POLICE AND FIRE COLLECTIVE BARGAINING AGREEMENT SUMMARY FORM

Section I: Agreement Details Delaware Township/Hunterdon County Public Employer: County: Hunterdon County PBA Local 188 Employees in Unit: 6 Employee Organization New Contract Term 1/1/2012 12/31/2014 1/1/2009 12/31/2011 Base Year Contract Term ☐ Fact-Finder Recommendation Voluntary Settlement Type of Settlement. Arbitrator's Award Section II: Statutory Definition of Base Salary N.J.S.A. 34:13A-16.7(a): Base salary is the salary provided pursuant to a salary guide or table and any amount provided pursuant to a salary increment, including any amount provided for independing 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. Base Year - Total Costs New Base Year - Total Costs (Last Year of Previous agreement) Column C Column D Non-salary Economic Non-salary Econon Section III: Economic - Costs inside base salary \$392,471 \$392,471 Salary \$0 N/A \$23,101 N/A \$5,129 \$3,852 Longevity Section IV: Additional Costs List economic items; indicate either inside or outside base salary as agreed to between the parties. Hem Description \$6,900 Item 1 Clothing Allowance \$6,900 Item 2 item 4 Item 5 Item 6 Item 7 Any additional items list on separate sheet Additional Items Section V: Totals - Sum of costs in each column \$396.323 \$6.900 \$420,701 \$6,900 (Total Economic) Section III & IV (Total Economic) Section III & IV (Total Non-salary (Total Non-salary Economic) Economic) NEW AGREEMENT ANALYSIS Section VI: Analysis of new successor agreement Total Economic Base Year(previous agreement) \$396,323 Effective Date (m/d/yyyy) 1/1/2012 6.05% Actual dollar increase \$24.378 Total Economic Costs (successor agreement) \$420,701 Section VII: Impact of Settlement - average annual increase over term of agreement Percentage Impact (average per year over term of 4.12% Dollar Impact (average per year over term of agreement) \$16,628 Section VIII Medical Costs Cost of Health Plan \$74,705 \$75,122 \$6,305 \$0 \$0 \$0 \$0 \$0 \$0 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 IX Linda J. Zengel CMFO/Treasurer Prepared by: Print-Name 7/3/2012 Signature

Send completed & signed form, a signed and dated copy of contract, signed and dated certification as by

Rev 2012.03.21