POSITION DESCRIPTION CITY OF MUNCIE, INDIANA SANITARY DISTRICT

POSITION: Vehicle/Heavy Equipment Mechanic

DEPARTMENT: Sewer Maintenance

WORK SCHEDULE: 7:00 a.m. – 3:00 p.m., M-F JOB CATEGORY: LTC (Labor, Trades, Crafts)

DATE WRITTEN: July 2014 STATUS: Full-time

DAVE REVISED: November 2019 FLSA STATUS: Non-exempt

To perform this position successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed in this document are representative of the knowledge, skill and/or ability required. City of Muncie Sanitary District provides reasonable accommodation to qualified employees and applicants with known disabilities who require accommodation to complete the application process or perform essential functions of the job, unless the accommodation would cause an undue hardship.

Incumbent serves as Vehicle/Heavy Equipment Mechanic for the Muncie Sanitary District Sewer Maintenance Department, responsible for providing assistance in maintenance and repair of vehicles, heavy equipment, and machinery within the Sanitary District.

DUTIES:

Assists in inspecting, troubleshooting, and repairing vehicles, trucks, heavy equipment, and specialized equipment within the Sanitary District.

Disassembles/reassembles or overhauls gasoline and diesel engines, CNG equipment, pumps, power units, differentials, transmissions, and/or various equipment as directed.

Performs data entry of records and various tasks on appropriate computer system.

Operates various hand and/or power tools in performance of duties, including, but not limited to, hammer, screw drivers, air compressor and nozzle, and ratchet.

Operates various machinery and/or equipment in performance of duties, including, but not limited to, fork lift, manlift, belt sander, grinder and drill press.

Performs related duties as assigned.

SKILLS AND KNOWLEDGE:

High school diploma or GED. Must have completed two (2) years of post-high school training in public or private trade school, technical institute, community or four-year college, or minimum of five (5) years of experience in automobile, truck, and heavy equipment.

CNG (Compressed Natural Gas) certified. Must be at least 18 years of age.

Possession of a valid Indiana driver's license, commercial driver's license (CDL Class B with passage of air brake test), and a demonstrated safe driving record.

Knowledge of standard practices and procedures involving various types of machine and equipment repair.

Ability to meet all hiring requirements, including passage of a drug test and medical exam. Incumbent may be subject to random drug screenings if hired.

Working knowledge of standard English grammar, spelling and punctuation, and ability to comprehend and enter data appropriately.

Ability to comply with all employer and Department policies and work rules, including, but not limited to, attendance, safety, drug-free workplace, and personal conduct.

Ability to provide public access to or maintain confidentiality of Department information and records according to state requirements.

Ability to effectively communicate orally and in writing with co-workers, other City departments, and the general public, including being sensitive to professional ethics, gender, cultural diversities and disabilities.

Ability to follow policies and procedures and legal requirements, and ability to apply such knowledge to a variety of interrelated processes, tasks and operations.

Ability to follow policies and procedures and legal requirements, and ability to apply such knowledge to interrelated processes, tasks, and skills.

Ability to utilize computerized programs and related software as required.

Ability to understand, memorize, retain, and carry out written or oral instructions and present findings in oral or written form.

Ability to work alone with minimum supervision and with others in a team environment.

Ability to work on several tasks at the same time and work rapidly for long periods, occasionally under time pressure.

Ability to apply knowledge of people and/or locations, plan and layout assigned work projects, and perform arithmetic calculations. .

Ability to read and interpret detailed prints, sketches, layouts, specifications, and maps. Ability to occasionally work extended hours, evening and/or weekends.

RESPONSIBILTY:

Incumbent performs mechanical duties according to service needs of the District. Incumbent receives indirect or occasional supervision with assignments guided by definite objectives using a variety of

methods or procedures. Care and skill is required to protect vehicles, equipment and tools. Periodically, decisions are made in the absence of specific policies, and/or guidance from supervisor.

Incumbent reports directly to Sewer Maintenance Superintendent.

PHYSICAL EFFORT:

Incumbent performs duties which require moderate physical exertion, involving sitting/walking at will, sitting/standing/walking for long periods, lifting/carrying objects weighing more than 50 pounds pushing/pulling objects, crouching/kneeling, bending, reaching, driving, close/far vision, color/depth perception, handling/grasping objects, and hearing sounds/communications.

WORKING CONDITIONS:

Incumbent performs duties in a garage/shop and/or outdoors, involving working in extreme temperatures, near chemicals, fumes, odors, dust and dirt, high places, and in cramped/awkward areas. Incumbent must wear protective clothing, and safety precautions must be utilized to prevent injury to self and others. Incumbent occasionally works extended hours, weekend, and/or evening hours.

APPLICANT/EMPLOYEE ACKNOWLEDGEMENT

The job description for the position of Vehicle/Heavy Equipment Mechanic for the Sewer Maintenance Department describes the duties and responsibilities for employment in this position. I acknowledge that I have received this job description, and understand that it is not a contract of employment. I am responsible for reading this job description and complying with all job duties, requirements and responsibilities contained herein, and any subsequent revisions.

Is there anything that would keep you from meeti Yes No	ng the job duties and requirements as outlined?
A 1' 4/5 1 G' 4	
Applicant/Employee Signature	Date
Print Name	

APPLICATION FOR EMPLOYMENT



Muncie Sanitary District, Indiana An Equal Opportunity Employer

The Muncie Sanitary District, Indiana, does not discriminate on the basis of race, color, gender, national origin, age, religion, or disability, in employment or the provision of services

Please type or print responses to <u>all</u> questions on the application form. *Any application not completed in its entirety will be <u>disqualified</u>.*

Positio	n sought:				
Last na	ame: First name:				
Middle	initial: Forme	r names(s)			
Addres	SS:		Cit	y/state/zip:	
Phone	<u>:</u>	Are you a	t least 18 yea	ars of age? Ye	s: No:
Are yo	u interested in:	Full-time work?	Yes:	No:	
		Part-time work?	Yes:	No:	
		Seasonal?	Yes:	No:	
Date a	vailable to start work:				
******	********	*********	******	******	**********
	EMPLOY	MENT HISTOF	RY AND W	ORK EXPE	RIENCE
	employment history a t employer. <i>Failure to i</i>	•	• .	•	ars, beginning with your disqualification.
If curre	ently unemployed, che	ck here and	skip to Prev	rious employer	below.
!	Current employer:				
					ip:
	Beginning salary:	per:	Curre	nt salary:	per:
	Supervisor		Titl	le:	
	Work phone:				
	Current employer: Address: Phone: Beginning salary: Supervisor	Hire date:per:	Job Curre Titl	City/state/zititle: nt salary:	ip:per:

Why	y do you want to leave?				
— May	/ we contact your current employ	er? Yes:	No:	If no, ple	ase explain why:
!	Previous employer:				
	Address:				
	Phone:				
	Job title:				
	Beginning salary:				per:
	Supervisor				
	Work phone:				
—— Rea	ason for leaving:				
— May	/ we contact your current employ	er? Yes:	No:	If no, ple	ase explain why:
!	Previous employer:				
	Address:				
	Phone:				
	Job title:				
	Beginning salary:				per:
	Supervisor				
	Work phone:				

Briefly	Briefly describe the work you did, such as duties, responsibilities, equipment you operate, promotions:					
Reaso	on for leaving:					
May w	ve contact your current employer?	? Yes:	No:	If no, plea	se explain why:	
!	Previous employer:					
	Address:			City/state/zip:		
	Phone:	Dat	es employed:			
	Job title:					
	Beginning salary:					
	Supervisor		Title:			
	describe the work you did, such	as duties, re	esponsibilities,	, equipment yo	ou operate, promotions	
——— May w	ve contact your current employer	? Yes:	No:	If no, plea	se explain why:	
→ List ar	If you had additional employers			attach additio	nal pages as needed.	
From:	to		Reaso	on:		
From:	to		Rease	on:		

EDUCATION AND TRAINING

This section is intended to give the employer information about education and training you have completed, and to describe your skills, knowledge and abilities to perform the duties of the position.

High sch	nool atten	ded:	Attach additional _l	pages as i	needed.	
Name:						
	Address: City/state/zip:					
Diploma	? Yes:	No:	GED?	Yes:	No:	
Activities or disab		: (You may e	xclude any which	indicate r	ace, color, religio	on, gender, age national origin,
College	(s) or Trac	le Schools(s) Attach add	ditional pa	ges as needed.	
! !	Name:					
[Dates atte	nded:		to:		_
A	Address: _				City/state/zip	:
[Degrees(s	s):				
! !	Name:					
Γ	Dates atte	nded:		. to:		_
A	Address: _				City/state/zip	:
Ι	Degrees(s	s):				
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		ops, special a sition you are	•	ou have p	ublished, other i	nformation that may be

MILITARY HISTORY AND STATUS If you have never served in the military on active duty, check here and skip to the next section. Military Branch Dates of Service Highest Rank Attained Rank at Separation Type of Discharge: Citations/awards received: PROFESSIONAL OR SPECIALIZED TRAINING Specialized training: CDL Class A: CDL Class B: Air Brake Endorsement: ____ Tanker Endorsement: ____ HAZMAT Endorsement: Professional/special license(s) or certificate(s): State Issued by Date Issued Expiration Type License# Have you had any license suspended, revoked or terminated? If yes, explain: Yes: No: PROFESSIONAL AFFILIATIONS List current or previous affiliations/organizations and related offices/positions. **Organization Name** Address Phone Offices/Positions

Use the following space to describe other training, education, skills, abilities, hobbies, volunteer work or other information that may be helpful in evaluating your application. (You may exclude any which indicate race, color, religion, gender, age, national origin or disability.)					
********	******	******	******	*******	
	PERSONA	AL INFORM	IATION		
		_			
Do you have any commitments wh	-		•		
such as a scond job or school?	Yes:	No:	if yes, pi	ease explain:	
Have you ever been convicted of a	a felony?	Yes:	No:	If yes, please explain:	
·	•				
List three references who are not n	elated to you	and are not for	ormer employe	ers or supervisors who we	
are authorized to contact:					
Name:			Pho	ne:	
Address:		City/sta	te/zip:		
Number of years known:					
Name:			Pho	ne·	
Address:					
Number of years known:			<u></u>		
Name:					
Address:			te/zip:		
Number of years known:					

List any former employers or other individuals/organization we are not authorized to contact:			
Are you	currently requ	uired to register as a sex offender in	this or any other jurisdication?
Yes:	No:	If yes, please explain (including	g jurisdiction of registry):
*****	*****	*********	*************
		APPLICANT CERT	IFICATION
contents	and conditio	• • • •	your understanding of, and consent to, the ur initial at the end of each paragraph. If you the employer <u>before</u> initialing.
or psych the esse	ological exar	nination that the employer deems ne s of the position. I understand and a	ired conditional on passing any medical and/ ecessary to determine my ability to perform eccept that this may include drug, alcohol or
			Initials:
		it may be necessary for me to appro otain information from my current an	ove and sign any waivers necessary in order d former employers.
			Initials:
intentiona understa	ally excluded nd and acce termination,	, my application may be disqualified of that, if I am employed by the emp	application is found to be falsified or from further consideration. I further loyer, I may be subject to disciplinary action, pplication has been falsified or intentionally
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			Initials:
employm	nent medical nent with the	examination and drug testing conse	xecute the employer's conditional and post- nt requirements. I recognize that my future lage in substance abuse, illegal drug use, or
Applican	t signature		Date