#### 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: Dumont Board of Education   |  |                  | County: Bergen     |                |        |   |  |  |
| 2    | Employee Organization: Custodial Maintenance Association   |  |                  | Number of Employe  | es in Unit: 30 |        |   |  |  |
| 3    | Base Year Contract Te  | o7/01/2018                                   |                  | New Contract Term: | June 30, 2021  |        |   |  |  |
|      | SECTION II: Type of Contract Settlement (please check only one)  |  |                  |                    |                |        |   |  |  |
| 4    | Contract set   | Contract settled without neutral assistance  |                  |                    |                |        |   |  |  |
| 5    | Contract sett  | 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 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. |  |                  |                    |                |        |   |  |  |
| 0    | 1 545 000  |  |                  |                    |                |        |   |  |  |
| 9    | Salary Costs in Base Year  |  | ş!               | 200                |                |        |   |  |  |
| 10   | Longevity Costs in Base Year   |  | \$ 4,300         | 1,300              |                |        |   |  |  |
| 11   | Total Salary Base  |  | \$ 1,550,188     | ş 1,550,188        |                |        |   |  |  |
|      | SECTION IV: Salary   | Increases for Each                           | Year of New Agre | eement*            |                |        |   |  |  |
| 4.5  | F(f .: D .   | Year 1                                       | Year 2           | Year 3             | Year 4         | Year 5 |   |  |  |
| 12   | Effective Date (month/day/year)  | 07/01/2018                                   | 07/01/2019       | 07/01/2020         |                |        |   |  |  |
| 13   | Cost of Salary<br>Increments (\$)  | 44,955                                       | 45785            | 46,958             |                |        |   |  |  |
| 14   | Salary Increase Above Increments (\$)  |  |                  |                    |                |        |   |  |  |
| 15   | Longevity Increase (\$)  | 0  | 475              | 642                |                |        |   |  |  |
| 16   | Total \$ Increase (sum of lines 13-15)   | 44,955                                       | 46,260           | 47,600             |                |        |   |  |  |
| 17   | New Salary Base (\$)   | 1,595,143                                    | 1,641,403        | 1,689,003          |                |        |   |  |  |
| 18   | Percentage increase over prior year  | 2.90 %                                       | 2.90 %           | 2.90 %             |                | %      | % |  |  |
|      |  |  |                  |                    |                |        |   |  |  |

\*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\*

| 20 Totals | ,(¢). |  |  |  |
|-----------|-------|--|--|--|

<sup>\*</sup>If contract duration is longer than five years, please add an additional page.

#### Base Year Year 1 s 638,897 657,425 21 Health Plan Cost 22 Prescription Plan Cost \$ 38,366 \$ 38,366 23 Dental Plan Cost Vision Plan Cost 24 677,263 695,791 25 Total Cost of Insurance

**Employee Insurance Contributions** 

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**SECTION VI: Medical Costs** 

| Employ  | er: Dumont Boa   | ard of Education             | Employee Organization: | Custodial Maintenance Association                               | Page 3 |
|---------|------------------|------------------------------|------------------------|---|--------|
| Section | 1 VI: Medical Co | osts (continued)             |                        |   |        |
| 28      | Identify any in  | surance changes that were    | included in this CNA.  |   |        |
| 5% fc   |                  | )20 school year. Tha         |                        | under Chapter 78 shall be reduce applied non-cumulatively for t |        |
|         |                  | 5                            |                        |   |        |
|         | SECTION VII: C   | Certification and Signature  | e                      |   |        |
| 29      | The undersigne   | ed certifies that the forego | oing figures are true: |   |        |
|         | Print Name:      | Kevin Cartotto               |                        |   |        |
|         | Position/Title:  | Business Administrator       | •                      |   |        |
|         | Signature:       | P0/44/0000                   |                        |   |        |
|         | Date:            | 09/11/2020                   |                        |   |        |

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: <a href="mailto:contracts@perc.state.nj.us">contracts@perc.state.nj.us</a>

NJ Public Employment Relations Commission

**Conciliation and Arbitration** 

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016

# Certification

| I declare to the best of my knowledge and beli- | ef that the attach | ed docu | iment(s) | are true | electronic c | opies of the    |    |
|---|--------------------|---------|----------|----------|--------------|-----------------|----|
| executed collective negotiations agreement(s)   | and the included   | summa   | ry is an | accurate | assessment   | of the collecti | ve |
| bargaining agreement for the term beginning     |                    |         | 6/30/2   |          | ä            |                 |    |

Employer: Dumont Board of Education

County: Bergen

Date: 9/11/2020

Name: Kevin Cartotto

Print Name

Title: Business Administrator

Signature