CITY OF MILFORD
HUMAN RESOURCES DEPARTMENT
JOB ANNOUNCEMENT

TO: All

FROM: Tania R. Barnes, Director

SUBJECT: Job Opening

DATE: October 19, 2016

NOTICE TO ALL APPLICANTS:
This opening is available to all City employees and the general public.

POSITION: **TAX COLLECTOR** – Tax Collector Division, Finance Department

REQUIREMENT(S): Graduation from an accredited college or university with a Bachelor's degree in accounting, finance, business, public administration or closely related field and four (4) years of supervisory experience in accounting and/or finance management OR any equivalent combination of training and experience.

SPECIAL REQUIREMENTS: Within five (5) years of appointment, shall obtain the State of Connecticut certification as a Certified Connecticut Municipal Collector (CCMC). Must be eligible for required bonding at time of appointment.

For a complete job description and Application for Employment, visit www.ci.milford.ct.us and click on *Services*, then *Employment Opportunities*, then *Job Title*. In order to be considered for this position, applicants must submit a cover letter, resume, and City of Milford Application for Employment to:

Ms. Tania R. Barnes, SHRM-SCP
Human Resources Department, 2nd Floor
City of Milford, 70 W. River Street, Milford, CT 06460
or
EMAIL: lpisacane@ci.milford.ct.us

APPLICATION PROCESS: Applications will be reviewed and those candidates deemed most qualified will be invited to participate in the interview process. Please be advised that the successful candidate will be required to submit to a physical examination, a drug screening and a comprehensive background check prior to appointment.

COMPENSATION: $63,249 - $69,320 per annum. The City of Milford offers a comprehensive and generous benefits packet that includes: health insurance, life insurance, defined benefit plan (pension), paid time off (vacation, sick, personal business), paid holidays (13 days per year), and Employee Assistance Program.

LAST FILING DATE: All Applications must be received on or before November 10, 2016.

TAX COLLECTOR

GENERAL SUMMARY OF DUTIES

Under the general direction of the Finance Director, directs and administers the functions of the collection and accounting of City taxes. An employee in this class is responsible for the collection of real, personal, and special assessment taxes and the supervision of clerical employees engaged in this activity.
Ensures the production and maintenance of office files and required financial records and provides data and information for annual and other audits.

ILLUSTRATIVE DUTIES

Plans, organizes and directs work involved in established collection cycle to insure timely and accurate billing, payment and accounting of assessed taxes.

Supervises and participates in the collection of City taxes and serves as temporary custodian of receipts.

Directs the preparation, distribution and collection of tax bills on all real estate, motor vehicles, personal property, and sewer and special assessments.

Schedules, motivates, trains and guides subordinates in the daily performance of billing, receiving, reconciling, depositing and reporting activities.

Monitors records of delinquent taxes; arranges and approves payment plans for tardy taxpayers; initiates enforcement procedures against delinquent non-payers, in consultation with the City Attorney's Office.

Prepares and files certificates of lien for the continuance of liens.

Records new or amended property information and reconciles rate book in coordination with the Tax Assessor.

Produces various lists and statistical and narrative reports for submission to municipal, state and federal officials.

Prepares and monitors operating budget for the Tax Collector's Office.

Maintains records of tax receipts and statements, and of accounts due and collected, screens account records and selects delinquent accounts for collection action, and prepares reports from these records.

Supervises and participates in the receipt and recording of sanitary sewer utility collections.

Receives payment for special assessments resulting from special improvement rolls.

ILLUSTRATIVE DUTIES (cont'd.)

Reviews and interprets new and existing laws; implements new policies or procedures as required.

Responds to the most unusual or complicated questions and complaints regarding tax policies or procedures.

Provides superior customer service to other employees and members of the general public.

Performs related work as required.

REQUIRED KNOWLEDGES, SKILLS AND ABILITIES

Extensive knowledge of federal and State tax collection statutes and City ordinances relating to the custody of City revenue funds.

Considerable knowledge of the general principles and practices of revenue accounting and bookkeeping.

Knowledge of modern office practices and procedures.

Ability to plan, develop and organize efficient procedures for the billing and collection of taxes and utility charges.

Knowledge of administration, including personnel practices and budget management.

Ability to comprehend complex statistical reports and written materials, including laws, rules and regulations.

Ability to maintain financial records of some complexity and to prepare reports and statements from such records.

Ability to supervise, plan and coordinate the work of assigned staff.

Ability to establish and maintain effective working relationships and methods of communication with other employees and the general public.

Ability to deliver services to City employees and members of the general public in a manner focused on superior customer service.

Ability to comprehend and analyze computerized information.

Ability to communicate effectively, both orally and in writing.

TAX COLLECTOR

MINIMUM TRAINING & EXPERIENCE REQUIRED

Graduation from an accredited college or university with a Bachelor's degree in accounting, finance, business, public administration or closely related field and four (4) years of supervisory experience in accounting and/or finance management OR any equivalent combination of training and experience.

SPECIAL REQUIREMENTS

Within five (5) years of appointment, shall obtain the State of Connecticut certification as a Certified Connecticut Municipal Collector (CCMC). Must be eligible for required bonding at time of appointment.

City of Milford, Conn.
Civil Service Commission
7/2007
Revised: 10/2014

APPLICATION FOR EMPLOYMENT

Human Resources Department
City of Milford
70 West River Street
Milford, CT 06460
(203) 783-3239

An Equal Opportunity Employer

Position applying for
(use title on job announcement)

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK.
All blanks must be completed in order for application to be considered.

DO NOT WRITE IN THIS SPACE
☐ **Q** Rev. by: _____
☐ **NQ**
☐ **Educ**
☐ **Exp**
☐ **Not City EE**
☐ **Other** _____

PERSONAL INFORMATION

Last Name | First Name | M.I. | Other names by which you have been known | 000- - Last 6 digits of Soc. Sec. No.

Present Address: No. and Street | City | State | Zip Code — How long at this address? Years/Months

Mailing address (if different from residence address) No. and Street | City | State | Zip Code

Home Telephone _____ Cellular _____ Email _____

In case of emergency, notify:

Name _____ Relationship _____ Telephone Number _____

Are you legally eligible for employment in the USA? Yes ☐ No ☐ *If hired, you will be required to submit proof of eligibility to work in the USA.*

Are you 18 years of age or older? Yes ☐ No ☐

Have you previously applied for employment with the City of Milford? If yes, when and for which position(s)? Yes ☐ No ☐
Year(s) applied _____ Position(s) applied for _____

Have you previously been employed by the City of Milford? Yes ☐ No ☐ If yes, complete the following information:
Job Title/Department _____ From _____ To _____

List any relatives or members of your household who are employed by the City of Milford:
Name(s) _____ Job Title _____ Department _____

Do you claim 5 points preference based on active duty in the U.S. Armed Forces? Yes ☐ No ☐ *Attach copy of DD214.*
Do you claim 10 points veteran's disability preference? Yes ☐ No ☐ *Attach copy of DD214 & other supporting documentation.*

Have you ever been convicted of any offenses other than juvenile, youthful offender, or a minor traffic violation? Yes ☐ No ☐
If yes, you must complete Section B of the applicant disclosure form.
Have you ever been disqualified for a position with the City of Milford due to a criminal conviction or failure to disclose a criminal conviction? If yes, list job title and date of disqualification. Yes ☐ No ☐

Job Title: _____ Date of Disqualification: _____

GENERAL INFORMATION

What date are you available to begin work? _____
Do you have any commitments to another employer that might affect your employment with the City of Milford? ☐ Yes ☐ No
If yes, specify commitment(s): _____
Can you perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ☐ Yes ☐ No
If no, please explain: _____

PERSONAL INFORMATION

High school attended:

Name of School(s)	City/State	Did you graduate?	
		Yes ☐ No ☐	
		Yes ☐ No ☐	

Colleges/Universities attended:

Name of Educational Institution	City/State	Did you graduate?	Dates attended	Degree, dipoloma, GED,certification or number of credits completed.
		Yes ☐ No ☐ Yes ☐ No ☐		

EMPLOYMENT HISTORY

List below **ALL** present and past employment. **BEGIN WITH YOUR MOST RECENT EMPLOYMENT AND WORK BACKWARDS CONSECUTIVELY**. Applicants may be required to furnish satisfactory proof of employment history claimed. Use additional pages if necessary. Resumes may be required for certain positions. If applicable, include resume with **completed application**.

Have you ever been discharged or asked to resign? ☐ Yes ☐ No

If yes, please explain: _____

Employer	FROM		TO		TOTAL TIME	
Address	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number						
Your job title	Hours per week					
Supervisor's Name _____ Title: _____	Starting Salary	$	per			
Reason for leaving position _____	Ending Salary	$	per			

Specific Duties:

Number of Employees Supervised (if applicable) _____

Employer	FROM		TO		TOTAL TIME	
Address	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number						
Your job title	Hours per week					
Supervisor's Name _____ Title: _____	Starting Salary	$	per			
Reason for leaving position _____	Ending Salary	$	per			

Specific Duties:

Number of Employees Supervised (if applicable) _____

Employer	FROM		TO		TOTAL TIME	
Address	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number						
Your job title	Hours per week					
Supervisor's Name _____ Title: _____	Starting Salary	$	per			
Reason for leaving position _____	Ending Salary	$	per			

Specific Duties:

Number of Employees Supervised (if applicable) _____

EMPLOYMENT HISTORY (continued)

Employer / Address / Telephone Number	FROM Month	FROM Year	TO Month	TO Year	TOTAL TIME YEARS	TOTAL TIME MONTHS

Your job title _____ Hours per week _____

Supervisor's Name _____ Title: _____ Starting Salary $ _____ per _____

Reason for leaving position _____ Ending Salary $ _____ per _____

Specific Duties:

Number of Employees Supervised (if applicable) _____

Employer / Address / Telephone Number	FROM Month	FROM Year	TO Month	TO Year	TOTAL TIME YEARS	TOTAL TIME MONTHS

Your job title _____ Hours per week _____

Supervisor's Name _____ Title: _____ Starting Salary $ _____ per _____

Reason for leaving position _____ Ending Salary $ _____ per _____

Specific Duties:

Number of Employees Supervised (if applicable) _____

SPECIAL SKILLS/TRAINING

Typing speed: _____ words per minute

Business machines (other than computers) you are able to operate: _____

What computer experience do you have? ☐ Apple ☐ PC

Your skill level in Word can best be described as:	☐ Proficient	☐ Very good	☐ Good	☐ Fair	☐ Beginner	☐ Never Used
Your skill level in Excel can best be described as:	☐ Proficient	☐ Very good	☐ Good	☐ Fair	☐ Beginner	☐ Never Used
Your skill level in Outlook can best be described as:	☐ Proficient	☐ Very good	☐ Good	☐ Fair	☐ Beginner	☐ Never Used
Your skill level in PowerPoint can best be described as:	☐ Proficient	☐ Very good	☐ Good	☐ Fair	☐ Beginner	☐ Never Used
Your skill level in Access can best be described as:	☐ Proficient	☐ Very good	☐ Good	☐ Fair	☐ Beginner	☐ Never Used
Your skill level in Acrobat can best be described as:	☐ Proficient	☐ Very good	☐ Good	☐ Fair	☐ Beginner	☐ Never Used
Your skill level in Publisher can best be described as:	☐ Proficient	☐ Very good	☐ Good	☐ Fair	☐ Beginner	☐ Never Used

Describe any other software and level of skill or any other applicable abilities:

SPECIAL SKILLS - FIELD

Light Equipment:

What best describes your skill level operating a payloader?	☐ Excellent	☐ Very good	☐ Good	☐ Fair	☐ Never Used
What best describes your skill level operating a backhoe?	☐ Excellent	☐ Very good	☐ Good	☐ Fair	☐ Never Used
What best describes your skill level operating a small tractor?	☐ Excellent	☐ Very good	☐ Good	☐ Fair	☐ Never Used

Heavy Equipment:

What best describes your skill level operating a grader?	☐ Excellent	☐ Very good	☐ Good	☐ Fair	☐ Never Used
What best describes your skill level operating a Cat 225 excavator?	☐ Excellent	☐ Very good	☐ Good	☐ Fair	☐ Never Used
What best describes your skill level operating a bulldozer?	☐ Excellent	☐ Very good	☐ Good	☐ Fair	☐ Never Used

Snowplowing:

Describe any experience you may have had snowplowing. Include the size of the plow(s) you have driven, number of months/years of snow plowing experience and type of area(s) plowed (roads, driveways, parking lots):

OTHER TRAINING, SKILLS, AND/OR LICENSES

Other Training/Certifications (special courses, work training programs, armed forces training) related to the job for which you are applying. Give name and location where training was given, dates attended, subject of training, total number of training hours, and other details.

Summarize any other special skills or abilities relating to the job for which you are applying, such as: licenses, machines you are able to operate, languages you speak and read or write well, computer skills besides those mentioned above, and any other special abilities or knowledge.

DRIVER'S LICENSE: If the position for which you are applying will require you to operate a vehicle:

(1) You must possess a valid driver's license;
(2) Any special endorsements must be current and valid;
(3) If you are offered employment by the City of Milford, and if your driver's license is from another state, you may be required as a condition of employment to obtain a valid Connecticut Driver's License before you can begin work.

Do you have a valid driver's license: Yes ☐ No ☐ State _____

Expiration Date Classification License #

FINALISTS MAY BE REQUIRED, UPON NOTIFICATION, TO SUBMIT A COPY OF THEIR DRIVING ABSTRACT. Note: Driving abstracts may be obtained at any Connecticut Department of Motor Vehicles office. This fee is at the finalist's expense.

PROFESSIONAL REFERENCES

List three professional or business references who are not your relatives or employees of the City of Milford. State the nature of the relationship (i.e., co-worker, supervisor, associate, customer).

Name	Address	Phone	Relationship	Years Known

IMPORTANT: Read each of the following sections carefully and completely. If you do not understand any portion of the statements that follow, ask for clarification. Your signature indicates that you have read and understand each of the provisions listed and that you agree to abide by the conditions stated therein.

NOTICE TO PERSONS WITH DISABILITIES: Testing arrangements to accommodate persons with disabilities will be made upon request of the applicant. If accommodation is requested, the applicant will be required to state what accommodation is needed.

PRE-EMPLOYMENT MEDICAL EXAMINATION: Applicants selected for employment may be required to pass a medical examination given by a physician designated by the City of Milford.

PROBATIONARY PERIOD: Employees serve a probationary period as determined by City policy or by any applicable collective bargaining agreement. Termination of employment during the probationary period may be with or without cause and is not subject to any appeal process or grievance procedure of any applicable collective bargaining agreement.

DRUG POLICY: It is the policy of the City of Milford to maintain a drug free workplace. Employees who are observed in possession of or using controlled substances (drugs) will be terminated and may have criminal actions filed against them. Employees in certain positions are subject to Federal laws requiring pre-employment, post-accident, and random drug testing.

UPON EMPLOYMENT, YOU WILL BE REQUIRED TO PROVIDE YOUR SOCIAL SECURITY NUMBER.

PRE-EMPLOYMENT STATEMENT

AGREEMENT: I CERTIFY THAT ALL STATEMENTS MADE ON OR IN CONNECTION WITH THIS APPLICATION ARE TRUE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT INCOMPLETE, FALSE, INACCURATE, OR MISLEADING INFORMATION GIVEN IN MY APPLICATION, INTERVIEW(S) OR DURING THE COURSE OF MY EMPLOYMENT MAY RESULT IN THE REJECTION OF THIS APPLICATION OR WITHDRAWAL OF A JOB OFFER. FURTHER, FALSE INFORMATION PROVIDED, WHETHER WILLINGLY OR ACCIDENTALLY, MAY RESULT IN DISCIPLINE OR IMMEDIATE DISMISSAL IF EMPLOYED, WHENEVER THE OMISSION OR FALSEHOOD IS DISCOVERED.

I UNDERSTAND THAT THIS APPLICATION IS NOT A CONTRACT OF EMPLOYMENT NOR IS IT A GUARANTEE OR INDICATION OF EMPLOYMENT. I ALSO UNDERSTAND THAT SHOULD I BE GRANTED AN INTERVIEW, THE REPRESENTATIONS THAT MAY BE MADE AT THE INTERVIEW ARE NOT TO BE CONSTRUED AS CREATING ANY OBLIGATION, PROMISE OR CONTRACT ON BEHALF OF THE CITY OF MILFORD. SHOULD I BE EMPLOYED BY THE CITY, IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE RULES AND POLICIES OF THE CITY OF MILFORD, AS THEY MAY FROM TIME TO TIME BE IMPLEMENTED OR REVISED. IDENTIFICATION AND VERIFICATION OF ELIGIBILITY TO WORK IN THE UNITED STATES MUST BE SATISFIED FOR EMPLOYMENT.

I FURTHER UNDERSTAND THAT IN CONSIDERATION FOR EMPLOYMENT, AN INVESTIGATIVE BACKGROUND REPORT MAY BE PREPARED AT THE REQUEST OF THE CITY OF MILFORD, WHEREBY INFORMATION MAY BE OBTAINED FROM MY EMPLOYERS (PRESENT OR FORMER), EDUCATIONAL INSTITUTIONS, ALL BRANCHES OF THE U.S. MILITARY SERVICE, AND PUBLIC RECORDS MAINTAINED BY GOVERNMENT AGENCIES OR OTHERS, INCLUDING BUT NOT LIMITED TO CRIMINAL CONVICTION REPORTS, CREDIT REPORTS, ETC. I AUTHORIZE THE CITY OF MILFORD AND ITS DESIGNATED REPRESENTATIVE(S) TO PERFORM THIS INVESTIGATION, AND FURTHER AUTHORIZE PRESENT AND FORMER EMPLOYERS, REFERENCES AND OTHER PERSONS TO PROVIDE INFORMATION FOR THE INVESTIGATION. I ALSO AUTHORIZE THE CITY OF MILFORD TO RECEIVE CRIMINAL CONVICTION RECORDS PERTAINING TO ME, WHICH MAY BE IN THE FILES OF ANY CRIMINAL JUSTICE AGENCY

I UNDERSTAND THAT ACCEPTANCE FOR EMPLOYMENT SHALL DEPEND ON SATISFACTORY REPLIES FROM MY REFERENCES AND OTHER BACKGROUND CHECKS. ANY OFFER OF EMPLOYMENT MAY BE CONTINGENT UPON PASSING A DRUG TEST AND MEDICAL EXAMINATION. I AUTHORIZE MEDICAL PROVIDER(S) TO RELEASE ANY/ALL MEDICAL INFORMATION TO THE CITY PURSUANT TO ITS PRE-EMPLOYMENT PHYSICAL AND DRUG SCREEN PROCEDURES IN ACCORDANCE WITH HIPAA.

RELEASE: I HEREBY RELEASE AND HOLD HARMLESS ANY PERSON, CORPORATION, COMPANY FROM ANY AND ALL POSSIBLE DAMAGES, DIRECT OR CONSEQUENTIAL, IMMEDIATE OR REMOTE, OF ALL FORMS OR TYPES, THAT I MAY SUSTAIN OR ALLEGE TO SUSTAIN BY VIRTUE OF THAT PERSON, CORPORATION, COMPANY OR OTHER ENTITY COMPLYING WITH MY REQUEST TO FULLY AND COMPLETELY COMPLY WITH THE INVESTIGATION, INQUIRY OR INTERESTS OF THE CITY OF MILFORD, TO WHOM I HAVE MADE AN APPLICATION OF EMPLOYMENT AND IS THE BEARER OF THIS AUTHORIZATION.

SIGNATURE of APPLICANT		DATE

APPLICANT DISCLOSURE FORM

City of Milford

Section A

Position applying for
(use the title that appears on the job announcement)

CANDIDATE INFORMATION

It is the policy of the City of Milford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, sex, color, religion, national origin, marital status, veteran status or disability unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental reporting requirements. While completion of this section is voluntary, all applicants are strongly urged to complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that they have chosen not to provide the City of Milford with the requested information by checking the appropriate box in Section 4. This information will not affect in any way your employment opportunities. This form will be removed from the application.

GENERAL INFORMATION

Name _____ Date _____

Social Security Number **000** _____ _____ **(Last six digits ONLY)**

STATISTICAL INFORMATION

Race/Ethnic Identification (Please check one)

American Indian or Alaska Native	☐	All persons having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affliation or community attachment.
Asian	☐	All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Phillipine Islands, Thailand, and Vietnam.
Black or African American	☐	(Not of Hispanic or Latino origin.) All persons having origins in any of the black racial groups of Africa.
Hispanic or Latino	☐	All persons of Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race.
Native Hawaiian or Other Pacific Islander	☐	All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.
White	☐	(Not of Hispanic or Latino origin.) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.
Other	☐	Please specify _____

Gender ☐ Male ☐ Female

NON-PARTICIPATION

Please check box if applicable

I have read the above statement and have chosen not to complete this form. ☐

RECRUITING INFORMATION

How did you hear about this job? (Please check one.)

☐ Milford Mirror	☐ Human Resources or Department Bulletin Board
☐ Other newspaper (give name):	☐ Community Agency (give name):
☐ City Website	☐ Professional Journal (give name):
☐ Internet (list site):	☐ Other (please specify):
☐ City Employee	

APPLICANT DISCLOSURE FORM

City of Milford

NOTE
THIS INFORMATION WILL BE REVIEWED ONLY BY MEMBERS OF THE HUMAN RESOURCES DEPARTMENT AND HIRING MANAGERS.

Section B

CRIMINAL CONVICTION INFORMATION

Applicants are required to disclose the existence of *any* criminal conviction, regardless of the nature, date or location thereof, with the exception of minor traffic violations or an arrest, criminal charge, or conviction that has been erased. The types of records subject to erasure under Connecticut law are as follows: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled;" (d) a criminal charge for which the person was found not guilty; or (e) a conviction for which the person received an absolute pardon.

The information provided below is subject to the terms of the "Pre-Employment Statement" on Page 5 of this application. A criminal conviction will not necessarily result in the rejection of this application, but will be considered as it relates to the nature of the position sought, and in light of any applicable state and federal law.

Name (Print) _____ Title of Position Sought _____

Applicant's Signature _____ Date _____

DATE OF CONVICTION	OFFENSE	DATE OF ARREST	PLACE OF ARREST (City/State)	SENTENCE