New Jersey Public Employment Relations Commission NON-POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line	#					
	SECTION I: Parties	and Term of Cont	racts			
1	Public Employer: Th	e Township of Nor	th Bergen	County: Hudson		
2	Employee Organizati	on: Intl. Brotherhood of Tear	msters, Local 125	Number of Employe	es in Unit: 16	A. 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
3	Base Year Contract T	erm: Jan. 1, 2016 - I	Dec. 31, 2019	New Contract Terms	lan 1 2020 De	c. 31, 2023
	SECTION II: Type o	of Contract Settlen	nent (please check	only one)		
4	Contract set	ttled without neutral	l assistance			
5	Contract set	tled with assistance	of mediator			
6	Contract set	tled with assistance	of fact-finder			
7	Contract set	tled with assistance o	of super-conciliator			
8	If contract was settle	d in fact-finding, did	the fact-finder issue	a report with recom	mendations?	
	Yes No					
	SECTION III: Salary	Base				
	The salary base is the the parties negotiate		•	pired or expiring agr	eement. This is the	base cost from which
9	Salary Costs in Base Y	ear	\$ 683,122			
10	Longevity Costs in Bas	se Year	\$ 6,600			
11	Total Salary Base		\$ 689,722			
	SECTION IV: Salary	Increases for Each	Year of New Agre	ement*		
12	Effective Date	Year 1	Year 2	Year 3	Year 4	Year 5
12	(month/day/year)	1/1/2020	1/1/2021	1/1/2022	1/1/2023	<u></u>
13	Cost of Salary Increments (\$)	74,502	51,756	53,058	54,378	
14	Salary Increase Above Increments (\$)	0	0	0	0	
15	Longevity Increase (\$)	800	2,400	0	200	
16	Total \$ Increase (sum of lines 13-15)	75,302	54,156	53,058	54,578	
17	New Salary Base (\$)	702,939	819,180	872,238	926,816	
18	Percentage increase over prior year	10.92 %	7.08 %	6.48 %	6.26 %	
	*If contract duration i	s longer than five ye	ars, please add an ac	lditional page.		

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
		Production of the state of the					
				-		*	
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	_{\$} 286,010	ş <mark> 308,359</mark>	
22	Prescription Plan Cost	\$ <mark>87,447</mark>	\$ <mark>95,264</mark>	
23	Dental Plan Cost	ş <mark> 7,800</mark>	\$ <mark>8,084</mark>	
24	Vision Plan Cost	ş 1,778	ş <u>1,778</u>	
25	Total Cost of Insurance	\$ 383,035	\$ <mark>413,485</mark>	
26	Employee Insurance Contributions	ş 37,100	\$ <mark>49,155</mark>	
27	Employee Contributions as % of Total Insurance Cost	10	_% 12 %	

form to: contracts@perc.state.nj.us

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