New Jersey Public Employment Relations Commission NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line	#							
	SECTION I: Parties	and Term of Contr	acts					
1	Public Employer: Old	Public Employer: Old Bridge Township Board of Education			County: Middlesex			
2	Employee Organizatio	Employee Organization: Old Bridge Supervisors Association			Number of Employees in Unit:			
3	Base Year Contract Te	Base Year Contract Term: 7/1/14 to 6/30/17			New Contract Term: 7/1/17 to 6/30/20			
	SECTION II: Type of	f Contract Settlem	ent (please check o	only one)				
4	Contract set	Contract settled without neutral assistance						
5	Contract sett	tled with assistance of	of mediator					
6	Contract sett	Contract settled with assistance of fact-finder						
7	Contract sett	Contract settled with assistance of super-conciliator						
8	If contract was settled		- 03	a report with recomm	nendations?			
	Yes No							
	SECTION III: Salary	Base						
	The salary base is the the parties negotiate			pired or expiring agre	eement. This is the	base cost from which		
9	Salary Costs in Base Year \$		\$ 1,046,854					
10	Longevity Costs in Base Year		\$ 13,550					
11	Total Salary Base	Total Salary Base		404				
	SECTION IV: Salary	Increases for Each	Year of New Agre	ement*				
		Year 1	Year 2	Year 3	Year 4	Year 5		
12	Effective Date (month/day/year)	7/1/2017	7/1/2018	7/1/2019				
13	Cost of Salary Increments (\$)	19,969	23,286	24,311				
14	Salary Increase Above Increments (\$)	0	0	0				
15	Longevity Increase (\$)	3,850	1,000	0				
16	Total \$ Increase (sum of lines 13-15)	23,819	24,286	724,311				
17	New Salary Base (\$)	1,084,222	1,108,508	1,132,819				
18	Percentage increase over prior year	2.25 %	2.24 %	2.19 %	%	<u></u> %		
	*If contract duration i	s longer than five ye	ars, please add an ad	lditional 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 (\$)

20	Totals(\$):						

^{*}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	\$ 160,061	\$ 170,465
22	Prescription Plan Cost	\$ 444,681	\$ 50,194
23	Dental Plan Cost	\$ 9,878	\$ 10,621
24	Vision Plan Cost	ş 434	\$ 434
25	Total Cost of Insurance	\$ 217,053	ş <mark>231,714</mark>
26	Employee Insurance Contributions	ş 71,183	\$ 76,002
27	Employee Contributions as % of Total Insurance Cost	32.8	% 32.8 %

Page 2 of 3 (complete all pages)

Employ	er: Old Bridge To	wnship Board of Education	Employee Organization: Old Bridge Supervisors Association	Page 3
Section	n VI: Medical Co	sts (continued)		
28	Identify any in	surance changes that were i	included in this CNA.	
	SECTION VII: C	ertification and Signature		
29		ed certifies that the forego		
	Print Name:	Joseph Marra		
	Position/Title:	Business Administrator		
	Signature:	Jours	Mu	
	Date:	8/30//17		
	,	pleted and signed form ald acts@perc.state.nj.us	ong with an electronic copy of the contract and the signed certific	ation
	NI Public Emple	ovment Relations Commiss	sion	

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016