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: B	Public Employer: Borough of hymnochile County: Borger						
2	Employee Organizatio	Employee Organization: Teamsters local Number of Employees in Unit:						
3	Base Year Contract Te	erm: 1-1-16-	12.31.18	New Contract Term:	1-1.19 . 13	131-3033		
	SECTION II: Type of Contract Settlement (please check only one)							
4	Contract set	Contract settled without neutral assistance						
5	Contract set	Contract settled with assistance of mediator						
6	Contract sett	Contract settled with assistance of fact-finder						
7	Contract settled with assistance of super-conciliator							
8	· · · · · · · · · · · · · · · · · · ·		•	a renort with recomn	nendations?			
	Yes No No	If contract was settled in fact-finding, did the fact-finder issue a report with recommendations? Yes No						
,	SECTION III: Salary	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		\$ 414 854					
10	Longevity Costs in Base Year		\$ - O -					
11	Total Salary Base		\$ 414,85	\$ 414,854				
	SECTION IV: Salary	Increases for Each	Year of New Agre	ement*				
		Year 1	Year 2	Year 3	Year 4	Year 5		
12	Effective Date	11-1-19	1-1-50	1-1.21	1.1.23	and the second second		
13	(month/day/year) Cost of Salary Increments (\$)	- 0-	-0-	()-	-0-			
14	Salary Increase Above Increments (\$)	7554.	13.127.	13 281,	13,435.	-		
15	Longevity Increase (\$)	- 0 -	-0.	- O ·	-0-			
16	Total \$ Increase (sum of lines 13-15)	7554	13 127	13,281,	13 435			
17	New Salary Base (\$)	422 408	435, 535	448,816	462 251	Winds Ave		
18	Percentage increase over prior year	<u>a</u> %	2 %	<u> </u>	<u> </u>	%		
	*If contract duration is longer than five years, please add an additional page.							

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	SECTION V: Increa	ases in Other Co	ntractual Econ	omic Items or N	lewly Added Eco	onomic Items*		
19	Item Description	Base Year	Year 1	Year 2	Year 3	Year 4	Year 5	
	Ţ	Cost (\$)	increase (\$)	Increase (\$)	increase (\$)	Increase (\$)	Increase (\$)
	<u></u>			<u> </u>				
-							<u> </u>	XXIII XXIIIX
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20	Totals(\$):		J		Value 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
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	*If contract duration is longer than five years, please add an additional page.							
	,		- , , ,					
	SECTION VI: Medi	cal Costs						
				Base Year	Year 1			
				1		211		
21	Health Plan Cost			\$1.1.1	899. \$147.6	241		
22	Prescription Plan Cos	st		\$	<u> </u>			
23	Dental Plan Cost			s 513	6 s 483	· · ·		
23	Dentai Plan Cost			<u>ي ۱ ري ا</u> خ	\$ <u>110.J</u>	OV		
24	Vision Plan Cost			\$ <u> </u>	<u> </u>	<u></u>		
25	Total Cost of Insuran	ce		s 155 (1521 \$ 1521	160		
26	Employee Insurance	Contributions		\$ 38.73	39. \$ 39.3	<u> </u>		
27	Employee Contribut	tions as % of Tota	Insurance Cost	<u>l a5.</u>	% 35°	<u> </u> %		
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Page 2 of 3 (complete all pages)

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Emplo	ver: Boloush of Manad	Employee Organizati	on: Toamsters to	Call! Page	3			
Sectio	on VI: Medical Costs (continued)							
20					٦			
28	Identify any insurance changes that were included in this CNA.							
	None							
					١			
	SECTION VII: Certification and Signa	nture						
29	The undersigned certifies that the foregoing figures are true:							
	Print Name: Supriya	Sanyal						
	Position/Title: Bornugh	Clerk						
	Signature: Suna	- Sunn						
	11/00/9	020						
	Date: $\frac{1}{1}\frac{11/0}{0}\frac{3}{1}\frac{1}{10}\frac{3}{10}$	020						
					_			
	Send this completed and signed form	n along with an electronic	copy of the contract and t	he signed certificatio	n			
	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