

BANDERA COUNTY
Job Description

JOB TITLE: Truck Driver - Road & Bridge Department

PAY GRADE: 15 FLSA: Non-exempt

EMPLOYEE NO.:

OBJECTIVE: To insure the safe and proper construction and maintenance of county roads and bridges.

ORGANIZATIONAL RELATIONSHIPS:

1. Reports to: County Road Superintendent
2. Directs:

GENERAL STATEMENT OF DUTIES:

Capability to repair, maintain and upgrade the County Road System.

ESSENTIAL FUNCTIONS/DUTIES: (to include but not limited to):

- * Operate all vehicles, machinery, power/hand tools as required;
- * Accepts general instructions from supervisory personnel;
- * Ensures that safety procedures are followed when performing job duties;
- * Regular attendance required;
- * Lift 25-50lbs frequently and 50-100lbs occasionally;
- * Perform other duties as may be assigned by supervisor.

REQUIRED KNOWLEDGE, SKILLS, AND ABILITIES:

- * Truck driving experience;
- * Communication skills, both oral and written;
- * Basic computer skills;
- * Basic math skills;

PHYSICAL REQUIREMENTS:

- * Ability to lift 25-50lbs frequently and 50-100lbs occasionally;
- * Frequent sitting, repetitive foot controls, twisting, driving, and occasional lifting;
- * Work and drive in all types of weather conditions;
- * Perform manual labor when required;
- * Work on-call when required;

- * Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions of this job.

CERTIFICATE AND LICENSES REQUIRED:

- * High School Diploma or GED equivalent;
- * Texas Driver's License, Class A Commercial with Endorsement Tank Vehicle with an insurable driving record.

This job description does not constitute an employment agreement between the employer and the employee and is subject to change by the employer as the needs of the employer and requirements of the job change. The employee further understands, and accepts, that this position falls under the provision of an "At Will" employment, and under no circumstances is this a contract for employment.

Acknowledgement of Employee: _____
(Printed Last, First Name, MI)

Signature of Employee: _____

Approval: _____
(Elected/Appointed Official, Dept. Head/Supervisor) (Date)

Approved by Commissioner's Court: ___08-25-22___
(Date)