



# Josephine County, Oregon

## Human Resources Office

Josephine County Courthouse  
500 NW 6<sup>th</sup> Street Dept 11 / Grants Pass OR 97526  
(541) 474-5217 / FAX (541) 474-5218 / TTY (800) 735-2900

### POSITION DESCRIPTION

Job Title: Airport Maintenance Technician  
Department: Airports  
FLSA Status: Non-Exempt  
Job Code: 4548  
WC Code: 7403  
Effective Date: May 1, 2008  
Last Revised: September 30, 2016  
Pay Grade: A10  
Union: AFSCME

#### SUMMARY

Performs semi-skilled and skilled work in corrective and preventative maintenance to County airport grounds, buildings and equipment maintenance, and assists the Airport Director as directed, and as necessary.

#### ESSENTIAL DUTIES AND RESPONSIBILITIES

(Illustrative Only. Any single position in the classification will not necessarily involve all of the listed duties below and other positions will involve duties that are not listed. These duties represent the essential functions needed of persons in this classification.)

1. Operation of equipment, hand, power, light and heavy equipment.
2. Maintenance of equipment.
3. Performs facility maintenance to include administrative building, basic carpentry, welding, masonry, plumbing & painting.
4. Mowing, weed eating, keeping parking lot/fueling area free of debris, spraying of non-regulated herbicides.
5. Reporting maintenance issues to the Airport Director in a timely manner.
6. Performs airport operational duties to include replacing runway marker lights, servicing airport beacon, greasing turret, replacing clearance light bulbs, and monitoring fuel service equipment and requesting parts as required.

#### SUPERVISORY RESPONSIBILITIES

This job has no supervisory responsibilities.

#### QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. A qualified applicant must be self-motivated and comfortable working unsupervised. The requirements listed are representative of the knowledge, skill, and/or ability required.

#### EDUCATION AND EXPERIENCE

High school diploma or general education degree (GED); and three years experience in building and grounds maintenance/repair at a journeymen level in at least two of the building trades; or any satisfactory combination of experience and training which demonstrates the knowledge, skills and ability to perform the above described duties. Knowledge of airport operations and FAA regulations required.

#### JOB IMPACT

The most common consequence of error would involve financial loss due to improper preventative and corrective maintenance to County buildings and equipment.

#### JOB CONTACTS

Contacts are with other County department personnel and the public to resolve problems, and with suppliers to procure materials.

#### LANGUAGE SKILLS

Ability to read and interpret documents such as safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence.

#### MATHEMATICAL SKILLS

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

#### REASONING ABILITIES

Ability to apply common sense understanding to carry out detailed but uninvolved written or oral instructions. Ability to deal with problems involving a few concrete variables in standardized situations.

#### OTHER SKILLS AND ABILITIES

Skill in the operation and maintenance of light and heavy equipment to include lawn mowers and tractors, and weed eaters.

#### CERTIFICATES, LICENSES, REGISTRATIONS

Possession of a valid Oregon Driver's license; history of safe driving record.

#### BACKGROUND INVESTIGATION

Those employed in this position may be subject to a background investigation including criminal background investigation. Conviction of a crime will not necessarily disqualify an individual for this classification.

#### WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. While performing the duties of this job, the employee is regularly exposed to outside weather conditions. The employee is frequently exposed to high, precarious places and fumes or airborne particles. The employee is occasionally exposed to moving mechanical parts, toxic or caustic chemicals, and risk of electrical shock. The noise level in the work environment is usually moderate, and occasionally high noise levels.

#### PHYSICAL REQUIREMENTS

The physical requirements outlined are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

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### **PHYSICAL REQUIREMENTS**

Check if required for essential job function	Activity	Never 0%	Occasionally 1-33%	Frequently 34-66%	Continuous 67-100%
<input checked="" type="checkbox"/>	Standing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Sitting - 1/2 hour plus	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Moving about work area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Bending forward	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Stoop position - 1 minute plus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Climbing stairs - 1 floor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Crawling - hands & knees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Reaching overhead	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Lifting strength	<b># of pounds = 50 lbs</b>			
<input checked="" type="checkbox"/>	Lifting	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Patient Lifting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Lifting Overhead	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Moving carts, etc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Carry items	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Dexterity/Coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Keyboard Operation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Rapid-mental/hand/eye coord.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Operation of motor vehicle	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Speech, Vision &amp; Hearing</b>					
<input checked="" type="checkbox"/>	Distinguish colors	Yes: <input checked="" type="checkbox"/> No: <input type="checkbox"/>			
<input checked="" type="checkbox"/>	Distinguish shades	Yes: <input checked="" type="checkbox"/> No: <input type="checkbox"/>			
<input checked="" type="checkbox"/>	Depth perception	Describe: Yes			
<input checked="" type="checkbox"/>	Ability to hear	Normal Speech Level: Yes			
<input type="checkbox"/>	Other Spec. Hearing Req.	Describe:			
<b>Exposure - Environmental Factors</b>					
<input checked="" type="checkbox"/>	Heat	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Cold	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Humidity	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Wet Area/Slippery	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Noise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Dust	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Smoke	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Vibration	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Chemical Solutions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Uneven Area	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Ladder/Scaffold	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Ionization	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Radiation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Body Fluids	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>