

# CITY OF GRAND JUNCTION JOB ANALYSIS QUESTIONNAIRE

**I. EMPLOYEE BACKGROUND:** In this section you will provide information regarding your name, current job title, your immediate supervisor, etc. This will help us make sure we refer to the correct job throughout the study.

Is this a group questionnaire? ☒ Yes ☐ No If yes, please list all employee names.

Daniel C. Shepard

Randy Keller

Nina McNally

**Division:** Public Works and Planning

**Department:** Neighborhood Services

## For Individual Questionnaires Only:

**Employee Name:** Shepard Daniel C  
(Last) (First) (Middle Initial)

**Current Classification Title:** Code Enforcement Officer

**Division** Public Works and Planning **Department** Neighborhood Services

**Total Length of Time with organization** 1 Years 7 months

**Total Length of Time in Current Position** 1 Years 7 months

**Assigned Hours/Week:: from** 8:00 am **to** 4:30 pm **Assigned Days/Week** Monday-Friday

**Email:** dans@ci.grandjct.co.us

**Work Phone:** 970-256-4124

### Immediate Supervisor:

### Immediate supervisor reports to:

**Name:** Kathy Portner

**Name:** Tim Moore

**Title:** Neighborhood Services Manger

**Title:** Public Works and Planning Director

**Work Phone** 970-244-1420

**Work Phone:** 970-244-1557

**E-mail:** kathyp@ci.grandjct.co.us

**E-mail:** timm@ci.grandjct.co.us

## II. POSITION INFORMATION

**1. POSITION SUMMARY:** This section asks for a short paragraph, one to three sentences, regarding the purpose of your position and/or your primary responsibilities. This summary helps us to quickly understand the essence of your job. Usually it is better to write this after you have completed the remainder of the questionnaire. Briefly describe what you consider to be the major purpose or objective of the job. Simply stated, what are you attempting to accomplish in your position?

Example: Computer Support Technician

Summary: To operate, maintain and repair computer equipment and to provide technical assistance to users.

Code Enforcement Officer

To enforce the Grand Junction Zoning and Development Code and select sections of the Grand Junction Municipal Ordinance in a pro-active and reactive basis. In so doing to promote the health, safety and welfare of the public.

## 2. SUPERVISION & ORGANIZATIONAL RELATIONSHIPS.

- a. The chart below asks for your specific supervisory responsibilities. If a duty statement applies to you, please check the box under the "Yes" column and then indicate the number of employees for which you are responsible to the right of the statement.

Yes	Duty	Number of Employees
<input checked="" type="checkbox"/>	I do not officially supervise other employees (sign performance reviews).	
<input type="checkbox"/>	I evaluate and sign performance reviews of other full-time employees.	
<input type="checkbox"/>	I evaluate and sign performance reviews of part-time, temporary or contract employees.	
<input type="checkbox"/>	I instruct other employees in methods or procedures needed to carry out their job (how to carry-out their assigned duties).	
<input type="checkbox"/>	I make work assignments for others.	
<input type="checkbox"/>	I make hiring and hiring pay recommendations.	
<input type="checkbox"/>	I make hiring and hiring pay decisions.	
<input type="checkbox"/>	I recommend termination for poor performance.	
<input type="checkbox"/>	I provide advice to peers that they must consider carefully before making a decision.	
<input type="checkbox"/>	I provide information to supervisors/management that they use in making a decision.	

- b. Complete the organization chart below. This chart will help us to understand your job in relation to others in your department. Please use titles and not names. Fill in the applicable position titles: (1) your coworkers, employees you work with and who also report directly to your supervisor; and, (2) your subordinates, any employees you supervise directly. List only those jobs over which you have full managerial/supervisory authority (i.e. complete and sign performance evaluation.) Do not list employees supervised by your subordinate supervisors.

### YOUR COWORKERS' JOB TITLES

Manager
Code Enforcement Officer
Administrative Assistant
Administrative Specialist
Senior Planner
Weed Surveyor

### YOUR DIRECT REPORTS' JOB TITLES


Please indicate the nature of the group supervised and the number supervised

☐ Full Time

☐ Part-Time

☐ Seasonal/Temp

☐ Volunteer

☐ Contract

c. Describe with whom, or with what departments/organizations, you have regular contact.

**1. Inside your organization (other City Departments):**

Title of Person or Department	How Often	For What Purpose
Ex: Peers, Subordinates		
Planning and Public works	Daily	Code violations and land use consultations
Police Department	Bi-monthly	Service of summons, code violations, back-up and community projects
Municipal Court Clerk	Monthly	Court cases and Administrative citation management
Staff Attorney	Weekly	Legal consults, pre-trial conferences
City Clerk	Monthly	Liquor license inspections
Fire Prevention Officer	6 x yearly	report and consult on fire code violations

**2. Outside your organization:**

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public		
Mesa County Building department	Monthly	Assist with code violations
Mesa County Animal Services	2 x yearly	for animal violations
Mesa County Sheriff Office	Yearly	Outside process service of summons and citations

**3. ESSENTIAL DUTIES.**

The list of essential duties helps us to understand those duties which are the primary reasons why your position exists. For clarification, please refer to the examples provided below.

**Essential Duties:** Those duties that make up at least 5% of your time. Please provide enough detail so that someone who may not be familiar with your job will have a clear understanding of what it is that you do. For example, do not simply state "prepares reports", but state "prepares reports such as status reports, staff reports", or other type of report(s) you may prepare. Also, please use action verbs such as prepares, calculates, operates, etc., to start off each statement. Do not use acronyms in your description. Examples are shown below. Use additional sheets if needed.

**Decisions Required:** List the decisions you make to carry out the essential duties.

**Frequency:** Indicate how often you perform each duty - D = daily, W = weekly, M = monthly, Q = quarterly, A = annually, or O = occasionally.

**Percent of Time:** Indicate how much of your time you spend on each task. The total of these percentages should not be more than 100%. Example: Sally conducts property value estimates 20% of the time, it may mean she spends one day out of five on that task, or that she spends around two hours each day. These need only be estimates so do not spend a great deal of time trying to come up with an exact percentage. The percentages of all duties should equal 100% over a one year period of time.

Attach additional sheets if necessary.

**EXAMPLE (LIST ACTUAL ESSENTIAL DUTIES BELOW EXAMPLE)**

Essential Duties	Decisions Required	Frequency	% of Time
<b>EXAMPLES:</b>			
Prepares monthly newsletters by gathering information, writing copy, editing, preparing for publication and overseeing distribution.	Articles to include, editorial changes, graphics, layouts	M	25%
Performs inventory spot checks and monthly counts of supplies in warehouse.	When to check supplies	M	10%

	List of Essential Duties	Decisions Required	Frequency: D = Daily W = Weekly M = Monthly Q = Quarterly A = Annually O = Occasionally	% of Time Spent (Not to exceed 100%)
1	Make and answer phone calls	To determine if it is a valid complaint being reported; determine if and extension or case management plan should be implemented	Daily	5%
2	Inspect properties for violations and follow up inspections for compliance	Determine if there is a violation and type and to what extent; to determine if compliance has been gained	Daily	30%
3	Prepare Voluntary Compliance Request and Notice of Violation Letters; memos and reports	Letters to include type of violation, photo of violation, course of action to be taken to resolve the violation and date of next inspection; memos include nature of violation and recommended course of action or requesting information	Daily	35%
4	Create and implement case management plans	If and when a management plan is needed and time period in which violation is to be corrected	Monthly	2%

5	Prepare and serve Municipal Court sSmmons and Administrative Citations	When and if summons or citation is warranted; what violation and if either a summons or a citation is issued	Monthly	2%
6	Prepare pretrial reports and appear and testify in court	Reports to contain dates, times, names, locations, violation and history; testifying involves memory recollection of case investigation.	Monthly	2%
7	Enter comments for Site PlanReviews	To determine if plans are within the scope of the code and to know the codes may be a future violation	Monthly	1%
8	Prepare complaint forms and enter complaint data, reports and photographs into computer	Determine when intial inspection is to be done; data to contain all elements of the complaint and any follow up on the complaint - letters sent, e-mails, photographs taken and inspection details	Daily	20%
9	Inspect signs for compliance with sign permits	To determine if sign is in compliance with the code and if the sign is in compliance with what is in the permit	Monthly	2%
10	Attend and participate in neighborhood meeting	To determine and research what the problems are for the neighborhood and any solutions to correct the situation	Annually	1%
11			Select	
12			Select	
13			Select	
14			Select	
15			Select	
16			Select	
17			Select	
18			Select	
19			Select	

#### 4. REQUIRED KNOWLEDGE AND SKILLS.

This section helps us to understand the types of knowledge and skill you would need to perform your job at the entry level. Those items you list are those required and not what you might necessarily know or are able to do after being in the position for a number of years.

**Knowledge:** refers to the possession of concepts and information gained through experience, training and/or education and can be measured through testing.

**Skills:** refers to the proficiency which can be demonstrated and are typically manual in nature and/or can be measured through testing.

The knowledge and skills that you list in the following section must refer to the Essential Duties you listed in Section 3.

Duty #	Knowledge – Skills
1,2,3,5,6,7,9,10	Knowledge of Zoning and development Code and Municipal Ordinance
1,2,3,5,6,7,9,10	Policies and procedures for land development and use
2,4	Investigation techniques and legal aspects of investigation ; personal property rights
3,4,6	Report and document writing skills
6	Court room procedures and testifying
7,8	Some typing skills
2,3,7,8	Some computer knowledge
1,2,4,10	Public relation skills
1,2,3,8	Use of general office equipment- copiers, fax machines, printer, phones

### III. EDUCATION, EXPERIENCE, AND EQUIPMENT

**1. EDUCATION:** What level of education do you have and what minimum level of education do you believe is needed to satisfactorily perform your job at entry level? Check the level that applies to your job:

<b>You Have</b>	<b>You Need</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Less than High School Diploma or equivalent (G.E.D.) (ability to read, write, and follow directions)
<input type="checkbox"/>	<input type="checkbox"/>	High School Diploma or equivalent (G.E.D.)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Up to one year of specialized or technical training beyond high school
<input type="checkbox"/>	<input type="checkbox"/>	Associate degree (A.S., A.A.) or two-year technical certificate
<input type="checkbox"/>	<input type="checkbox"/>	Bachelor's degree
<input type="checkbox"/>	<input type="checkbox"/>	Other (explain):

**2. EXPERIENCE:** What kinds of experience do you have, and what minimum kinds of experience are needed to enter your job at entry level?

**Type of Experience**

<b><u>You Have</u></b>	<b><u>Your Time</u></b>	<b><u>You Need</u></b>	<b><u>Minimum Time Required</u></b>
Code Enforcement	1.5 years	years Lawenforcement related	1 years
Animal Services Officer	13 years	years Planning field	1 years
		years	years

a. What field (s) should training or degree be in?  
Code Enforcement, law enforcement, planning

**3. SPECIAL REQUIREMENTS:** List any registrations, certifications or licenses that are **required** for you to hold your position. Be specific and do not abbreviate words or use acronyms.

Colorado Association of Code Enforcement Officials - Colorado State Certification and American Association of Code Enforcement Officers - National Certification



**4. MACHINES, TOOLS AND EQUIPMENT.** List any machines, tools or equipment used in your work and indicate the frequency and time spent using each. The machines, tools and equipment must refer to the Essential Duties you listed in Section 3.

Duty #	Machines, Tools, Equipment	Frequency/Time
3,4,6,7,8,	Personal computer; laptop	Daily
25,6,8,9	Digital camera	Daily
25,9,10	Motor vehicle	Daily
13,4	Office equipment - phones,fax,copier,printer	Daily
2	Sound meter	2 x year
2	Light meter	2 x year

**5. DECISION-MAKING & JUDGMENTS.**

a. Describe three types of important decisions and judgments you make regularly and independently in the performance of your duties.

1. Determine if a violation exists and to what extent and if another department is needed to assist.

2. Identify the safety issues associated with possible hazardous conditions and dangerous people.

3. Determine if the owner or resident should be issued a summons or an administrative citation with an immediate fine.

#### IV: AMERICANS WITH DISABILITIES ACT REQUIREMENTS

##### 1. PHYSICAL ACTIVITIES/REQUIREMENTS.

This section helps us understand the physical activities and requirements that are absolutely necessary for you to be able to do in order to perform your job. Please list the frequency and the importance of each of the physical requirements listed in this section. These physical activities/requirements will help in ensuring the City of Grand Junction remains in compliance with the Americans with Disabilities Act.

The City of Grand Junction is required to document any physical requirements in order to legally defend restrictions that are imposed. The definitions for the physical activities/requirements are taken directly from the guidelines established by the federal government. Your answers in this section will not affect how your job is classified.

##### Frequency

##### Importance

**How frequently is the activity performed?**

**How important is the activity in accomplishing the job's purpose?**

- 0 – Never
- 1 – Annually
- 2 – Quarterly (at least 3 per year)
- 3 – Monthly (at least 8 per year)
- 4 – Weekly (at least 3 per month)
- 5 – Daily (at least 3 per week)

- 0 – Not Important
- 1 – Somewhat Important
- 2 – Very Important
- 3 – Extremely Important

Physical Activity	Frequency	Importance	Duties
<b>Climbing:</b> Ascending or descending ladders, stairs, scaffolding, ramps, poles and the like, using feet and legs and/or hands and arms. Body agility is emphasized. This factor is important if the amount and kind of climbing required exceeds that required for ordinary locomotion.	3--Monthly	1--Somewhat Important	2
<b>Balancing:</b> Maintaining body equilibrium to prevent falling when walking, standing or crouching on narrow, slippery or erratically moving surfaces. This factor is important if the amount and kind of balancing exceeds that needed for ordinary locomotion and maintenance of body equilibrium.	2--Quarterly	1--Somewhat Important	2
<b>Stooping:</b> Bending body downward and forward by bending spine at the waist. This factor is important if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.	0--Never	0--Not Important	
<b>Kneeling:</b> Bending legs at knee to come to a rest on knee or knees.	2--Quarterly	0--Not Important	2
<b>Crouching:</b> Bending the body downward and forward by bending leg and spine.	2--Quarterly	1--Somewhat Important	2
<b>Crawling:</b> Moving about on hands and knees or hands and feet.	0--Never	0--Not Important	
<b>Reaching:</b> Extending hand(s) and arm(s) in any direction.	0--Never	0--Not Important	
<b>Standing:</b> Particularly for sustained periods of time.	4--Weekly	2--Very Important	2,10

<b>Walking:</b> Moving about on foot to accomplish tasks, particularly for long distances.	3--Monthly	2--Very Important	2
<b>Pushing:</b> Using upper extremities to press against something with steady force in order to thrust forward, downward or outward.	0--Never	0--Not Important	2
<b>Pulling:</b> Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.	0--Never	0--Not Important	2
<b>Fingering:</b> Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand or arm as in handling.	5--Daily	3--Extremely Important	1,2,3,4,5,6,7,8
<b>Grasping:</b> Applying pressure to an object with the fingers or palm.	5--Daily	3--Extremely Important	1,2
<b>Lifting:</b> Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. This factor is important if it occurs to be a considerable degree and requires the substantial use of the upper extremities and back muscles.	1--Annually	1--Somewhat Important	2
<b>Feeling:</b> Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	5--Daily	1--Somewhat Important	2,8
<b>Talking:</b> Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.	5--Daily	3--Extremely Important	1,2,6,10
<b>Hearing:</b> Perceiving the nature of sounds with no less than a 4db loss @ 500 Hz, 1,000 Hz and 2,000 Hz with or without correction. Ability to receive detailed information through oral communication, and to make fine discriminations in sound, such as when making fine adjustments on machined parts.	5--Daily	3--Extremely Important	1,2,6,10
<b>Seeing:</b> The ability to perceive the nature of objects by the eye. Seeing is important for hazardous jobs where defective seeing would result in injury and also jobs where special and minute accuracy, inspecting and sorting exist. A high degree of visual efficiency, placing intense and continuous demands on the eyes by moving machinery and other objects are also considered important. Other important factors of seeing are acuity (near and far), depth perception (three dimensional vision), accommodation (adjustment of lens of eye to bring an object into sharp focus), field of vision (area that can be seen up and down or to the right or left while eyes are fixed on a given point) and color vision (ability to identify and distinguish colors).	5--Daily	3--Extremely Important	2,9
<b>Repetitive Motions:</b> Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5--Daily	3--Extremely Important	8
<b>Sedentary Work:</b> Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently or constantly to	5--Daily	1--Somewhat Important	1,3,4,5,6,7,8,9,10

lift, carry, push, pull or otherwise move objects, including the human body. Sedentary work involves sitting most of the time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.			
<b>Light Work:</b> Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly to move objects. If the use of arm and/or leg controls requires exertion of forces greater than that for Sedentary Work and the worker sits most of the time, the job is rated for Light Work.	3--Monthly	1--Somewhat Important	2
<b>Medium Work:</b> Exerting up to 50 pounds of force occasionally, and/or up to 20 pounds of force frequently, and/or up to 10 pounds of force constantly to move objects.	2--Quarterly	1--Somewhat Important	2
<b>Heavy Work:</b> Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects.	2--Quarterly	1--Somewhat Important	2
<b>Very Heavy Work:</b> Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects.	1--Annually	1--Somewhat Important	2

## 2. WORKING CONDITIONS.

The working conditions section helps us to understand the physical environment you are subjected to while performing your job duties. This section does not apply to conditions like an old office building but only those factors that have to do with the job itself. In this section, please place an X by the condition that applies and one under the frequency that is most appropriate. The condition should be unique to your job and not generally applicable to all employees with the organization. **Please note, there is a choice for "Does Not Apply," if most of your work is in an office setting.**

☐ Does Not Apply

Condition	Less than 25% of the time	25-50% of the time	More than 50% of the time
Hazardous physical conditions (mechanical parts, electrical currents, vibration, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Atmospheric Conditions (fumes, odors, dusts, gases, poor ventilation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous materials (chemicals, blood and other body fluids, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme temperatures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Inadequate lighting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work space restricts movement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intense noise	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental (disruptive people, imminent danger, threatening environment)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## V: EMPLOYEE, SUPERVISOR, AND DEPARTMENT HEAD SIGNATURES

### ADDITIONAL COMMENTS

Are there any additional comments you would like to make to be sure you have described your job adequately? (Use additional sheets if necessary).

## EMPLOYEE CERTIFICATION

I certify that the above statements and responses are accurate and complete to the best of my knowledge.

Signed: David C. Shepard

Date: 12/30/06

**TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR AND DEPT. HEAD**

This section is to be used by the Supervisor to note any additional comments, additional duties or disagreements with any section of the questionnaire. The Supervisor should not change anything written by the individual filling out the questionnaire nor should they address any performance issues. Please remember that this questionnaire is intended solely for the purpose of accurately describing the job in question. Supervisors, please review the entire JAQ for completeness and accuracy. If there are sections that are not complete or are incorrect, please fill in the blanks when you review the questionnaire with the incumbent. If you disagree with any information provided or believe some information is missing, indicate below the question number and your comments. **Please note the form should have all three signatures to ensure all have read the questionnaire.**

Question No.	Comments

Please check the appropriate statement:

☒ I agree with the incumbents' position questionnaire as written.

☐ The above modifications have been discussed with the incumbent, and the incumbent agrees with these modifications.

☐ The above modifications have been discussed with the incumbent, and the incumbent disagrees with these modifications.

**I have noted the modifications made by my supervisor in the Comments Section above.**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor  
Signature: Kathleen M. Portner Date: 12-30-08

Department Head  
Signature: Tom J. Noe Date: 1-8-09

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE. AFTER YOU OR YOUR GROUP HAS COMPLETED YOUR PORTION OF THE QUESTIONNAIRE, PLEASE SUBMIT THE QUESTIONNAIRE TO YOUR SUPERVISOR FOR REVIEW, SIGNATURE, AND COMMENT. YOUR SUPERVISOR WILL SUBMIT THE COMPLETED QUESTIONNAIRE TO YOUR DEPARTMENT HEAD.





# CITY OF GRAND JUNCTION

## JOB ANALYSIS QUESTIONNAIRE

**I. EMPLOYEE BACKGROUND:** In this section you will provide information regarding your name, current job title, your immediate supervisor, etc. This will help us make sure we refer to the correct job throughout the study.

Is this a group questionnaire? ☒ Yes ☐ No If yes, please list all employee names.

Nina McNally

Randy Keller

Dan Shepard

**Division:** Neighborhood Services

**Department:** Public Works and Planning

### For Individual Questionnaires Only:

**Employee Name:** McNally Nina I.  
(Last) (First) (Middle Initial)

**Current Classification Title:** Code Enforcement Officer

**Division** Neighborhood Services **Department** Public Works and Planning

**Total Length of Time with organization** 14 Years 9 months

**Total Length of Time in Current Position** 14 Years 9 months

**Assigned Hours/Week:: from** 8:00 a.m. **t o** 4:30 p.m. **Assigned Days/Week** 5

**Email:** ninam@gjcity.org

**Work Phone:** (970) 256-4103

### Immediate Supervisor:

### Immediate supervisor reports to:

**Name:** Kathy Portner

**Name:** Tim Moore

**Title:** Neighborhood Services Manager

**Title:** Public Works and Planning Director

**Work Phone** (970) 244-1420

**Work Phone:** (970) 244-1557

**E-mail:** kportner@gjcity.org

**E-mail:** timm@gjcity.org

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**Example:** Computer Support Technician

**Summary:** To operate, maintain and repair computer equipment and to provide technical assistance to users.

Code Enforcement Officer

To enforce the Grand Junction Zoning and Development Code and select sections of the Grand Junction Municipal Ordinance in a pro-active and reactive basis. In doing so, to promote the health, safety and welfare of the public.

## 2. SUPERVISION & ORGANIZATIONAL RELATIONSHIPS.

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Yes	Duty	Number of Employees
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<input type="checkbox"/>	I evaluate and sign performance reviews of part-time, temporary or contract employees.	
<input type="checkbox"/>	I instruct other employees in methods or procedures needed to carry out their job (how to carry-out their assigned duties).	
<input type="checkbox"/>	I make work assignments for others.	
<input type="checkbox"/>	I make hiring and hiring pay recommendations.	
<input type="checkbox"/>	I make hiring and hiring pay decisions.	
<input type="checkbox"/>	I recommend termination for poor performance.	
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### YOUR COWORKERS' JOB TITLES

Neighborhood Services Manager
Code Enforcement Officer
Administrative Specialist
Administrative Assistant
Senior Planner
Weed Surveyor

### YOUR DIRECT REPORTS' JOB TITLES


Please indicate the nature of the group supervised and the number supervised

☐ Full Time

☐ Part-Time

☐ Seasonal/Temp

☐ Volunteer

☐ Contract

c. Describe with whom, or with what departments/organizations, you have regular contact.

**1. Inside your organization (other City Departments):**

Title of Person or Department	How Often	For What Purpose
Ex: Peers, Subordinates		
Planning and Public Works	Daily	Code violation and land use consultations
Grand Junction Police Department	Bi-monthly	Service of summons, code violation back-up and community projects
Municipal Court Clerk	Monthly	Court case and Administrative Citation management
Staff Attorney	Weekly	Legal consultations, pre-trial conferences
City Clerk	Monthly	Liquor license inspections
Fire Prevention Officer	6 X yearly	Report and consult on fire code and hazmat violations

**2. Outside your organization:**

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public		
Mesa County Building Department	Monthly	Assist with code violation inspections
Mesa County Animal Services	2 X yearly	Animal violations of City or County code
Mesa County Sheriff's Office	Yearly	Outside process service of summons and citations

**3. ESSENTIAL DUTIES.**

The list of essential duties helps us to understand those duties which are the primary reasons why your position exists. For clarification, please refer to the examples provided below.

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**Attach additional sheets if necessary.**

**E X A M P L E (LIST ACTUAL ESSENTIAL DUTIES BELOW EXAMPLE)**

<b>Essential Duties</b>	<b>Decisions Required</b>	<b>Frequency</b>	<b>% of Time</b>
<b>EXAMPLES:</b>			
<i>Prepares monthly newsletters by gathering information, writing copy, editing, preparing for publication and overseeing distribution.</i>	<i>Articles to include, editorial changes, graphics, layouts</i>	<i>M</i>	<i>25%</i>
<i>Performs inventory spot checks and monthly counts of supplies in warehouse.</i>	<i>When to check supplies</i>	<i>M</i>	<i>10%</i>

	<b>List of Essential Duties</b>	<b>Decisions Required</b>	<b>Frequency:</b> D = Daily W = Weekly M = Monthly Q = Quarterly A = Annually O = Occasionally	<b>% of Time Spent</b>  (Not to exceed 100%)
1	Make and return telephone calls associated with code violations and to provide information	To determine if a valid complaint has been reported. Determine if an extension to correct a violation, or a case management plan should be implemented; or to proceed directly with formal enforcement action.	Daily	5%
2	Inspect properties for code violations and conduct follow up inspections for compliance	Determine if there is a violation, the type and to what extent. Determine if compliance has been gained.	Daily	30%
3	Prepare Voluntary compliance Request letters, formal Notice of Violations, memos and reports	Letters to include type of violation, photo of violation, course of action to be taken to resolve the violation and date of next inspection. Memos include nature of violation and recommended course of action or request information.	Daily	35%

4	Create and implement case management plans	Determine if and when a management plan is needed and the time period in which the code violation is to be corrected.	Monthly	2%
5	Prepare and serve Municipal Court Summons and Administrative Citations	Determine if and when a summons or citation is warranted; what violation is to be cited and if either a summons to Municipal Court or citation (fine) will be issued.	Monthly	2%
6	Prepare pre-trial reports and appear to testify in court	Reports to contain dates, times, names, locations, violation and history; testifying involves memory recollection of case investigation.	Monthly	2%
7	Enter comments for Development Site Plan Reviews	Determine if plans are within the scope of the code sections that are of particular concern to Code Enforcement in regard to creation of possible code violations.	Monthly	1%
8	Prepare complaint forms and enter complaint ate, reports and photographs into the computer data base	Determine when initial inspection is to be done; data to contain all elements of the complaint and any follow up on the complaint; letter sent, e-mails, photographs taken and inspection and contact details.	Daily	20%
9	Inspect signs for compliance with permits issued by Planning and Public Works Department	Determine if sign is in compliance with sign code and whether the construction of the sign conforms to the permit.	Monthly	2%
10	Attend and participate in neighborhood meetings	To determine and research what the problems are for the neighborhood, and suggest solutions to correct the situation. Interact with other Departments in accomplishing solutions.	Annually	1%
11			Select	
12			Select	



### III. EDUCATION, EXPERIENCE, AND EQUIPMENT

**1. EDUCATION:** What level of education do you have and what minimum level of education do you believe is needed to satisfactorily perform your job at entry level? Check the level that applies to your job:

<b>You Have</b>	<b>You Need</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Less than High School Diploma or equivalent (G.E.D.) (ability to read, write, and follow directions)
<input type="checkbox"/>	<input type="checkbox"/>	High School Diploma or equivalent (G.E.D.)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Up to one year of specialized or technical training beyond high school
<input type="checkbox"/>	<input type="checkbox"/>	Associate degree (A.S., A.A.) or two-year technical certificate
<input type="checkbox"/>	<input type="checkbox"/>	Bachelor's degree
<input type="checkbox"/>	<input type="checkbox"/>	Other (explain):

**2. EXPERIENCE:** What kinds of experience do you have, and what minimum kinds of experience are needed to enter your job at entry level?

#### Type of Experience

<u>You Have</u>	<u>Your Time</u>	<u>You Need</u>	<u>Minimum Time Required</u>
Code Enforcement Officer	14 years	Law enforcement related	1 years
Legal Assistant	12 years	Legal and land use related	1 years
Management	3 years		years

a. What field (s) should training or degree be in?

Code enforcement, law enforcement, planning, legal, real estate

**3. SPECIAL REQUIREMENTS:** List any registrations, certifications or licenses that are **required** for you to hold your position. Be specific and do not abbreviate words or use acronyms.

Colorado Association of Code Enforcement Officials Certification

American Association of Code Enforcement Officers Registration



**4. MACHINES, TOOLS AND EQUIPMENT.** List any machines, tools or equipment used in your work and indicate the frequency and time spent using each. The machines, tools and equipment must refer to the Essential Duties you listed in Section 3.

Duty #	Machines, Tools, Equipment	Frequency/Time
3, 4, 6, 7, 8	Personal computer; laptop	Daily
25, 6, 8, 9	Digital camera operation and photograph composition	Daily
25, 9, 10	Motor vehicle	Daily
13, 4	Office equipment; telephone, copier, printer, fax	Daily
2	Sound meter	2 X year
2	Light meter	2 X year

**5. DECISION-MAKING & JUDGMENTS.**

a. Describe three types of important decisions and judgments you make regularly and independently in the performance of your duties.

1. Determine if a code violation exists and to what extent, and whether another department should be advised for possible violations in their field.

2. Identify the safety issues associated with possible hazardous materials or conditions and dangerous individuals.

3. Determine if the owner or resident should be issued a summons or an administrative citation with an immediate fine due to the history of the owner/resident property or severity of the violation.

#### IV: AMERICANS WITH DISABILITIES ACT REQUIREMENTS

##### 1. PHYSICAL ACTIVITIES/REQUIREMENTS.

This section helps us understand the physical activities and requirements that are absolutely necessary for you to be able to do in order to perform your job. Please list the frequency and the importance of each of the physical requirements listed in this section. These physical activities/requirements will help in ensuring the City of Grand Junction remains in compliance with the Americans with Disabilities Act.

The City of Grand Junction is required to document any physical requirements in order to legally defend restrictions that are imposed. The definitions for the physical activities/requirements are taken directly from the guidelines established by the federal government. Your answers in this section will not affect how your job is classified.

##### Frequency

##### Importance

**How frequently is the activity performed?**

**How important is the activity in accomplishing the job's purpose?**

- 0 – Never
- 1 – Annually
- 2 – Quarterly (at least 3 per year)
- 3 – Monthly (at least 8 per year)
- 4 – Weekly (at least 3 per month)
- 5 – Daily (at least 3 per week)

- 0 – Not Important
- 1 – Somewhat Important
- 2 – Very Important
- 3 – Extremely Important

Physical Activity	Frequency	Importance	Duties
<b>Climbing:</b> Ascending or descending ladders, stairs, scaffolding, ramps, poles and the like, using feet and legs and/or hands and arms. Body agility is emphasized. This factor is important if the amount and kind of climbing required exceeds that required for ordinary locomotion.	3--Monthly	1--Somewhat Important	2
<b>Balancing:</b> Maintaining body equilibrium to prevent falling when walking, standing or crouching on narrow, slippery or erratically moving surfaces. This factor is important if the amount and kind of balancing exceeds that needed for ordinary locomotion and maintenance of body equilibrium.	2--Quarterly	1--Somewhat Important	2
<b>Stooping:</b> Bending body downward and forward by bending spine at the waist. This factor is important if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.	0--Never	0--Not Important	
<b>Kneeling:</b> Bending legs at knee to come to a rest on knee or knees.	2--Quarterly	0--Not Important	2
<b>Crouching:</b> Bending the body downward and forward by bending leg and spine.	2--Quarterly	1--Somewhat Important	
<b>Crawling:</b> Moving about on hands and knees or hands and feet.	0--Never	0--Not Important	2
<b>Reaching:</b> Extending hand(s) and arm(s) in any direction.	0--Never	0--Not Important	
<b>Standing:</b> Particularly for sustained periods of time.	4--Weekly	2--Very Important	2, 10
<b>Walking:</b> Moving about on foot to accomplish tasks, particularly for long distances.	3--Monthly	1--Somewhat Important	2
<b>Pushing:</b> Using upper extremities to press against something with steady force in order to thrust	0--Never	0--Not Important	

forward, downward or outward.			
<b>Pulling:</b> Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.	0--Never	0--Not Important	
<b>Fingering:</b> Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand or arm as in handling.	4--Weekly	3--Extremely Important	1, 2
<b>Grasping:</b> Applying pressure to an object with the fingers or palm.	5--Daily	3--Extremely Important	1, 2
<b>Lifting:</b> Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. This factor is important if it occurs to be a considerable degree and requires the substantial use of the upper extremities and back muscles.	1--Annually	1--Somewhat Important	2
<b>Feeling:</b> Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	5--Daily	1--Somewhat Important	2, 8
<b>Talking:</b> Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.	5--Daily	3--Extremely Important	1, 2, 6, 10
<b>Hearing:</b> Perceiving the nature of sounds with no less than a 4db loss @ 500 Hz, 1,000 Hz and 2,000 Hz with or without correction. Ability to receive detailed information through oral communication, and to make fine discriminations in sound, such as when making fine adjustments on machined parts.	5--Daily	3--Extremely Important	1, 2, 6, 10
<b>Seeing:</b> The ability to perceive the nature of objects by the eye. Seeing is important for hazardous jobs where defective seeing would result in injury and also jobs where special and minute accuracy, inspecting and sorting exist. A high degree of visual efficiency, placing intense and continuous demands on the eyes by moving machinery and other objects are also considered important. Other important factors of seeing are acuity (near and far), depth perception (three dimensional vision), accommodation (adjustment of lens of eye to bring an object into sharp focus), field of vision (area that can be seen up and down or to the right or left while eyes are fixed on a given point) and color vision (ability to identify and distinguish colors).	5--Daily	3--Extremely Important	2, 9
<b>Repetitive Motions:</b> Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5--Daily	3--Extremely Important	8
<b>Sedentary Work:</b> Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently or constantly to lift, carry, push, pull or otherwise move objects, including the human body. Sedentary work involves sitting most of the time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.	5--Daily	1--Somewhat Important	1, 3, 4, 5, 6, 7, 8, 9, 10
<b>Light Work:</b> Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly to move objects. If the use of arm	3--Monthly	1--Somewhat Important	2

and/or leg controls requires exertion of forces greater than that for Sedentary Work and the worker sits most of the time, the job is rated for Light Work.			
<b>Medium Work:</b> Exerting up to 50 pounds of force occasionally, and/or up to 20 pounds of force frequently, and/or up to 10 pounds of force constantly to move objects.	2--Quarterly	1--Somewhat Important	2
<b>Heavy Work:</b> Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects.	2--Quarterly	1--Somewhat Important	2
<b>Very Heavy Work:</b> Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects.	1--Annually	1--Somewhat Important	2

## 2. WORKING CONDITIONS.

The working conditions section helps us to understand the physical environment you are subjected to while performing your job duties. This section does not apply to conditions like an old office building but only those factors that have to do with the job itself. In this section, please place an X by the condition that applies and one under the frequency that is most appropriate. The condition should be unique to your job and not generally applicable to all employees with the organization. Please note, there is a choice for "Does Not Apply," if most of your work is in an office setting.

☐ Does Not Apply

Condition	Less than 25% of the time	25-50% of the time	More than 50% of the time
Hazardous physical conditions (mechanical parts, electrical currents, vibration, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Atmospheric Conditions (fumes, odors, dusts, gases, poor ventilation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous materials (chemicals, blood and other body fluids, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme temperatures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Inadequate lighting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work space restricts movement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intense noise	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental (disruptive people, imminent danger, threatening environment)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## V: EMPLOYEE, SUPERVISOR, AND DEPARTMENT HEAD SIGNATURES

### ADDITIONAL COMMENTS

Are there any additional comments you would like to make to be sure you have described your job adequately? (Use additional sheets if necessary).

Code Enforcement Officers spend much of the time making contact with individuals at their homes or places of business in the course of field inspections. This is important in order to provide exceptional customer service. The persons we communicate with cover a wide spectrum of society, from transients to professionals, business owners to housewives. Some individuals have criminal histories; we don't have any information on the people we contact prior to meeting them at their place of business or their home. The work can be dangerous because of this and, and possibly even life-threatening. In addition, we conduct inspections that may expose us to chemicals, explosives, and other hazardous materials that may be encountered during an inspection with no prior knowledge of their existence at the site.

Our cases may involve neighborhood disputes that require us to act as mediators to a degree, and our training and experience helps us to do this and manage our cases in an understanding, equitable and resolute manner. Coordination with other agencies both internal and external may be necessary in order to resolve code violations. Cases may last for several weeks or up to several years to complete management and follow up, and stress levels in some situations can be very high. Communication skills are one of the most important that we use, and training is on-going to maintain our certification and improve all aspects of our duties.

# EMPLOYEE CERTIFICATION

I certify that the above statements and responses are accurate and complete to the best of my knowledge.

Signed: Mina E. McNally Date: 12-30-08

**TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR AND DEPT. HEAD**

This section is to be used by the Supervisor to note any additional comments, additional duties or disagreements with any section of the questionnaire. The Supervisor should not change anything written by the individual filling out the questionnaire nor should they address any performance issues. Please remember that this questionnaire is intended solely for the purpose of accurately describing the job in question. Supervisors, please review the entire JAQ for completeness and accuracy. If there are sections that are not complete or are incorrect, please fill in the blanks when you review the questionnaire with the incumbent. If you disagree with any information provided or believe some information is missing, indicate below the question number and your comments. **Please note the form should have all three signatures to ensure all have read the questionnaire.**

[illegible]

Please check the appropriate statement:

☒ I agree with the incumbents' position questionnaire as written.

☐ The above modifications have been discussed with the incumbent, and the incumbent agrees with these modifications.

☐ The above modifications have been discussed with the incumbent, and the incumbent disagrees with these modifications.

I have noted the modifications made by my supervisor in the Comments Section above.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor  
Signature: Katherine M. Portman Date: 12-30-08

Department Head  
Signature: Tim Mow Date: 1-8-08

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE. AFTER YOU OR YOUR GROUP HAS COMPLETED YOUR PORTION OF THE QUESTIONNAIRE, PLEASE SUBMIT THE QUESTIONNAIRE TO YOUR SUPERVISOR FOR REVIEW, SIGNATURE, AND COMMENT. YOUR SUPERVISOR WILL SUBMIT THE COMPLETED QUESTIONNAIRE TO YOUR DEPARTMENT HEAD.





# CITY OF GRAND JUNCTION

## JOB ANALYSIS QUESTIONNAIRE

**I. EMPLOYEE BACKGROUND:** In this section you will provide information regarding your name, current job title, your immediate supervisor, etc. This will help us make sure we refer to the correct job throughout the study.

Is this a group questionnaire? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please list all employee names.
--	---

Randy Keller

Nina McNally

Daniel Shepard

**Division:** Public Works and Planning

**Department:** Neighborhood Services

### For Individual Questionnaires Only:

<b>Employee Name:</b>	Keller	Randy	P
	(Last)	(First)	(Middle Initial)

**Current Classification Title:** Code Enforcement Officer

<b>Division</b>	Public Works and Planning	<b>Department</b>	Neighborhood Services
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**Total Length of Time with organization** 26 Years 4 months

**Total Length of Time in Current Position** 11 Years 11 months

**Assigned Hours/Week::** from 8:00 A.M. to 4:30 P.M. **Assigned Days/Week** Monday-Friday

**Email:** randyk@gjcityorg

**Work Phone:** 970-256-4102

### Immediate Supervisor:

### Immediate supervisor reports to:

**Name:** Kathy Portner

**Name:** Tim Moore

**Title:** Neighborhood Services Manager

**Title:** Public Works and Planning Director

**Work Phone** 970-244-1420

**Work Phone:** 970-244-1557

**E-mail:** kathyp@gjcity.org

**E-mail:** timm@gjcity.org

## II. POSITION INFORMATION

**1. POSITION SUMMARY:** This section asks for a short paragraph, one to three sentences, regarding the purpose of your position and/or your primary responsibilities. This summary helps us to quickly understand the essence of your job. Usually it is better to write this after you have completed the remainder of the questionnaire. Briefly describe what you consider to be the major purpose or objective of the job. Simply stated, what are you attempting to accomplish in your position?

Example: Computer Support Technician

Summary: To operate, maintain and repair computer equipment and to provide technical assistance to users.

Code Enforcement Officer

To enforce the Grand Junction Zoning and Development Code and select sections of the Grand Junction Municipal Ordinance in a pro-active and reactive basis. In so doing to promote the health, safety and welfare of the public.

## 2. SUPERVISION & ORGANIZATIONAL RELATIONSHIPS.

- a. The chart below asks for your specific supervisory responsibilities. If a duty statement applies to you, please check the box under the "Yes" column and then indicate the number of employees for which you are responsible to the right of the statement.

Yes	Duty	Number of Employees
<input checked="" type="checkbox"/>	I do not officially supervise other employees (sign performance reviews).	
<input type="checkbox"/>	I evaluate and sign performance reviews of other full-time employees.	
<input type="checkbox"/>	I evaluate and sign performance reviews of part-time, temporary or contract employees.	
<input type="checkbox"/>	I instruct other employees in methods or procedures needed to carry out their job (how to carry-out their assigned duties).	
<input type="checkbox"/>	I make work assignments for others.	
<input type="checkbox"/>	I make hiring and hiring pay recommendations.	
<input type="checkbox"/>	I make hiring and hiring pay decisions.	
<input type="checkbox"/>	I recommend termination for poor performance.	
<input type="checkbox"/>	I provide advice to peers that they must consider carefully before making a decision.	
<input type="checkbox"/>	I provide information to supervisors/management that they use in making a decision.	

- b. Complete the organization chart below. This chart will help us to understand your job in relation to others in your department. Please use titles and not names. Fill in the applicable position titles: (1) your coworkers, employees you work with and who also report directly to your supervisor; and, (2) your subordinates, any employees you supervise directly. List only those jobs over which you have full managerial/supervisory authority (i.e. complete and sign performance evaluation.) Do not list employees supervised by your subordinate supervisors.

### YOUR COWORKERS' JOB TITLES

Manager
Code Enforcement Officer
Administrative Asssistant
Administrative Specialist
Senior Planner
Weed Surveyor

### YOUR DIRECT REPORTS' JOB TITLES


Please indicate the nature of the group supervised and the number supervised

☐ Full Time

☐ Part-Time

☐ Seasonal/Temp

☐ Volunteer

☐ Contract

c. Describe with whom, or with what departments/organizations, you have regular contact.

**1. Inside your organization (other City Departments):**

Title of Person or Department	How Often	For What Purpose
Ex: Peers, Subordinates		
Planning and Public works	Daily	Code violations and land use consultations
Police Department	Bi-monthly	Service of summons, code violations, back-up and community projects
Municipal Court Clerk	Monthly	Court cases and Administrative citation management
Staff Attorney	Weekly	Legal consults, pre-trial conferences
City Clerk	Monthly	Liquor license inspections
Fire Prevention Officer	6 x yearly	report and consult on fire code violations

**2. Outside your organization:**

Title of Person or Organization	How Often	For What Purpose
Ex: Vendors, Gen. Public		
Mesa County Building department	Monthly	Assist with code violations
Mesa County Animal Services	2 x yearly	for animal violations
Mesa County Sheriff Office	Yearly	Outside process service of summons and citations

**3. ESSENTIAL DUTIES.**

The list of essential duties helps us to understand those duties which are the primary reasons why your position exists. For clarification, please refer to the examples provided below.

**Essential Duties:** Those duties that make up at least 5% of your time. Please provide enough detail so that someone who may not be familiar with your job will have a clear understanding of what it is that you do. For example, do not simply state "prepares reports", but state "prepares reports such as status reports, staff reports", or other type of report(s) you may prepare. Also, please use action verbs such as prepares, calculates, operates, etc., to start off each statement. Do not use acronyms in your description. Examples are shown below. Use additional sheets if needed.

**Decisions Required:** List the decisions you make to carry out the essential duties.

**Frequency:** Indicate how often you perform each duty – D = daily, W = weekly, M = monthly, Q = quarterly, A = annually, or O = occasionally.

**Percent of Time:** Indicate how much of your time you spend on each task. The total of these percentages **should not be more than 100%**. Example: Sally conducts property value estimates 20% of the time, it may mean she spends one day out of five on that task, or that she spends around two hours each day. These need only be estimates so do not spend a great deal of time trying to come up with an exact percentage. The percentages of **all** duties should equal 100% over a one year period of time.

*Attach additional sheets if necessary.*

**E X A M P L E (LIST ACTUAL ESSENTIAL DUTIES BELOW EXAMPLE)**

Essential Duties	Decisions Required	Frequency	% of Time
<b>EXAMPLES:</b>			
Prepares monthly newsletters by gathering information, writing copy, editing, preparing for publication and overseeing distribution.	Articles to include, editorial changes, graphics, layouts	M	25%
Performs inventory spot checks and monthly counts of supplies in warehouse.	When to check supplies	M	10%

	List of Essential Duties	Decisions Required	Frequency: D = Daily W = Weekly M = Monthly Q = Quarterly A = Annually O = Occasionally	% of Time Spent (Not to exceed 100%)
1	Make and answer phone calls	To determine if it is a valid complaint being reported; determine if and extension or case management plan should be implemented	Daily	5%
2	Inspect properties for violations and follow up inspections for compliance	Determine if there is a violation and type and to what extent; to determine if compliance has been gained	Daily	30%
3	Prepare Voluntary Compliance Request and Notice of Violation Letters; memos and reports	Letters to include type of violation, photo of violation, course of action to be taken to resolve the violation and date of next inspection; memos include nature of violation and recommended course of action or requesting information	Daily	35%
4	Create and implement case management plans	If and when a management plan is needed and time period in which violation is to be corrected	Monthly	2%

5	Prepare and serve Municipal Court sSmmons and Administrative Citations	When and if summons or citation is warranted; what violation and if either a summons or a citation is issued	Monthly	2%
6	Prepare pretrial reports and appear and testify in court	Reports to contain dates, times, names, locations, violation and history; testifying involves memory recollection of case investigation.	Monthly	2%
7	Enter comments for Site PlanRreviews	To determine if plans are within the scope of the code and to know the codes may be a future violation	Monthly	1%
8	Prepare complaint forms and enter complaint data, reports and photographs into computer	Determine when intial inspection is to be done; data to contain all elements of the complaint and any follow up on the complaint - letters sent, e-mails, photographs taken and inspection details	Daily	20%
9	Inspect signs for compliance with sign permits	To determine if sign is in compliance with the code and if the sign is in compliance with what is in the permit	Monthly	2%
10	Attend and participate in neighborhood meeting	To determine and research what the problems are for the neighborhood and any solutions to correct the situation	Annually	1%
11			Select	
12			Select	
13			Select	
14			Select	
15			Select	
16			Select	
17			Select	
18			Select	
19			Select	

#### 4. REQUIRED KNOWLEDGE AND SKILLS.

This section helps us to understand the types of knowledge and skill you would need to perform your job at the entry level. Those items you list are those required and not what you might necessarily know or are able to do after being in the position for a number of years.

**Knowledge:** refers to the possession of concepts and information gained through experience, training and/or education and can be measured through testing.

**Skills:** refers to the proficiency which can be demonstrated and are typically manual in nature and/or can be measured through testing.

The knowledge and skills that you list in the following section must refer to the Essential Duties you listed in Section 3.

Duty #	Knowledge - Skills
1,2,3,5,6,7,9,10	Knowledge of Zoning and development Code and Municipal Ordinance
1,2,3,5,6,7,9,10	Policies and procedures for land development and use
2,4	Investigation techniques and legal aspects of investigation ; personal property rights
3,4,6	Report and document writing skills
6	Court room procedures and testifying
7,8	Some typing skills
2,3,7,8	Some computer knowledge
1,2,4,10	Public relation skills
1,2,3,8	Use of general office equipment- copiers, fax machines, printer, phones

### III. EDUCATION, EXPERIENCE, AND EQUIPMENT

### III. EDUCATION, EXPERIENCE, AND EQUIPMENT

**1. EDUCATION:** What level of education do you have and what minimum level of education do you believe is needed to satisfactorily perform your job at entry level? Check the level that applies to your job:

<b>You Have</b>	<b>You Need</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Less than High School Diploma or equivalent (G.E.D.) (ability to read, write, and follow directions)
<input type="checkbox"/>	<input type="checkbox"/>	High School Diploma or equivalent (G.E.D.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Up to one year of specialized or technical training beyond high school
<input type="checkbox"/>	<input type="checkbox"/>	Associate degree (A.S., A.A.) or two-year technical certificate
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bachelor's degree
<input type="checkbox"/>	<input type="checkbox"/>	Other (explain):

**2. EXPERIENCE:** What kinds of experience do you have, and what minimum kinds of experience are needed to enter your job at entry level?

#### Type of Experience

<u>You Have</u>	<u>Your Time</u>	<u>You Need</u>	<u>Minimum Time Required</u>
Code Enforcement Officer	11 years	Law Enforcement related	1 years
Parking Control Officer	6 years	Law Enforcement related	1 years
	years		years

a. What field (s) should training or degree be in?  
Code Enforcement, Law Enforcement, Planning

**3. SPECIAL REQUIREMENTS:** List any registrations, certifications or licenses that are **required** for you to hold your position. Be specific and do not abbreviate words or use acronyms.

Colorado Association of code Enforcement Officials- Colorado State Association Certification  
Association fo Code Enforcement Officer-National Association Certification



**4. MACHINES, TOOLS AND EQUIPMENT.** List any machines, tools or equipment used in your work and indicate the frequency and time spent using each. The machines, tools and equipment must refer to the Essential Duties you listed in Section 3.

Duty #	Machines, Tools, Equipment	Frequency/Time
3,4,6,7,8,	Personal computer; laptop	Daily
25,6,8,9	Digital camera	Daily
25,9,10	Motor vehicle	Daily
13,4	Office equipment - phones,fax,copier,printer	Daily
2	Sound meter	2 x year
2	Light meter	2 x year

**5. DECISION-MAKING & JUDGMENTS.**

- a. Describe three types of important decisions and judgments you make regularly and independently in the performance of your duties.
  - 1. Determine if a violation exists and to what extent and if another department is needed to assist.
  - 2. Identify the safety issues associated with possible hazardous conditions and dangerous people.
  - 3. Determine if the owner or resident should be issued a summons or an administrative citation with an immediate fine.

## IV: AMERICANS WITH DISABILITIES ACT REQUIREMENTS

### 1. PHYSICAL ACTIVITIES/REQUIREMENTS.

This section helps us understand the physical activities and requirements that are absolutely necessary for you to be able to do in order to perform your job. Please list the frequency and the importance of each of the physical requirements listed in this section. These physical activities/requirements will help in ensuring the City of Grand Junction remains in compliance with the Americans with Disabilities Act.

The City of Grand Junction is required to document any physical requirements in order to legally defend restrictions that are imposed. The definitions for the physical activities/requirements are taken directly from the guidelines established by the federal government. Your answers in this section will not affect how your job is classified.

#### Frequency

#### Importance

**How frequently is the activity performed?**

**How important is the activity in accomplishing the job's purpose?**

- 0 – Never
- 1 – Annually
- 2 – Quarterly (at least 3 per year)
- 3 – Monthly (at least 8 per year)
- 4 – Weekly (at least 3 per month)
- 5 – Daily (at least 3 per week)

- 0 – Not Important
- 1 – Somewhat Important
- 2 – Very Important
- 3 – Extremely Important

Physical Activity	Frequency	Importance	Duties
<b>Climbing:</b> Ascending or descending ladders, stairs, scaffolding, ramps, poles and the like, using feet and legs and/or hands and arms. Body agility is emphasized. This factor is important if the amount and kind of climbing required exceeds that required for ordinary locomotion.	3--Monthly	1--Somewhat Important	2
<b>Balancing:</b> Maintaining body equilibrium to prevent falling when walking, standing or crouching on narrow, slippery or erratically moving surfaces. This factor is important if the amount and kind of balancing exceeds that needed for ordinary locomotion and maintenance of body equilibrium.	2--Quarterly	1--Somewhat Important	2
<b>Stooping:</b> Bending body downward and forward by bending spine at the waist. This factor is important if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.	0--Never	0--Not Important	
<b>Kneeling:</b> Bending legs at knee to come to a rest on knee or knees.	2--Quarterly	0--Not Important	2
<b>Crouching:</b> Bending the body downward and forward by bending leg and spine.	2--Quarterly	1--Somewhat Important	2
<b>Crawling:</b> Moving about on hands and knees or hands and feet.	0--Never	0--Not Important	
<b>Reaching:</b> Extending hand(s) and arm(s) in any direction.	0--Never	0--Not Important	
<b>Standing:</b> Particularly for sustained periods of time.	4--Weekly	2--Very Important	2,10

<b>Walking:</b> Moving about on foot to accomplish tasks, particularly for long distances.	3--Monthly	2--Very Important	2
<b>Pushing:</b> Using upper extremities to press against something with steady force in order to thrust forward, downward or outward.	0--Never	0--Not Important	2
<b>Pulling:</b> Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.	0--Never	0--Not Important	2
<b>Fingering:</b> Picking, pinching, typing or otherwise working, primarily with fingers rather than with the whole hand or arm as in handling.	5--Daily	3--Extremely Important	1,2,3,4,5,6,7,8
<b>Grasping:</b> Applying pressure to an object with the fingers or palm.	5--Daily	3--Extremely Important	1,2
<b>Lifting:</b> Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. This factor is important if it occurs to be a considerable degree and requires the substantial use of the upper extremities and back muscles.	1--Annually	1--Somewhat Important	2
<b>Feeling:</b> Perceiving attributes of objects, such as size, shape, temperature or texture by touching the skin, particularly that of fingertips.	5--Daily	1--Somewhat Important	2,8
<b>Talking:</b> Expressing or exchanging ideas by means of the spoken word. Those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.	5--Daily	3--Extremely Important	1,2,6,10
<b>Hearing:</b> Perceiving the nature of sounds with no less than a 4db loss @ 500 Hz, 1,000 Hz and 2,000 Hz with or without correction. Ability to receive detailed information through oral communication, and to make fine discriminations in sound, such as when making fine adjustments on machined parts.	5--Daily	3--Extremely Important	1,2,6,10
<b>Seeing:</b> The ability to perceive the nature of objects by the eye. Seeing is important for hazardous jobs where defective seeing would result in injury and also jobs where special and minute accuracy, inspecting and sorting exist. A high degree of visual efficiency, placing intense and continuous demands on the eyes by moving machinery and other objects are also considered important. Other important factors of seeing are acuity (near and far), depth perception (three dimensional vision), accommodation (adjustment of lens of eye to bring an object into sharp focus), field of vision (area that can be seen up and down or to the right or left while eyes are fixed on a given point) and color vision (ability to identify and distinguish colors).	5--Daily	3--Extremely Important	2,9
<b>Repetitive Motions:</b> Substantial repetitive movements (motions) of the wrists, hands, and/or fingers.	5--Daily	3--Extremely Important	8
<b>Sedentary Work:</b> Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently or constantly to	5--Daily	1--Somewhat Important	1,3,4,5,6,7,8,9,10

lift, carry, push, pull or otherwise move objects, including the human body. Sedentary work involves sitting most of the time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.			
<b>Light Work:</b> Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly to move objects. If the use of arm and/or leg controls requires exertion of forces greater than that for Sedentary Work and the worker sits most of the time, the job is rated for Light Work.	3--Monthly	1--Somewhat Important	2
<b>Medium Work:</b> Exerting up to 50 pounds of force occasionally, and/or up to 20 pounds of force frequently, and/or up to 10 pounds of force constantly to move objects.	2--Quarterly	1--Somewhat Important	2
<b>Heavy Work:</b> Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects.	2--Quarterly	1--Somewhat Important	2
<b>Very Heavy Work:</b> Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects.	1--Annually	1--Somewhat Important	2

## 2. WORKING CONDITIONS.

The working conditions section helps us to understand the physical environment you are subjected to while performing your job duties. This section does not apply to conditions like an old office building but only those factors that have to do with the job itself. In this section, please place an X by the condition that applies and one under the frequency that is most appropriate. The condition should be unique to your job and not generally applicable to all employees with the organization. Please note, there is a choice for "Does Not Apply," if most of your work is in an office setting.

☐ Does Not Apply

Condition	Less than 25% of the time	25-50% of the time	More than 50% of the time
Hazardous physical conditions (mechanical parts, electrical currents, vibration, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Atmospheric Conditions (fumes, odors, dusts, gases, poor ventilation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous materials (chemicals, blood and other body fluids, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme temperatures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Inadequate lighting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work space restricts movement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intense noise	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental (disruptive people, imminent danger, threatening environment)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## V: EMPLOYEE, SUPERVISOR, AND DEPARTMENT HEAD SIGNATURES

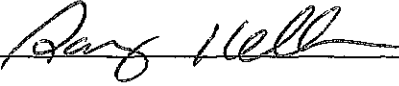
### ADDITIONAL COMMENTS

Are there any additional comments you would like to make to be sure you have described your job adequately? (Use additional sheets if necessary).

This survey did not have a place to indicate the amount of face to face public contact Code Enforcement Officers make. A very important part of our job is customer service. We meet and talk to a wide variety of people ranging from very educated professionals to homeless transients. We have to appear knowledgeable, calm, understanding, fair, and firm. We have to rely on on education, expiernce, skill, and knowledge to keep us from being inserted into a life threatening situation. We are not only case managers we are also people managers. There are situations such as property abatements were we as Code Enforcement Officers coordinate sevealr departments or agencies along with property owners to remove violations .The stress level of these situations is very high and can last several days. One of the most important aspects of our position is the art of communication

## EMPLOYEE CERTIFICATION

I certify that the above statements and responses are accurate and complete to the best of my knowledge.

Signed:  Date: 12/19/08

### TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR AND DEPT. HEAD

This section is to be used by the Supervisor to note any additional comments, additional duties or disagreements with any section of the questionnaire. The Supervisor should not change anything written by the individual filling out the questionnaire nor should they address any performance issues. Please remember that this questionnaire is intended solely for the purpose of accurately describing the job in question. Supervisors, please review the entire JAQ for completeness and accuracy. If there are sections that are not complete or are incorrect, please fill in the blanks when you review the questionnaire with the incumbent. If you disagree with any information provided or believe some information is missing, indicate below the question number and your comments. **Please note the form should have all three signatures to ensure all have read the questionnaire.**

Question No.	Comments

Please check the appropriate statement:

☒ I agree with the incumbents' position questionnaire as written.

☐ The above modifications have been discussed with the incumbent, and the incumbent agrees with these modifications.

☐ The above modifications have been discussed with the incumbent, and the incumbent disagrees with these modifications.

**I have noted the modifications made by my supervisor in the Comments Section above.**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: Kathleen M. Portman Date: 12-30-08

Department Head Signature: Toni Mow Date: 1-8-08

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE. AFTER YOU OR YOUR GROUP HAS COMPLETED YOUR PORTION OF THE QUESTIONNAIRE, PLEASE SUBMIT THE QUESTIONNAIRE TO YOUR SUPERVISOR FOR REVIEW, SIGNATURE, AND COMMENT. YOUR SUPERVISOR WILL SUBMIT THE COMPLETED QUESTIONNAIRE TO YOUR DEPARTMENT HEAD.

