

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: TOWNSHIP OF ROBBINSVILLE County: MERCER
 2 Employee Organization: TEAMSTERS LOCAL 35 - DPW Number of Employees in Unit: 19
 3 Base Year Contract Term: 01/01/2019-12/31/2022 New Contract Term: 01/01/2023-12/31/2025

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

4 Contract settled without neutral assistance
 5 Contract settled with assistance of mediator
 6 Contract settled with assistance of fact-finder
 7 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 No

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 \$ 951,202
 10 Longevity Costs in Base Year \$ 0
 11 Total Salary Base \$ 951,202

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)	<u>01/01/2023</u>	<u>01/01/2024</u>	<u>01/01/2025</u>		
13 Cost of Salary Increments (\$)	<u>61,224</u>	<u>58,195</u>	<u>59,358</u>		
14 Salary Increase Above Increments (\$)	<u>0</u>	<u>0</u>	<u>0</u>		
15 Longevity Increase (\$)	<u>0</u>	<u>0</u>	<u>0</u>		
16 Total \$ Increase (sum of lines 13-15)	<u>61,224</u>	<u>58,195</u>	<u>59,358</u>		
17 New Salary Base (\$)	<u>1,012,426</u>	<u>1,070,620</u>	<u>1,129,979</u>		
18 Percentage increase over prior year	<u>6.44</u> %	<u>5.75</u> %	<u>5.54</u> %		

*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 (\$)
	BOOTS REIMBURSEMENT	2,700	2,700	2,700	2,700		
	CERTIFICATION STIPENDS	15,750	15,750	15,750	15,750		
20	Totals(\$):	18,450	18,450	18,450	18,450		

**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	\$ 270,594	\$ 283,177
22	Prescription Plan Cost	\$ 44,305	\$ 43,178
23	Dental Plan Cost	\$ 13,804	\$ 48,131
24	Vision Plan Cost	\$ 3,902	\$ 4,101
25	Total Cost of Insurance	\$ 332,606	\$ 378,586
26	Employee Insurance Contributions	\$ 48,525	\$ 44,452
27	Employee Contributions as % of Total Insurance Cost	15 %	12 %

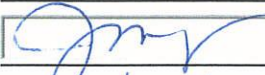
Section VI: Medical Costs (continued)

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

Teamsters no longer contribute towards dental benefits

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name: JEWEL MORGAN
Position/Title: ASSISTANT BUSINESS ADMINISTRATOR
Signature: 
Date: 9/20/2021

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