



RETURN By January 18, 2018  
Administration Office

**EMPLOYMENT APPLICATION**

Please complete the entire application.

**Employer Information**

Employer: City of Troy  
Address: 116 E. Market St.  
City State ZIP: Troy, Illinois 62294  
Telephone: 618-667-9924

It is the policy of City of Troy to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

**Applicant Information**

Applicant Full Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Number of years at this address: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_  
Mobile phone: \_\_\_\_\_  
Driver's License (State/Number): \_\_\_\_\_

**Emergency Contact**

Who should be contacted if you are involved in an emergency?

Contact Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

**Job Position Applied :Full Time-Public Works Water**

Salary Desired: \$ \_\_\_\_\_ per

**Previous Employment:**

**Employer Name:** \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Dates of Employment (Mth/Yr): \_\_\_\_\_ / \_\_\_\_\_ to Mth/Yr \_\_\_\_\_ / \_\_\_\_\_

**Employer Name:** \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Dates of Employment (Mth/Yr): \_\_\_\_\_ / \_\_\_\_\_ Mth/Yr \_\_\_\_\_ / \_\_\_\_\_

**Applicant's Education and Training**

College/University Name and Address: \_\_\_\_\_  
\_\_\_\_\_

Did you receive a degree? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, degree(s) received: \_\_\_\_\_

School/GED Name and Address: \_\_\_\_\_  
\_\_\_\_\_

Other Training (graduate, technical, vocational):  
\_\_\_\_\_

Please indicate any current professional licenses or certifications that you hold:  
\_\_\_\_\_

Awards, Honors, Special Achievements:  
\_\_\_\_\_

Military Service:

\_\_\_\_\_ Yes \_\_\_\_\_ No

Branch: \_\_\_\_\_

Specialized Training: \_\_\_\_\_

**References**

List any two non-relatives who would be willing to provide a reference for you.

Name:

Address: \_\_\_\_\_  
\_\_\_\_\_

City/State/ZIP: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**References**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION**

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize City of Troy to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

**JOB TITLE: Public Works Clerk**

**DEPARTMENT: Administration**

**REPORTS TO: Assistant to City Administrator**

**STATUS: Full Time**

**FLSA STATUS: Non-Exempt/Hourly**

**Prepared Date: 11/2011**

**JOB SUMMARY:**

Responsible for performing daily duties assigned in the Public Works office to include coordinate information from computer system to produce monthly customer bills for the Water Department, generating reports, issuing work orders, customer service functions, and coordinating information with other City departments and personnel.

**PRINCIPLE DUTIES AND RESPONSIBILITIES:**

Prepare monthly reports for Water Department customers from information generated from monthly meter reading generated from Interrogator device. Review customer usage reports for atypical water consumption. Generate work orders for Meter Reader based upon high/low readings for re-reading of customer meter. Review and update all re-read information and generate monthly customer water bill. Code, separate and mail customer water bills.

Generate report of delinquent accounts. Review report for accuracy and generate shut-off list/penalty notices. Mail notices to City water customers. If payment not received by due date, generate shut-off list and forward to Meter Reader for action. Once payment has been made, relay information to Meter Reader for water service turn-on. Make notations in customer account file regarding actions or agreements

Generate work orders based upon meter readings, and/or customer complaints. Follow-up with customer after work order has been completed and enter notations in customer account file regarding any and all work notes, work performed and customer issues.

Receive all customer water payments and post to customer accounts. Perform daily balance of all payments received and prepare deposit.

Set up all new water service accounts, update system and issue work orders for new service turn-on. Take deposits for all new accounts.

Close out and balance E-pay monthly. Break down water and sewer amounts and forward information to City Treasurer for transfer of funds.

Generate monthly water and sewer revenue reports and forward to appropriate City departments.

Contact customers regarding delinquent accounts and final bills to retrieve unpaid funds.

Answer phones and provide customer assistance.

Performs other duties and functions as required or assigned.

**QUALIFICATIONS:**

Position requires knowledge of the administrative operation and excellent customer service skills. Ability to operate office equipment such as computer, fax/copier/scanner, and communication equipment. Must have knowledge of MS office applications and ability to operate various software programs. Must be able to communicate effectively with the general public, fellow employees and supervisors.

**EDUCATION and /or EXPERIENCE:**

High School diploma or equivalent; 21 years of age; one year work experience. Previous customer service experience beneficial.

**CUSTOMER SERVICE & ORGANIZATIONAL SKILLS:**

Effective communication, interpersonal and customer service skills in dealing with the public and other City departments. . Possess effective time management skills.

*This description is intended to indicate the kinds of tasks and levels of difficulty that will be required of positions that will be given this title and shall not be construed as declaring what the specific duties and responsibilities of any particular position shall be. It is not intended to limit or in any way modify the right of any supervisor to assist, direct and control the work of employees under his/her supervision. The use of a particular expression or illustration describing the duties shall not be held to exclude other duties not mentioned that are of similar kind or level of difficulty.*