SUMMARY FORM

COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

Section I: Agreement Deta	iils						
Public Employer: Borough of Jamesburg					County; Middlesex		
Employee Organization	ocal #417	Employees in Unit: 4					
Base Year Contract Term:	1/1/2009	12/31/2011	New Contr	act Term1/1/	2012 12/3	1/2015	
Type of Settlement:	☐ Mediated Settlem	nent 🔲 F	act-Finder Recommendation		☑ Voluntary Settlement	☑ Voluntary Settlement ☐ Super Conciliation	
			T ALL	·			
		Column A <u>Base Year - Total Costs</u> (Last Year of Previous agreement)		New Base Year	Column B New Base Year - Total Costs (First Year of Successor agreement)		
Section II: Economic							
llem 1 Sal	ary	.	\$159,592		\$166,864	<u> </u>	
Item 2 <u>inc</u>	rement	-			****		
Item 3 Lor	gevity	-	\$1,500		\$4,500		
Item 4							
Item 5							
kem 6		_					
Item 7							
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Item 9							
ttem 10		_	ļ				
ltem 11		-					
Item 12		-	l		_		
Any additional items list on separate st	180(Addisonal Heins					
Section III: Totals - Sum of costs in each column			\$161,092		\$171,364	\$171.364	
			(Total)		_	(Total)	
			1	sotalj	(100	\$1) }	
Section IV: Analysis of new success	sor agreement		NEW AGRE	EMENT ANALYSIS	<u> </u>		
Total Base Year(provious agreement)	\$161,092						
Effective Date (m/d/yyyy)		1/1/2012	1/1/2013	1/1/2014	1/1/2015		
Percent increase		2%	1.5%	1.5%	1.5%		
Total cost of increase		\$7,557	\$2,715	\$4,038	\$5,550		
Total base selary (successor systems	ni)	\$168,649	\$171,364	\$175,402	\$180,952		
Section V: Impact of Settler	nent - average annual inc	rease over term of ag	reement				
Percentage Impact (average per year	over term of agreement)	1.62					
Dollar impact (overage per year over t	ern of agreement)	\$4,965.00	• •				
Section VI							
Health Insurance (Indicase costs asso	cialed on each leve)	1 11					
Paul of Hands Dia		Base Year	Year 1				
Cost of Health Pfan		\$43,235	\$44,723				
			\$2,462				
Prescription		\$11,601	\$12,269				
Vision		\$1,147	\$1,272				
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<u>The undersigned certifies (</u> Section VII	nat the loregoing figure	s are true and is awa	are that it any of the	ioregoing items a	re false, s/he is subject to pu	vsment.	
Prepared by:	Denise Jawidzik				Title: Administrator	·/CFO	
, .	/	Prink Name		•			
	au	Signature	· jy		Date: 5/14/2012		