



State Health Benefits Program (SHBP)  
School Employees' Health Benefits Program (SEHBP)  
**RESOLUTION**

To be completed by the employing agency's Certifying Officer.

**A resolution to terminate all participation under the SHBP and SEHBP (including prescription drug plan and/or dental plan coverage).**

BE IT RESOLVED:

1. Gloucester Township Fire District #2 166300  
*Corporate Name of Employer* *SHBP/SEHBP Employer Location Number*  
hereby resolves to terminate its participation in the Program (Medical Plan, Prescription Drug Plan, and/or Dental Plan coverage) thereby canceling coverage provided by the SHBP and/or SEHBP (N.J.S.A. 52:14-17.25 et seq.) for all its active and retired employees.
2. We shall notify all active employees of the date of their termination of coverage under the Program.
3. We understand that the New Jersey Division of Pensions & Benefits (NJDPB) will notify retired employees of the cancellation of their coverage.
4. We understand that all COBRA participants will be notified by the NJDPB and advised to contact our office concerning a possible alternative health, prescription drug, and dental insurance plan.
5. We understand that this resolution shall take effect the first of the month following a 60-day period beginning with the receipt of the resolution by the State Health Benefits Commission or School Employees' Health Benefits Commission.

I hereby certify that the foregoing is a true and correct copy of a resolution duly adopted by the:

Gloucester Township Fire District #2 856-282-3370 X125  
*Corporate Name of Employer* *Phone Number*

43 Somerdale Road Blackwood New Jersey 08012  
*Street Address* *City* *State* *Zip Code*

George H. Genzel Chairman  
*Print Name* *Official Title*

*George H. Genzel* 10/11/2023  
*Signature* *Date*

11 22-1982174  
*Number of Employees* *Employer's State Employer Identification Number (EIN)*

Please complete page 2 of this form.



State Health Benefits Program (SHBP)  
School Employees' Health Benefits Program (SEHBP)  
**RESOLUTION**

Please complete and comply with the following:

Type of funding method with the new contract:

Conventionally insured \_\_\_\_\_

Minimum premium \_\_\_\_\_

Administrative Services Only (ASO) \_\_\_\_\_

Other (please list) \_\_\_\_\_

New Health Carrier Southern New Jersey Regional Employee Benefits Fund

New Prescription Drug Carrier Southern New Jersey Regional Employee Benefits Fund

New Dental Plan Carrier N/A

Reason for termination from the SHBP/SEHBP: Equal to or better than coverage at lower cost.

In accordance with N.J.S.A. 18A:16-21 and 40A:10-25, you must file a copy of your new contract with the State Health Benefits Commission or School Employees' Health Benefits Commission. Please submit a copy of the new contract with this completed resolution.

Mail Completed Resolution to:

**New Jersey Division of Pensions & Benefits  
Health Benefits Bureau  
P.O. Box 299  
Trenton, NJ 08625-0299**

**RESOLUTION NO. 23-29**

**SOUTHERN NEW JERSEY REGIONAL EMPLOYEE BENEFITS FUND**

**RESOLUTION to JOIN**

**WHEREAS**, a number of public entities in the State of New Jersey have joined together to form the **Southern New Jersey Regional Employee Benefits Fund**, hereafter referred to as "FUND", as permitted by N.J.S.A. 11:15-3, 17:1-8.1, and 40A:10-36 et seq., and;

**WHEREAS**, the FUND was approved to become operational by the Departments of Insurance and Community Affairs and has been operational since that date, and;

**WHEREAS**, the statutes and regulations governing the creation and operation of a joint insurance fund, contain certain elaborate restrictions and safeguards concerning the safe and efficient administration of the public interest entrusted to such a FUND;

**WHEREAS**, the governing body of Gloucester Township Fire District #2, hereinafter referred to as "LOCAL UNIT" has determined that membership in the FUND is in the best interest of the LOCAL UNIT.

**NOW, THEREFORE, BE IT RESOLVED** that the governing body of the LOCAL UNIT hereby agrees as follows:

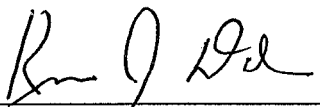
- i. Become a member of the FUND for the period outlined in the LOCAL UNIT's Indemnity and Trust Agreements.
- ii. Will participate in the following type (s) of coverage (s):
  - a.) Health Insurance and Prescription Insurance as defined pursuant to N.J.S.A. 17B:17-4, the FUND's Bylaws, and Plan of Risk Management.
- iii. Adopts and approves the FUND's Bylaws.
- iv. Execute an application for membership and any accompanying certifications.

**BE IT FURTHER RESOLVED** that the governing body of the LOCAL UNIT is authorized and directed to execute the Indemnity and Trust Agreement and such other documents signifying membership in the FUND as required by the FUND's Bylaws, and to deliver these documents to the FUND's Executive Director with the express reservation that these documents shall become effective only upon:

- i. Approval of the LOCAL UNIT by the FUND.
- ii. Receipt from the LOCAL UNIT of a Resolution accepting assessment.
- iii. Approval by the New Jersey Department of Insurance and Department of Community Affairs.

**ADOPTED: October 11, 2023**  
**Date**

BY:   
**Chairman George Genzel**

ATTEST:   
**Commissioner Kevin Donahue - Secretary**

FIRE DISTRICT #2  
TOWNSHIP OF GLOUCESTER

RESOLUTION AUTHORIZING  
APPOINTMENT OF HEALTH INSURANCE FUND COMMISSIONERS

**Resolution to Appoint a Fund Commissioner**

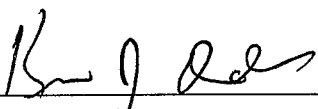
**BE IT RESOLVED BY THE** Gloucester Township Fire District #2 that Administrator William Robb be and is hereby appointed as FUND Commissioner to the Southern New Jersey Regional Employee Benefits Fund to represent Gloucester Township Fire District #2 and

**BE IT FURTHER RESOLVED THAT** Commissioner Lawrence Grady be and is hereby appointed as Alternate Fund Commissioner to the Southern New Jersey Regional Employee Benefits Fund effective October 11, 2023.

MOTION BY: Comm Grady                      SECONDED BY: Comm Evans  
VOTE: Aye: 4      Nay: Ø      Abstain: Ø

CERTIFICATION

I, Secretary / Commissioner Kevin Donahue, do hereby certify that the foregoing is a true copy of a resolution #23-30, duly passed and adopted by the Gloucester Township Fire District #2 at its meeting held on the 11<sup>th</sup> day of October, 2023.

  
\_\_\_\_\_  
Kevin Donahue - Secretary