Certification

executed collective negotiations agreement(s) and the included subargaining agreement for the term beginning $\frac{1}{1/2015}$	mmary is an accurate assessment of the collective hru $12/31/2017$.
Employer:	Morris County Board of Chosen Freeholders
County:	Morris
Date:	8/22/2017
Name:	Mary Susan D'Amore Print Name
Title:	Labor Relations Specialist
	Signature (

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the

New Jersey Public Employment Relations Commission

NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line	#						
	SECTION I: Parties	and Term of Cont	racts	Noodistanii .			
1	Public Employer: Mor	Public Employer: Morris County Board of Chosen Freeholders			County: Morris		
2	Employee Organization	on: CWA 1040 OT	A Supervisor	Number of Employees in Unit: 11			
3	Base Year Contract Te	erm: 1/1/12-12/31	1/14	New Contract To	erm: 1/1/15-12/31/1	17	
	SECTION II: Type o	f Contract Settler	ent (please chec	k only one)			
4	Contract set	tled without neutral	l assistan c e				
5	Contract sett	tled with assistance	of mediator				
6	Contract sett	tled with assistance	of fact-finder				
7	Contract sett	led with assistance	of super-conciliato	r			
8	If contract was settled		•		commendations?		
	Yes No						
	SECTION III: Salary	Base					
	The salary base is the the parties negotiate			expired or expiring	g agreement. This is	the base cost fro	om which
9	Salary Costs in Base Y	•	, 675,293				
10	Longevity Costs in Bas	Longevity Costs in Base Year					
11	Total Salary Base		ş 698,220	98,220			
	SECTION IV: Salary	Increases for Eacl	h Year of New Ag	reement*			
		Year 1	Year 2	Year 3	Year 4	Year 5	
12	Effective Date (month/day/year)	1/1/15	1/1/16	1/1/17			
13	Cost of Salary Increments (\$)	24,437	10,839	11,002			
14	Salary Increase Above						
15	Increments (\$) Longevity Increase (\$)						
16	Total \$ Increase	24,437	10,839	11,002			···
17	(sum of lines 13-15) New Salary Base (\$)	722,657	733,496	744,498			
18	Percentage increase over prior year	3.5 %	1.6		_%		%
	*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 (\$)
20	Totals(\$):					errore.	

^{*}If contract duration is longer than five years, please add an additional page.

	SECTION VI: Medical Costs Oot AVOI	lable
	•	Base Year Year 1
21	Health Plan Cost	\$
22	Prescription Plan Cost	\$\$
23	Dental Plan Cost	\$
24	Vision Plan Cost	\$ \$
25	Total Cost of Insurance	\$
26	Employee Insurance Contributions	\$ <u></u> \$
27	Employee Contributions as % of Total Insurance Cost	<u>%</u>

Page 2 of 3 (complete all pages)

Emplov	er: Morris County	Board of Chosen Freeholders	Employee Organization:	CWA 1040 OTA Supv	Page 3
-	n VI: Medical Co				
28	Identify any in	surance changes that were in	cluded in this CNA.		
	SECTION VII: C	Certification and Signature			
29	The undersigne	ed certifies that the foregoi	ng figures are true:		
	Print Name:	Mary Susan D'Amore			
	Position/Title:	Labor Relations Speciali	st		
	Signature:	Mary Susm	Danve		
	Date:	8/22/17			
		pleted and signed form alor acts@perc.state.nj.us	ng with an electronic co	ppy of the contract and the signe	ed certification
	NJ Public Empl	oyment Relations Commissi	ion		

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016