

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

14	Total Base Salary Cost from Line 13:	<u>\$1,575,070.00</u>					
	Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	<u>1-1-18</u>	<u>1-1-19</u>	<u>1-1-20</u>	<u>1-1-21</u>		
16	Cost of Salary Increments (\$)	<u>2.43</u>	<u>2.25</u>	<u>2.25</u>	<u>2.75</u>		
17	Salary Increase Above Increments (\$)	<u>8,413.00</u>	<u>20,655.00</u>	<u>59,137.00</u>	<u>14,271.00</u>		
18	Longevity Increase (\$)	<u>1,800.00</u>	<u>2,000.00</u>	<u>2,000.00</u>	<u>2,000.00</u>		
19	Total Increased Cost for "Other" Items (\$) <i>Clothing Rolled In</i>		<u>23,000.00</u>				
20	Total Increase (\$) (sum of lines 16-19)	<u>39,829.00</u>	<u>63,240.00</u>	<u>93,330.00</u>	<u>68,531.00</u>		

SECTION V: Average Increase Over Term of New CNA

21	Dollar Increase Over Life of Contract	<u>\$214,936.00</u>	[Take sum of all amounts listed on Line 20 above]
22	Percentage Increase Over Life of Contract	<u>.17</u>	% [Divide amount on Line 21 by amount on Line 14]
23	Average Percentage Increase Per Year	<u>.04</u>	% [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
	Education benefit	4,500.00	5,500.00	4,500.00	4,500.00	4,500.00		
25	Totals (\$):	4,500.00	5,500.00	4,500.00	4,500.00	4,500.00		

SECTION VII: Medical Costs

Base Year Cost Estimated with 10% Increase

	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$318,192.24	\$316,993.04
27	Prescription Plan Cost	\$87,340.86	\$79,446.24
28	Dental Plan Cost	\$13,458.72	\$12,235.20
29	Vision Plan Cost	\$2,910.73	\$2,646.12
30	Total Cost of Insurance	\$452,452.55	\$411,320.60

SECTION VII: Medical Costs (continued)

31	Employee Insurance Contributions	<u>\$100,993.62</u>	<u>\$91,812.38</u>
32	Contributions as % of Total Insurance Cost	<u>.22 %</u>	<u>.22 %</u>

33 Identify any insurance changes that were included in this CNA.
Negotiated to go to NJ Direct 20135 from NJ Direct 15 as of 9-1-2018.

SECTION VIII: Certification and Signature

34 The undersigned certifies that the foregoing figures are true:

Print Name: Audrey Boyer
Position/Title: Deputy Municipal Clerk
Signature: Audrey Boyer
Date: 9-23-2019

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