

SECTION IV: Increase in Base Salary Cost (for each year of New CNA)

14 Total Base Salary Cost from Line 13: \$3,627,904.00

Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15 Effective Date (month/day/year)	<u>1/1/2017</u>	<u>1/1/2018</u>				
16 Cost of Salary Increments (\$)	<u>-90,313.00</u>	<u>138,880.00</u>				
17 Salary Increase Above Increments (\$)	<u>0.00</u>	<u>0.00</u>				
18 Longevity Increase (\$)	<u>23,200.00</u>	<u>26,540.00</u>				
19 Total Increased Cost for "Other" Items (\$)	<u>0.00</u>	<u>0.00</u>				
20 Total Increase (\$) (sum of lines 16-19)	<u>-67,113.00</u>	<u>165,420.00</u>				

SECTION V: Average Increase Over Term of New CNA

21 Dollar Increase Over Life of Contract \$98,307.00 [Take sum of all amounts listed on Line 20 above]

22 Percentage Increase Over Life of Contract 36.90382 % [Divide amount on Line 21 by amount on Line 14]

23 Average Percentage Increase Per Year 18.45191 % [Divide percentage on Line 22 by number of years of the contract]

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases→

24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
25	Totals (\$):	0.00	0.00	0.00				

SECTION VII: Medical Costs

Insurance Costs

	Base Year	Year 1
26 Health Plan Cost	\$	\$
27 Prescription Plan Cost	\$	\$
28 Dental Plan Cost	\$	\$
29 Vision Plan Cost	\$	\$
30 Total Cost of Insurance	\$794,533.32	\$732,954.12

Employer: Borough Of Florham Park

Employee Organization: PBA Local No. 78

SECTION VII: Medical Costs (continued)

31	Employee Insurance Contributions	\$ <u>197,814.53</u>	\$ <u>236,556.16</u>
32	Contributions as % of Total Insurance Cost	<u>4.01655</u> %	<u>3.098435</u> %

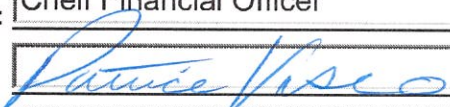
33 Identify any insurance changes that were included in this CNA.

SECTION VIII: Certification and Signature

34 The undersigned certifies that the foregoing figures are true:

Print Name: Patrice Visco

Position/Title: Cheif Financial Officer

Signature: 

Date: 11/1/2021

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission
Conciliation and Arbitration
PO Box 429
Trenton, NJ 08625
Phone: 609-292-9898

Revised 8/2016