SUMMARY FORM

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

Section I: Agreement Details

Public Employer: City of Sea Isle City, NJ County: Cape May

Employee Organization: CWA - CLERICAL Employees in Unit: 10

Base Year Contract Term: 1/1/2010 12/31/2014 New Contract Term 1/1/2015 12/31/2018

Type of Settlement: ☐ Mediated Settlement ☐ Fact-Finder Recommendation ☑ Voluntary Settlement ☐ Super Conciliation

		Column A **Base Year - Total Costs** *(Last Year of Previous agreement)*	Column B **New Base Year - Total Costs** *(First Year of Successor agreement)*
Section II: Economic			
Item 1	Salary	$493,934	$507,813
Item 2	Increment		
Item 3	Longevity	$12,948	$13,606
Item 4	Stipend	$600	$1,200
Item 5			
Item 6			
Item 7			
Item 8			
Item 9			
Item 10			
Item 11			
Item 12			
Any additional items list on separate sheet	Additional Items		
Section III: Totals - Sum of costs in each column		$507,481 (Total)	$522,619 (Total)

Section IV: Analysis of new successor agreement — ***NEW* AGREEMENT ANALYSIS**

Total Base Year(previous agreement) $507,481

Effective Date (m/d/yyyy)	1/1/2015	1/1/2016	1/1/2017	1/1/2018		
Percent Increase	2.98%	-5.77%	1.99%	1.99%		
Total cost of increase ..	$15,138	-$87,470	$8,679	$8,852		
Total base salary (successor agreement)	$522,619	$434,550	$443,229	$452,081		

Section V: Impact of Settlement - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 0.29%

Dollar Impact (average per year over term of agreement) -$13,700.25

Note: Also negotiated was a reduction in healthcare plan. These savings are not reflected in the Section V Impact. Including health care and increasing employee contributions reduces the impact.

Section VI

Health Insurance (Indicate costs associated on each line)

	Base Year	*Year 1*				
Cost of Health Plan	$135,679	$239,503	$196,478	$220,802	$240,674	
Employee Contributions	$0	$8,714	$14,011	$21,916	$30,716	
Prescription						
Dental	$6,931	$7,596	$5,844	$5,844	$5,844	
Vision	$555	$648	$582	$582	$582	

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punisment.

Section VII

Prepared by: George Savastano Title: Administrator

Print Name

George Savastano

Signature

Date: 7/15/16

Send completed & signed **form**, a signed and dated copy of **contract**, signed and dated **certification** as well as a **word processing version of contract** to contracts@perc.state.nj.us Rev 2012.03.28