

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:	Pittsgrove Township Board of Education	County:	Salem
2	Employee Organization:	Pittsgrove Administrators and Supervisors Association	Number of Employees in Unit:	13
3	Base Year Contract Term:	FY2021	New Contract Term:	FY2022-2024

SECTION II: Type of Contract Settlement (please check only one)

4	<input checked="" type="checkbox"/>	Contract settled without neutral assistance
5	<input type="checkbox"/>	Contract settled with assistance of mediator
6	<input type="checkbox"/>	Contract settled with assistance of fact-finder
7	<input type="checkbox"/>	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 <input type="checkbox"/>	No <input type="checkbox"/>

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	\$ 1,319,712
10	Longevity Costs in Base Year	\$
11	Total Salary Base	\$ 1,320,712

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)	07/01/2021	07/01/2022	07/01/2023		
13 Cost of Salary Increments (\$)	40,538	39,648	36,192		
14 Salary Increase Above Increments (\$)					
15 Longevity Increase (\$)					
16 Total \$ Increase (sum of lines 13-15)					
17 New Salary Base (\$)	1,360,070	1,399,718	1,435,910		
18 Percentage increase over prior year	3.06 %	2.92 %	2.59 %		

**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" value="n/a"/>	<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"/>
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	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20	Totals(\$):	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<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	\$ <input type="text" value="n/a"/>	\$ <input type="text"/>
22 Prescription Plan Cost	\$ <input type="text"/>	\$ <input type="text"/>
23 Dental Plan Cost	\$ <input type="text"/>	\$ <input type="text"/>
24 Vision Plan Cost	\$ <input type="text"/>	\$ <input type="text"/>
25 Total Cost of Insurance	\$ <input type="text"/>	\$ <input type="text"/>
26 Employee Insurance Contributions	\$ <input type="text"/>	\$ <input type="text"/>
27 Employee Contributions as % of Total Insurance Cost	<input type="text"/> %	<input type="text"/> %

Employer: Pittsgrove Township Board of Education

Employee Organization: Pittsgrove Administrators and Supervisors Association

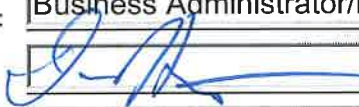
Section VI: Medical Costs (continued)

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

The new reimbursement rate for out-of-network expenses for the base medical plan will change from 90% of fair market to a minimum of 180% of Medicare (CMS) rates.

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name: Darren Harris
Position/Title: Business Administrator/Board Secretary
Signature: 
Date: 12/10/2021

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

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