

JOB DESCRIPTION

Job Title: Laborer

Department: Public Works Department

Reports To: Public Works Foreman

Term of Employment: Full-time, permanent. \$17-20 an hour depending on experience and water/wastewater certification. Benefits include health, dental, vision, vacation/sick leave (after 90 days), paid holidays, life insurance, and retirement.

General Statement of Duties: Performs a variety of manual labor tasks in all the functional areas of Public Works (maintenance and repair of water utilities, sewer utilities, trash, infrastructure, parks, streets & alleys, mosquito abatement, buildings, sidewalks, parking lots, vehicles and equipment, and cemetery).

Supervision Exercised: None

Duties: The following list of duties is intended to be illustrative only and is not intended to be all-inclusive:

Performs a variety of general labor duties that could include:

- Manually opening and closing water valves
- Rebuilding/repairing/replacing water meters, may include crawling/working in basements/crawl spaces.
- Repairing/replacing water infrastructure, may include working in a trench
- Sewer washing, may include entering confined spaces
- Weed/grass mowing
- Maintaining sprinkler systems
- Snow/Ice shoveling/removal
- Painting
- Equipment repair/maintenance
- Spraying for mosquitos
- Driving/operating vehicles and equipment
- Lifting
- Building repair/maintenance
- Cleaning of equipment and tools
- Cleaning/organizing of town buildings
- Tree trimming
- Pothole repair
- General maintenance of Mount View Cemetery including opening/closing graves for services.
- Ability to establish and maintain effective working relationships with other employees and members of the general public.
- Abide by local, state and federal regulations, as well as all company safety procedures.
- Commit to the overall safety of the work environment by always taking extra precautions to work with the utmost care and consideration.
- Other duties as assigned
- Must be available for some on-call hours including weekends.

Required Knowledge, Skills, and abilities:

- Ability to learn about the town's utility infrastructure and how it works.
- Keen attention to detail and situational awareness to maintain the safety of the work environment.

Education: Graduation from high school or GED equivalent.

Experience: Water/Wastewater Operator preferred. Experience in performing manual labor.

Licensing and Certification: If not already obtained, all the following licenses must be obtained within the dates stated below:

- Valid "Class B" CDL License (within 1 year)
- Level 1 Distribution Systems certificate, or equivalent (within first 90 days of employment)
- Level 1 Lagoon System certificate, or equivalent (within 9 months of employment)

Tools and Equipment Used: Hand tools, hand power tools, mowers, welder, sewer washer, sewer camera, cardboard baler and numerous other types of powered equipment.

Physical Demands: The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is occasionally required to stand, walk, use hands and fingers to handle, feel or operate objects, tools or controls and reach with hands and arms. The employee is occasionally required to sit, climb, balance, stoop, kneel, crouch, crawl, talk, hear and smell.

The employee must occasionally lift and/or move up to 75 pounds. Specific vision abilities required by this job include close vision, distance vision, peripheral vision, depth perception and the ability to adjust focus.

Work Environment: The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

Work is in a variety of indoor and outdoor settings. The outdoor conditions include all types of weather conditions. Supplementary PPE may be required as the employee occasionally works in confined spaces, near moving mechanical parts and in high, precarious places, and is occasionally exposed to wet and/or humid conditions, fumes or airborne particles, toxic or caustic chemicals, risks of electrical shock and vibration. The noise level in the work environment is usually moderate, at times loud when working around equipment.

The duties listed above are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment of the position.

The job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer requirements of the job change.

Applications can be picked up at Town Hall or found online at www.thetownofbasin.com/employment opportunities. They can be submitted to townofbasinclerk@gmail.com or they can be mailed or delivered to Town of Basin, P.O. Box 599, 209 South 4th Street, Basin, WY 82410

TOWN OF BASIN

P.O. Box 599
Basin, WY 82410
(307)568-3331

EMPLOYMENT APPLICATION

PLEASE TYPE OR PRINT USING BLACK INK

Date: _____ 20__

| |
|--|
| Positions desired: <div style="text-align: right; margin-right: 20px;"> 1. _____ 2. _____ </div> |
|--|

Name: _____

(Last)
(First)
(Middle)

Address:
Street
City
State
Zip Code

() _____
 Telephone Number

EDUCATION AND TRAINING DATA

Circle highest grade completed: 7 8 9 10 11 12 or GED College: 1 2 3 4 5 6

Name and Location of Last Elementary or High School Attended: _____

| Name & Location of College, and/or Vocational Schools Attended | Dates Attended | | Course of Study | Graduate? | Degree or Certificate |
|--|----------------|-----|-----------------|-----------|-----------------------|
| | From: | To: | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

List any apprenticeships, internships, trade schools, and military schools, completed or not:

| Name of School or Apprenticeship | Dates Attended | | Employer & Address | Type of Training | Graduate? |
|----------------------------------|----------------|-----|--------------------|------------------|-----------|
| | From: | To: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Please list any additional training, and/or scholastic honors: _____

List all equipment/machines that you can operate. After each piece of equipment, list the number of years experience you have had with that piece of equipment:

Other Skills: _____

Licenses or Certificates Held: _____

MILITARY DATA

Are you a Veteran of The Armed Forces of the United States? Yes No

If so, please attach a copy of your form DD 214

Military Service: From _____ To _____

EMPLOYMENT DATA

LIST ALL EMPLOYMENT EXPERIENCE STARTING WITH PRESENT OR MOST RECENT EMPLOYER FIRST.

Most recent or present Employer:

Name of Employer: _____ From ___/___ To ___/___

Address: _____

Telephone Number: _____

Your Title: _____

Salary (Monthly or Hourly) _____
Beginning Ending

Describe in detail your duties and responsibilities: _____

Number and kind of employees you supervised: _____

Your Supervisor: _____ May we contact? Yes No

Reason for Leaving: _____

Next Previous Employer:

Name of Employer: _____ From ___/___/___ To ___/___/___

Address: _____

Telephone Number: _____

Your Title: _____

Salary (Monthly or Hourly) _____
Beginning Ending

Describe in detail your duties and responsibilities: _____

Number and kind of employees you supervised: _____

Your Supervisor: _____ May we contact? ___Yes ___No

Reason for Leaving: _____

Next Previous Employer:

Name of Employer: _____ From ___/___/___ To ___/___/___

Address: _____

Telephone Number: _____

Your Title: _____

Salary (Monthly or Hourly) _____
Beginning Ending

Describe in detail your duties and responsibilities: _____

Number and kind of employees you supervised: _____

Your Supervisor: _____ May we contact? ___Yes ___No

Reason for Leaving: _____

REFERENCES

List those that know of your abilities.

1. _____
Name Occupation Address City State Phone

2. _____
Name Occupation Address City State Phone

3. _____
Name Occupation Address City State Phone

1. Do you have a valid driver's license? YES NO

2. Do you have any relatives who work for the Town of Basin? YES NO

If so, who? _____

The facts made in my application are to the best of my knowledge, true and complete. I understand that any false statements or misrepresentations given by me on this application are sufficient cause for dismissal.

Signature Date

THE TOWN OF BASIN IS AN EQUAL OPPORTUNITY EMPLOYER

INTERVIEWED BY: _____ DATE: _____

COMMENTS: