New Jersey Public Employment Relations Commission

NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line	#							
	SECTION I: Parties							
1	Public Employer: To	Public Employer: Township of Egg Harbor			County: Atlantic			
2	Employee Organizati	Employee Organization: Teamsters Local 331			Number of Employees in Unit: 103			
3	Base Year Contract To	Base Year Contract Term: 1/1/21-12/31/22			New Contract Term: 1/1/2023-12/31/2025			
	SECTION II: Type o	f Contract Settler	ent (please check	3				
4	Contract set	Contract settled without neutral assistance						
5	Contract set	Contract settled with assistance of mediator						
6	Contract settled with assistance of fact-finder							
7	Contract sets	tled with assistance of	of super-conciliator					
8				a report with recom	mendations?			
	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 whi the parties negotiate the salary increases.						m which	
9	Salary Costs in Base Y	ear	\$ <mark>4,882,004</mark>					
10	Longevity Costs in Base Year		\$ 15,831					
11	Total Salary Base		ş <mark>4,897,835</mark>					
	SECTION IV: Salary	Increases for Each	Year of New Agre	eement*				
9202		Year 1	Year 2	Year 3	Year 4	Year 5		
12	Effective Date (month/day/year)	1/01/2023	1/01/2024	1/01/2025			1	
13	Cost of Salary	311,012	158,618	160,566				
14	Increments (\$) Salary Increase Above Increments (\$)	0	0	0		7	==	
15	Longevity Increase (\$)	(2,053)	397	409		=		
16	Total \$ Increase (sum of lines 13-15)	308,959	159,015	160,975		-		
17	New Salary Base (\$)	5,206,794	5,365,809	5,526,784				
18	Percentage increase over prior year	6.31 %	3.05 %	3.00 %		%	%	
	*If contract duration i	s longer than five ve	ars, please add an ai	dditional page				

Empl	Township of	Egg Harbor	Emplo	yee Organization:	Teamsters	Local 331	Page 2
	SECTION V: Incre	ases in Other C		THE PERSON NAMED IN COLUMN	The later of the same	10 July 1 10 July 1	
19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	<i>Year 3</i> Increase (\$)	<i>Year 4</i> Increase (\$)	<i>Year 5</i> Increase (\$)
	None						
20	Totals(\$):						
	*If contract duration	is longer than f	ive years, please o	add an additional p	age.		
	SECTION VI: Med	ical Costs		Me	133		
21	Health Plan Cost	i		Base Year \$\\1,477,	Y		
22	Prescription Plan Co	st		_{\$} 404,90			
23	Dental Plan Cost			_{\$} 95,132		240	
24	Vision Plan Cost			\$ 0	ş0		

25

26

27

Total Cost of Insurance

Employee Insurance Contributions

Employee Contributions as % of Total Insurance Cost

\$1,977,373

13

\$327,305

_% 15

Emplo	_{oyer:} Township of Egg Harbor	Employee Organization: Teamsters Local 331	Page 3
Section	on VI: Medical Costs (continued)		
28 Opte	Identify any insurance changes that we ed out of NJ State Health Benefits	rere included in this CNA. Is Plan and joined South Jersey Coastal HIF 1/1/2023	
29	SECTION VII: Certification and Signate The undersigned certifies that the for Print Name:		
	Position/Title: Township Admining Signature: June 16, 2023	strator Jarlulie	
	Send this completed and signed form form to: contracts@perc.state.nj.us	n along with an electronic copy of the contract and the signed cer	tification

NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016