

The Town of North Branford is accepting application for a part time **Assistant Building Official**. Position is 19 hours per week. Responsible for building plan review, permitting, outside inspections, code inspection/ compliance and providing customer service. Involves interpretation and application of the State Building Codes.

Extensive experience in building construction practices, mechanical systems or as an inspector or an equivalent combination of experience and training; ability to enforce codes with tact; and excellent skills with the public. Must be licensed as an Assistant Building Official by the State of Connecticut. Must hold a valid Connecticut Driver's license. Salary DOQ.

Application are available on-line at www.townofnorthbranfordct.com. Applications can be mailed to Town of North Branford, Town Manager's Office, 909 Foxon Rd, North Branford CT 06471. Applications are due to the Town Manager's Office. This position will remain open until filled. (No faxes or emails). EEO/AA

PERSONAL DATA (continued):

4. Are you able to perform the essential functions listed in the job description without reasonable accommodation?
 Yes [] No []

If no, what can be done to accommodate your limitation? _____

5. How did you learn of our organization: _____

EDUCATION

	Name of School/Program	Graduated	Type of Degree	Coursework /Major
HIGH SCHOOL		<input type="checkbox"/> YES <input type="checkbox"/> NO		
COLLEGE		<input type="checkbox"/> YES <input type="checkbox"/> NO		
GRADUATE SCHOOL		<input type="checkbox"/> YES <input type="checkbox"/> NO		
TECHNICAL SCHOOL		<input type="checkbox"/> YES <input type="checkbox"/> NO		
OTHER TRAINING OR PROFESSIONAL CERTIFICATIONS (Explain)				

Employment History:

Start with your current or most recent position and work backwards. Use additional sheets of paper if you need more space. Resumes may be submitted but are not a substitute for the requested information.

- Name of Employer _____ Employment Dates _____

Job Title _____

Duties and Responsibilities: _____

Reason for Wanting to Leave: _____

Name and Title of Immediate Supervisor: _____

Telephone Number: _____

EMPLOYMENT HISTORY (continued):

2.

Name of Employer

Employment Dates

Job Title

Duties and Responsibilities: _____

Reason for Wanting to Leave: _____

Name and Title of Immediate Supervisor: _____

Telephone Number: _____

3.

Name of Employer

Employment Dates

Job Title

Duties and Responsibilities: _____

Reason for Wanting to Leave: _____

Name and Title of Immediate Supervisor: _____

Telephone Number: _____

4.

Name of Employer

Employment Dates

Job Title

Duties and Responsibilities: _____

Reason for Wanting to Leave: _____

Name and Title of Immediate Supervisor: _____

Telephone Number: _____

May we contact your **present employer** regarding your employment record? Yes [] No []

May we contact your **past employer(s)** regarding your employment record? Yes [] No []

