New Jersey Public Employment Relations Commission

POLICE AND FIRE COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #		THE PRINT SOMMART FORM
	SECTION I: Parties and Term of Contracts	
1	Public Employer: Township of Union	County: Union
2	Employee Organization:	Number of Employees in Unit: 29
3	Base Year Contract Term: 01/01/2015-12/31/2015	The second section of the section of the second section of the second section of the section of the second section of the section of t
4	New Contract Term: 01/01/2016-12/31/2018	
Witnessen or wage		•
	SECTION II: Type of Contract Settlement (please	check only one)
5	Contract settled without neutral assistance	
6	Contract settled with assistance of mediator	
7	Contract settled with assistance of fact-finder	
8	Contract settled in Interest Arbitration	
9	If contract was settled in Interest Arbitration, did the Arbitra	ator Issue an Award? Yes No
	SECTION III: Base Salary Calculation	
	The "base year" refers to the final year of the expiring or ex	pired agreement.
	N.J.S.A. 34:13A-16.7(a) defines base salary as follows: "Ras	e salary' means the selaminantial i
	or table and any amount provided pursuant to a salary incre It shall also include any other item agreed to by the parties, understood by the parties in the prior contract. Base salary health and medical insurance costs."	ment, including any amount for longevity or length of service.
10	Salary Costs in base year	\$ 3,526,208
11	Longevity Costs in base year	\$ 303,602
12	Other base year salary costs	Y
	\$	
	\$	
	3	
	\$ <u>L</u>	
	Sum of "Other" Costs Listed In Line 12.	\$
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	\$ 3,829,804

Em	ployer: Township of Unic	on	Employ	ee Organizatio	Superior Officers' Assoc of a	ha Township of Union police Depart	Page:
	SECTION IV: Increase		Personal Property lies and the last of the	-	ew CNA)		Action 1
14	Total Base Salary Cost fr	om Line 13:	\$ 3,89,804	THE STREET'S LAND.	e e e e e e e e e e e e e e e e e e e		
	Increases	Year 1	Year 2	Year <mark>3</mark>	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	01/01/2016	01/01/2017	01/01/2018			
16	Cost of Salary Increments (\$)	36,555	28,052	2,429	- Indiana		
17	Salary Increase Above Increments (\$)	67,750	40,287	52,832			19 100 19 100 100 100 100 100 100 100 10
18	Longevity Increase (\$)	26,315	29,582	32,409			
19	Total Increased Cost for "Other" Items (\$)	11/100 1000 1000 1000 1000					
20	Total Increase (\$) (sum of lines 16-19)	130,620	97,921	87,670			
	SECTION V: Average In	crease Over 1	Term of New	CNA			
1	Dollar Increase Over Life o	of Contract	\$ 316,211	Take sum	of all amounts	listed on Line :	20 shave1
2	Percentage Increase Over	Life of Contrac	8.2	7		1 by amount of	
3	Average Percentage Increa		2.75	1		e 22 by number	

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SECTION VI: Other Economic Items Outside Base Salary and Increases

2.4	11				←Inci	reases->		
24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	Stipend	0	0	14500	21750			
	Seniority	83,385	87,309	91,233	93,195			
	Uniforms	4453	4453	1374	1374			
	Education	12,000	14,000	13,500	14,000			
				Lake manager spine.			A TOTAL OF LOW AND A SECOND A SECOND AND A SECOND A SECOND AND A SECOND A	
	1/2007							

			-7-21-cm-falandrahaman-interace	14 PPENEDENA.	Total to the desire in the second		And have the same of the same	
25	Totals (\$):	99,838	105,762	120,607	130,319			

	SECTION VII: Medical Costs		
	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$ 689,120	\$ 790,627
27	Prescription Plan Cost	\$ 0	\$ 0
28	Dental Plan Cost	\$ 26,250	\$ 29,400
29	Vision Plan Cost	\$	\$
0	Total Cost of Insurance	\$ 715,370	\$ 820,027

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	ployer: Township of Union Employee Organization: Superior Officers' Assoc. of the Township of Union Page Page
2000	medicar costs (continuea)
31	[400 044] [
	Employee Insurance Contributions \$\\ \frac{188,044}{\} \\ \\$
32	Contributions as % of Total Insurance Cost 26.4 % 33.5 %
33	Identify any insurance changes that were included in this CNA.
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4	SECTION VIII: Certification and Signature The undersigned certifies that the foregoing figures are true:
	Print Name: KAREN J. CAULTIERS
	Position/Title: DIRECTOR Human Resources
	Signature: Taken I (m. dii)
	Control of the contro
	Date: Dept 1, 2017
***************************************	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
W. M. MILLES	
	NJ Public Employment Relations Commission
	Conciliation and Arbitration
	PO Box 429
	Trenton, NJ 08625

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Revised 8/2016

Phone: 609-292-9898