LABORATORY TECHNICIAN

DEFINITION

Under general supervision, samples and tests District water supply, distribution systems and storage facilities and reports results in accordance with state and federal requirements, including the State Water Resources Control Board; takes corrective action to maintain compliance; responds to customer inquiries; maintains record keeping system. Performs additional work as required.

DISTINGUISHING CHARACTERISTICS

Incumbents in this classification report to the Assistant General Manager of Field Operations. This class has regular contact with regulatory agencies in order to furnish and obtain reports and information. Incumbents have a moderate degree of technical knowledge, with certification required. This class has no supervisory duties.

EXAMPLES OF DUTIES

Duties may include, but are not necessarily limited to

- Collect water samples from the distribution system; test for chlorine residuals, temperature, turbidity, clarity, bacteria; test after repairs to system
- Perform microscopic examinations, special and routine tests of physical, chemical or bacteriological nature in the field and the laboratory; take corrective action when necessary
- Submit requisite reports to government agencies and confer with State and other government personnel as the District's representative on matters concerning water quality control
- Check water levels in reservoirs; check daily chlorine residuals in distribution system and add chlorine to reservoirs to maintain optimal levels
- Investigate and resolve customer water quality complaints
- Maintain records of required data, including logs and reports
- Maintain laboratory certification as required
- Operate, maintain and calibrate laboratory equipment
- Monitor and requisition materials, supplies and equipment as needed
- Assist in the development of the following: Standard operating procedures for laboratory, water quality emergency notification plan, water quality monitoring plan and assurance documents
- Assist neighboring agencies with weekly in-house laboratory testing
- Conduct Lead and Copper Rule Testing, UCMR Testing and other testing as required
- Conduct testing as needed during emergency main breaks which may occur after hours
- Conduct testing for District's recycled water program

MINIMUM QUALIFICATIONS

Any combination of education and experience that would provide the required knowledge and abilities is qualifying. A typical way to obtain the knowledge and abilities would be:

Training and Experience:

- High School diploma or equivalent.
- At least two years of college level studies including laboratory courses in chemistry and/or the biological sciences.

and

• Two years progressively responsible experience in a water/wastewater analysis laboratory

Possession of a Bachelor's degree in chemistry, bacteriology, or a similar science may be substituted for up to two years of the required analytical experience.

<u>Licenses/Certificates</u>: Possession of a valid Class B California State operator's license with a driving record acceptable to the District.

Possession of the following certificates:

- Grade I Water Quality Laboratory Analyst
- Grade II Water Treatment Operator Desired
- Grade II Water Distribution Operator Desired

Knowledge of:

- Water quality regulations
- Laboratory procedures and equipment
- District's storage, transmission, distribution, pumping and telemetry systems
- Sampling techniques and methods of statistical analysis
- Flushing program

Ability to:

- Read, interpret and apply standards, regulations, etc.
- Prepare and maintain accurate reports and records
- Respond accurately and tactfully to inquiries from the public
- Establish and maintain good working relationship with officials and employees
- Exercise good judgement in emergency situations

Skill In:

- Operation and calibration of laboratory equipment
- Quantitative and qualitative analysis

PHYSICAL REQUIREMENTS

Incumbent must be able to function indoors and outdoors in an office and shop environment and out in the field in work of primarily an active nature, and perform the following, with or without reasonable accommodation:

- Maintain cardiovascular fitness to engage in active physical work
- Lift and/or carry (100 pounds maximum)
- Walk on smooth and/or uneven surfaces
- Climb, ladders or steep surfaces
- Stand upright and/or forward flexing
- Utilize vision, hearing and speech, may not be color blind
- Utilize manual and finger dexterity
- Twist, turn, bend and reach
- Push and pull
- Work in areas subject to exposure to wet, damp surfaces; chemicals, dusts, mists, fumes; a variety of weather conditions; extremes of heat or cold
- Wear personal protective equipment

NORTH COAST COUNTY WATER DISTRICT

EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR EMPLOYMENT

Position for which you are applying:

PERSONAL DATA: Please use BLACK INK or TYPEWRITE only.

Last Name	First Name	Middle Initial	Telephone – Home: ()
Streets Address			Telephone – Work: ()
City	State	Zip	Message / Fax (if different):
			Social Security Number:

Employment with North Coast County Water District

Have you ever been employed with NCCWD?	Yes	No	
Do you have any relatives employed with NCCWD?	Yes	No	

Language Skills

Fluent?	Yes	No	
Fluent?	Yes	No	

Dismissal from Employment or Felony Convictions: (If you answer yes to either or both of the following questions, complete details, including reasons, offenses, places, dates and penalties, must be outlined and attached to this application on a separate sheet.) The fact that a dismissal or conviction has occurred will not necessarily disqualify an applicant from employment consideration.

Have you ever been dismissed or		
asked to resign from any employment?		
Yes	No	

Employment: (Attach a separate sheet if necessary to cover the past ten (10) years.)

Dates of Current or Latest Employment	May we contact? Yes () No ()	
From: To:	Job Title:	
Name of Employer:	Telephone No.: ()	
Address, City, State and Zip		
	Supervisor's Name and Title:	
Full Time? Part Time?	Your Name Used if Different:	
Briefly Describe Position, Duties, Supervision Exercised:	Reason for Leaving – Explain Fully	

Dates of Previous Employment			
From: 7	lo:	Job Title:	
Name of Employer:		Telephone No.: () Supervisor's Name and Title:	
Address, City, State and Zip			
Full Time?	Part Time?	Your Name Used if Different:	
Briefly Describe Position,	Duties, Supervision Exercised:	Reason for Leaving – Explain Fully	

Dates of Previous Employment		
From: To:	Job Title:	
Name of Employer:	Telephone No.: ()	
Address, City, State and Zip		
	Supervisor's Name and Title:	
Full Time? Part Time?	Your Name Used if Different:	
Briefly Describe Position, Duties, Supervision Exercised:	Reason for Leaving – Explain Fully	

Education:	
High School:	Graduate?
Address:	
College or University	Degree / Major
Address:	

Professional Training:

Troncssional Training	,•			
Institution or Agency	Address	Name of Course	Inclusive Dates	Brief Description Including Certificate
				Received

Licenses / Certificates (List all valid California licenses and / or certificates you hold and attach a copy of both sides of each listed.)

List any equipment, including computers, you can operate that may be involved in the position for which you are applying.

Use this section to continue your employment history or to describe in greater detail any aspects of your experience, activities, or education that are particularly appropriate for the position for which you are applying. Continue on a separate sheet if necessary.

My signature authorizes the North Coast County Water District (NCCWD) to conduct a background investigation concerning any and all information cited by me in connection with my application for employment. Further, I authorize any person, agency, or other entity contacted by NCCWD to release any information to NCCWD with respect to my application for employment. I waive my right of access to any such information released to NCCWD and, without limitation, hereby release NCCWD and any person, agency, or entity that released information from any liability in connection with such release of information or its authorized use.

I certify that I have made true, correct and complete statements and answers on this application with the knowledge that such statements and information may be relied upon by NCCWD in considering my application for employment. I affirm that I have no other purpose in applying for a job with NCCWD. I understand that any omission or false statement made by me on this application, or any supplement to it, or in the course of any interview for employment, will be sufficient grounds for NCCWD to deny my application for employment or for NCCWD to discharge me should I become employed by NCCWD. I understand employment with NCCWD is at the pleasure of the General Manager. I understand I am required to take a pre-appointment physical including a screening for drug and alcohol use.

Date:	Signature: