

CITY OF HOYT LAKES POSITION OPENING

The City of Hoyt Lakes will accept applications for the full-time position of Combination Specialist II, Water and Wastewater Plant Operator. Must possess a valid MN Class C Water and Wastewater Operator's Certificate or the ability to obtain within 18 months of employment. Must also obtain a valid MN Class B driver's license within 90 days of employment. For an application packet contact the City Clerk's Office, 206 Kennedy Memorial Drive, Hoyt Lakes, MN 55750 or (218) 225-2344. Application is also available on the City website at www.hoytlakes.com. Deadline for application is 4:00 pm on Friday, April 20, 2018.

Post: April 10, 2018

Publish: East Range Shopper, April 16, 2018
Mesabi Daily News, April 11 & 15, 2018
Website
MN Rural Water Website
LMC Website

City of Hoyt Lakes
206 Kennedy Memorial Drive
Hoyt Lakes, MN 55750
Phone (218)225-2344
Fax (218)225-2485
www.hoytlakes.com



EOE/AA
Pay Equity Job Code: Craftworker
Eligible for Overtime: Yes

JOB DESCRIPTION

Classification Title: Combination Specialist II
Headquarters – Department: Public Utilities
Immediate Supervisor: Director of Public Works
Direction of Others: Situational Leadership Occasionally
Updated: 04/09/2018

GENERAL STATEMENT OF DUTIES

Performs skilled maintenance and operational work involving the water plant distribution, wastewater plant and collection systems for the city, assist the street department; and performs related duties as required.

ESSENTIAL FUNCTIONS

- A. Cleans storm sewers, unplugs sewer lines, cleans the disposal plant, hauls sludge, cleans and maintains lift stations, and assists in repairing or replacing sewer lines.
- B. Tests wastewater samples; checks meters, gauges, pumps, and control panels to see all is operating properly; maintains, adjusts or repairs as needed.
- C. Maintains and inspects water and wastewater equipment.
- D. Collects samples, performs laboratory tests, and records information.
- E. Operates a sewer jetter to clean sewer lines.
- F. Installs, repairs, calibrates, and replaces water meters.
- G. Reads water meters and reports information.
- H. Backwashes water plant filter.
- I. Operates and maintains the water and wastewater treatment plants; cleans, services, lubricates, and maintains or repairs equipment.
- J. Checks and replenishes chemical feeders; adjusts feed rate settings; greases feeders and oils feeder motors.
- K. Inspects the operation of all plant equipment including wells, lift stations, and septic tanks.
- L. Assists in all aspects of repairing water main breaks.
- M. Flushes, paints, installs and repairs fire hydrants; prepares hydrants for winter.
- N. Develops and updates manuals in accordance with state lab certification requirements; calibrates lab equipment.
- O. Assists with the MPCA Quality Assurance Program.

OTHER DUTIES AND RESPONSIBILITIES

- A. Assists the public works department with projects as needed.
- B. May operate the snowplow or dump truck to remove snow, blade gravel roads or haul dirt or gravel
- C. Operates cutting torch and jack hammer for miscellaneous projects.
- D. May perform welding including structural welding as needed in the city.
- E. Delivers material and equipment to various locations.
- F. Performs a variety of routine maintenance and custodial tasks including cleaning and painting public buildings and facilities.
- G. Performs miscellaneous carpentry and related repair tasks on municipal buildings as needed.
- H. Acts as liaison with the MPCA, U.S. Forestry, and the county in their regulatory efforts.
- I. Mows grass around water and wastewater facilities.
- J. Records maintenance work as required.

REQUIRED KNOWLEDGE, SKILLS, AND ABILITIES

- A. Knowledge of tools, methods, operations, and materials used in water and wastewater treatment.
- B. Knowledge of laboratory testing and laboratory equipment involved in water and wastewater treatment.
- C. Knowledge of the occupational hazards and safety precautions necessary to perform manual and maintenance work with water and wastewater systems.
- D. Knowledge of the rules and regulations related to water and wastewater treatment.
- E. Skill in the repair and maintenance of water and wastewater equipment and facilities.
- F. Skill in testing water, wastewater and sludge samples.
- G. Ability to perform heavy manual labor, sometimes under adverse conditions.
- H. Ability to lift, carry and move heavy objects.
- I. Ability to communicate effectively with other city employees and the general public.
- J. Ability to operate city public works equipment.
- K. Ability to follow oral and written instructions and to read and follow technical manuals and guides.
- L. Ability to read gauges, detect problems, and respond appropriately to them.

EDUCATION

Completion of two-year technical college program in water and wastewater treatment. Must possess Class C water and wastewater operator's certificates or the ability to obtain within eighteen months of employment. **Must obtain a valid Minnesota Class B driver's license within 90 days of employment.** Must obtain and maintain other licenses such as Boiler, Land Application, or Storm Water, as needed.



Municipal Building
206 Kennedy Memorial Drive
Hoyt Lakes, Minnesota 55750-1140

www.hoytlakes.com
email: info@hoytlakes.com

Phone: (218) 225-2344
FAX: (218) 225-2485

EMPLOYMENT APPLICATION -INSTRUCTIONS-

PLEASE READ AND FOLLOW THESE INSTRUCTIONS

GENERAL INFORMATION

- **IMPORTANT! You MUST complete all parts of the application.**
Read the job announcement carefully before you apply.
Announcements may contain special instructions and requirements.
- Type or print clearly in dark ink. Applications in pencil will not be accepted. Legible photocopies are acceptable.
- We cannot be responsible for failure of other agencies or postage services to forward applications by the deadline. Applications will not be accepted after the closing date of the job announcement.
- If your application is incomplete or does not clearly show the experience and/or training required, your application may be rejected at the City's discretion.
- For jobs with an experience and training rating, your score will be determined by an evaluation of the job related experience and training you describe on the application form and any addendum/supplement provided by the City. Pay close attention to items 14-19. Be complete.
- Your application and all attachments become the property of the City and will not be returned.

KEEP A COPY OF YOUR COMPLETED APPLICATION

IMPORTANT FACTS ABOUT INFORMATION ON YOUR APPLICATION

This application is to assist in the process of referring you for possible employment. Certain information requested on the application is private, that is, it may be released only to you or to agencies where you may be considered for employment (to comply with M.S. 13.43 Subd.2). If you are employed, the data will be available to the Department of Finance, the Internal Revenue Service and the Social Security Administration for payroll and tax purposes. If you disagree with the data we have about you, notify the City Clerk by letter.

Office use: 1. Position Announcement _____ 4. Rating Points _____
 2. Position Description _____ 5. ADA Job Factors _____
 3. Benefits Statement _____

Last Revised 10/17

PRIVATE DATA	WHY WE ASK FOR IT	ARE YOU LEGALLY OBLIGATED TO PROVIDE IT	WHAT MAY HAPPEN IF YOU DON'T PROVIDE IT
Social Security Number	To distinguish you from all other applicants and to make processing more efficient.	No	In most cases, nothing. However, it will help insure we do not confuse your records with those of others.
Name	To distinguish you from all other applicants.	Yes	Failure to provide information may be cause for rejecting an application.
Address	To be able to send you notices.	Yes	Failure to provide information may be cause for rejecting an application.
Home Telephone	To be able to contact you to determine availability for interview.	No	We may not be able to employ you in certain jobs where you may be required to come to work on short notice.
Conviction Record	To determine whether we may process an application from you and to determine whether your record may be a job-related consideration.	Yes	We will not be able to make determinations required by law. Failure to provide relevant conviction information may be grounds for dismissal.

Office Use: Date Received _____
 Initials _____

**CITY OF HOYT LAKES
 APPLICATION FOR EMPLOYMENT**

BE SURE TO READ INSTRUCTION PAGE BEFORE COMPLETING APPLICATION

GENERAL INFORMATION

1) Title of specific position for which you are applying _____ When will you be available for employment? (Check one) <input type="checkbox"/> Now <input type="checkbox"/> Beginning _____ <input type="checkbox"/> Upon ____ weeks notice to current employer	2) Date of Application _____ Phone # _____
3) Last Name: _____ First Name: _____ M.I.: _____	4) Social Security # _____
5) Street Address: _____ City: _____ State/Zip: _____	6) Email Address _____
7) Are you fluent in a language, including sign language, other than English? Yes _____ No _____ If so, which _____	8) May we contact you at work: Yes _____ No _____
9) Have you previously been employed by the City of Hoyt Lakes? Yes _____ No _____ If yes, Date _____ Position _____	10) Are you over the age of 18? Yes _____ No _____ If no, please give date of birth _____
11) Are you able to work the schedule hours for this position? Yes _____ No _____	12) Are you legally eligible to work? Yes _____ No _____
13) Your employment may involve use of a public vehicle. Do you have a valid driver's license? Yes _____ No _____ MN Drivers License # _____ Class _____	

EDUCATION

PLEASE BE COMPLETE: Experience and Training Points are determined by items 14-19.

14) Education: Did you graduate from high school or receive a GED? Yes _____ No _____ School Attended: _____ If No, last grade in high school completed: _____			
Name and location of College, University, Technical Schools	Did you Graduate?	Certificate or Degree	Major Course of Study
	Yes _____ No _____		
	Yes _____ No _____		
	Yes _____ No _____		
	Yes _____ No _____		

WORK EXPERIENCE

List your present or most recent experience first

15 A)

Employer Name _____
Address _____
Phone Number _____
Your Job Title _____
Supervisor's Name & Title _____

Length of Employment:
From ____/____/____ to ____/____/____
Total: Years _____ Months _____
 Full-time Part-time Hours Per Week ____
Reason for Leaving: _____

Number and Type of Positions You Supervised _____

Description of job duties - **Be Complete** _____

May we contact this Employer? Yes ____ No ____

If no, explain: _____

15 B)

Employer Name _____
Address _____
Phone Number _____
Your Job Title _____
Supervisor's Name & Title _____

Length of Employment:
From ____/____/____ to ____/____/____
Total: Years _____ Months _____
 Full-time Part-time Hours Per Week ____
Reason for Leaving: _____

Number and Type of Positions You Supervised _____

Description of job duties - **Be Complete** _____

May we contact this Employer: Yes ____ No ____

If no, explain: _____

WORK EXPERIENCE

List your present or most recent experience first

15 C)

Employer Name _____
Address _____
Phone Number _____
Your Job Title _____
Supervisor's Name & Title _____

Length of Employment:
From ____/____/____ to ____/____/____
Total: Years____ Months____
 Full-time Part-time Hours Per Week ____
Reason for Leaving: _____

Number and Type of Positions You Supervised _____

Description of job duties - **Be Complete** _____

May we contact this Employer? Yes ____ No ____

If no, explain: _____

15 D)

Employer Name _____
Address _____
Phone Number _____
Your Job Title _____
Supervisor's Name & Title _____

Length of Employment:
From ____/____/____ to ____/____/____
Total: Years____ Months____
 Full-time Part-time Hours Per Week ____
Reason for Leaving: _____

Number and Type of Positions You Supervised _____

Description of job duties - **Be Complete** _____

May we contact this Employer: Yes ____ No ____

If no, explain: _____

WORK EXPERIENCE

List your present or most recent experience first

15 E)

Employer Name _____
 Address _____
 Phone Number _____
 Your Job Title _____
 Supervisor's Name & Title _____

Length of Employment:
 From ____/____/____ to ____/____/____
 Total: Years _____ Months _____
 Full-time Part-time Hours Per Week ____
 Reason for Leaving: _____

Number and Type of Positions You Supervised _____

Description of job duties - **Be Complete** _____

May we contact this Employer? Yes ____ No ____

If no, explain: _____

PROFESSIONAL MEMBERSHIPS, REGISTRATIONS or LICENSES

16) List relevant current professional memberships, registrations or licenses. Include date first issued:

VOLUNTEER AND UNPAID WORK EXPERIENCE

Do not specify Organization

Kind of Volunteer Activity	Major Responsibilities	# Hours/Month	How Long? From To

ADDITIONAL EXPERIENCE OR TRAINING

18) Describe any additional experience or training that qualifies you for this position (Be Specific).

19) What machines or equipment do you operate? (i.e. computers, construction equipment, tools, etc).
Please describe software/hardware you are familiar with.

20) In accordance with the Immigration Reform and Control Act of 1986, this employer hires only U.S. Citizens and lawfully authorized alien workers. If hired, you will be required to provide written documentation of citizenship or legalized alien program. Failure to provide said documentation will result in dismissal.

21) Police and Fire Position Applicants only:

Have you served a sentence in jail or prison, plead guilty for or been convicted of a felony, gross misdemeanor for which a jail sentence could have been imposed? You may answer "No" if the conviction or criminal records have been annulled, sealed, set aside or purged, or if you have been pardoned pursuant to the law.

NO YES

If "yes" please attach a separate sheet with explanation. Information concerning this question will not automatically disqualify you from employment, unless adversely related to the position for which you are applying. **In addition to Police and Fire positions, other positions applied for may require a criminal background check as a condition of employment.**

REFERENCES

List at least four people other than relatives who can be contacted regarding your qualifications, work habits and character.

NAME	ADDRESS	PHONE NUMBER	OCCUPATION AND RELATIONSHIP

SIGNATURE & AUTHORIZATION FOR RELEASE OF INFORMATION

I understand this employer has the right to verify information provided in the application. If there are any misrepresentations on this application or my resume or made by me in an interview, which may be discovered now or anytime in the future, I may be discharged for cause without severance pay of any kind. False information or misrepresentation may also subject me to the penalty provisions of M.S.43A.39.

In connection with this application for employment, I authorize this employer and any agent acting on its behalf to conduct an inquiry into any job-related information contained in this application, including, but not limited to my current and past employment and applications for employment, my records maintained by an educational institution relating to academic performance (such as transcripts), a criminal history check, background check, and/or driver's license record review. Moreover, I hereby release this employer and any agent acting on its behalf from any and all liability by reason of requesting such information from any person. A photocopy of this authorization will be treated in the same manner as the original.

_____YES

_____YES, but not present employer until job is offered.

_____NO (we may be unable to hire you without this information).

I declare that any and all statements in this application or information provided are true and complete and hereby acknowledge that I have read and understand the information contained herein.

DATE

SIGNATURE (do not print)

City of Hoyt Lakes
206 Kennedy Memorial Drive
Hoyt Lakes, MN 55750
(218) 225-2344

Date: _____

The following named individual has made application with this agency for employment.

Last Name of Applicant (please print): _____

First Name (please print): _____

Middle (full)(please print): _____

Maiden, Alias or Former (please print): _____

Date of Birth: _____ **Sex (M or F):** _____
Month/Day/Year

Social Security Number (optional): _____

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to the City of Hoyt Lakes for the purpose of Employment with this agency.

The expiration of this authorization shall be one year from the date of my signature.

Signature of Applicant _____

Date _____

Please sign in front of a Notary:

Notary

City of Hoyt Lakes

CONSENT FORM

PERSONAL INFORMATION (Please Print)			
First Name	Last Name	Middle Name	
Maiden, Alias or Former and Dates Used		Date of Birth	Sex
Social Security Number		Driver's License Number and State	

ACKNOWLEDGEMENT/AUTHORIZATION

I, _____ (Full Name: *first, middle, last*), am the person named in an application for employment with the City of Hoyt Lakes for the position of (fill in).

I realize I am not legally required to sign this form, but if I do not, the City of Hoyt Lakes will not be able to determine whether my driving record or conviction record, if any, is a job-related consideration. I understand that if I am rejected as a candidate for the position cited above on the basis of a criminal conviction, I will be notified in writing and will be given any rights to processing of complaints or grievances afforded by *Minnesota Statutes, Chapter 364*. I understand that information prepared by the City's Police Department or other agent acting on the City's behalf is private data; that is, it may be released only pursuant to the statutory provisions of *Minnesota Statutes, Chapter 13*. I acknowledge I have read the notification on the reverse side of this form.

I hereby authorize the City's Police Department or any agent acting on its behalf to inspect and gather information retained by local, county, state, and federal agencies as necessary to determine whether any convictions of a crime or moving traffic violations, for which a jail sentence or more than 90 days could have been imposed, directly related to the position of employment sought by me.

I specifically authorize the Hoyt Lakes Police Department to Disclose all criminal history and driving record information to the City of Hoyt Lakes for the purpose of determining my suitability for employment with the City. Moreover, I hereby release the City of Hoyt Lakes, its agents, and any agency named above from any and all liability.

The duration of this authorization shall be for a period no longer than one year from the date of my signature although I understand this authorization can be revoked by me if I indicate such intent in writing. Criminal history background checks will not be conducted on applicants, except for Police and Fire applicants, unless and until the applicant is selected for an interview.

Applicant's Signature _____ Date _____

IMPORTANT FACTS ABOUT INFORMATION ON THIS FORM

Certain information requested on this form is considered private; that is, it may be released only to you and agencies where you may be considered for employment. This form is part of the City of Hoyt Lakes' employment application materials. Information in your application that is defined by law as *public* may be released on request and includes: veteran status; relevant test scores; rank on eligible list; job history; education and training; and work availability. Your name is private data except when certified as eligible for appointment to a vacancy or when you are considered by the appointing authority to be a finalist for a position in public employment. (To comply with M.S. 13.43, Subd. 2 and Subd 3). A summary of your rights under the Fair Credit Reporting Act will be provided to you prior to any adverse action taken by the City of Hoyt Lakes, regarding your application for employment, based on information obtained through the use of this form.

Private Data	Why We Ask For It?	Are You Legally Obligated To Provide It?	What May Happen If You Don't Provide It?
Name	To distinguish you from all other applicants.	Yes	Failure to provide may be cause for rejection of your application.
Maiden Name/Date of Birth/Sex/Social Security Number/Driver's License Number	To be able to conduct criminal background and driver's license checks.	No	Failure to provide may be cause for rejection of your application.

CITY OF HOYT LAKES

AMERICANS WITH DISABILITIES ACT - PHYSICAL & ENVIRONMENTAL JOB FACTORS

Position: Water & Wastewater Plant Operator Date: December 19, 1995

PHYSICAL FACTORS	CODE	ENVIRONMENTAL FACTORS	CODE
Standing Stationary	O	Work Alone	O
Moving About	F	Work With Others	F
Sitting	O	Work Around Others	F
		Public Contact	O
PHYSICAL STRENGTHS & DEMANDS		Shift Work	V
Lifting - Push & pull while stationary		Extended Day	V
Sedentary - up to 10 lbs.	O	Inside	F
Light Work - 11 to 20 lbs.	O	Outside	O
Medium Work - 21 to 50 lbs.	O	Confined Area	F
Heavy Work - 51 to 100 lbs.	V	Extreme Hot	V
Very Heavy Work - over 100 lbs.	V	Extreme Cold	V
		Wet and/or Humid	O
Carrying - Push & Pull while moving about		Noise	F
Sedentary - up to 10 lbs.	O	Vibration	F
Light Work - 11 to 20 lbs.	O	Mechanical Equipment	F
Medium Work - 21 to 50 lbs.	V	Electrical Equipment	F
Heavy Work - 51 to 100 lbs.	V	Pressurized Equipment	O
Very Heavy Work - over 100 lbs.	V	Burning Material/Equipment	V
Climbing	V	Explosive Material/Equipment	V
Balancing	V	Radiant Energy	V
Stooping	O	Moving Objects	F
Kneeling	O	High Places	V
Crouching	O	Fumes/Odors	F
Crawling	V	Dirt/Dust	F
Reaching	F	Gases	F
Twisting - Sitting	O	Poor Ventilation	V
Twisting - Standing	O	Other (specify)	V
Handling	O	Other (Specify)	
Fingering	O		
Feeling	O		
Talking	O		
Hearing	F		
Seeing - Near Vision	C		
Seeing - Far Vision	F		
Seeing - Depth Perception	C		
Seeing - Accommodation	O	V = Very Infrequent, 1 to 2 times a week	
Seeing - Color Vision	V	O = Occasional, Up to 1/3 of time a week	
Seeing - Field of Vision	O	F = Frequent, 1/3 to 2/3 of time a week	
Smelling	C	C = Constant, more than 2/3 of time a week	
Walking	F		
Reading	O		
Driving	O		
Night Vision	V		
Other (specify)			

