



KITSAP COUNTY
 614 Division St.
 Port Orchard WA 98366

Employee Name _____

PHYSICAL REQUIREMENTS: M&O MANAGER (NON-UNION)
DEPARTMENTS: PUBLIC WORKS, PARKS AND FACILITIES MAINTENANCE

POSITION REQUIREMENTS:

- Walking (short or long distances).
- Frequent bending, stooping, climbing, and reaching (over shoulders, at waist and below waist).
- Handling/grasping documents or equipment.
- Sitting and/or standing for short or extended periods of time.
- Clear speaking and adequate hearing necessary to communicate effectively and respond appropriately in-person and/or on the telephone.
- Vision necessary to read source materials, gauges, and computer screen data.
- Repetitive motions for computer, tool and equipment use.
- Hazards associated with this work when exposed to exhaust fumes, loud noise, foul odors, insects, and dust.
- Exposure to all weather conditions; including inclement weather (temperature extremes, slippery surfaces).
- Exertion of force of up to 50 lbs. occasionally, and/or up to 35 lbs. frequently, and/or up to 10 lbs. continually to lift/carry/move objects and to operate a variety of power equipment.

- **Some positions may require exertion of force of up to 75 lbs. occasionally and 100 lbs. with assistance to lift/carry/move objects. May be required to operate a variety of power equipment, shovel large quantities of materials, and operate heavy equipment such as backhoes, pavers, dozers and graders.**

PHYSICAL AND MENTAL DEMANDS

| Activity | Never 0% | Inter. 1-10% | Occas. 11-33% | Freq. 34-66% | Cont. 67+% | Further Description |
|------------|-------------|-----------------|------------------|-----------------|---------------|---|
| 1. Walking | | | | X | | Inspection, maintenance |
| 2. Balance | | | X | | | Ladders, stairs, look over railings, access equipment |
| 3. Lifting | - | - | - | - | - | |
| 0-10 lbs. | | | | X | | |
| 11-20 lbs. | | | | X | | |
| 21-35 lbs. | | | X | | | |
| 36-50 lbs. | | X | | | | Containers, tools, hoses, and equipment |
| 50 + lbs. | X | | | | | N/A |
| | - | - | - | - | - | |



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|-------------------------|-------------|-----------------|------------------|-----------------|---------------|--|
| 4. Carry | | | | | | |
| 0-10 lbs. | | | | X | | |
| 11-20 lbs. | | | | X | | |
| 21-35 lbs. | | | X | | | |
| 36-50 lbs. | | X | | | | |
| 5. Pushing/ Pulling | - | - | - | - | - | |
| 0-10 lbs. | | | | X | | Tools, equipment, and supplies |
| 11-20 lbs. | | | | X | | |
| 21-35 lbs. | | | X | | | |
| 36-50 lbs. | | X | | | | |
| 6. Climbing | | | X | | | Stairs, ladders, equipment access, outside terrain |
| 7. Twisting | | | X | | | |
| 8. Reaching | | | X | | | |
| 9. Grasping | | | | X | | Picking up and using parts, tools, and equipment |
| 10. Stoopng/ Bending | | | X | | | Picking up and using parts, tools equipment, clean/scrub |
| 11. Sitting | | X | | | | Record keeping and data input |
| 12. See/Hear/ Speak | - | - | - | - | - | |
| Sees Detail | | | | | X | Inspect equipment, operate machinery, read instructions |
| Color Discrim. | | | X | | | recognize proper colors in treatment process, equipment |
| Visual Displays | | | X | | | Computer and video displays |
| Audible | | | | | | Listen for alarms, signals, |



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| Signals | | | X | | | radio, and telephone |
| Oral Direction | | | X | | | Supervisors and co-workers |
| Other | | | | | | |
| 13. Working Cond/Exp. | - | - | - | - | - | |
| Uneven Ground | | | | X | | Outside work |
| Work Outside | | | | X | | " |
| Work Inside | | | X | | | |
| High Elevations | | X | | | | Climb stairs, ladders, and equipment |
| Moving Objects | | | X | | | |
| Slippery Surface | | | X | | | |
| Wetness | | | | X | | " |
| Temp. Extremes | | | X | | | Outside work |
| Confined Spaces | | X | | | | |
| Special Clothing | | | | | X | Protective gear, rubber boots, rain gear, coveralls, PPE |
| Vibration | | | X | | | Pnuematic tools, pressure washer, and weed-eater |
| Use of Solvents | | X | | | | Cleaners |
| Use of Detergent | | | X | | | Cleaners and degreasers |
| Chemical Contact | | X | | | | |
| Chemical Vapors | | X | | | | " |
| Dust or Particles | | | X | | | Cleaning and landscaping |
| 14. Other | | | | | | |
| 15. Standing | | | | | X | |



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|---|-------------|-----------------|------------------|-----------------|---------------|------------------------|
| 16. Squatting/ kneeling | | | X | | | |
| 17. Crawling | | X | | | | |
| 18. Foot Controls | | X | | | | |
| 19. Hand Controls | | | X | | | |
| 20. Fine Finger Manipulation | | X | | | | |
| 21. Repetitive motion | | | X | | | |
| 22. Proximity to mechanical parts | | | X | | | |
| 23. Noise intensity | | | X | | | |
| 24. Explosives | X | | | | | |
| 25. Radiation | X | | | | | |
| 26. Electricity | | X | | | | |

**For CDL positions: If there are driving restrictions employee must be evaluated by a DOT approved doctor prior to returning to the job of injury.

SUMMARY DETERMINATION (Please check appropriate item)

___ Worker can fully perform the job with no restrictions as of the date below.

___ Worker requires restrictions to perform the job. The restrictions are described on the Physician's Estimate of Physical Capacities.

Physician Signature

Date

ADDITIONAL
COMMENTS: _____

