

COUNTY OF SONOMA - JOB DEMANDS ANALYSIS

**JOB CLASSIFICATION:** Storekeeper  
**DEPARTMENT:** Clerk-Recorder-Assessor  
**DOT OCCUPATION CODE:** 222.387-058

**DATE COMPLETED:** February 2018  
**DIVISION:** Registrar of Voters  
**PHYSICAL DEMAND STRENGTH RATING:** Heavy

**INSTRUCTIONS TO MEDICAL PROVIDERS COMPLETING THIS FORM:**

Please use the "Medical Provider Use Only" columns to the right of each section and the "Medical Provider's Comments & Signature" Section on the signature page to provide work restrictions by indicating whether there is some portion of each function that the employee can perform; designating whether each restriction is temporary or permanent; and, if restriction is temporary, stipulating the expected duration of work restriction(s). To finalize the form, please provide the name of the employee evaluated and additional comments, as appropriate, then sign and date where indicated.

**FREQUENCY RATING:**

Frequency	Percentage of time per shift	Repetition (# times per shift)	8 Hr Shift	9 Hr Shift	10 Hr Shift	12 Hr Shift
Never (N)	n/a	n/a	n/a	n/a	n/a	n/a
Occasionally (O)	1 - 33%	1 – 100	0 - 2.5	0 - 3	0 - 3.5	0 – 4
Frequently (F)	34 - 66%	100 – 500	2.5 - 5.5	3 - 6	3.5 - 7	4 – 8
Continuously (C)	67 - 100%	500+	5.5 – 8	6 - 9	7 - 10	8 - 12

**PART 1 - JOB DUTIES/FUNCTIONS:**

A. Job Duty/Function	B. Job Duty #	C. Freq Rating	D. Equipment or tools used to perform (Describe)	E. Specialized Expertise, License, Certification Required? (Describe)	F. Reason position exists? (Y/N)	G. Essential or Non-Essential	Medical Provider Use Only: For each job duty/function, indicate in this column "Can Perform", is "Temporarily Restricted" from performing, or is "Permanently Restricted" from performing.
While performing the following duties, employees in this class work long and irregular hours, including nights, weekends, and holidays, during election cycles.							
Leads staff in materials handling; trains staff; assigns work; provides advice and technical guidance as a subject matter expert.	1	F			Y	E	
Receives election materials and supplies; inventories and tags items; delivers items to proper destination, using hand carts and trucks, and pallet jack; ensures supplies/equipment are maintained in proper working order; packs, stores, sorts, and destroys documents and equipment/supplies as required/permitted by law; bends, stoops, reaches, and stands for extended periods of time.	2	C	Hand cart/trucks; pallet jack; ladder; step-stool	Forklift cert.	Y	E	

A. Job Duty/Function	B. Job Duty #	C. Freq Rating	D. Equipment or tools used to perform (Describe)	E. Specialized Expertise, License, Certification Required? (Describe)	F. Reason position exists? (Y/N)	G. Essential or Non-Essential	Medical Provider Use Only: For each job duty/function, indicate in this column "Can Perform", is "Temporarily Restricted" from performing, or is "Permanently Restricted" from performing.
Manages storage space at off-site warehouse spaces; places supplies and equipment on shelves or cabinet's; reaches forward, above and below shoulders and lifts, pushes, pulls, carries, and places items weighing up to 51 pounds; ensures orderly placement of supplies and equipment; maintains inventory.	3	F	Hand cart/trucks; pallet jack; forklift; ladder; step-stool	Forklift cert.	Y	E	
Coordinates election night warehouse receiving area: sorts, distributes, and stores materials; bends, stoops, reaches, and stands for extended periods of time	4	F			Y	E	
Communicates by phone, in person, or by email or other written format with co-workers/supervisors and vendors to provide information on supplies and equipment, schedule appointments, and to resolve problems.	5	F	Computer, cell phone; office machines		Y	E	
Collects, sorts, processes, and delivers mail to various office locations, both on and off-site.	6	F	Vehicle; mail processing equipment	CA DL	N	N	
Coordinates the delivery of elections supplies to off-site polling places.	7	O	Vehicle	CA DL	Y	E	
Conducts polling places accessibility surveys in the field; documents results; enters data into computer software; maintains electronic and paper records and files.	8	O	Level; distance meter; pressure gauge; pen+ clipboard; Computer		Y	E	
Monitors car maintenance schedule; schedules appointments.	9	O	Computer, phone		N	N	
Assists with training precinct officers in proper lifting/loading and materials packaging techniques.	10	F			N	N	

**PART 2: PHYSICAL DEMANDS**

Activity	Examples of Duties/Functions Requiring Activity	FREQUENCY RATING Never, Occasional; Frequent, or Constant	MEDICAL Can Perform	PROVIDER Temporarily Restricted	USE ONLY: Permanently Restricted
Sitting	5,6,7,8,9	O			
Walking	1,2,3,4,6,7,8,10	F			
Running	N/A	N			
Standing	1,2,3,4,6,8,10	F			
Bending-Neck	1-10	F			
Bending-Waist	2,3,4	O			
Squatting	2,3,4,10	O			
Climbing (e.g., up/down ladders and step-stools to manage inventory)	2,3	O			
Kneeling	2,3,4	O			
Crawling	N/A	N			
Twisting (neck)	1-10	F			
Twisting (waist)	2,3,4	O			
Repetitive Hand Use	2,3,4,5,6,8,9,10	F			
Simple Grasping-Right Hand	2,3,4,5,6,8,9,10	F			
Simple Grasping-Left Hand	2,3,4,5,6,8,9,10	F			
Power Grasping-Right Hand	1,2,3,10	O			
Power Grasping-Left Hand	1,2,3,10	O			
Fine Manipulation-Right Hand	5,6,8,9	O			
Fine Manipulation-Left Hand	5,6,8,9	O			
Pushing and Pulling (right hand) (e.g., moving disabled access unit (DAU) carts)	2,3,4,10	O			
Pushing and Pulling (left hand) (e.g., moving disabled access unit (DAU) carts)	2,3,4,10	O			
Reaching (above shoulder level) (e.g., to access precinct boxes, bankers boxes of voter registration at warehouse)	2,3,4,10	O			
Reaching (below shoulder level)	2,3,4,6,8,10	F			
Lifting-up to 10 lbs.	1,2,3,4,6,8,10	C			
Lifting-11-25 lbs. (e.g., single voter booth, unused large precinct box)	2,3,4,6,10	F			
Lifting-26-50 lbs. (e.g., disabled access units (DAU), box of unused ballots, 5000 count of secrecy envelopes, box of historical records)	2,3,4,10	F			
Lifting 51-75 lbs. (e.g., box of files or supplies)		O			
Lifting 76-100 lbs.	N/A	N			
Lifting 100 + lbs.	N/A	N			
Carrying 0-10 lbs.	1,2,3,4,6,8,10	C			
Carrying 11-25 lbs. (e.g., single voter booth, unused large precinct box)	2,3,4,6,10	F			
Carrying 26-50 lbs. (e.g., disabled access units (DAU), box of unused ballots, 5000 count of secrecy envelopes, boxes of historical records)	2,3,4,10	F			
Carrying 51-75 lbs. (e.g., box of files or supplies) [employee typically moves heavier items with a cart or hand truck]	2,3,4,10	O			
Carrying 76-100 lbs.	N/A	N			

**PART 3: SENSORY REQUIREMENTS**

Activity	Examples of Duties/Functions Requiring Activity	FREQUENCY RATING Never, Occasional; Frequent, or Constant	MEDICAL Can Perform	PROVIDER Temporarily Restricted	USE ONLY Permanently Restricted
Functional vision, normal or corrected	1-10	C			
Functional color vision, normal or corrected (e.g., to identify and place supplies in their proper place)	2,3,4	O			
Functional night vision, normal or corrected (e.g., when work assignments require the employee to work before dawn and after dusk, especially during elections)	2,3,4,8,10	O			
Functional hearing, normal or corrected	1,5,9,10	F			
A sense of smell or taste	N/A	N			

**PART 4: COMPREHENSION LEVEL**

Activity	FREQUENCY RATING Never, Occasional; Frequent, or Constant	MEDICAL Can Perform	PROVIDER Temporarily Restricted	USE ONLY Permanently Restricted
Follow Oral Instructions	F			
Follow Written Instructions	F			
Required to sustain concentration	F			

**PART 5: NATURE OF TASKS**

Activity	FREQUENCY RATING Never, Occasional; Frequent, or Constant	MEDICAL Can Perform	PROVIDER Temporarily Restricted	USE ONLY Permanently Restricted
Follow set procedures	C			
Organize own work	C			
Able to ask questions or request assistance when needed	C			
Required to make decisions independently	F			
Required to train and/or lead others (e.g. trains staff in materials packing techniques, proper lifting/loading techniques) <i>[non-essential]</i>	F			
Required to direct others (e.g. planning, goal setting, performance)	O			

**PART 6: WORK PACE**

Activity	FREQUENCY RATING Never, Occasional; Frequent, or Constant	MEDICAL Can Perform	PROVIDER Temporarily Restricted	USE ONLY Permanently Restricted
Tightly scheduled and rapid pace of work activities at high volume	O			
Meet time sensitive deadlines	O			
Long and/or irregular hours	O			
Long and/or irregular hours (i.e., during election cycles)	O			
Limited/unpredictable opportunity for breaks (i.e., during election cycles)	N			

**PART 7: COMPLEXITY/VARIABILITY**

Activity	FREQUENCY RATING Never, Occasional; Frequent, or Constant	MEDICAL Can Perform	PROVIDER Temporarily Restricted	USE ONLY Permanently Restricted
Variable and unpredictable workflow	O			
Attention divided by issues requiring multi-tasking	O			
Work requires precise attention to detail	F			
Use of judgment in routine matters	F			
Requires use of judgment in adapting procedures from one task to another	O			
Possible legal ramifications associated with work activities or work product	C			

**PART 8: INTERACTIONS WITH OTHERS**

Activity	FREQUENCY RATING Never, Occasional; Frequent, or Constant	MEDICAL Can Perform	PROVIDER Temporarily Restricted	USE ONLY Permanently Restricted
Works with others (e.g., co-workers, other departments/agencies, public)	F			
Interactions limited to giving/receiving information	F			
Interactions exceed giving/receiving information (e.g., advises, persuades, justifies)	O			
Interactions occur under circumstances of emotional stress	O			
Risk of confrontation with violent or assaultive clients or customers	O			

**PART 9: ENVIRONMENTAL FACTORS/WORKING CONDITIONS:**

Activity	FREQUENCY RATING Never, Occasional; Frequent, or Constant	MEDICAL Can Perform	PROVIDER Temporarily Restricted	USE ONLY Permanently Restricted
Work Inside	C			
Work Outside	O			
Extreme Heat (above 100 degrees)	N			
Extreme Cold (below 32 degrees)	N			
Excessive Noise (must raise voice to be heard)	O			
Vibration (e.g., jack hammer, hammer drill, chainsaw, etc.)	N			
Dust, Vapors, Fumes, Smoke	O			
Silica, asbestos, etc.	N			
Solvents (e.g., gas, turpentine, etc.)	N			
Grease, oils	O			
Acidic, Caustic Solutions	N			
Pesticides	N			
Explosives (e.g., dynamite, bomb, etc.)	N			
Cleaning supplies, abrasives	N			
Other Chemicals (e.g. drugs and other contraband)	N			
Human Blood, Body Tissues, or Fluids	N			
Human Wastes	N			
Animal Blood, Body Tissues, or Fluids	N			
Animal Wastes	N			
Biological Toxins (e.g., poison ivy, poison oak, anthrax, etc.)	O			
Insect Bites (e.g., ticks, mosquitos, spiders, etc.)	O			
Biomedical Waste	N			
Ionizing Radiation	N			
Non-Ionizing Radiation	N			
Electrical Energy	N			
Walking on uneven, slippery, or rough terrain (e.g., gravel, rocks, hills, etc.)	O			
Proximity to moving mechanical parts (e.g., equipment, machinery)	O			
Proximity to moving vehicles or objects	O			
Heights (e.g., rooftop, ladders, scaffolding, etc.) (e.g., managing storage space, placing supplies and equipment on shelves or cabinets)	O			
Contact with water, other liquids, humid conditions - not weather related	N			
Work Below Ground: (e.g., excavation, trench, etc.)	N			
Potential exposure to airborne infectious diseases (e.g. clinics, labs, corrections) (e.g. health clinics, laboratories, correctional facilities, etc.)	N			
Operates non-commercial motor vehicles (cars, trucks)	O			
Operates commercial vehicles – CDL Class _____ Endorsements _____	N			
Operates passenger van to transport clients, inmates, etc.	N			
Pulls non-commercial trailers or equipment	N			
Operates heavy equipment	N			
Other: Forklift	O			

**PART 10: MEDICAL SCREENING, SURVEILLANCE AND VACCINATION REQUIREMENTS: Not Applicable**

Please check each of the medical screening, surveillance, and vaccination requirements that apply to the position, and indicate if the requirement applies pre-employment/pre-placement only, or whether there are additional requirements after hire.

Medical Screening, Surveillance or Vaccination	Pre-Hire	Post-Hire	Frequency (one time, annual, etc.)
Audiometric Testing			
DOT Drug and Alcohol Screening			
DOT Physical Exam			
Respirator Physical Exam			
Respirator Questionnaire – Short			
Respirator Questionnaire – Standard			
Blood lead level			
Hazardous Waste/Emergency Worker physical			
Heavy metal screen (mercury, lead, arsenic)			
HINT Hearing Noise Sensitivity Testing			
Tuberculosis skin test			
Vaccine: MMR			
Vaccine: Hepatitis B			
Vaccine: Influenza			
Vaccine: Meningococcal			
Vaccine: Pneumococcal			
Vaccine: Rabies			
Vaccine: Tdap			
Vaccine: Chickenpox			

**PART 11: ADDITIONAL INFORMATION, PICTURES, ETC.**



Coffey Lane Warehouse



Coffey Lane Warehouse



Disable Access Units- (DAU)  
25" x 25" x 6" - 25 lbs. moved  
from 25 inches to 48 inches high



Full DAU Cart- Push Force- 34.67 lbs.



Full DAU Cart- Pull Force- 27.33 lbs.





Stack of Voter/Privacy Booths- from floor to 50 inches high



Single Voter/Privacy Booth- 23" x 20" x 4" – 14lbs.



Ballot Box- 5lbs.  
Floor to 59" high shelf



Foreground(pink)- Used Ballot Box  
20" x 21" x 11" – 51 lbs. to 59inches  
Background(clear)- box of unused Ballots  
20" x 21" x 11" – 44 lbs. up to 36 inches



Large Precinct Box-  
20"x13"x9"  
18 lbs. from 12" to 72"



Historical Records Storage  
Maps and Blueprints



Historical Records Storage



Historical Records Storage- Bankers Boxes- 50lbs.



Historical Records Storage- Maps and Blueprints



Historical Records Storage



Safety Ladder



Pallet Jack- Office Furniture moved by contracted labor force



Folding Signs of various shapes and sizes- Largest sign 28 lbs. with handle height at 45 inches

Incumbent has access to Forklift for heavy items that are stored overhead; safety ladders and pallet jacks are placed strategically throughout the warehouse to aid in lifting items to higher shelves and prevent injury moving heavy or overhead items.

**PART 12 – FORM REVIEW AND SIGNATURES**

**OCCUPATIONAL HEALTH CONSULTANTS**

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SUPERVISOR/SECTION MANAGER**

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**HUMAN RESOURCES RECRUITMENT AND CLASSIFICATION**

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**HUMAN RESOURCES SAFETY UNIT**

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**HUMAN RESOURCES DISABILITY MANAGEMENT**

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART 13 – MEDICAL PROVIDER REVIEW AND COMMENTS**

Employee Name: \_\_\_\_\_ Date of Evaluation: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_