27	Employee Contributions as % of Total Insurance Cost	20.4 %	22.9 %

Section VI: Medical Costs (continued)

28 Identify any insurance changes that were included in this CNA.
none

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name: Michelle Smith
Position/Title: Comptroller
Signature: Michelle Smith
Date: 05/24/2019

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