

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

14 Total Base Salary Cost from Line 13: \$2,892,570

Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15 Effective Date (month/day/year)	<u>01/01/2021</u>	<u>01/01/2022</u>	<u>01/01/2023</u>	<u></u>	<u></u>	<u></u>
16 Cost of Salary Increments (\$)	<u>57,851</u>	<u>-12,067</u>	<u>unknown at this time</u>	<u></u>	<u></u>	<u></u>
17 Salary Increase Above Increments (\$)	<u>58,497</u>	<u>82,467</u>	<u>unknown</u>	<u></u>	<u></u>	<u></u>
18 Longevity Increase (\$)	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
19 Total Increased Cost for "Other" Items (\$)	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
20 Total increase (\$) (sum of lines 16-19)	<u>116,348</u>	<u>70,400</u>	<u></u>	<u></u>	<u></u>	<u></u>

SECTION V: Average Increase Over Term of New CNA

21 Dollar Increase Over Life of Contract \$186,748 [Take sum of all amounts listed on Line 20 above]

22 Percentage Increase Over Life of Contract 6.45 % [Divide amount on Line 21 by amount on Line 14]

23 Average Percentage Increase Per Year 3.225 % [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
	Detective	5000	5000	5000				
	LEAD Certification	5000	5000	5000				
	K-9 Officer	2500	2500	2500				
	EMT Certification	3000	3000	3000				
	Corporal	8000	8000	8000				
	College Degrees	9250	9750	10,000				
	Pittman Time	82,258	92,891	unknown				
25	Totals (\$):	115,008	126,141	unknown				

SECTION VII: Medical Costs

	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$ 246,833	\$ 255,689
27	Prescription Plan Cost	\$ 114,000	\$ 117,000
28	Dental Plan Cost	\$ 17,492	\$ 19,292
29	Vision Plan Cost	\$ 3,950	\$ 4,410
30	Total Cost of Insurance	\$ 382,275	\$ 396,391

Employer: Township of Washington

Employee Organization: PBA

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SECTION VII: Medical Costs (continued)

31	Employee Insurance Contributions	\$ <u>126,435</u>	\$ <u>131,925</u>
32	Contributions as % of Total Insurance Cost	<u>33.07</u> %	<u>33.28</u> %

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

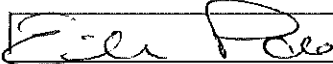
None

SECTION VIII: Certification and Signature

34 The undersigned certifies that the foregoing figures are true:

Print Name: Eileen Parks

Position/Title: Chief Financial Officer

Signature: 

Date: 10/25/2022

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