SUMMARY FORM

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

Employee Organization	Section I: Agreement Det Public Employer:		BERKELEY HEIGHTS	3			County: Union	
Base Year Contract Term: 1/1/2009 12/31/2013 New Contract Term: 1/1/2014 12/31/2018		UNITED PUBLIC	SERVICE EMPLOYI	EES UNION - WA	ASTE WATER TREAT			_
Type of Settlement:		1/1/2009 12/31/2013		New Contract Term 1/1/2014				
Column A Column B Base Year - Total Costs (First Year - Total Co								_
Section II: Economic Salary Sala	Type of Settlement.	☐ Mediated Settle	ement L Fac	st-rinder Recommen	idation 🕒	voluntary Settlemen	Super Conciliation	1
		32		Base Year -	- Total Costs	New Base Y	fear - Total Costs	
	Section II: Economic							
	Item 1 Sa	alary	_	\$210,025		\$215,190		
	Item 2 In	crement	=					
Rem 5	Item 3 Lo	ongevity						
Idem 6	Item 4 UN	USED SICK		\$286		\$0		
	Item 5 OV	ERTIME		\$49,686		\$58,725		
	Item 6 ME	ALS		\$50		\$438		
	Item 7							
	Item 8						_	
	Item 9							
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	manual reset was stranger		_		·	,		
Additional learns lat on separate sheet				-				
Clotal C	_	sheet	Additional Items					
Clotal C		*						
Section IV: Analysis of new successor agreement Section IV: Analysis of new successor agreement \$260,047	ection III: Totals - Sum of c	ection III: Totals - Sum of costs in each column		\$260,047		\$274,353		
Total Base Year(previous agreement) \$260,047 1/1/2014 1/1/2015 1/1/2016 1/1/2017 1/1/2018 1/1/2017 1/1/2018 1/1/2017 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/201				(Total)		(Total)	
Total Base Year(previous agreement) \$260,047 1/1/2014 1/1/2015 1/1/2016 1/1/2017 1/1/2018 1/1/2017 1/1/2018 1/1/2017 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/2018 1/1/201								
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Effective Date (m/d/wyyr)				NEW AGRE	EMENT ANALTSIS			
Percent Increase 2.00 2.	Total base rear(previous agreemen	\$260,047						
Percent Increase 2.00 2.	Effective Date (m/d/yyyy)		1/1/2014	1/1/2015	1/1/2016	1/1/2017	1/1/2018	
Total base salary (successor agreement) \$14,306 \$4,304 \$4,390 \$4,477 \$4,568 Total base salary (successor agreement) \$274,353 \$278,657 \$283,047 \$287,524 \$292,092 Section V: Impact of Settlement - average annual increase over term of agreement	Percent Increase		12 AND 12					
Total base salary (successor agreement) \$274,353 \$278,657 \$283,047 \$287,524 \$292,092 Section V: Impact of Settlement - average annual increase over term of agreement Percentage Impact (average per year over term of agreement) \$6,409.00 Section VI Health Insurance (Indicate costs associated on each line) Base Year Year 1 \$89,912 \$89,912 \$89,912 Employee Contributions \$2,638 \$3,398 Prescription Dental Wision 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 punisment. Section VII Prepared by: MICHEL MARCEAU Title: CHIEF FINANCIAL OFFICER	Total cost of increase						_	
Percentage Impact (average per year over term of agreement) 2.00 \$6,409.00 Section VI Health Insurance (Indicate costs associated on each line) Base Year Year 1 Cost of Health Plan \$89,912 \$89,912 Employee Contributions \$2,638 \$3,398 Prescription Dental Vision 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 punisment. Section VII Prepared by: MICHEL MARCEAU Title: CHIEF FINANCIAL OFFICER	Total base salary (successor agreer	ment)	The state of the s	8 -77 0-7	40	Unit other base in		
Percentage Impact (average per year over term of agreement) 2.00 \$6,409.00 Section VI Health Insurance (Indicate costs associated on each line) Base Year Year 1 Cost of Health Plan \$89,912 \$89,912 Employee Contributions \$2,638 \$3,398 Prescription Dental Vision 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 punisment. Section VII Prepared by: MICHEL MARCEAU Title: CHIEF FINANCIAL OFFICER	Section V: Impact of Settle	ement - average annual	increase over term of agr	reement				
Dollar Impact (average per year over term of agreement) Section VI Health Insurance (Indicate costs associated on each line) Base Year Year 1 Cost of Health Plan \$89,912 \$89,912 Employee Contributions \$2,638 \$3,398 Prescription Dental Vision 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 punisment. Section VII Prepared by: MICHEL MARCEAU Title: CHIEF FINANCIAL OFFICER								
Base Year Year 1	Dollar Impact (average per year ove	er term of agreement)						
Health Insurance (Indicate costs associated on each line) Base Year Year 1 Cost of Health Plan \$89,912 \$89,912 Employee Contributions \$2,638 \$3,398 Prescription Dental			40,100,00					
Cost of Health Plan \$89,912 \$89,912 Employee Contributions \$2,638 \$3,398 Prescription	Section VI	<u> </u>	4.45					
Section VII	Health Insurance (Indicate costs as:	sociated on each line)	2					
Employee Contributions \$2,638 \$3,398 Prescription Dental Vision 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 punisment. Section VII Prepared by: MICHEL MARCEAU Title: CHIEF FINANCIAL OFFICER	Cast of Health Plan							
Prescription Dental Vision 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 punisment. Section VII Prepared by: MICHEL MARCEAU Title: CHIEF FINANCIAL OFFICER			100 000	-		-		
Dental			\$2,638	\$3,398		-		
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Prepared by: MICHEL MARCEAU Title: CHIEF FINANCIAL OFFICER	The undersigned certifies	s that the foregoing figu	ures are true and is awa	re that if any of the	foregoing items are fals	e, s/he is subject to	punisment.	
Prepared by: MICHEL MARCEAU Title: CHIEF FINANCIAL OFFICER								
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Date: 9/1/2015			11) Date:	9/1/2015		