POLICE AND FIRE COLLECTIVE BARGAINING AGREEMENT SUMMARY FORM

High Bridge Police Department		Umtordon				daa		Section I: Agreement Detai
Section II: Statutory Definition of Base Salary		Sac - C. ()	_			Public Employer:		
Type of Settlement:	Employees in Unit: 6					High Bridge Police Department		Employee Organization
Section II: Statutory Definition of Base Salary M.J.S.A. 94.134-18.7(8): 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 pursuant to a salary increment, including any amount provided pursuant to a salary increment, including any amount provided pursuant to a salary increment, including any amount provided pursuant to a salary increment, including any amount provided pursuant to a salary increment, including any amount provided pursuant to a salary increment including any amount provided pursuant to a salary increment. Salary Sal		31/2014	12/3	ct Term 1/1/2012	New Contrac	12/31/2011	1/1/2008	Base Year Contract Term:
## Act Survey for the Base salery incomed procurent to a callery guide or table and any amount proceed consumant to a salery incomed. The process of the sale of the process of the sale of the process of the sale of the sal	ıt	Voluntary Settlement	₹	Recommendation	Fact-Finder		☐ Arbitrator's Award	Type of Settlement:
							tion of Base Salary	Section II: Statutory Definit
Clast Part For Pro-Province agreement Clast Part For Province agreement Selection III: Economic - Costs Inside base safery	nount provided for parties in the prio	ment, including any ame s understood by the pa	suant to a salary incre I in the base salary a	her item that was included	the parties, or any other	ther item agreed to by	It shall also include any of	longevity or length of service.
Column C								
Section IV: Additional Costs Salary								
Section IV: Additional Costs SA SA SA SA SA SA SA S							ts inside base salary	Section III: Economic - Cost
Section IV: Additional Costs Section IV: Additional Items			\$502,748		\$468,486			Salary
Section V: Additional Costs State concent State		N/A	\$8,222	N/A	\$34,263			Increment
Internal Content Internal Co			\$8,060		\$4,030			Longevity
							inside or outside base salary Item Description rtime	List economic Items: indicate either in as agreed to between the parties. Item 1 Over
		Ψ1,333	-	41,233		•	sed Sick Time	
		X 	-			•		Hom 4
Item 6 Item 7 Item 8 Item 9 Any additional litems Section V: Totals - Sum of costs in each column Section IV: Analysis of new successor agreement Section IV: Analysis of new successor agreement NEW AGREEMENT ANALYSIS Feffective Date (mid/hyny)						•		u r
Item 7						•		u 0
Item 8					-	•		The second secon
Any additional items list on separate sheet Additional Items Section V: Totals - Sum of costs in each column Section V: Totals - Sum of costs in each column Section III 8 IV Section III 8 IV Frommic) Section III 8 IV Sectio						•		
Any additional items list on separate sheet Additional Items Section V: Totals - Sum of costs in each column Section V: Totals - Sum of costs in each column Section III 8 IV Section III 8 IV Frommic) Section III 8 IV Sectio								
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Crotal Economic Crotal Economic Crotal Economic Economic Economic Economic Section II & IV Economic E		\$112,777	\$519,030	\$96,466	\$506,779	- State Walter	osts in each column	Section V: Totals - Sum of co
Total Economic Base Year(previous agreement) \$506,779		(Total Non-salary	(Total Economic)	(Total Non-salary	(Total Economic)			
Total Economic Base Year(previous agreement) \$506,779				MENT ANALYSIS	NEW ACREE			Section VIII Applied of any age
Percent Increase 0% 1.5% 1.5% 1.5% 1.5% Actual dollar increase \$12,251 \$12,583 \$22,070 Total Economic Costs (successor agreement) \$519,030 \$531,611 \$553,681 Section VII: Impact of Settlement - average annual increase over term of agreement Percentage Impact (average per year over term of agreement) 1% 1% Dollar Impact (average per year over term of agreement) \$15,635 Section VIII Medical Costs Base Year Year 1 Cost of Health Plan \$68,597 \$81,343 Employee Contributions \$0 \$8,303 Prescription \$19,453 \$23,433 Dental \$10,035 \$10,837				MENT ANALYSIS	NEW AGREE			
Percent Increase 0% 1.5% 1.5% 1.5% 1.5% Actual dollar increase \$12,251 \$12,583 \$22,070 Total Economic Costs (successor agreement) \$519,030 \$531,611 \$553,681 Section VII: Impact of Settlement - average annual increase over term of agreement Percentage Impact (average per year over term of agreement) 1% 1% Dollar Impact (average per year over term of agreement) \$15,635 Section VIII Medical Costs Base Year Year 1 Cost of Health Plan \$68,597 \$81,343 Employee Contributions \$0 \$8,303 Prescription \$19,453 \$23,433 Dental \$10,035 \$10,837				1/1/0014	1/1/2012	1/1/2010		Effective Date (m/d/www)
Actual dollar increase								
Section VII: Impact of Settlement - average annual increase over term of agreement		-						
Percentage Impact (average per year over term of agreement)								
Percentage Impact (average per year over term of agreement) 1% Dollar Impact (average per year over term of agreement) \$15,635 Section VIII Base Year Year 1 Cost of Health Plan \$68,597 \$81,343 Employee Contributions \$0 \$8,303 Prescription \$19,453 \$23,433 Dental \$10,035 \$10,837				Ψ000,001			ament - average annual inc	Section VII: Impact of Settle
Dollar Impact (average per year over term of agreement) \$15,635					greement	Provinces	STATE OF THE STATE	Percentage Impact (average per y
Medical Costs Base Year Year 1 Cost of Health Plan \$68,597 \$81,343 Employee Contributions \$0 \$8,303 Prescription \$19,453 \$23,433 Dental \$10,035 \$10,837							over term of agreement)	
Cost of Health Plan \$68,597 \$81,343 Employee Contributions \$0 \$8,303 Prescription \$19,453 \$23,433 Dental \$10,035 \$10,837								Section VIII
Employee Contributions \$0 \$8,303 Prescription \$19,453 \$23,433 Dental \$10,035 \$10,837					Year 1	Base Year		Medical Costs
Employee Contributions \$0 \$8,303 Prescription \$19,453 \$23,433 Dental \$10,035 \$10,837					\$81.343	\$68.597		Cost of Health Plan
Prescription \$19,453 \$23,433 Dental \$10,035 \$10,837				***				Employee Contributions
Dental			-					Prescription
Medica				-				Dental
vision								Vision
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.		unisment.	s/he is subject to p	oregoing items are false	re that if any of the fo	are true and is awar	that the foregoing figures	The undersigned certifies to
Section IX					5			
Prepared by: Bonnie Ann Fleming Title: CFO/CTC			CFO/CTC	Title:		n Fleming	Bonnie Ann	Prepared by:
Print Name						Print Name		
Date: 4/10/2013			4/10/2013	Date:		2	Land -	
Signature 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 2012.03.21	oro atoto el	contract to contract O	ord processing	adification on unil	The second secon	signed and dated once of ac-t-	Sand completed & sizeed form