



KITSAP COUNTY
 614 Division St.
 Port Orchard WA 98366

Employee Name: _____

DEPARTMENT: PUBLIC WORKS
PHYSICAL REQUIREMENTS: RIGHT OF WAY ANALYST, TECH & SUPERVISOR

Work is performed primarily in a field and office environment. Positions in this class typically require:

- Work is performed primarily in an office environment, and in the field
- Walking long and short distances
- Bending, stooping, twisting
- Reaching above and/or below shoulder
- Handling/grasping documents or office equipment
- Sitting and/or standing for short or extended periods of time
- Clear speaking and adequate hearing sufficient to communicate effectively and respond appropriately in person and/or on the telephone
- Vision sufficient to read source materials and computer screen data
- Repetitive motions for computer equipment use
- Requires exertion of force of 25 pounds occasionally, 10 pounds frequently, and/or 5 pounds continuously to lift/carry/move objects, files and documents

PHYSICAL AND MENTAL DEMANDS

Activity	Never 0%	Inter. 1-10%	Occas. 11-33%	Freq. 34-66%	Cont. 67+%	Further Description
1. Walking					x	Alternates standing and walking when completing job tasks, viewing project sites, market sales, road vacation areas and meeting with owners on-site
2. Balance					x	
3. Lifting	-	-	-	-	-	
0-10 lbs.			x			Office supplies, paperwork, and files
11-20 lbs.		x				
21-35 lbs.		x				
36-50 lbs.	x					



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50 + lbs.	x					
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Activity	Never 0%	Inter. 1-10%	Occas. 11-33%	Freq. 34-66%	Cont. 67+%	Further Description
4. Carry	-	-	-	-	-	
0-10 lbs.			x			Office supplies, paperwork, and files
11-20 lbs.		x				
21-35 lbs.		x				
36-50 lbs.	x					
5. Pushing/ Pulling	-	-	-	-	-	
0-10 lbs.		x				File drawers, office equipment, files
11-20 lbs.		x				
21-35 lbs.	x					
36-50 lbs.	x					
6. Climbing			x			May periodically climb stairs and traversing slopes
7. Twisting		x				Accessing files, office supplies and equipment
8. Reaching		x				"
9. Grasping		x				Office supplies, equipment, phone
10. Stoopng/ Bending		x				To access low filing cabinets/shelves
11. Sitting					x	
12. See/Hear/ Speak	-	-	-	-	-	
Sees Detail					x	Documents, computer screen
Color Discrim.					x	Files may be color coded
Visual						Computer screen



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Displays					x	
Audible Signals					x	Supervisor's directions & phones if applicable
Oral Direction					x	Supervisor's directions and interaction with co-workers
Activity	Never 0%	Inter. 1-10%	Occas. 11-33%	Freq. 34-66%	Cont. 67+%	Further Description
13. Working Cond/Exp.	-	-	-	-	-	
Uneven Ground			x			Walking project sites (slopes) and meeting with property owners on-site
Work Outside			x			"
Work Inside					x	Office environment
High Elevations	x					
Moving Objects	x					
Slippery Surface			x			Walking project sites (rain)
Wetness			x			"
Temp. Extremes	x					
Confined Spaces	x					
Special Clothing					x	semi-professional attire
Vibration	x					
Use of Solvents	x					
Use of Detergent	x					
Chemical Contact	x					
Chemical Vapors	x					
Dust or Particles		x				Nuisance dust



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PHYSICIAN TO COMPLETE

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:
