## New Jersey Public Employment Relations Commission NON-POLICE AND FIRE

## COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Lin	e #			The state of the s	IANT TONIN				
	SECTION I: Partie	s and Term of Co	ntracts						
1	Public Employer:	Jost Deptiler	d Township	County: Claucestes					
2	Employee Organization: APSCME			Number of Employees in Unit:					
3	Base Year Contract	Base Year Contract Term: 2017 2000			New Contract Term: 2021-2025				
	SECTION II: Type	of Contract Settle	ment (please chec			3024			
4		ettled without neutr		is only one;					
5	Contract se	ttled with assistanc	e of mediator						
6		ttled with assistance							
7									
8	If annual ser	ttled with assistance	of super-conciliator						
٥	If contract was settle	ed in fact-finding, di	d the fact-finder issu	e a report with recon	nmendations?				
	Yes No								
	SECTION III: Salary Base								
	The salary base is the cost of salaries in the final year of the expired or surising								
	the parties negotiate the salary increases.								
9	Salary Costs in Base Year		\$ 1,918,929.58						
10	O Longevity Costs in Base Year		\$ -0-						
11	Total Salary Base		\$ 1,918,929.58						
	SECTION IV: Salary	Increases for Eac	h Year of New Agr	eement*					
		Year 1	Year 2	Year 3	Year 4	Year 5			
12	Effective Date (month/day/year)	17/1/21	111122	[1/1/2]	1/1/2/4	rears			
13	Cost of Salary	TI cen		111/03	111/09	1/1/05			
14	Increments (\$) Salary Increase Above	5(0,954	158,264.	60,179	(a), 163	64,218			
14	Increments (\$)								
15	Longevity Increase (\$)								
16	Total \$ Increase	10 004	ro v						
17	(sum of lines 13-15) New Salary Base (\$)	757	58,064	60,179	62,163	64,018			
18		1,975,523	2.033,788	2053,968	2,156,131	2,20,349			
10	Percentage increase over prior year	2 %	2 %	<b>→</b> %		0			
	*If contract duration is	longer than five ye	ars, please add an ac	iditional page.					

	SECTION V: Incre	eases in Other (	Contractual Econ	omic Items or N	Newly Added Ec	onomic Items*	3
19 A	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (
20	Totals(\$):						
20	*If contract duration SECTION VI: Media		ve years, please aa	d an additional p	age.		
20	*If contract duration		ve years, please aa	d an additional p	oge.		
20	*If contract duration		ve years, please aa		Year 1	333	
	*If contract duration SECTION VI: Media	cal Costs	ve years, please aa	Base Year	Year 1 513, 1		
21	*If contract duration  SECTION VI: Media  Health Plan Cost	cal Costs	ve years, please aa	8   (285, 3.	Year 1 94 \$ 713,	169	
21 22 23	*If contract duration  SECTION VI: Media  Health Plan Cost  Prescription Plan Cost	cal Costs	ve years, please ad	Base Year	Year 1 513, 1	169	
21	*If contract duration  SECTION VI: Media  Health Plan Cost  Prescription Plan Cost  Dental Plan Cost	t	ve years, please ad	8   (285, 3.	Year 1 94 \$ 713,	169	
21 22 23	*If contract duration  SECTION VI: Media  Health Plan Cost  Prescription Plan Cost  Dental Plan Cost  Vision Plan Cost	t	ve years, please ad	8   (285, 3.	Year 1  94 \$ 713, 1  9 \$ 106, 8  9 \$ 37, 3  \$ \$ -	02	

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	Employer: West September Tourship Employee Organization: AFXME					
Section	on VI: Medical Costs (continued)	Page				
28	Identify any insurance changes that were included in this CNA.					
	Nove					
	SECTION VIII. Cortification and Ci					
29	SECTION VII: Certification and Signature  The undersigned certifies that the foregoing figures are true:					
	Print Name: Michael Y Kurgs1705					
	Position/Title:					
	Signature: Al Ollar					
	Date: 10/12/21					
ino-e i vocan	Send this completed and almost a					
	Send this completed and signed form along with an electronic copy of the contract and the signed certific contracts@perc.state.nj.us	cation				
	NID III T					
	NJ Public Employment Relations Commission Conciliation and Arbitration					
	PO Box 429					
	Trenton, NJ 08625					

Revised 8/2016

Phone: 609-292-9898