

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: BOROUGH OF PARAMUS County: BERGEN

2 Employee Organization: Paramus Employee Association Number of Employees in Unit: 74

3 Base Year Contract Term: 1/1/2014-12/31/2016 New Contract Term: 1/1/2017 - 12/31/2019

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 \$ 3,722,607

10 Longevity Costs in Base Year \$ 64,934

11 Total Salary Base \$ 3,787,541

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)	<u>1/1/17</u>	<u>1/1/18</u>	<u>1/1/19</u>		
13 Cost of Salary Increments (\$)	<u>180,020</u>	<u>220,000</u>	<u>240,000</u>		
14 Salary Increase Above Increments (\$)					
15 Longevity Increase (\$)	<u>2,400</u>	<u>2,660</u>	<u>3,000</u>		
16 Total \$ Increase (sum of lines 13-15)	<u>182,240</u>	<u>222,660</u>	<u>243,000</u>		
17 New Salary Base (\$)	<u>3,969,961</u>	<u>4,192,621</u>	<u>4,435,621</u>		
18 Percentage increase over prior year	<u>4.7</u> %	<u>5.45</u> %	<u>5.63</u> %		

*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 (\$)
		1/1/17	1/1/18	1/1/29			
	SHOE ALLOWANCE	7,000	7,000	7,000			
	CLOTHING ALLOWANCE	2,000	2,000	2,000			
	ROTATION ALLOWANCE	7,300	7,300	7,300			
20	Totals(\$):	16,300	16,300	16,300			

**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	\$ 983,040	\$ 983,040
22	Prescription Plan Cost	\$	\$
23	Dental Plan Cost	\$	\$
24	Vision Plan Cost	\$	\$
25	Total Cost of Insurance	\$ 983,040	\$ 983,040
26	Employee Insurance Contributions	\$ 165,818	\$ 167,116
27	Employee Contributions as % of Total Insurance Cost	15 %	17 %

Section VI: Medical Costs (continued)

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

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name: **MARIA A. REDA**

Position/Title: **DEPUTY CFO**

Signature: *Maria A. Reda*

Date: **5/4/18**

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

Revised 8/2016