



October 8, 2026

TO: EXTERNAL POSTING
FROM: Joseph Jaumann, Director of Personnel
SUBJECT: EMPLOYMENT

PLEASE POST

**THE CITY OF ANSONIA
ANNOUNCES EMPLOYMENT OPPORTUNITIES**

ANSONIA PUBLIC WORKS

SCALE OPERATOR

**RATE OF PAY US BETWEEN \$29.34 - \$32.65, AND BENEFITS INCLUDE MEDICAL, DENTAL
AND RETIREMENT IN ACCORDANCE WITH THE UNION CONTRACT.**

**TO BE CONSIDERED FOR THIS POSITION
A COMPLETED CITY EMPLOYMENT APPLICATION MUST BE SUBMITTED
NO LATER THAN 5PM OCTOBER 15, 2026.**

**THE COMPLETED APPLICATION MUST BE SUBMITTED
DURING NORMAL CITY HALL BUSINESS HOURS OR IF EMAILED
NOT LATER THAN THE DEADLINE NOTED ABOVE. TO:**

**JOSEPH JAUMANN, Director of Personnel
253 Main Street
Ansonia, CT 06401
jjaumann@ansoniacct.gov**

AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY

Job Description

SCALE OPERATOR

General Description:

The scale operator is responsible for the operation of the transfer station. Operations of the transfer station include the identification of municipal residents, the proper segregation of waste materials, and the management and collection of payments and fees for transfer station services. This requires effectively communicating with the public, effectively managing the scale operations including weighing, segregation of waste materials, and the collection and administration of fee collection.

General Duties And Responsibilities

Identification of municipal residents and other allowable visitors for acceptable materials and refuse into the transfer station. Ensuring the weighing and unloading of refuse into the appropriate containers at drop-off locations. The scale operator is responsible for weighing waste material, keeping track of daily tonnage of each material disposed of, and billing of commercial haulers and residents as required. The work requires that the scale operator has effective communication skills and management as the scale operator is a public facing position and will be dealing with the public.

General Supervision:

Works under the general supervision of the Superintendent of Public Works.

Qualifications:

- High school diploma or the equivalent required or three (3) years of work experience is required. Experience should include a minimum of one year of public contact and one year of clerical experience or bookkeeping experience.
- An associate or bachelor's degree is strongly preferred
- Demonstrated proficiency in Microsoft Office Suite, particularly Microsoft Excel, Word, Outlook, and PowerPoint. A proficiency examination may be required.
- The candidate shall possess the ability to effectively utilize computerized financial management systems, enterprise resource planning (ERP) software, budgeting and accounting applications, payroll systems, and financial reporting software.
- The candidate must be able to prepare and analyze complex spreadsheets, generate financial reports, maintain electronic records, and adapt to new technologies and software platforms. Experience with municipal financial management software is preferred.
- Ability to maintain the confidentiality and security of electronic financial records.

-Must be able to obtain a Connecticut Landfill and Transfer Station License within one year of employment.

-Bilingual (English/Spanish) strongly preferred

Other Duties and Responsibilities:

-Stops incoming vehicles to determine identification. If not a municipal resident, or other authorized user, access to the transfer station is denied.

-Responsible for weighing and tracking waste of each accepted material on daily, weekly, and monthly basis.

-Responsible for preparing reports on the tonnage of each material received at the transfer station at the intervals requested by the superintendent or city hall.

-Responsible for any billing and collection from residents or commercial haulers with charges for disposal of material at the transfer station.

-Responsible for the preparation of regular monthly reports reporting income received at the transfer station for all fees collected.

-Responsible for the Designated areas for disposal of waste, including the removal of waste and enforcement of transfer station rules and regulations for disposal.

-Designated Keeper of Records for all pertinent transfer station operations.

-Responsible for the logging and recording of all the weights (of waste) accepted at the transfer station.

-Coordinates with city officials regarding bulk pick up and other waste disposal at the transfer station.

-Performs related duties as assigned.

Knowledge, Skill, and Abilities:

-Must have good knowledge of departmental rules and regulations regarding solid waste disposal.

-Must have a good ability to maintain records.

-Must be able to enforce transfer station rules and regulations with firmness and tact.

-Must have considerable ability to establish and maintain effective working relationships with superiors, associates, and the general public.

-Must have adequate strength, stamina, physical agility and visual and auditory, and must maintain physical fitness to perform the duties.

-A physical exam will be required.

-Pre-employment drug and alcohol test must be completed prior to hiring date.

-Ability to work with minimal supervision.

-Other duties and responsibilities as assigned by supervisors

AN AFFIRMATIVE ACTION, EQUAL OPPORTUNITY EMPLOYER

EMPLOYER, PLEASE REMOVE: THURSDAY OCTOBER 15, 2026

APPLICATION FOR EMPLOYMENT

All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or veteran status, medical condition, handicap or disability, sexual orientation, citizenship status or any other status protected by law. We are an Equal Opportunity Employer.

PERSONAL

(Please Print)

Date: _____

Name: _____
Last First Middle

Soc. Sec. # _____

Street Address: _____
Home Phone: () _____

City, State, Zip: _____
Business Phone: () _____

Position(s) applied for: _____

Who referred you to our company? ☐ Advertisement ☐ Private Employment Agency ☐ Friend ☐ Relative
☐ Gov't. Employment Agency ☐ Walk-in ☐ Other _____

Are you of legal age to work? ☐ Yes ☐ No. If NO, a work permit will be required.

To the best of your knowledge, are you legally eligible to work in the United States? ☐ Yes ☐ No.
(Should you be hired, you will be required by law to provide documents verifying your employment eligibility).

Date you are available to start work: ____/____/____. Salary or wages desired: \$ _____ ☐ Hr. ☐ Wk.

What type of employment are you applying for? ☐ Full Time ☐ Part Time ☐ Night ☐ Shift ☐ Temporary
If you are applying for Part Time, Night, Shift or Temporary employment, please specify days and hours you are available:

☐ Mon.: ____ ☐ AM ☐ PM to ____ ☐ AM ☐ PM ☐ Tues.: ____ ☐ AM ☐ PM to ____ ☐ AM ☐ PM ☐ Wed.: ____ ☐ AM ☐ PM to ____ ☐ AM ☐ PM

☐ Thurs.: ____ ☐ AM ☐ PM to ____ ☐ AM ☐ PM ☐ Fri.: ____ ☐ AM ☐ PM to ____ ☐ AM ☐ PM ☐ Sat.: ____ ☐ AM ☐ PM to ____ ☐ AM ☐ PM

☐ Sun.: ____ ☐ AM ☐ PM to ____ ☐ AM ☐ PM

NOTE: Every consideration will be given to work availability information provided by an applicant; however, there is no guarantee the Company can offer employment that accommodates applicants' availability to work.

Have you ever applied for work here before? ☐ Yes ☐ No. If YES, enter date here: ____/____/____.

Were you ever employed by us before? ☐ Yes ☐ No. If YES, enter date here: ____/____/____.

If you are applying for Full Time employment, can you work overtime if necessary? ☐ Yes ☐ No

Are you employed at the present time? ☐ Yes ☐ No. If YES, can we contact your present employer? ☐ Yes ☐ No.

Do you have any relatives now employed by this Company? ☐ Yes ☐ No. If YES, please list names(s) and department: _____

Have you ever been bonded in prior employment? ☐ Yes ☐ No. If YES, list name(s) of employer(s): _____

Have you ever been convicted of a crime (excluding misdemeanors and traffic offenses)? ☐ Yes ☐ No.
If YES, list convictions: (a conviction does not necessarily disqualify an applicant for the position being applied for).



EDUCATION

HIGH SCHOOL

Name _____

Location _____

Number of years completed _____. Did you graduate? ☐ Yes ☐ No

What was your course of study? ☐ Academic ☐ Business ☐ Trade or Technical ☐ Other _____

COLLEGE

Name _____

Location _____

Number of years completed _____. Did you graduate? ☐ Yes ☐ No ☐ G.P.A. _____

What was your major? _____. Degree: _____

Did you enroll in a post-graduate course of education? ☐ Yes ☐ No If "Yes", what was your post-graduate field of study? _____. Degree: _____

Trade, Business or Correspondence School

Name _____

Location _____

Number of years completed _____. Did you graduate? ☐ Yes ☐ No

What was your course of training or study? _____

SPECIAL QUALIFICATIONS OR SKILLS

Use this space to describe any special qualifications or skills you have acquired.

If computer skills are required for the job position you have applied for, please check the boxes that apply to your experience:

☐ PC ☐ Mac ☐ Both. Software applications: ☐ Word Processing ☐ Accounting ☐ Data Processing
☐ Graphics ☐ Presentation ☐ E-mail ☐ Internet ☐ Other _____

FOREIGN LANGUAGES

Indicate foreign language(s) you are familiar with:

Language: _____ ☐ Fluent ☐ Good ☐ Fair ☐ Speak ☐ Read ☐ Write

Language: _____ ☐ Fluent ☐ Good ☐ Fair ☐ Speak ☐ Read ☐ Write

MEMBERSHIPS

List Business, Trade, Professional, Community or Activities Memberships and any offices you may have held. (Exclude any organizations the name and character of which would reveal race, religion, national origin or any other protected status):

PRIOR EMPLOYMENT

(Start with most recent employer)

Employer:	Phone:	From:	To:
()			
Address:	City, State, Zip	Position:	
Duties:	Supervisor's Name:		
		Starting Salary/Wages:	
Reason for leaving:		Final Salary/Wages:	
Employer:	Phone:	From:	To:
()			
Address:	City, State, Zip	Position:	
Duties:	Supervisor's Name:		
		Starting Salary/Wages:	
Reason for leaving:		Final Salary/Wages:	
Employer:	Phone:	From:	To:
()			
Address:	City, State, Zip	Position:	
Duties:	Supervisor's Name:		
		Starting Salary/Wages:	
Reason for leaving:		Final Salary/Wages:	
Employer:	Phone:	From:	To:
()			
Address:	City, State, Zip	Position:	
Duties:	Supervisor's Name:		
		Starting Salary/Wages:	
Reason for leaving:		Final Salary/Wages:	

MILITARY SERVICE

Were you a member of the U.S. Armed Forces? ☐ Yes ☐ No. Branch: _____

Describe briefly your military duties: _____

_____. Years served: _____. Rank at discharge: _____

PERSONAL REFERENCES

List three personal references. (exclude relatives or former employers).

NAME	ADDRESS	TELEPHONE

APPLICANT'S STATEMENT

The information provided by me in this application for employment is true and complete to the best of my knowledge. Should I be employed by the Company, any misrepresentation or any false statement contained herein may be considered cause for possible dismissal.

The Company, in compliance with the provisions of the Fair Credit Reporting Act of Sept. 1997, may contact directly or employ the services of investigative agencies to obtain all necessary information from the references I have listed, or any other sources, concerning my prior employment, personal history or credit standing. I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in any reports furnished to the Company.

I understand this application does not constitute an employment contract of any kind. Should I be employed by the Company, I may resign such employment at any time at my discretion with or without prior notice and the Company may terminate my employment at any time at their discretion, with or without cause and with or without prior notice.

This application will be considered valid for a period of 60 days. After 60 days it will be necessary for me to submit a new application.

Signature of Applicant

Date

DO NOT WRITE BELOW THIS LINE

SUMMARY OF INTERVIEW

Accepted for employment: ☐ Yes ☐ No Position: _____

Starting Rate \$ _____ per ☐ Hour ☐ Week Schedule to start work: ____/____/____

Interviewed by: _____ Date: ____/____/____

Approved by: _____ Date: ____/____/____

This Application for Employment form is designed for general use throughout the United States. It has been prepared in accordance with E.E.O.C. guidelines; however, Sagamore Graphics Inc. shall not be responsible or held liable for the inclusion herein, or omission, of any questions which, when used by the employer, may violate Federal, State and/or local laws.

VOLUNTARY DISCLOSURE RECORD

Our policy is to provide equal employment opportunity to all applicants for employment and employees without regard to race, color, religion, sex, national origin, marital or veteran status, medical condition or handicap, or any other legally protected status. In order that our company comply with United States Government Affirmative Action Programs, we are required to collect certain personal information from our applicants and employees. **Completion of this form is entirely voluntary.** If you choose to provide the information requested below, you are assured that it will be kept confidential and separate from your application form. This information is not a requirement for employment and will not be a factor regarding the decision to hire.

PLEASE PRINT

Date: _____

Name: _____
Last First Middle

Soc. Sec. # _____

Street Address: _____

City, State, Zip: _____

Position(s) applied for: _____

Who referred you to our company? ☐ Advertisement ☐ Private Employment Agency ☐ Friend ☐ Relative
☐ Gov't. Employment Agency ☐ Walk-in ☐ Other _____

CHECK ONE OF THE FOLLOWING: ☐ Male ☐ Female

CHECK ONE OF THE FOLLOWING EQUAL EMPLOYMENT OPPORTUNITY IDENTIFICATION GROUPS:

☐ American Indian/Alaskan Native ☐ Asian ☐ Pacific Islanders - native Hawaiian
☐ Hispanic/Latino - White ☐ Hispanic/Latino - all other races ☐ White (not of Hispanic origin)
☐ Black (not of Hispanic origin) ☐ Other _____

In accordance with United States Department of Labor regulations, federal contractors are required to provide an opportunity for handicapped individuals, disabled veterans and Vietnam era veterans to identify themselves when applying for employment. **Identification is entirely voluntary and confidential.** The information provided will only be used to assist in proper placement and determining reasonable accommodation. If you wish to be identified, please check any of the following that are applicable.

☐ Person with disability ☐ Veteran with disability ☐ Vietnam Era Veteran

The above information is voluntarily provided by me. I understand it is for record-keeping only and is not part of my application or a requirement for employment. It will be filed separately and kept confidential.

Signature _____ Date _____