New Jersey Public Employment Relations Commission POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #		
	SECTION I: Parties and Term of Contracts	
1	Public Employer: Township of Marlboro	County: Monmouth
2	Employee Organization: FOP Lodge #15 (Sergeants & Lieutenants)	Number of Employees in Unit: 17
3	Base Year Contract Term: 1/1/17-12/31/19	
4	New Contract Term: 1/1/20-12/31/23	
	SECTION II: Type of Contract Settlement (plea	se check only one)
5	Contract settled without neutral assistance	
6	Contract settled with assistance of mediator	
7	Contract settled with assistance of fact-finder	
8	Contract settled in Interest Arbitration	
9	If contract was settled in Interest Arbitration, did the Art	itrator issue an Award? Yes No
	SECTION III: Base Salary Calculation	
	The "base year" refers to the final year of the expiring or	
	or table and any amount provided pursuant to a salary in It shall also include any other item agreed to by the parti	Base salary' means the salary provided pursuant to a salary guide acrement, including any amount for longevity or length of service. les, or any other item that was included in the base salary as ary shall not include non-salary economic issues, pension and
10	Salary Costs in base year	\$ 2089313.77
11	Longevity Costs in base year	\$ 199351.17
12	Other base year salary costs	
	Holiday Pay \$ 111678.54	
	Education Incentive \$ 27500.00	
•	FOP 15 years + \$ 24000.00	
	\$	
	Sum of "Other" Costs Listed in Line 12.	\$ 163178.54
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	\$ 2451843.48

Employer	Township of Marlboro	Employee Organization:	FOP Lodge #15 (Sergeants & Lieutenants)	Page 2
SE	ECTION IV: Increase in Base Salar	y Cost (for each year of New	CNA)	
14 To	otal Base Salary Cost from Line 13:	ş 2451843.48		
	•			_

	Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	1/1/20	1/1/21	1/1/22	1/1/23		
16	Cost of Salary Increments (\$)	6323.55	0	0	0		
17	Salary Increase Above Increments (\$)	39696.96	42706.66	50094.96	51247.17	1	
18	Longevity Increase (\$)	15363.69	12606.18	11883.14	15461.52		
19	Total Increased Cost for "Other" Items (\$)	5689.22	2667.02	2988.41	3216.47		
20	Total Increase (\$) (sum of lines 16-19)	67073.42	57979.86	64966.51	69925.16		

SECTION V: Average Increase Over Term of New CNA

21	Dollar Increase Over Life of Contract	259944.95	[Take sum of all amounts listed on Line 20 above]
22	Percentage Increase Over Life of Contract	10.6 %	[Divide amount on Line 21 by amount on Line 14]
23	Average Percentage Increase Per Year	2.7	[Divide percentage on Line 22 by number of years of
			the contract]

10.7		· · · · · · · · · · · · · · · · · · ·
T I to a Chila alla a una	Employee Organization: FOP Lod	de #15 (Cantains)
Township of Marlboro	Employee Organization: 1 Or Louis	Page 3
mplover:	Ellipioyee Organizacioni	

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases→

24	ltem Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
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				10 10 10 10 10 10 10 10 10 10 10 10 10 1			;	
25	Totals (\$):						:	

	SECTION VII: Medical Costs		
	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$ 331753.90	\$ 331753.90
27	Prescription Plan Cost	\$	\$
28	Dental Plan Cost	\$ 21068.86	\$ 21068.86
29	Vision Plan Cost	\$	\$
30	Total Cost of Insurance	\$ 352822.75	s 352822.75

Page 3 of 4 (complete all pages)

Employ	er: Township of Marlboro	Employee Organization: FOP Lodge #15 (Captains) Page 4
SECTIO	N VII: Medical Costs (continued)	
31 32 33	Employee Insurance Contributions Contributions as % of Total Insurance Cost Identify any insurance changes that were	\$ 103672.08 \$ 103672.08
For al subse the St Police benef	I employees with a hire date with the equently promoted into this unit, the b cate Health Benefits Program. For all e on or after January 1, 2017 and sub its plan shall be NJ Direct 2035 offere	Marlboro Division of Police prior to January 1, 2017 and case health benefits plan shall be NJ Direct 15 offered by employees with a hire date with the Marlboro Division of esequently promoted into this unit, the base health ed by the State Health Benefits Program.
The p	arties agreed that medical contribution	ons shall continue in accordance with the Chapter 78 grid.
34	SECTION VIII: Certification and Signature The undersigned certifies that the foreg	
÷	Print Name: Jonathan A. Capp Township Administrator	
	Position/Title: Township / driminglutor Signature:	
	Date: 10/19/21	
	Send this completed and signed form a certification form to: contracts@perc.	along with an electronic copy of the contract and the signed state.nj.us
	NJ Public Employment Relations Comm	ission

Conciliation and Arbitration PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016