



**Township Council**  
1 Municipal Plaza  
Bloomfield, NJ 07003

**Louise M. Palagano**  
*Municipal Clerk*

<http://www.bloomfieldtwpnj.com>

Meeting: 05/19/25 07:00 PM

**2025 RESOLUTION EMPLOYEES**

**R25 260**

**RESOLUTION: GRANTING LAST EXTENSION OF CATASTROPHIC LEAVE OF PAY EMPLOYEE #026371**

**WHEREAS**, written application has been filed by Employee #026371, for their last extension of catastrophic leave of absence with pay as per their Collective Bargaining Agreement; and

**WHEREAS**, Employee #026371 was previously approved for an initial 90 work days of catastrophic leave with pay per resolution #12226; and

**WHEREAS**, Employee #026371 was also previously approved for a catastrophic leave with pay extension for 90 work days per resolution #12509; and

**WHEREAS**, Employee #026371 has met the criteria to receive their last allotment of catastrophic leave with pay for 80 work days; and

**WHEREAS**, Employee #026371 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

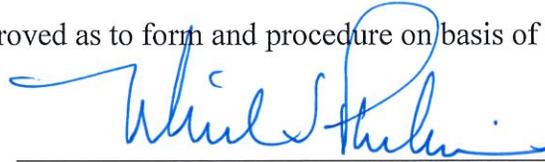
**WHEREAS**, the catastrophic leave provision can be granted for a career total of 260 work days;

**NOW, THEREFORE, BE IT RESOLVED** by the Mayor and Council of the Township of Bloomfield, County of Essex, State of New Jersey, that Employee #026371 is hereby granted a final extension of catastrophic leave of absence with pay from their position effective May 29, 2025 for an additional 80 work day period, provided that the leave is conditioned upon the following:

1. During said catastrophic leave of absence, Employee #026371 will not accrue sick leave, vacation leave, personal leave, holiday time coming, holiday pay and uniform allowance, 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, employee shall continue to be covered for pension, health benefits, dental plan and prescription drug plan and life insurance 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.

\*...\*...\*

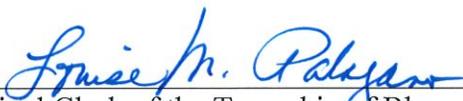
Approved as to form and procedure on basis of facts set forth.

  
 \_\_\_\_\_  
 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 May 19, 2025.

  
 \_\_\_\_\_  
 Municipal Clerk of the Township of Bloomfield

  
 \_\_\_\_\_  
 Mayor of the Township of Bloomfield

<input checked="" type="checkbox"/> <b>Vote Record – Resolution</b>						
<input type="checkbox"/> Adopt			Yes/Aye	No/Nay	Abstain	Absent

Resolution (ID # 12953)

Meeting of May 19, 2025

<input type="checkbox"/> Deny	Rosalee Gonzalez		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Withdrawn	Nicholas Joanow		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Table	Sarah Cruz		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Not Discussed	Monica Charris Tabares		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> First Reading	Wartyna Davis		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Table with no Vote	Widney Polynice		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Approve	Jenny Mundell		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Veto by Mayor						
<input type="checkbox"/> Discussion						
<input type="checkbox"/> Defeated						
<input type="checkbox"/> Discussion No Vote						