New Jersey Public Employment Relations Commission POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #								
	SECTION I: Parties and Term of Contracts							
1	Public Employer: West Milford Township	County: Passaic						
2	Employee Organization: PBA Local 162	Number of Employees in Unit: 39						
3	Base Year Contract Term: 01/01/2012-12/31/2015							
4	New Contract Term: 04/15/15-12/31/18							
	*							
	SECTION II: Type of Contract Settlement (please ch	eck only one)						
5	Contract settled without neutral assistance							
6	Contract settled with assistance of mediator							
7	Contract settled with assistance of fact-finder							
8	Contract settled in Interest Arbitration							
9	If contract was settled in Interest Arbitration, did the Arbitrato	or issue an Award?						
		,65						
	SECTION III: Base Salary Calculation							
	The "base year" refers to the final year of the expiring or expired agreement.							
	N.J.S.A. 34:13A-16.7(a) defines base salary as follows: "Base salary' means the salary provided pursuant to a salary guide or table and any amount provided pursuant to a salary increment, including any amount for longevity or length of service. It shall also include any other item agreed to by the parties, or any other item that was included in the base salary as understood by the parties in the prior contract. Base salary shall not include non-salary economic issues, pension and health and medical insurance costs."							
10	Salary Costs in base year	\$ 3,912,112						
11	Longevity Costs in base year	\$ 197,774						
12	Other base year salary costs							
	College Credits \$ 50,151							
	Differential \$\\ \\$\\ 75,237							
	\$							
	\$							
	Sum of "Other" Costs Listed in Line 12.	\$ 125,388						
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	\$ 4,235,274						

mpl	oyer: West Milford Towns	hip	Employe	e Organizatior	PBA Local 1	162	Page 2
L 4	SECTION IV: Increase in Total Base Salary Cost from		Cost (for each year of New CNA)				
	Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	04/15/2015	01/01/2016	01/01/2017	01/01/2018		
16	Cost of Salary Increments (\$)	1,504	678	1,163	1,180		
17	Salary Increase Above Increments (\$)	78,242	39,903	60,454	61,361		
18	Longevity Increase (\$)	3,955	2,141	3,056	3,102		
19	Total Increased Cost for "Other" Items (\$)	1,685	1,375	2,084	2,116		
20	Total Increase (\$) (sum of lines 16-19)	85,386	44,097	66,757	67,759		
	SECTION V: Average I	ncrease Over	Term of New	CNA			
21	Dollar Increase Over Life	of Contract	\$ 263,999	[Take sun	n of all amount	s listed on Line	20 above]
22	Percentage Increase Ove	r Life of Contra	act 6.23		mount on Line	21 by amount o	on Line 14]
23	Average Percentage Incre	ease Per Year	1.56		ercentage on L	ine 22 by numb	per of years of

the contract]

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases→

			←increases→					
24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	Court Appearances	1,876	23	19	29	29		
	Holiday Pay	116,801	1,460	1,191	1,805	1,832		
	Acting as Sargeant	8,514	106	86	131	134		
	Training	7,719	96	79	119	121		
	Clothing Allowance	1,710	0	0	0	0		
25	Totals (\$):	136,620	1,685	1,375	2,084	2,116		

SECTION VII: Medical Costs

	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$ 804,108	\$ 760,476
27	Prescription Plan Cost	\$ 0	\$ 0
28	Dental Plan Cost	\$ 41,424	\$ 38,088
29	Vision Plan Cost	\$ 0	\$
30	Total Cost of Insurance	\$ 845,532	\$ 798,564

Page 3 of 4 (complete all pages)

Employ	yer: West Milford Township	Employee Organization: PBA Local 162	Page 4					
SECTIO	SECTION VII: Medical Costs (continued)							
31 32	Employee Insurance Contributions Contributions as % of Total Insurance Cost	\$\frac{204,444}{24} \text{\square}{281,288} \\ \end{array}						
33	Identify any insurance changes that were	e included in this CNA.						
Char	Change in Base Plan from UHC Choice 20 to Aetna Open Access 20 Plan.							
	;**							
63								
	SECTION VIII: Certification and Signatu	ire						
34	The undersigned certifies that the foregoing figures are true:							
	Print Name: Ellen Mageean Position/Title: Temporary CFO							
	Signature:							
	Date:							
	Send this completed and signed form a certification form to: contracts@perc.	along with an electronic copy of the contract and the state.nj.us	signed					

NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016