

## **TRANSFER VEHICLE OPERATOR**

### **NATURE OF WORK**

Work involves the transport of trash and other solid waste between a transfer station and other disposal sites in a manner which emphasizes being a good neighbor on the road with no accidents or safety violations and proper care of equipment.

Work is performed under the supervision of the Transportation Operation Manager and is carried out in accordance with standardized equipment operation practices and general work instructions.

### **CRITICAL ELEMENTS OF PERFORMANCE**

Operates a tractor-trailer combination to transport solid waste between transfer station and disposal sites in a safe and timely fashion.

Operates trailer-unloading mechanism according to established procedure.

Inspects each load before closing tops and repacks load as necessary.

Cleans and performs minor maintenance, such as fluid level checks and additions, tire check, cleaning lights and reflectors, replacing washer fluid and fueling on a daily basis.

Keeps daily equipment logs as required.

Performs regular and routine inspection of equipment.

Observes all Department of Transportation rules and regulations.

Reports service needs to Transportation Operations Manager.

Follows SPSA policies and procedures.

Performs other duties as needed and/or required.

### **KNOWLEDGE, SKILLS, AND ABILITIES REQUIRED TO PERFORM JOB**

Thorough knowledge of tractor-trailer equipment operation and maintenance needs sufficient to drive safely and make required safety and maintenance checks.

Thorough knowledge of the occupational hazards and safety precautions of the type of equipment to which assigned.

Knowledge of local geographical area and ability to read and understand maps.

Good knowledge of traffic and safety rules and accident prevention practices.

Skill in interpersonal relations and the exercise of good judgment and discretion in order to deal effectively with employees, vendors, customers, and the general public.

Skill in the safe and efficient operation of assigned equipment, including adverse climate conditions.

Ability to understand and follow oral and written directions.

Ability to maneuver a tractor-trailer combination at a fully competent level.

Ability to receive and maintain Department of Transportation physical card.

### MINIMUM QUALIFICATIONS

A high School diploma or GED. A Class A Commercial License with two years of driving experience of a tractor-trailer combination; or a Commercial A Driver's License and graduation from an approved Tractor Trailer School with a minimum of one year of experience driving a tractor trailer combination. Good DMV record with less than two (2) moving traffic violations and no DUI's in three (3) years.

Possess a valid driver's license with a demonstrable safe driving record. As this position will require operating a motor vehicle owned by, leased by or loaned to SPSA; All policies, rules and directives concerning personal driving records, motor vehicle violations and the reporting thereof will be strictly enforced.

Must be able to perform all essential functions of the job.

## **ACCOUNTABILITIES**

### **TRANSFER VEHICLE OPERATOR**

1. Operates assigned vehicle in a productive manner according to established standards.
2. Observes all rules and regulations regarding the safe and preventable accident free operation of motor vehicles according to Department of Transportation and SPSA requirements on or off public highways and roads.
3. Monitors the condition of all assigned equipment and maintains its clean appearance by regular and routine washing and polishing as required by established standards.
4. Maintains clear and concise communication, and courteous, professional relationships with SPSA employees at all levels of the hierarchy, government officials, vendors, and external customers. Exhibits skill in interpersonal relations and the exercise of good judgment and discretion in order to deal effectively with people of diverse backgrounds and experience levels.
5. Follows SPSA's policies and procedures, including required training and licenses.
6. Demonstrates SPSA's mission statement and shared values in daily actions, service, appearance, and attitude. Represents the department in a manner which demonstrates pride, competence, integrity and professionalism.



**Department of Human Resources**  
 723 Woodlake Drive  
 Chesapeake, VA 23320  
 Office (757) 420-4700, FAX (757) 962-7695  
<http://www.spsa.com>

## APPLICATION FOR EMPLOYMENT

**Effect of Nondisclosure:** Because this application requests both optional data (other skills, training, etc) and mandatory data (qualifications, biographical, etc.), it is in your best interest to answer all questions. Omission of any items means you might not receive full consideration for a position in which this information is needed. A misstatement of material facts on the employment forms may be used as grounds for not employing you or for dismissing you after you begin work. All statements are subject to investigation. All information you give will be considered in reviewing your employment forms.

### PERSONAL INFORMATION

Position Applied For:	Req #:	Position #:
Name:		
Last	First	Middle
Address:		
Number/Street	City	State      Zip Code
Primary Contact Number: (      )		check one:    home    work    cell    pager
Alternate Contact Number: (      )		Best time to reach you:

	Yes	No
Are you currently employed by SPSA?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been employed by SPSA? If Yes, please give dates of last employment: From:                        To:                        Position Held:	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any relatives currently employed by SPSA? If Yes, please give name, relationship, and department:	<input type="checkbox"/>	<input type="checkbox"/>
Are you a citizen of the United States?	<input type="checkbox"/>	<input type="checkbox"/>
If No, do you have the legal right to work in the United States?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of a <b>Felony</b> <input type="checkbox"/> or <b>Misdemeanor</b> <input type="checkbox"/> (including driving-related convictions)? If Yes, please explain and list city, state, and date of every conviction:	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any <b>Felony</b> <input type="checkbox"/> or <b>Misdemeanor</b> <input type="checkbox"/> charges pending against you (including driving-related charges)? If Yes, please explain and list city, state, and date of every pending charge:	<input type="checkbox"/>	<input type="checkbox"/>

### COMPUTER SKILLS

Indicate Software Skills & Proficiency level: Indicate level as Beginner, Intermediate, or Advanced under each application as necessary.	Word <input type="checkbox"/>	Excel <input type="checkbox"/>	Access <input type="checkbox"/>	Power Point <input type="checkbox"/>
List any additional software experience:				
No previous computer/software experience <input type="checkbox"/>				





## PRIVACY ACT NOTICE

This information is provided pursuant to the Privacy Protection Act of 1976, under Virginia Code, Section 26, for individuals supplying information to include in a system of records. The authority to collect information requested by this form is derived from the Southeastern Public Service Authority (SPSA) administrative policies. The principle purpose of employment forms is to collect information needed to determine qualifications, suitability, and availability of applicants for SPSA employment and of current SPSA employees for reclassification, transfer, promotion, and demotion. Your completed application may be used to examine and/or assess your qualifications; to determine if you are entitled to employment under certain laws and regulations and any applicable requirements; and to contact you concerning availability and/or an interview. All or part of your completed employment form may be disclosed outside the Department of Human Resources to:

- Executive Director and staff or supervisor upon a request for a list of eligibles to consider for employment, reinstatement, reemployment, transfer, promotion, or demotion.
- SPSA investigators to determine your suitability for SPSA employment.
- Federal, state or local agencies to create other personnel records after you have been employed by SPSA.
- Appropriate federal, state, or local agency to the extent the information is relevant to the requesting agency's decision.
- A requesting federal, state, or local law enforcement agencies charged with the responsibility of investigating a violation of the law.
- Anyone requesting statistical information (without your personal identification) and for statistical reporting within the confines of SPSA.
- Any requesting information system after obtaining your voluntary release and the requesting company's assurance for the information protection.

**Information regarding disclosure of Social Security Number, if applicable.** Disclosure of your Social Security Number (SSN) is mandatory to obtain the services, benefits, or process that you are seeking. Solicitation of the SSN by SPSA is authorized under the provisions of the Social Security Act. Your SSN will be used primarily to identify your records on file with SPSA and to report wages earned, required by law.

## ACKNOWLEDGMENT AND CERTIFICATION

- I certify eligibility for employment under the Immigration Reform Act of 1986.
- I acknowledge the Privacy Notice above concerning my application with SPSA.
- I acknowledge, understand, and agree that SPSA has the authority, in accordance with the Fair Labor Standards Act, to award compensatory time at the time and one-half rate in lieu of overtime worked under SPSA's overtime policy for non-exempt employees.
- If employment is offered by SPSA, such employment shall be conditional upon successful completion of a job-related physical, drug screen, criminal background check, and certain waiting periods, in addition to a one year period for access to portions of the grievance procedure. I understand that during my employment with SPSA, I shall be subject to all policies and procedures of SPSA (a copy is available for review). I understand that SPSA retains its right to add, delete, or modify any policy, procedure, or benefit pertaining to employment. I understand that employment is not for a specific or definite term, but that my employment is terminable at will, by me or SPSA, at any time, for any reason, including such factors as unsatisfactory performance, conduct, continued need for the position, or any other facts as determined by SPSA to be in the best interest of SPSA. I understand that no contract of employment will alter my "at-will" relationship with SPSA except the Executive Director of SPSA may enter into any agreement for employment that may modify this "at-will" relationship only if such agreement is in writing and signed by me and the Executive Director.
- I, the undersigned, hereby authorize SPSA to contact firms or agencies I have indicated and to investigate background information which is pertinent to my employment and to hold harmless and release those firms or agencies from any claims for damages of any kind that may occur to me by reasons of furnishing such information.
- By typing my name below, I understand that I am applying my electronic signature and certifying that this application was completed by me and that all statements made in this application and any other pre-employment statements are true to the best of my knowledge and belief. I understand that any misstatement or omission of material facts therein may forfeit consideration for employment with SPSA or be grounds for my discharge once employed.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Receipt by \_\_\_\_\_ Date \_\_\_\_\_

**The Southeastern Public Service Authority complies with EEO/ADA guidelines  
and is a drug-free workplace.**