New Jersey Public Employment Relations Commission NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line	##						
	SECTION I: Parties	and Term of Cont	cracts				
1	Public Employer: Cit	ity of Ocean City		County: Cape May			
2	Employee Organization	nization: Beach Patrol Admin Assoc		Number of Employees in Unit:			
3	Base Year Contract To	1/1/2015 12/31/18		New Contract Term: 1/1/2019 to 12/31/2022			
	SECTION II: Type o	f Contract Settlen	nent (please ch	eck only one)			
4	Contract settled without neutral assistance						
5	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		Showardan and a contract of the state of the				
	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.						
9	Salary Costs in Base Y	ear	\$				
10	Longevity Costs in Base Year		\$				
11	Total Salary Base		\$				
	SECTION IV: Salary	Increases for Eac	h Year of New A	Agreement*			
		Year 1	Year 2	Year 3	Year 4	Year 5	
12	Effective Date (month/day/year)	2019	2020	2021	2022		
13	Cost of Salary Increments (\$)	2.0%	1.75%	1.75%	2.0%		
14	Salary Increase Above				PRODUCTION CONTRACTOR		
15	Increments (\$) Longevity Increase (\$)		<u> </u>		<u> </u>		
16	Total \$ Increase						
10	(sum of lines 13-15)]			<u> </u>		
17	New Salary Base (\$)						
18	Percentage increase over prior year	%		%	_%	_%%	
	*If contract duration i	ંs longer than five ye	ears, please add a	an additional page.			

Empl	_{oyer:} City of Ocean	City	Employ	yee Organization	Beach Patro	ol Admin Asso	DC Page 2
	SECTION V: Increa						
19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
20	Totals(\$):						
	*If contract duration	is longer than fiv	ve years, please a	dd an additional រុ	oage.		
ł	SECTION VI: Medic	cal Costs		Base Year	Year 1		
21	Health Plan Cost			\$	\$	-	
22	Prescription Plan Cos	t		\$	\$		
23	Dental Plan Cost			\$	\$		
24	Vision Plan Cost			\$	\$		
25	Total Cost of Insurance	ce		\$	\$	annota ass	
26	Employee Insurance	Contributions		\$	\$		
27	Employee Contribut	ions as % of Tota	al Insurance Cost			%	

Page 2 of 3 (complete all pages)

Employer: City of Ocean City			Employee Organizat	ion: Beach Patrol Adm	in Assoc	Page 3
Sectio	on VI: Medical Co	osts (continued)			,	
28	Identify any ir	nsurance changes that were	included in this CNA.	* **	-	
29		Certification and Signatured certifies that the foreg				
29	Print Name:	Elizabeth M Woods				
	Position/Title:	Director, Human Re				
	Signature: Date:	10/28/2019	10vls)			
2						
		pleted and signed form al acts@perc.state.nj.us	ong with an electronic	c copy of the contract and	the signed certifi	cation
					· /	

NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016