

City of Burlington  
Department of Administration



DEPARTMENT OF PUBLIC WORKS

Vacancy Announcement:

**ASSISTANT WATER TREATMENT PLANT OPERATOR – title code 05479**

Posting Dates: May 3, 2017 to May 17, 2017

FULL TIME; SHIFT WORK; DEPARTMENT OF PUBLIC WORKS. Under direction of an experienced operator, receives on-the-job training in the operation of a water treatment plant; does other related duties. Seeking an individual with knowledge of the operation and maintenance of mechanical equipment. Preference to City of Burlington residents.

*NOTE: The examples of work for this title are for illustrative purposes only. A particular position using this title may not perform all duties listed in this job specification. Conversely, all duties performed on the job may not be listed.*

EXAMPLES OF WORK: Receives instruction and/or on-the-job training in the operation of a water treatment plant. Performs routine tasks such as recording meter readings and taking water samples. Performs routine maintenance and repair work on pumps, electric motors, valves, and other mechanical equipment. Performs housekeeping tasks such as cleaning and maintaining plant equipment and property. Under direction of an experienced water treatment plant operator, adjusts, regulates, and maintains alum and lime feeders, chemical feed machines, chlorinators, purification machines, water filters, flowmeters, and other mechanical equipment. Will be required to learn to utilize various types of electronic and/or manual recording and computerized information systems used by the agency, office, or related units.

REQUIREMENTS: Mechanical ability. Must be willing and able to work shift work including nights, weekends and holidays.

LICENSE: Appointees will be required to attend school and to obtain a valid Public Water Treatment Operator license of the appropriate class, depending on the permit level of the facility, issued by the NJ Department of Environmental Protection. Facility is a T4/W2 water plant. Appointees will be required to possess a driver's license valid in New Jersey.

KNOWLEDGES AND ABILITIES: Knowledge of the operation and maintenance of mechanical equipment. Ability to learn procedures to be followed in operating, adjusting, regulating, and maintaining alum and lime feeders, chemical feed machines, chlorinators, purification machines, water filter, flowmeters, and other mechanical equipment. Ability to work harmoniously with associates and with other groups and individuals engaged in or concerned with work relating to the water treatment plant. Ability to use judgment and make decisions to keep the plant operating. Ability to learn to utilize various types of electronic and or manual recording and information systems used by the agency, office or related units. Ability to read, write, speak, understand or communicate in English sufficiently to perform the duties of the position.

American Sign Language or Braille may also be considered as acceptable forms of communication. Persons with mental or physical disabilities are eligible as long as they can perform the functions of the job after reasonable accommodation is made to their known limitations. If the accommodation cannot be made because it would cause the employer undue hardship, such persons may not be eligible.

This position is subject to NJ Civil Service Procedures. For a copy of the NJ Civil Service job specification please go to <http://info.csc.state.nj.us/jobspec/05479.htm>. Interested applicants should complete an application by 5:00 PM May 17, 2017 to: City of Burlington Administrator, 525 High Street, Burlington, NJ 08016; Equal Opportunity Employer.

O.K. O.H. Ball 5/2/17

# Application for Employment

City of Burlington  
525 High Street  
Burlington, NJ 08016

Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_ Applicant ID # \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State ZIP Code

Telephone # (\_\_\_\_) \_\_\_\_\_ Cellular/Other # (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Referral Source (How did you hear about us?) \_\_\_\_\_

If you are under 18 and it is required, can you furnish a work permit?.....  Yes  No

If no, please explain: \_\_\_\_\_

Have you ever been employed here before? If yes, give dates and positions: \_\_\_\_\_  Yes  No

Is this application a request for reemployment following an extended military leave of absence from this company?.....  Yes  No

If yes, additional information may be requested.

Are you legally eligible for employment in this country? .....  Yes  No

Date available for work ..... \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range?.....\$ \_\_\_\_\_

Type of employment desired:  Full-Time  Part-Time  Temporary  Seasonal  Educational Co-Op

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)?

This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Yes  No  Need more information about the job's "essential functions" to respond

Driver's license number required if driving may be required in the job for which you are applying: \_\_\_\_\_ State \_\_\_\_\_

## Employment History

Starting with your most recent employer, provide the following information.

Employer _____	Telephone # _____	Dates employed: _____ to _____
Street address _____	City _____ State _____	<b>Compensation (Starting)</b>
Starting job title/final job title _____		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per
Immediate supervisor and title (for most recent position held) _____	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$ _____
Why did you leave? _____	E-mail: _____	<b>Compensation (Final)</b>
Summarize the type of work performed and job responsibilities. _____		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per
		Commission/Bonus/Other Compensation \$ _____

Employer _____	Telephone # _____	Dates employed: _____ to _____
Street address _____	City _____ State _____	<b>Compensation (Starting)</b>
Starting job title/final job title _____		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per
Immediate supervisor and title (for most recent position held) _____	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$ _____
Why did you leave? _____	E-mail: _____	<b>Compensation (Final)</b>
Summarize the type of work performed and job responsibilities. _____		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per
		Commission/Bonus/Other Compensation \$ _____

Employer _____	Telephone # _____	Dates employed: _____ to _____
Street address _____	City _____ State _____	<b>Compensation (Starting)</b>
Starting job title/final job title _____		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per
Immediate supervisor and title (for most recent position held) _____	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$ _____
Why did you leave? _____	E-mail: _____	<b>Compensation (Final)</b>
Summarize the type of work performed and job responsibilities. _____		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per
		Commission/Bonus/Other Compensation \$ _____

## Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

**Computer Skills** (Check appropriate boxes. Include software titles and years of experience.)

Word Processing \_\_\_\_\_ Years: \_\_\_\_\_  E-mail \_\_\_\_\_ Years: \_\_\_\_\_  
 Spreadsheet \_\_\_\_\_ Years: \_\_\_\_\_  Internet \_\_\_\_\_ Years: \_\_\_\_\_  
 Presentation \_\_\_\_\_ Years: \_\_\_\_\_  Other \_\_\_\_\_ Years: \_\_\_\_\_

## Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA (Class Rank)	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

## References

List names and telephone numbers of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to You	Telephone	E-mail	# of Years Known
			( )		
			( )		
			( )		

## Social Security Number

SS# \_\_\_\_\_ We will use this information only for employment purposes and make reasonable efforts to safeguard your privacy.

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, genetic information, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, genetic information, citizenship, age, disability, or any other protected status. The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

**\*\*\*NOTICE\*\*\*** To Applicants: Screening tests for illegal drug use may be required before hiring and during your employment here.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**CITY OF BURLINGTON  
AFFIRMATIVE ACTION  
VOLUNTARY INFORMATION**

The City of Burlington considers all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action.

Please be advised that this survey is *not* a part of your official application for employment. It will not be used in any hiring decision. To be filled separately from application. The information will be used and kept confidential in accordance with applicable laws and regulations.

Please Print

Position(s) applied for \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Referral Source**

Walk-in

Government Employment Agency

Private Employment Agency

Employee

Relative

School

Advertisement-Source \_\_\_\_\_

Other \_\_\_\_\_

Name of person who referred you IF APPLICABLE \_\_\_\_\_

**Applicant Information:**

Name: \_\_\_\_\_ Telephone # ( ) \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street City State Zip

Male

Female

**Please check one of the following Equal Employment Opportunity Identification Groups:**

American Indian / Alaskan Native

White

Native Hawaiian / Other Pacific Islander

Asian

Hispanic / Latino (White race only)

Black / African American

Hispanic / Latino (all other races)

**For Administrative Use Only**

Position(s) applied for

Available

Not Available

Other

Other positions considered for \_\_\_\_\_

Hired  Yes

No

Position hired for \_\_\_\_\_ Date of hire \_\_\_\_/\_\_\_\_/\_\_\_\_

From the EEO job classifications listed below, which one best describes the position filled?

Officials and Managers

Sales Workers

Operatives (semi-skilled)

Professionals

Office and Clerical Workers

Laborers (unskilled)

Technicians

Craft Workers (skilled)

Service Workers

Notes: \_\_\_\_\_

Completed by : \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_