

SUMMARY FORM

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

Section I: Agreement Details

Public Employer: Borough of New Providence County: Union
 Employee Organization: Local Union 469 Teamsters Employees in Unit: 15
 Base Year Contract Term: 1/1/2012 12/31/2014 New Contract Term 1/1/2015 12/31/2018
 Type of Settlement: Mediated Settlement Fact-Finder Recommendation Voluntary Settlement Super Conciliation

Section II: Economic	Column A	Column B
	Base Year - Total Costs <i>(Last Year of Previous agreement)</i>	New Base Year - Total Costs <i>(First Year of Successor agreement)</i>
Item 1 <u>Salary</u>	\$974,292	\$976,455
Item 2 <u>Increment</u>		
Item 3 <u>Longevity</u>	\$12,000	\$12,000
Item 4 <u>License Stipend</u>	\$7,000	\$85,000
Item 5 <u>Clothing</u>	\$14,000	\$15,000
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	\$1,007,292	\$1,011,955
	(Total)	(Total)

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year (previous agreement) \$1,007,292

Effective Date (m/d/yyyy)	1/1/2015	1/1/2016	1/1/2017	1/1/2018
Percent Increase	2	2	2	2
Total cost of increase ..	\$4,663	\$32,496	\$31,425	\$33,641
Total base salary (successor agreement)	\$1,011,955	\$1,044,451	\$1,075,876	\$1,109,517

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

Percentage Impact (average per year over term of agreement) 2.00
 Dollar Impact (average per year over term of agreement) \$25,556.00

Section VI

Health Insurance (Indicate costs associated on each line)

	Base Year	Year 1		
Cost of Health Plan	\$319,040	\$356,965		
Employee Contributions	\$51,668	\$59,357		
Prescription				
Dental	\$17,410	\$16,879		
Vision		\$742		

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 punishment.

Section VII

Prepared by:

Deborah R. Marvick
 Print Name
Deborah R. Marvick
 Signature

Title:

Administrator

Date:

10/15/15