



CITY OF HICKMAN, NEBRASKA
JOB DESCRIPTION

115 Locust Street / P.O. Box 127
Hickman, Ne 68372-0127
Phone: 402.792.2212
Fax: 402.792.2210

Job Title: Maintenance I
Department: Public Works (Electric, Water, Wastewater, Street, Park Departments)
Reports To: Public Works Director, Parks & Recreation Director, City Administrator, Mayor and City Council
FLSA Status: Non-Exempt, Non-Volunteer, Full Time
Date: March 2019

Job Summary

Under direction, performs a variety of routine unskilled to semi-skilled manual labor job tasks to enhance and maintain the City's infrastructure. The position requires the ability to work individually and as a member of a team during normal daily and emergency situations. The position is responsible for conducting general public works and parks maintenance, operating a variety of light duty vehicles, multiple tools and types of equipment for the following areas: Street Maintenance; Park Maintenance; Water Treatment Plant and Infrastructure Maintenance; Electrical Infrastructure Maintenance; Wastewater Treatment Plant and Infrastructure Maintenance. Position requires the ability to work in extreme weather conditions, to be on call after hours for emergencies, and on a rotating schedule of evening and weekend duty.

Knowledge, Skills and Abilities

The requirements listed below are representative of the knowledge, skills and/or abilities required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Knowledge of:

- Basic methods and proper and efficient use of hand and power tools, materials and equipment used in construction trades.
- Basic safety and first aid practices.
- Defensive driving practices.
- Methods, techniques, tools and operating characteristics of equipment used in light to heavy construction, installation, and maintenance projects.
- Electrical, Water and Wastewater utility line distribution, maintenance and repair.
- Modern methods, techniques, materials and safe operation of equipment used for the planning, forming, pouring and finishing of concrete slabs, curbs, gutters, and sidewalks.
- Operating characteristics of vehicles with automatic and manual transmissions.

Note: The statements herein are intended to describe the general nature and level of work being performed by employees assigned to this job summary. They are not intended to be construed as an exhaustive list of all responsibilities, duties, and skills required of personnel. This job description may be changed or updated at any time without notice.

- Traffic control rules and regulations for appropriate signage and safety.

Skills and Ability to:

- Perform heavy and sustained manual labor.
- Operate light-duty (pick-up truck) and heavy-duty (dump truck; tractor; snow plow; skid steer; street sweeper) vehicles while performing legal and defensive driving practices.
- Effectively follow oral and written instructions.
- Follow work safety procedures and practices.
- Complete basic work activity records and time reports.
- Learn and effectively perform maintenance techniques specific to work assignments, including all municipal utilities.
- Work independently in the temporary absence of supervision.
- Safely and skillfully operate hand tools, mechanical equipment, power tools and equipment required to complete work assignments.
- Utilize computers and various software applications (Microsoft Office, GIS Software).
- Communicate effectively while maintaining tact and professionalism through verbal and written communication.
- Establish and maintain effective working relationships with the public, other employees, other governmental agencies, and municipal officials.

Education and Experience

- 1) Applicants are required to have a High School or GED degree and able to pass any background, medical, and drug screenings required.
- 2) Previous electrical, water, and/or wastewater utility experience is preferred.
- 3) Must be 18 years of age or older to operate equipment and perform essential duties.

Essential Job Functions

The following duties represent the principal job duties, which will vary depending upon actual assignment and are not all-inclusive:

- Be punctual and dependable with regular attendance.
- Perform light to heavy manual labor and unskilled to semi-skilled tasks to assist with removal of snow, trash and debris and/or construction, maintenance, replacement, and repair of City utilities (electrical lines, water lines, wastewater lines and streets).
- Safely operate a variety of equipment, vehicles, hand and power tools related to area of assignment.
- Maintain vehicles and equipment.
- Learn and effectively apply regulations, policies, and procedures related to area of assignment.
- Develop and retain records and prepare routine reports through written, oral and electronic means.
- Inspect and perform basic repair on all municipal equipment and make referrals for more extensive repairs.
- Load and unload supplies, tools, and equipment.
- Provide traffic control by setting up and removing signage, cones and barricades as appropriate to the job site.

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- Pick up litter, trash and recycling as necessary from municipal locations.
- May provide training to seasonal staff.
- Use of computers and all related software.
- Perform other job-related duties as required.

Wages, Hours and Benefits:

Full Time Employment, 40 hours per week, Monday through Friday, 7:30 am to 4:00 pm. Insurance, retirement, and other benefits available. City paid Holiday, Vacation, and Sick time off. Compensation Time bank benefit. Starting Wage \$13.00 to \$20.00 per hour, based on qualifications, education and experience.

License / Certification Preferences:

- Possess and maintain a valid Nebraska Driver license at time of hire and must be able to obtain and maintain a Nebraska Commercial Driver’s License (CDL) upon successful completion of introductory employment period.
- Possess, or ability to obtain, a certification as a State of Nebraska Water Operator.
- Possess, or ability to obtain, a certification as a State of Nebraska Wastewater Operator.

Physical Requirements:

Heavy Lifting, 100 pounds	Occasional
Moderate Lifting, 50 pounds	Frequent
Light Lifting, 20 pounds	Frequent
Seeing	Adequate to perform essential functions
Hearing	Frequently perceive nature of sounds by ear
Speaking	Frequently express ideas by means of spoken words
Writing	Adequate to perform essential functions
Standing	Frequent
Walking	Moderate
Sitting	Occasional
Stooping/Bending/Twisting	Frequent
Kneeling	Occasional
Eye/Hand/Foot Coordination	Frequent and necessary to operate equipment and tools
Climbing/Balancing	Occasional, climbs on inclines and uneven surfaces, balance required for utility repairs in high places

Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

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EMPLOYMENT APPLICATION AN EQUAL OPPORTUNITY EMPLOYER

It is our policy to comply fully with all federal, state and local equal employment opportunity laws. This organization provides equal employment and advancement opportunities for all persons regarding race, creed, sex, national origin, age, religion, disability, marital status, sexual orientation or any other classification protected by law.

Employees of this organization are selected in order to accomplish the legal and operational duties established by statute and by the policy choices of the organization's elected officials. Each employee is expected to conduct him / herself in a manner which reflects favorably upon the organization and recognize that our employees are subject to additional public scrutiny in their public and personal lives.

Name: _____ SSN: _____
(As it appears on Social Security Card / Work Permit Card)

Address: _____

City, State, Zip Code: _____

Phone Number(s) Home: (_____) _____ Mobile: (_____) _____

Are you at least 18 years old? Yes No

Other names you have used: _____

Position applied for: _____ Salary Requirements: \$ _____

Referred for this position by: _____ Date Available: _____

Have you ever been employed by this organization? Yes No

When: _____ Department: _____

Supervisor: _____ Reason for leaving: _____

Have you ever been convicted of a felony? Yes No
(If, Yes, please give a location, date charge and disposition of case(s) on a separate page)

If applying for a position which requires driving a vehicle, please provide the following information:

I have a valid driver's license: Yes No Driver's License Number: _____

Can you, if hired, submit verification of your legal right to work in the United States? Yes No

Office Use Only

- Letter of Application
- Resume with four (4) References
- City Application Fully Completed
- Salary History Document

U. S. Military Service:

If you have served in the U. S. Military, please provide the following information:

Branch of Service: _____

From: _____ To: _____ Type of Discharge: _____

Are you claiming Veteran's Preference? Yes No

If you are a veteran, a disabled veteran, or the spouse of a 100% disabled veteran (§48-225), you may be eligible for Veterans Preference in the employment process. To verify eligibility, all applicants claiming Veterans Preference must submit the Form DD214. Disabled veterans must also show proof of a service-connected disability. Spouses of a 100% disabled veteran must provide verification of the veteran's 100% disability rating, along with proof of marriage to the 100% disabled veteran. All documentation must be submitted at the time of application.

Education / Skills:

Education Level	Name, City, State	Years Completed (Circle One)	Units Completed	Degree	Major
High School		9 10 11 12			
Community or Junior College		1 2			
		1 2			
Business or Trade School		1 2			
College or University		1 2 3 4			
		1 2 3 4			
		1 2 3 4			
Graduate School					

Computer Software Skills:

Computer Software	Name of Software	Your Proficiency With The Software
Word Processing		
Spreadsheet		
Database		
Other		

Licenses / Certifications / Organizations:

Name	Description

Job Related Training:

Name of Course	Year Completed	Name of Course	Year Completed

Employment History:

(This portion of the application must include a minimum of 10 year work history and must be completed even if supplemented by a resume)

List your most recent employer first including U. S. Military Service and unpaid volunteer work.

Base salary does not include overtime, bonuses or commissions

From (Month / Year): _____ To (Month / Year): _____ Total Years / Months: _____

Employer: _____ Position: _____

Address: _____ Phone: (____) _____

Type of Business: _____ Reason for Leaving: _____

Base Salary: _____ / _____ Monthly Weekly Hourly Other Compensation, Bonuses: _____
Start Final

Brief Description of your Duties & Responsibilities: _____

From (Month / Year): _____ To (Month / Year): _____ Total Years / Months: _____

Employer: _____ Position: _____

Address: _____ Phone: (____) _____

Type of Business: _____ Reason for Leaving: _____

Base Salary: _____ / _____ Monthly Weekly Hourly Other Compensation, Bonuses: _____
Start Final

Brief Description of your Duties & Responsibilities: _____

From (Month / Year): _____ To (Month / Year): _____ Total Years / Months: _____

Employer: _____ Position: _____

Address: _____ Phone: (____) _____

Type of Business: _____ Reason for Leaving: _____

Base Salary: _____ / _____ Monthly Weekly Hourly Other Compensation, Bonuses: _____
Start Final

Brief Description of your Duties & Responsibilities: _____

From (Month / Year): _____ To (Month / Year): _____ Total Years / Months: _____

Employer: _____ Position: _____

Address: _____ Phone: (____) _____

Type of Business: _____ Reason for Leaving: _____

Base Salary: _____ / _____ Monthly Weekly Hourly Other Compensation, Bonuses: _____
Start Final

Brief Description of your Duties & Responsibilities: _____

Explanation of Interruptions in Employment History:

Please use this space to explain employment history interruptions since high school that do not pertain to pregnancy, child care, disability or any other protected activity:

(Attach an additional page if necessary)

References: (No Relatives)

Name: _____
Address: _____
City, State, Zip: _____
Daytime Phone: _____
Relationship: _____

Name: _____
Address: _____
City, State, Zip: _____
Daytime Phone: _____
Relationship: _____

Name: _____
Address: _____
City, State, Zip: _____
Daytime Phone: _____
Relationship: _____

Name: _____
Address: _____
City, State, Zip: _____
Daytime Phone: _____
Relationship: _____

Emergency Contact:

Name: _____ Relationship: _____

Address: _____ City, State, Zip: _____

Phone Number(s) Home: (_____) _____ Mobile: (_____) _____

Authorization and Agreement:

I Hereby Authorize you to Contact: My Present Employer(s): Yes No

My Past Employers: Yes No

As part of our normal procedure in processing applications, a routine inquiry will be made concerning your background. Former employers, school record offices and personal, school and employment references may be contacted by a consumer reporting agency to verify and obtain information concerning your background, qualifications, school and work records. You may be asked to sign another form authorizing the release of records or to supply grade transcripts. Information gathered about your background and qualifications will be used to help make fair employment decisions. This information will only be available to those participating in this decision or those who process employment applications. As part of this investigation, a check of criminal records will also be conducted by a consumer reporting agency. This agency may keep and use information it supplies to us in this investigation for its own business purposes. Further information such as name of the consumer reporting agency or the nature and scope of such inquiry, if one is made, is available to you upon written request. You will also be given a separate disclosure and authorization to review and sign concerning any reports prepared about your background for us by a consumer reporting agency that compiled the report.

CA and MN only: check here if you wish to receive a copy of the consumer report directly from the consumer reporting Agency that compiled the report.

I hereby authorize the employer, its representatives, employees or agents to contact all pre-employment inquires and tests as described. I further authorize the employer and it's agents to verify all statements contained in this application and any other materials I submit in concern with my employment applications. I agree to complete any requisite authorizations forms. I release the employer, its agents and all providers of information from any liability arising out of gathering and use of such information. In the event of employment, this authorization and release is valid throughout my employment and photocopy is as effective as the original.

I understand all offers of employment are conditional upon satisfactory reference checks, successful completion of all pre-employment tests and production of all documents necessary for the employer to verify my identity and work authorization in accordance with the requirements of the Immigration and Naturalization Services.

As an employer, this organization is subject to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disability Act of 1990. Applicants who believe they are covered by these Acts are invited to identify their disability and special accommodations they feel are necessary to adequately perform their jobs. Submission of this information is strictly voluntary and may be made to the Human Resources Manager.

I certify the information provided in this application is true and complete to the best of my knowledge. I understand withholding pertinent information or submitting false or misleading information on this application, my resume, during interviews or at any other time during the hiring process constitutes valid grounds for disqualification from further consideration for hire or immediate dismissal from employment and loss of all employee benefits and privileges. I further understand and agree that the employer shall not be liable in any respect if my employment is so denied or terminated.

I understand and agree that if I am applying for a law enforcement or jail position, I will be required to comply with all the requirements of the Peace Officer Standards and Training Board (or equivalent agency) required by the state. I further understand that any offer of employment is conditioned upon completing all those tests, including physical agility, to determine my fitness for this position.

I understand the acceptance of this application by the employer neither expresses nor implies I will be offered employment. I understand my employment is at will and I may resign at any time for any reason; similarly my employment may be terminated by the organization at any time for any reason. Any charges to this at-will employment agreement will not be valid unless in writing signed by me and a duly authorized representative of this employing organization.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE AUTHORIZATION AND AGREEMENT STATEMENTS.

Applicant Signature

Print Name

Date



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FAIR CREDIT REPORTING ACT DISCLOSURE AND AUTHORIZATION STATEMENT

To: All Applicants for Employment (Please read carefully before signing below)

In processing my application for employment, I understand the employer, its representatives, employees or agents may obtain a consumer report and investigative consumer report for employment purposes concerning my past employment, work habits, education, military record, motor vehicle record, credit background, references, character, general reputation, personal characteristics, mode of living, civil judgments, liens, and information about my criminal conviction background consistent with state and federal law.

I understand that upon written request to the employer, I will be informed whether an investigative consumer report through a consumer reporting agency was requested and I will be given information as to the nature and scope of the investigation and a summary of my rights under the Fair Credit Reporting Act. I understand in investigative consumer report is a report in which information concerning my character, general reputation, personal characteristics or mode of living is obtained through personal interviews with neighbors, friends, associates or others with whom I am acquainted or who may have knowledge concerning this information.

By signing below, I authorize this employer to obtain a consumer report and an investigative consumer report on me as part of the pre-employment background and investigation process. If I am offered employment, I further authorize my employer to obtain additional consumer and investigative consumer reports and updates on me for employment purposes at any time during my employment. A copy of this authorization is as valid as the original.

Applicant Signature

Print Name

Date

(To be maintained on file with employment application)



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VOLUNTARY CONSENT TO PRE-EMPLOYMENT DRUG TESTING

Applicant Name:

(Please Print)

City of Hickman has a vital interest in maintaining safe, healthful and efficient working conditions for its employees. Using or being under the influence of drugs may pose serious safety and health risks not only for the user but his/her co-workers and the public.

By signing this Notice, the applicant understands and voluntarily agrees to submit to pre-employment drug screening. The applicant further agrees to release City of Hickman and its directors, officers, agents, employees, parents, subsidiaries and affiliated concerns from any and all liability, claims, demands, damages and causes of action of every kinds and nature arising out of the pre-employment drug screening and any decision concerning employment made by City of Hickman, in whole or in part, based upon the results of the pre-employment drug screen.

ANY APPLICANT WHO IS UNWILLING TO AGREE TO THESE CONDITIONS SHOULD NOT APPLY FOR EMPLOYMENT WITH THE CITY OF HICKMAN. Refusal of any applicant to agree to pre-employment drug screening at this time does not preclude an applicant from applying for employment with City of Hickman at some future when the applicant will agree to conform to our policies.

I understand that my offer of employment with City of Hickman is contingent upon my taking and passing a test for the presence of illegal drugs. I further understand and agree that I may be terminated from City of Hickman should the results be positive for the presence of illegal drugs. I voluntarily consent to have a sample of my urine collected for the purpose of drug testing. In the event I should submit two or more samples for drug screening in connection with my application for employment, I understand that each sample must be negative for the presence of illegal drugs. The drug test will be conducted by a clinical laboratory. I hereby authorize the results of this of this testing to be released to City of Hickman. This consent is subject to revocation at any time upon written notice. I understand that I may receive a copy of this consent form upon written request.

Applicant Signature

Print Name

Date

(To be maintained on file with employment application)