

Cherry Valley and Rochdale Water District

Job Description

System Operator

As an employee of the Cherry Valley and Rochdale Water District you will be expected to contribute to support our goal of providing a continuous, uninterrupted supply of drinking water to our customers in an efficient and economic manner and to further promote public health and commercial development by meeting Federal and State drinking water regulations.

This position is responsible for assisting in the day-to-day maintenance and repair of the District's water distribution system, treatment system, facilities, and grounds as well as the sewer collection system.

General duties include but are not limited to,

- ability to lift 70 pounds,
- shoveling, mowing
- repair and installation of water mains, services, hydrants, water meter installations,
- Performs a variety of routine and repetitive tasks, with work checked during progress and upon completion for quality, quantity, and safety of operations
- Maintains records of daily operations and electronically monitors water and sewer operations on an on-call basis
- Performs manual work in digging and backfilling excavations
- Performs manual work in maintaining, repairing, and cleaning water and sewage pumping stations
- Assists in installation and repair of water services and meters
- May work alone in operation and maintenance of water and sewer stations
- May be required to add, adjust, or control chemicals used for purposes of water treatment
- May participate in snow and ice removal operations
- Work environment includes working in closed spaces, excavations, heights, loud environments, and in all weather conditions
- Work involves direct contact with drinking water and wastewater machinery, pumps, and electronics
- All Certified Operators will rotate as weekend and holiday on-
- Water and sewer stations are inspected and maintained each day of the year including all holidays
- Monitoring of SCADA
- Water quality sampling,
- Diagnose and repair water pumps,
- Maintenance of sewer collection system & sewer pumps as needed.

The position is supervised by the Superintendent.

Minimum requirements: High School diploma
Valid Massachusetts Driver's License

Massachusetts Treatment 2T License preferred or obtainable within 1 year of hire
Massachusetts Distribution 2D License preferred or obtainable within 1 year of hire
OSHA 10 Certification

Work hours: Monday through Friday: 6:30 AM to 3:00 PM

Weekend Cover / on call rotation

Holiday Cover: As assigned by the Superintendent and in conjunction with Weekend Cover

Emergency: Must be available 24 hours per day / 7 days per week and must respond within thirty minutes for emergency operations.

Full benefits offered such as: health insurance, retirement, paid vacation time and holidays

\$22.00 - \$32.00 (DOQ) per hour base with ability to increase upon obtaining licensure.

Applications and detailed job description are available at: www.cvrwd.com Please email cover letter, resume and application to info@cvrwd.com or mail to: Cherry Valley and Rochdale Water District, P.O. Box 138, Rochdale, MA 01542. Applications will be accepted until the position is filled.

This institution is an equal opportunity provider and employer.

Please Print Clearly

APPLICATION FOR EMPLOYMENT

Cherry Valley and Rochdale Water District

Please Answer All Questions. Résumés Are Not A Substitute For A Completed Application.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Applicant Name _____ Position Applied For _____ (list only one)

Telephone Number () _____ - _____ Alternate/Cellular Telephone Number () _____ - _____

Present Address _____

Street, Apartment, or Unit Number

How long have you lived there _____ / _____ Years/Months

City

State

Zip

Email Address (optional) _____ Desired Salary/Hourly Rate _____

If under the age of 18, can you produce the necessary work certificate at the time of employment? Yes No

Type of employment desired? Full-time Part-time (Specify Hours) _____

Are you willing to work overtime? Yes No Date on which you can start work if hired _____

Have you previously applied for employment with this Company? Yes No

If Yes, when and where did you apply? _____

Have you ever been employed by this Company? Yes No

If Yes, provide dates of employment, location and reason for separation from employment. _____

If applicable, below list any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

Education	School Name and Location (Address, City, State)	Course of Study or Major	Graduate? Y or N	# of Years Completed	Honors Received
High School					
College					
Graduate/ Professional					
Trade or Correspondence					

WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or most recent employer listed first. Provide information for at least the most recent ten (10) year period. Attach additional sheets if needed. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment. Do not answer "see résumé?"

Employer

Name _____ **Address** _____ **Type of Business** _____

Telephone (____) _____ Dates Employed From ____/____/____ To ____/____/____

Job Title _____ Duties _____

Supervisor's Name _____ May we contact? Yes No If No, why not? _____

Wages Start _____ Final _____ Reason for Leaving? _____

What will this employer say was the reason your employment terminated? _____

Were you ever disciplined? If so, for what? _____

How much notice did you give when resigning? If none, explain. _____

Employer

Name _____ **Address** _____ **Type of Business** _____

Telephone (____) _____ Dates Employed From ____/____/____ To ____/____/____

Job Title _____ Duties _____

Supervisor's Name _____ May we contact? Yes No If No, why not? _____

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Were you ever disciplined? If so, for what? _____

How much notice did you give when resigning? If none, explain. _____

Have you ever been terminated or asked to resign from any job? Yes No If Yes how many times? _____

Has your employment ever been terminated by mutual agreement? Yes No If Yes how many times? _____

Have you ever been given the choice to resign rather than be terminated? Yes No If Yes how many times? If _____

you answered Yes to any of the above three questions, please explain the circumstances of each occasion.

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e. supervisor, co-worker)	TELEPHONE

Please list the names of personal references (not previous employers or relatives) who you know that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE	NUMBER OF YEARS KNOWN

DRIVING INFORMATION

Do you have a current valid driver's license? Yes No If yes, License No.: _____ State: _____
 Expiration Date: _____

If you do not have a driver's license for the state in which you currently reside, why not?

Has your license ever been suspended or revoked? Yes No
 If yes, explain: _____

Do you have personal automobile insurance? Yes No
 If no, explain: _____

Have you ever been denied personal automobile insurance or has it ever been terminated or suspended? Yes No If yes, explain:

Please list all moving traffic violations in the last five (5) years:

OFFENSE	DATE	LOCATION	COMMENTS

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement.

I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT—EXPRESS OR IMPLIED—WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY. IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Company or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation which may be permitted by federal, state and/or local law. If applicable and allowed by law, I will receive separate written notification regarding the Company's intent to obtain "consumer reports."

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information. Further, if hired, I authorize the company to provide truthful information concerning my employment to future employers and hold the company harmless for providing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE. DO NOT SIGN UNTIL YOU HAVE READ ALL OF THE INFORMATION CONTAINED IN THE APPLICATION.

Applicant Signature _____ **Date** _____ / _____ / _____

If the applicant is a minor, the foregoing release and consent must be signed by the applicant's parent or legal guardian. Signature by the applicant's parent or legal guardian constitutes acknowledgement by the applicant and the parent or legal guardian that the Company, to the extent permitted by federal, state, and local law, can test the applicant for illegal or controlled substances, conduct inspections of property without notice, and communicate test results to Company personnel who need to know, the applicant, and the applicant's legal guardian.

Parent/Legal Guardian

Witness

Date

Date

IT IS UNLAWFUL IN MASSACHUSETTS TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

FEDERAL AND/OR STATE LAW MAY PROHIBIT THE USE OF LIE DETECTOR, POLYGRAPH OR SIMILAR TEST AS WELL.