

**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:  County:

2 Employee Organization:  Number of Employees in Unit:

3 Base Year Contract Term:  New Contract Term:

**SECTION II: Type of Contract Settlement (please check 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

**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 Year \$

10 Longevity Costs in Base Year \$

11 Total Salary Base \$

**SECTION IV: Salary Increases for Each Year of New Agreement\***

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	<input type="text" value="01/01/2017"/>	<input type="text" value="01/01/2018"/>	<input type="text" value="01/01/2019"/>	<input type="text"/>	<input type="text"/>
13 Cost of Salary Increments (\$)	<input type="text" value="24,868"/>	<input type="text" value="17,156"/>	<input type="text" value="12,755"/>	<input type="text"/>	<input type="text"/>
14 Salary Increase Above Increments (\$)	<input type="text" value="38,155"/>	<input type="text" value="38,389"/>	<input type="text" value="40,166"/>	<input type="text"/>	<input type="text"/>
15 Longevity Increase (\$)	<input type="text" value="5,393"/>	<input type="text" value="5,309"/>	<input type="text" value="7,181"/>	<input type="text"/>	<input type="text"/>
16 Total \$ Increase (sum of lines 13-15)	<input type="text" value="68,416"/>	<input type="text" value="60,854"/>	<input type="text" value="60,102"/>	<input type="text"/>	<input type="text"/>
17 New Salary Base (\$)	<input type="text" value="3,402,767"/>	<input type="text" value="3,463,621"/>	<input type="text" value="3,523,723"/>	<input type="text"/>	<input type="text"/>
18 Percentage increase over prior year	<input type="text" value="2.1"/> %	<input type="text" value="1.8"/> %	<input type="text" value="1.7"/> %	<input type="text"/>	<input type="text"/>

*\*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\***

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Uniforms (8 employees)	175.00	125.00	125.00	125.00	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20	Totals(\$):	1,400.00	1,000.00	1,000.00	1,000.00	<input type="text"/>	<input type="text"/>

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

**SECTION VI: Medical Costs**

	Base Year	Year 1	
21	Health Plan Cost	\$ 1,002,496	\$ 1,048,366
22	Prescription Plan Cost	\$ 0	\$ 0
23	Dental Plan Cost	\$ 48,810	\$ 50,986
24	Vision Plan Cost	\$ 0	\$ 0
25	Total Cost of Insurance	\$ 1,051,306	\$ 1,099,352
26	Employee Insurance Contributions	\$ 249,882	\$ 271,177
27	Employee Contributions as % of Total Insurance Cost	23.8 %	24.7 %

Employer:

Employee Organization:

**Section VI: Medical Costs (continued)**

**28 Identify any insurance changes that were included in this CNA.**

State health benefits insurance plan - Horizon Blue Cross/Blue Shield Direct 10 and Aetna Freedom 10 insurance plans will no longer be available for any Teamsters Local 469 member. This will impact 11 employees (5 single coverage, 4 family coverage and 2 married coverage). Estimated cost savings is \$9,000 per year (based on 2017 insurance rates).

**SECTION VII: Certification and Signature**

**29** The undersigned certifies that the foregoing figures are true:

Print Name:	<input type="text" value="Michael F. Rogers"/>
Position/Title:	<input type="text" value="City Administrator"/>
Signature:	<input type="text" value="Michael F. Rogers"/>
Date:	<input type="text" value="10/26/17"/>

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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](mailto:contracts@perc.state.nj.us)

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NJ Public Employment Relations Commission  
Conciliation and Arbitration  
PO Box 429  
Trenton, NJ 08625  
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