

| PHYSICAL & MENTAL REQUIREMENTS/WORKING CONDITIONS<br>City of Virginia Beach, VA                                                                          |                                         |                  |                                             |                                              |                                                     |                                        |                                        |             |      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------------------|---------------------------------------------|----------------------------------------------|-----------------------------------------------------|----------------------------------------|----------------------------------------|-------------|------|
| Job Title:                                                                                                                                               | Mechanic Technician II                  |                  |                                             |                                              | Position Number(PCN):                               | B.002873                               |                                        |             |      |
| Div./Office:                                                                                                                                             | PWD 320 Automotive Services             | Approver's Name  |                                             |                                              |                                                     |                                        |                                        |             |      |
| Date of Last Update:                                                                                                                                     | April 10, 2023                          | Approver's Title |                                             |                                              |                                                     |                                        |                                        |             |      |
| Fields to the right (Y/N): The position's status AND If the background check must be passed by the incumbent                                             |                                         |                  |                                             |                                              |                                                     |                                        |                                        |             |      |
| Safety Sensitive:                                                                                                                                        |                                         | Yes              | Child Protective Services (CPS) Background: |                                              | No                                                  | VCIN Background:                       |                                        | No          |      |
| CJIS Certification:                                                                                                                                      |                                         | No               | PREA Certification:                         |                                              | No                                                  | Subject to Barrier Crime Provisions:   |                                        | No          |      |
| REQUIREMENTS                                                                                                                                             |                                         |                  |                                             |                                              |                                                     |                                        |                                        |             |      |
| FREQUENCY: Seldom = Infrequent, < 5%; Occasional = 5% to 25% of time on job; Frequent = 25% to 75% of time on job; Constant = Over 75% of time on job.   |                                         |                  |                                             |                                              |                                                     |                                        |                                        |             |      |
| Typical DURATION: Short = < 1 hr per occurrence; Moderate = 1-2 hrs per occurrence; Substantial = 2-6 hrs per occurrence; Long = > 6 hrs per occurrence. |                                         |                  |                                             |                                              |                                                     |                                        |                                        |             |      |
| Physical Demands                                                                                                                                         |                                         |                  |                                             | Working Conditions                           |                                                     |                                        |                                        |             |      |
| Element                                                                                                                                                  | Condition/Level/Value                   | Frequency        | Duration                                    | Element                                      | Condition/Level/Value                               | Frequency                              | Duration                               |             |      |
| Standing                                                                                                                                                 |                                         | Frequent         | Substantial                                 | Working Outside: in all weather conditions   |                                                     |                                        | Occasional                             | Moderate    |      |
| Walking                                                                                                                                                  |                                         | Frequent         | Short                                       | Working Alone: out of communication w/others |                                                     |                                        | N/A                                    | N/A         |      |
| Sitting                                                                                                                                                  |                                         | Occasional       | Short                                       | Extreme Temperatures                         | At/above 90 degrees                                 |                                        | Occasional                             | Long        |      |
| Reaching                                                                                                                                                 | Shoulder level or higher                | Frequent         | Short                                       | Below 30 degrees                             |                                                     | Occasional                             | Long                                   |             |      |
| Lifting                                                                                                                                                  | Up to 25 lbs.                           | Frequent         | Short                                       | Extreme Wetness                              |                                                     |                                        | N/A                                    | N/A         |      |
|                                                                                                                                                          | Over 50 lbs.                            | Occasional       | Short                                       | Extreme Dryness                              |                                                     |                                        | N/A                                    | N/A         |      |
| Carrying                                                                                                                                                 | Weight: Up to 50 lbs.                   | Occasional       | Short                                       | Exposure to Traffic                          | N/A                                                 |                                        | N/A                                    | N/A         |      |
|                                                                                                                                                          | Distance: Up to 25 ft.                  | Occasional       | Short                                       |                                              |                                                     |                                        |                                        |             |      |
| Pushing                                                                                                                                                  | Estimated weight-resistance equivalency |                  |                                             | Congested Area/Workspace                     |                                                     |                                        | N/A                                    | N/A         |      |
|                                                                                                                                                          | Over 50 lbs.                            | Occasional       | Short                                       | Confined Space- Permit REQUIRED              |                                                     |                                        | Occasional                             | Short       |      |
| Pulling                                                                                                                                                  | Estimated weight-resistance equivalency |                  |                                             | Working Below Ground                         |                                                     |                                        | N/A                                    | N/A         |      |
|                                                                                                                                                          | Over 50 lbs.                            | Occasional       | Short                                       | Working at Heights (ft.)                     | Up to 12 ft.                                        |                                        | Occasional                             | Short       |      |
| Working Overhead                                                                                                                                         | Using hand tools                        | Frequent         | Short                                       | Noise Level: > 85 decibels TWA for 8 hrs.    |                                                     |                                        | Yes                                    | Frequent    | Long |
|                                                                                                                                                          | Using power tools                       | Frequent         | Short                                       |                                              |                                                     |                                        |                                        |             |      |
|                                                                                                                                                          | Weight: Up to 10 lbs.                   | Frequent         | Short                                       |                                              |                                                     |                                        |                                        |             |      |
| Climbing Stairs                                                                                                                                          |                                         | Occasional       | Short                                       | Vibrations                                   | N/A                                                 |                                        | N/A                                    | N/A         |      |
| Climbing Ladders                                                                                                                                         |                                         | Occasional       | Short                                       |                                              |                                                     |                                        |                                        |             |      |
| Balancing                                                                                                                                                |                                         | Occasional       | Short                                       | Body area(s):                                |                                                     | Ex- Trunk, shoulders, arms, and hands. |                                        |             |      |
| Stooping                                                                                                                                                 |                                         | Frequent         | Moderate                                    | Dust / Dirt / Particulate                    |                                                     |                                        | Frequent                               | Substantial |      |
| Kneeling/Squatting                                                                                                                                       |                                         | Frequent         | Short                                       | Radiation                                    |                                                     |                                        | N/A                                    | N/A         |      |
| Bending                                                                                                                                                  |                                         | Frequent         | Moderate                                    | Silica/Fiberglass                            |                                                     |                                        | N/A                                    | N/A         |      |
| Crawling                                                                                                                                                 |                                         | Occasional       | Short                                       | Asbestos                                     |                                                     |                                        | Occasional                             | Short       |      |
| Explosive Strength: Short bursts of muscle force to propel oneself.                                                                                      |                                         | Occasional       | Short                                       | Aerosols & Gases                             | Irritant                                            |                                        | Occasional                             | Moderate    |      |
|                                                                                                                                                          |                                         |                  |                                             | Toxic/Poisonous                              |                                                     | Occasional                             | Moderate                               |             |      |
| Trunk Strength: Use of abdominal and lower back muscles.                                                                                                 |                                         | Frequent         | Moderate                                    | Hazardous Materials /Chemicals               |                                                     |                                        | Automotive Maintenance/Repair Products |             |      |
|                                                                                                                                                          |                                         |                  |                                             |                                              |                                                     |                                        | Welding Supplies/Materials             |             |      |
|                                                                                                                                                          |                                         |                  |                                             |                                              |                                                     |                                        | Painting Supplies/Products             |             |      |
| Dynamic Strength: Use of muscle force repeatedly or continuously & resistant to fatigue.                                                                 |                                         | Occasional       | Moderate                                    | Petroleum Products                           | Liquid                                              |                                        | Frequent                               | Substantial |      |
|                                                                                                                                                          |                                         |                  |                                             | Grease                                       |                                                     | Frequent                               | Substantial                            |             |      |
| Repetitive Limb Movement                                                                                                                                 | Fingers/Wrist                           | Constant         | Long                                        | Electrical Hazard                            |                                                     |                                        | N/A                                    | N/A         |      |
|                                                                                                                                                          | Arm/Shoulder                            | Constant         | Long                                        | Fire Hazard                                  |                                                     |                                        | Occasional                             | Occasional  |      |
| Dexterity                                                                                                                                                | Grasping                                | Constant         | Long                                        | Infected Diseases Exposure                   | N/A                                                 |                                        | N/A                                    | N/A         |      |
|                                                                                                                                                          | Handwriting                             | Occasional       | Short                                       |                                              |                                                     |                                        |                                        |             |      |
| Repetitive Twisting                                                                                                                                      | Wrist/Elbow                             | Constant         | Long                                        | Type(s):                                     | Ex- Repair sewer pipes; empty residence trash cans. |                                        |                                        |             |      |
|                                                                                                                                                          | Shoulder                                | Constant         | Long                                        | Symbols:                                     | < equal to or less than                             |                                        | < less than                            |             |      |
| Awkward Positions & Motions                                                                                                                              | Awkward positions                       | Frequent         | Substantial                                 |                                              | > equal to or greater than                          |                                        | > greater than                         |             |      |
|                                                                                                                                                          | Awkward motions                         | Frequent         | Substantial                                 |                                              |                                                     |                                        |                                        |             |      |

| Sensory Demands                                                                                            |                                  |           |             |  | Working Conditions (cont.)                                                        |                             |            |            |
|------------------------------------------------------------------------------------------------------------|----------------------------------|-----------|-------------|--|-----------------------------------------------------------------------------------|-----------------------------|------------|------------|
| Element                                                                                                    | Condition/Level/Value            | Frequency | Duration    |  | Element                                                                           | Condition/Level/Value       | Frequency  | Duration   |
| Vision                                                                                                     | 20/40 w/correction               | N/A       | N/A         |  | Hazardous Surfaces                                                                | N/A                         | N/A        | N/A        |
|                                                                                                            | Depth perception                 | N/A       | N/A         |  |                                                                                   |                             |            |            |
|                                                                                                            | Color vision (colors)            | N/A       | N/A         |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Hearing                                                                                                    | Conversational level             | N/A       | N/A         |  | Other Hazards                                                                     | Pinch points                | Frequent   | Short      |
| Smell                                                                                                      | Petroleum                        | N/A       | N/A         |  |                                                                                   | Sharp edges/objects         | Frequent   | Short      |
|                                                                                                            | Burning odor                     | N/A       | N/A         |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Touch                                                                                                      | Distinguish texture              | N/A       | N/A         |  | Hours Worked                                                                      | More than 40 hours/week     | Seldom     |            |
|                                                                                                            | Distinguish temperature          | N/A       | N/A         |  |                                                                                   | More than 8 hours/day       | Seldom     |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Voice                                                                                                      | Limited Verbal                   | N/A       | N/A         |  | Telework Eligible                                                                 | No                          |            |            |
| Personal Protective Equipment (PPE)                                                                        |                                  |           |             |  | Equipment Operation & Use                                                         |                             |            |            |
| Category                                                                                                   | Type                             | Frequency | Duration    |  | Category                                                                          | Type                        | Frequency  | Duration   |
| Eye and Face Protection                                                                                    | Safety glasses w/side shields    | Frequent  | Substantial |  | Motor Vehicles                                                                    | Sedan/Pickup/Van            | Occasional | Short      |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Respiration Protection                                                                                     | N/A                              | N/A       | N/A         |  | Heavy Equipment                                                                   | N/A                         | N/A        | N/A        |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Hearing Protection                                                                                         | N/A                              | N/A       | N/A         |  | Other Equipment or Machinery                                                      | Welding machine             | Occasional | Short      |
|                                                                                                            |                                  |           |             |  |                                                                                   | Machine shop equipment      | Occasional | Short      |
| Head Protection                                                                                            | N/A                              | N/A       | N/A         |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Hand Protection                                                                                            | N/A                              | N/A       | N/A         |  | Hand-Held Power Tools                                                             | Impact drill/wrench         | Occasional | Short      |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Foot Protection                                                                                            | Steel/composite toe-safety rated | Constant  | Long        |  | Hand Tools and Instruments                                                        | Mechanic tools              | Constant   | Long       |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Body, Arm, and Leg Protection                                                                              | Cloth coveralls                  | Constant  | Long        |  |                                                                                   | Office Machines & Equipment | Computer   | Occasional |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Operator License                                                                                           |                                  |           |             |  | Commercial Driver's License                                                       |                             |            |            |
| NOTE: If CDL is required, show CDL Class in element to right.                                              | Type                             |           |             |  | VA DMV requires: 20/40 in each eye w/o telescopic lens & ≥140° horizontal vision. | N/A                         |            |            |
|                                                                                                            | Standard Driver's License        |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
|                                                                                                            |                                  |           |             |  |                                                                                   |                             |            |            |
| Other physical or sensory demands, working conditions, equipment, hazards, PPE, etc., not indicated above: |                                  |           |             |  |                                                                                   |                             |            |            |

| Mental Requirements                                                                                                                                                                                                                                 |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Evaluate based on the level of complexity [least to most] inherent in the job using the examples provided; then select the number from the drop-down list that matches the column which best represents the mental demand required in each element. |  |
| 1 Comprehend Verbal Communication - Understand information and directions which are provided verbally                                                                                                                                               |  |
| Job requires the ability to understand and follow:                                                                                                                                                                                                  |  |
| Detailed information from a supervisor, a customer, or trainer/instructor which is necessary to the successful performance of job duties.                                                                                                           |  |
| 2 Communicate Orally - Verbally express thoughts and directions                                                                                                                                                                                     |  |
| Job requires:                                                                                                                                                                                                                                       |  |
| Communicating specialized information to co-workers, supervisors or customers.                                                                                                                                                                      |  |
| 3 Comprehend and Follow Written Material or Instructions - Understand written material, interpret appropriately, and adhere to the procedures stated.                                                                                               |  |
| Job requires ability to comprehend:                                                                                                                                                                                                                 |  |
| Detailed written material in the form of informational reports, memos, articles, plans and drawings to be used in performing duties.                                                                                                                |  |
| 4 Written Communication Skills - Express thoughts and directions in writing                                                                                                                                                                         |  |
| Job requires:                                                                                                                                                                                                                                       |  |
| Ability to prepare basic written information and relay it to others using a basic format such as a form or email.                                                                                                                                   |  |
| 5 Maintain an Appropriate Work Pace - The flow or rate of incoming work assignments and the expectations for completion of tasks                                                                                                                    |  |
| Job requires ability to adhere to work schedule:                                                                                                                                                                                                    |  |
| Where the flow of work is steady and predictable.                                                                                                                                                                                                   |  |
| 6 Perform Complex or Varied Tasks - The variety of tasks and assignments and the level of complexity of those tasks/assignments                                                                                                                     |  |
| Job requires ability to perform:                                                                                                                                                                                                                    |  |
| A variety of tasks at the fully functional independent level.                                                                                                                                                                                       |  |
| 7 Interact and Relate to Peers, Co-Workers, or the Public - The nature and level of interaction with others required of the job                                                                                                                     |  |
| Job requires interaction:                                                                                                                                                                                                                           |  |
| Within the immediate work unit.                                                                                                                                                                                                                     |  |
| 8 Decision Making & Reasoning Ability - The extent to which the job requires logic to analyze information, draw conclusions/ generalizations, and make decisions based on facts                                                                     |  |
| Job requires:                                                                                                                                                                                                                                       |  |
| Some decision making in duties such as troubleshooting where observation/judgement occurs and then a selection is made from a number of possible options for resolution.                                                                            |  |
| 9 Memory and Recall - The body of stored knowledge required and the retrieval of that information to accomplish duties                                                                                                                              |  |
| Job requires the ability to:                                                                                                                                                                                                                        |  |
| Remember detailed methods and procedures and apply them to work being performed.                                                                                                                                                                    |  |
| 10 Flexibility and Adaptability - The extent to which one must adjust to changing circumstances and expectations, take on new challenges on short notice, and/or deal successfully with changing priorities and workloads                           |  |
| Job requires flexibility and willingness:                                                                                                                                                                                                           |  |
| To adjust normal schedule or assume responsibility for tasks outside the normal set of duties.                                                                                                                                                      |  |
| 11 Attention Span - Sustained attention or the time spent continuously on task without becoming distracted to successfully perform duties                                                                                                           |  |
| Job tasks are:                                                                                                                                                                                                                                      |  |
| Varied and typically short in duration requiring only limited focus. Lapses may result in operational or production delays.                                                                                                                         |  |
| 12 Attention to Detail - Thoroughness and accuracy are required to accomplish tasks                                                                                                                                                                 |  |
| Job tasks:                                                                                                                                                                                                                                          |  |
| Involve investigation, inspection, auditing, or observation. Inattention to detail could result in confusion and delays.                                                                                                                            |  |
| 13 Reaction Time - Describes work that requires an immediate response or decision                                                                                                                                                                   |  |
| Job requires the ability to:                                                                                                                                                                                                                        |  |
| Provide an immediate response/decision to maintain normal daily operations, procedures or processes. Delays occur if response is not timely.                                                                                                        |  |
| 14 Direct, Control, and Plan the Work of Others - Determine the time, place and sequence of work procedures, operations, and actions. Establish goals and objectives, motivate, and promote cooperation and teamwork in the work group              |  |
| Job requires:                                                                                                                                                                                                                                       |  |
| No supervision or management of staff.                                                                                                                                                                                                              |  |
| 15 Influence Others - Obtain cooperation from others to accomplish tasks and objectives                                                                                                                                                             |  |
| Job requires:                                                                                                                                                                                                                                       |  |
| Little to no cooperation from co-workers or citizens to accomplish assigned tasks.                                                                                                                                                                  |  |
| 16 Stress Tolerance - Ability to perform duties without anxiety when faced with difficulties. Having positive stress tolerance is being able to stay calm in situations of heavy workload, tight deadlines, and/or difficult customers              |  |
| Job requires the ability to:                                                                                                                                                                                                                        |  |
| Tolerate typical work stressors such as deadlines or conflict and maintain composure.                                                                                                                                                               |  |