Township Council
1 Municipal Plaza
Bloomfield, NJ 07003

Louise M. Palagano
Municipal Clerk

http://www.bloomfieldtwpnj.com

Meeting: 11/18/24 06:30 PM

2024 RESOLUTION APPROVAL

RESOLUTION: GRANTING CATASTROPHIC LEAVE OF ABSENCE WITH PAY FOR EMPLOYEE #001203

WHEREAS, written application has been filed by Employee #001203, for a catastrophic leave of absence with pay; and

WHEREAS, Employee #001203 has met the criteria to receive catastrophic leave with pay as per their Collective Bargaining Agreement; and

WHEREAS, Employee #001203 has exhausted all of their earned sick leave, vacation leave, personal leave, compensatory time, floating holiday leave, month days (if applicable) and all other leave earned with the Township of Bloomfield and;

WHEREAS, the catastrophic leave provision can be granted for a career total of 260 work days;
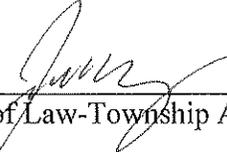
NOW, THEREFORE, BE IT RESOLVED by the Mayor and Council of the Township of Bloomfield, County of Essex, State of New Jersey, that Employee #001203 is hereby granted catastrophic leave of absence with pay from their position effective January 6, 2025 for an initial 90 work day period, provided that the leave is conditioned upon the following:

.   During said catastrophic leave of absence, Employee #001203 will not accrue sick leave, vacation leave, personal leave, floating holidays, holiday pay and uniform allowance (if applicable), in accordance with the terms and conditions of the Collective Bargaining Agreement that controls the employee's employment.

2. During said catastrophic leave of absence, the employee shall continue to be covered for pension, health benefits, dental plan and prescription drug plan in accordance with the terms and conditions of the agreement identified in paragraph 1 above.

3. During said catastrophic leave of absence, if employee engages in any other gainful employment, their leave with the Township shall be automatically terminated.

4. Prior to their return to work the employee must submit a note from their Physician, who must certify to the employee's fitness to return to work.

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Approved as to form and procedure on basis of facts set forth.

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Director of Law-Township Attorney

I do hereby certify that the funding will be legally appropriated per the above information for the purpose specified in the attached contract. Furthermore, it has been represented to me that the contracts have been processed in accordance with the applicable provisions of New Jersey Local Public Contract Law and the Code of the Township of Bloomfield.

_____
Chief Financial Officer

I hereby certify that the above resolution was duly adopted by the Mayor and Council of the Township of Bloomfield at a meeting of said Township Council held on November 18, 2024.

_____
Municipal Clerk of the Township of Bloomfield

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Mayor of the Township of Bloomfield

✔ Vote Record – Resolution			Yes/Aye	No/Nay	Abstain	Absent
☐ Adopt ☐ Deny						
☐ Withdrawn	Vacant		☐	☐	☐	☐
☐ Table ☐ Not Discussed	Nicholas Joanow		☑	☐	☐	☐
☐ First Reading	Sarah Cruz		☑	☐	☐	☐
☐ Table with no Vote	Wartyna Davis		☑	☐	☐	☐
☐ Approve ☐ Veto by Mayor	Monica Charris Tabares		☑	☐	☐	☐
☐ Discussion	Richard Rockwell		☑	☐	☐	☐
☐ Defeated ☐ Discussion No Vote	Jenny Mundell		☑	☐	☐	☐