

**New Jersey Public Employment Relations Commission**  
**NON-POLICE AND FIRE**  
**COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line #

**SECTION I: Parties and Term of Contracts**

1	Public Employer: <u>Seaside Heights BOE</u>	County: <u>Ocean</u>
2	Employee Organization: <u>Seaside Heights Education Assoc.</u>	Number of Employees in Unit: <u>39</u>
3	Base Year Contract Term: <u>7/1/19-6/30/22</u>	New Contract Term: <u>7/1/22-6/30/25</u>

**SECTION II: Type of Contract Settlement (please check only one)**

4	<input checked="" type="checkbox"/> Contract settled without neutral assistance
5	<input type="checkbox"/> Contract settled with assistance of mediator
6	<input type="checkbox"/> Contract settled with assistance of fact-finder
7	<input type="checkbox"/> Contract settled with assistance of super-conciliator
8	If contract was settled in fact-finding, did the fact-finder issue a report with recommendations? Yes <input type="checkbox"/> No <input type="checkbox"/>

**SECTION III: Salary Base**

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9	Salary Costs in Base Year	\$	2,350,391
10	Longevity Costs in Base Year	\$	21,500
11	Total Salary Base	\$	2,371,891

**SECTION IV: Salary Increases for Each Year of New Agreement\***

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	07/1/2022	07/1/2023	07/1/2024		
13 Cost of Salary Increments (\$)	53,713	88,424	91,608		
14 Salary Increase Above Increments (\$)	37,268	0	0		
15 Longevity Increase (\$)	1,300	0	0		
16 Total \$ Increase (sum of lines 13-15)	92,281	88,424	91,608		
17 New Salary Base (\$)	2,464,172	2,552,596	2,644,204		
18 Percentage increase over prior year	3.89 %	3.59 %	3.59 %		

*\*If contract duration is longer than five years, please add an additional page.*

**SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items\***

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
	Dental Coverage	30,996	3,100	0	0		
20	Totals(\$):						

*\*If contract duration is longer than five years, please add an additional page.*

**SECTION VI: Medical Costs**

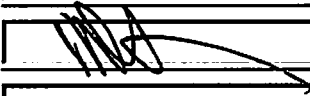
		Base Year	Year 1
21	Health Plan Cost	\$ 527,580	\$ 527,580
22	Prescription Plan Cost	\$ 107,007	\$ 107,007
23	Dental Plan Cost	\$ 30,996	\$ 34,096
24	Vision Plan Cost	\$ 8,662	\$ 8,662
25	Total Cost of Insurance	\$ 674,245	\$ 677,345
26	Employee Insurance Contributions	\$ 121,274	\$ 121,274
27	Employee Contributions as % of Total Insurance Cost	17.99 %	17.90 %

**Section VI: Medical Costs (continued)**

28 Identify any insurance changes that were included in this CNA.  
Enhanced Dental Coverage by \$1000 annual per member

**SECTION VII: Certification and Signature**

29 The undersigned certifies that the foregoing figures are true:

Print Name: Kevin O'Shea  
Position/Title: BA/BS  
Signature:   
Date: 9/27/22

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](mailto:contracts@perc.state.nj.us)

NJ Public Employment Relations Commission  
Conciliation and Arbitration  
PO Box 429  
Trenton, NJ 08625  
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