



Township Council  
1 Municipal Plaza  
Bloomfield, NJ 07003

Louise M. Palagano  
Municipal Clerk

<http://www.bloomfieldwpnj.com>

Meeting: 12/18/17 07:30 PM

2017 RESOLUTION APPROVAL

GRANTING CATASTROPHIC LEAVE OF ABSENCE

WHEREAS, written application has been filed by Employee #15421, for a catastrophic leave of absence with pay; and

WHEREAS, Employee #15421 has exhausted all his earned sick leave, vacation leave, personal leave, holiday leave, month days and all other leave earned with the Township of Bloomfield.

NOW, THEREFORE, BE IT RESOLVED by the Mayor and Council of the Township of Bloomfield, County of Essex, State of New Jersey, that Employee #15421 is hereby granted a catastrophic leave of absence with pay from his position for a period of ninety (90) days effective January 1, 2018; provided, however, that the leave is conditioned upon the following:

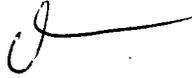
1. During said catastrophic leave of absence, Employee #15421 will not accrue sick leave, vacation leave, personal leave, holiday time coming, holiday pay and uniform allowance, in accordance with the terms and conditions of the Collective Bargaining Agreement that controls the employee's employment.
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, his leave with the Township shall be automatically terminated.
4. Prior to his return to work the employee must submit a note from his 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

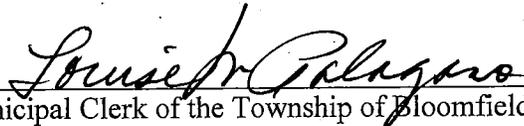
DIRECTOR OF LAW-TOWNSHIP ATTORNEY

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.

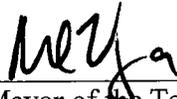


Chief Financial Officer

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 December 18, 2017.



Municipal Clerk of the Township of Bloomfield



Mayor of the Township of Bloomfield

✓ Vote Record - Resolution						
		Yes/Aye	No/Nay	Abstain	Absent	
<input type="checkbox"/> Adopt		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Deny		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Withdrawn		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Table		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/> Not Discussed		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> First Reading		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Table with no Vote		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Approve		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Veto by Mayor		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Discussion		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Defeated		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Discussion No Vote		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	