



Birch Run Township

8425 Main Street • P.O. Box 152 • Birch Run, MI 48415

Phone: (989) 624-9773 • Fax: (989) 624-1177

Office Administrative Assistant Application Packet

In this packet:

1. Office Administrative Assistant Job Description
2. Background Check Authorization Form

If interested in applying, please submit your Resume, Cover Letter, and the completed Background Check Authorization form either in-person or by email to clerk@birchruntwp.com

Thank you for your interest,

Riley Kiessling, Clerk



BIRCH RUN TOWNSHIP

Office Administrative Assistant

Job Description

Reports To: Birch Run Township Board of Trustees
Salary Grade: \$20-\$25/hr
Prepared By: Township Clerk / Board of Trustees
Approved By: Birch Run Township Board

FLSA Status: Hourly
Supervisory Responsibility: No
Prepared Date: March 8th, 2025
Approved Date: March 11th, 2025

Success Goal

To be an integral component to the efficient and smooth operations of Birch Run Township's general office and Water Department, and day-to-day processes.

Primary Function

Under the general direction of the Township Supervisor, this position is responsible for coordinating daily office activities, providing administrative support to Department Heads, and assisting with Water and Sewer Department functions. The role requires strong organizational skills, attention to detail, and excellent customer service abilities.

Performance Responsibilities – Essential Functions (Other duties may be assigned)

A. General Office Responsibilities

- Answer phones, emails, and in-person inquiries professionally.
- Assist with customer service, scheduling, and office support.
- Process payments for **taxes, water bills, permits, and business licenses.**
- Responsible to open and close office; open and close vault and safe; and for checking drop boxes.
- Maintain and process records for **permits, inspections, park rentals, and ballot applications.**
- Manage **mail pickup/drop-off, filing, scanning, and office supply inventory.**
- Maintain **Township Website, Business License Program, and Cemetery Program.**
- Assist with **FOIA requests and may serve as FOIA Coordinator.**
- Support **utility bill mailings, election mailings, tax mailings, and assessment mailings.**
- Assist with **employee policy updates, risk management, and insurance plans.**
- May be required to **attend Township meetings** and may serve as a **Recording Secretary.**

B. Water & Sewer Responsibilities

- Maintain **BS&A Utility Billing program & Payment Processing.**
- Enter, track, and assist with scheduling **work orders.**
- Assist with maintaining and processing **Cross-Connection records and GPS system (Silversmith).**
- Assist with **scheduling, customer complaints, and water department documentation.**



BIRCH RUN TOWNSHIP

C. Additional Administrative Responsibilities

- Maintain **BS&A software systems for billing and accounts payable.**
- Maintain **Township security systems (cameras, door locks, time clock, etc.).**
- Assist with **budget creation and purchasing schedules.**
- Maintain **Township dumpster contracts and phone systems.**
- Coordinate with Zoning department for **filing, packet creation, and document management.**
- Coordinate with Clerk department for filing, packet creation, and document management.
- Coordinate with the Treasurer department for filing, packet creation, and document management.

Qualifications

To perform this job successfully, an individual must be able to perform each essential function satisfactorily. The preferred qualifications listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

1. High School diploma or GED.
2. Minimum of one (1) year of office management experience (municipal setting preferred).
3. Thorough knowledge of filing system procedures and practices, office procedures and modern office equipment.
4. Ability to independently organize and schedule assigned work to meet established deadlines in an environment when interruptions may occur frequently.
5. BS&A Program Experience preferred
6. Must pass background check

Competencies

To perform the job successfully, an individual should demonstrate and/or possess the following competencies:

Stellar customer service and public relations skills	High-energy
Self-starter	Interpersonal skills
Ability to speak and write clearly and concisely	Organizational skills
Strong time management skills	Teamwork
Ability to analyze, research, and interpret data	Confidentiality
Ability to work with a diverse group of people	Flexibility
Creative thinking	Problem solving skills

BIRCH RUN TOWNSHIP



Language Skills

Ability to read and comprehend instructions, correspondence, and memos. Ability to effectively write simple correspondence. Ability to appropriately respond to common inquiries or complaints from customers.

Mathematical Skills

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals.

Reasoning Ability

Ability to apply common sense understanding to carry out detailed but uninvolved written or oral instructions.

Computer Skills

To perform this job successfully, an individual should have basic computer skills and knowledge of Microsoft Office Suite products, emails, group messaging, data collection, program management, and other database and spreadsheet programs.

Physical Demands

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

This position requires **prolonged sitting and/or standing** during office hours. The employee must have the ability to move around the office, retrieve files from storage, and interact with customers at the counter. Occasional lifting of office supplies (up to **20 lbs.**) may be required. Work is performed in an **indoor office environment** with **light to moderate noise levels**.

Work Environment

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

The noise level in the work environment is usually light to moderate.

Birch Run Township Equal Opportunity Employer Statement

Birch Run Township is an equal opportunity employer. Birch Run Township prohibits discrimination and harassment of any type and affords equal opportunity to employees and applicants without regard to race, color, religion, sex, national origin, age, pregnancy, disability, genetic information, or any other protected class.



BIRCH RUN TOWNSHIP

Disclaimer - Other Duties

Please note this job description is not designated to cover or contain a comprehensive listing of activities, duties, or responsibilities that are required of the employee for this job. Duties, responsibilities, and activities may change at any time, with or without notice.

Pay Scale For This Position

The pay scale for this position will be determined by experience and education by the Township Board at the time of application.

Signatures

Birch Run Township Supervisor: _____ **Date:** _____

Employee Printed Name: _____ **Date:** _____

Employee Signature: _____ **Date:** _____

(Employee signature above constitutes employee's understanding of requirements, essential functions, and duties of this position)

Background Check Authorization

Section 1. Required: Applicant Information (All sections completed by the applicant, the person receiving a background check). The requesting entity will submit the applicant's information through the online Background Check System (BCS).					
1. REQUIRED: LEGAL NAME AS IT IS LISTED ON YOUR DRIVER'S LICENSE OR GOVERNMENT ISSUED PHOTO IDENTIFICATION (ID)					
FIRST	MIDDLE	LAST			
2. REQUIRED: OTHER ALIAS FIRST, MIDDLE, AND LAST NAMES YOU HAVE USED					
FIRST	MIDDLE	LAST			
3. REQUIRED: DATE OF BIRTH (MM/DD/YYYY)		4. REQUIRED: PHONE NUMBER (INCLUDE AREA CODE)		5. EMAIL ADDRESS	
		7A. REQUIRED: VALID DRIVER'S LICENSE #		7B. REQUIRED: ISSUING STATE	
8. REQUIRED: HAVE YOU LIVED IN ANY STATE OR COUNTRY OTHER THAN STATE OF MICHIGAN WITHIN THE LAST THREE YEARS (36 MONTHS)? <input type="checkbox"/> Yes <input type="checkbox"/> No					
9. REQUIRED: CURRENT ADDRESS					
STREET		APT. NO.	CITY	STATE	ZIP CODE
10. REQUIRED: PREVIOUS ADDRESS					
STREET		APT. NO.	CITY	STATE	ZIP CODE
Section 2. Required: Self-Disclosure Questions for ALL convictions and pending charges from any state or jurisdiction. You must answer Questions 11A through 14. Attach Page 2 if you have crimes or pending charges. SEE INSTRUCTIONS.					
11A. Have you been convicted of any crime? If <u>yes</u> , complete Page 2, Section 3..... <input type="checkbox"/> Yes <input type="checkbox"/> No					
11B. Do you have charges (pending) against you for any crime? If <u>yes</u> , complete Page 2, Section 4..... <input type="checkbox"/> Yes <input type="checkbox"/> No					
12. Has a court or state agency ever issued you an order or other final notification stating that you have sexually abused, physically abused, neglected, abandoned, or exploited a child, juvenile, or vulnerable adult? .. <input type="checkbox"/> Yes <input type="checkbox"/> No					
13. Has a government agency ever denied, terminated, or revoked your contract or license for failing to care for children, juveniles, or vulnerable adults; or have you ever given up your contract or license because a government agency was taking action against you for failing to care for children, juveniles, or vulnerable adults? <input type="checkbox"/> Yes <input type="checkbox"/> No					
14. Has a court ever entered any of the following orders against you for abuse, sexual abuse, neglect, abandonment, domestic violence, exploitation, or financial exploitation of a vulnerable adult, juvenile, or child? . <input type="checkbox"/> Yes <input type="checkbox"/> No					
<ul style="list-style-type: none"> • Permanent vulnerable adult protection order / restraining order, either active or expired, under RCW 74.34. • Sexual assault protection order under RCW 7.90. • Permanent civil anti-harassment protection order, either active or expired, under RCW 10.14. 					
<p>I am the person named above. If I do not tell the whole truth on this form, I understand I can be charged with perjury, and I may not be allowed to work with vulnerable adults, juveniles, or children. I understand and agree my signature in the box below means:</p> <ul style="list-style-type: none"> • I give Birch Run Township permission to check my background with any governmental entity and law enforcement agency. • My background check result may include prior self-disclosure information and fingerprint results that are contained in the Birch Run Township Background Check System and that this information will be reported as allowed by federal or state law. • If a final finding is identified, Birch Run Township will report only my name and that a final finding was identified on the background check result. 					
15. REQUIRED: SIGNATURE. YOUR PARENT OR GUARDIAN'S SIGNATURE IF YOU ARE UNDER 18.				16. REQUIRED: TODAY'S DATE (MM/DD/YYYY)	

Background Check Authorization

List of Crimes and Pending Charges

This page **MUST** be attached to Page One of the Background Check Authorization form if 11A or 11B are marked "Yes."

Important information about answering self-disclosure questions: Your answers to self-disclosure questions become part of your background check history and are stored in the DSHS database. It is recommended that you refer to charging papers, court records, or other official documents and that you list criminal convictions, pending charges, dates, and other information exactly as they are listed in those documents.

REQUIRED: PRINT YOUR NAME AS IT IS LISTED ON YOUR DRIVER'S LICENSE OR GOVERNMENT ISSUED PHOTO ID		
FIRST:	MIDDLE:	LAST:

REQUIRED: DATE OF BIRTH (MM/DD/YYYY)

Section 3. Question 11A. If you check **YES**, you must enter the crime name, degree (if any), state, conviction date, and crime information.

1. CRIME NAME	DEGREE (IF ANY)	STATE	CONVICTION DATE (MM/DD/YYYY)
---------------	-----------------	-------	------------------------------

Other crime information: Attempted Conspiracy Domestic Violence Solicitation With Sexual Motivation N/A

DESCRIPTION OF CRIME (REQUIRED WHEN CRIME IS COMMITTED OR CONVICTED OUTSIDE OF MICHIGAN STATE)
--

2. CRIME NAME	DEGREE (IF ANY)	STATE	CONVICTION DATE (MM/DD/YYYY)
---------------	-----------------	-------	------------------------------

Other crime information: Attempted Conspiracy Domestic Violence Solicitation With Sexual Motivation N/A

DESCRIPTION OF CRIME (REQUIRED WHEN CRIME IS COMMITTED OR CONVICTED OUTSIDE OF MICHIGAN STATE)
--

3. CRIME NAME	DEGREE (IF ANY)	STATE	CONVICTION DATE (MM/DD/YYYY)
---------------	-----------------	-------	------------------------------

Other crime information: Attempted Conspiracy Domestic Violence Solicitation With Sexual Motivation N/A

DESCRIPTION OF CRIME (REQUIRED WHEN CRIME IS COMMITTED OR CONVICTED OUTSIDE OF MICHIGAN STATE)
--

Section 4. Question 11B. If you check **YES**, you must enter the PENDING charge name, degree (if any), state, and crime information.

1. CRIME NAME	DEGREE (IF ANY)	STATE
---------------	-----------------	-------

Other crime information: Attempted Conspiracy Domestic Violence Solicitation With Sexual Motivation N/A

DESCRIPTION OF CRIME (REQUIRED WHEN CRIME IS COMMITTED OR CONVICTED OUTSIDE OF MICHIGAN STATE)
--

2. CRIME NAME	DEGREE (IF ANY)	STATE	CONVICTION DATE (MM/DD/YYYY)
---------------	-----------------	-------	------------------------------

Other crime information: Attempted Conspiracy Domestic Violence Solicitation With Sexual Motivation N/A

DESCRIPTION OF CRIME (REQUIRED WHEN CRIME IS COMMITTED OR CONVICTED OUTSIDE OF MICHIGAN STATE)
--