



Peter G. Crummev
Town Supervisor

TOWN OF COLONIE
DEPARTMENT OF PUBLIC WORKS
DIVISION OF PURE WATERS
347 Old Niskayuna Road
Latham, New York 12110

Telephone: (518) 783-2766 Ext 4
Fax: (518) 783-2883
www.colonie.org/departments/purewaters

Job Advertisement
Sanitary Engineer
01/27/2025

The Town of Colonie, a modern and growing community in the heart of the Capital District and Tech Valley and one of the largest townships in Upstate New York, seeks an experienced Sanitary Engineer for its Latham operations to continue our mission of protecting public health and the environment.

The Sanitary Engineer is responsible for technical engineering and administrative duties associated with the construction, operation, and maintenance of a major public sanitary sewer collection and treatment system including project management, system evaluations, regulatory reporting, budget preparation, and employee supervision.

Candidates must have a thorough knowledge of engineering relating to the design, operation and maintenance of sanitary sewer collection piping and pumping systems, and wastewater treatment plant physical, biological and chemical processes. Extensive experience in successfully managing multi-million dollar public works capital improvement projects, thorough knowledge of construction specifications, plans, codes, rules and regulations associated with the industry, and the ability to supervise, direct and inspect the work of others are required. Candidates must have demonstrated capabilities in completing detailed engineering studies, performing complex calculations, and preparing technical reports and recommendations. Geographic Information System, AutoCAD and Asset Management System proficiency is a plus.

Candidates must possess a Bachelor of Science Degree in Engineering AND six years engineering experience in wastewater collection and treatment system design, operation and maintenance including two years supervisory experience. Must be a Professional Engineer in New York State and must maintain registration during course of employment.

There is a three-step salary program. Starting salary is \$105,232 and the full pay at the end of the three-step salary program for 2025 is \$116,924. The increase amounts for the three-step salary program and additional contractual increases for 2026 and beyond will be determined by contract negotiations. This position includes excellent health insurance, vision and dental insurance, employee assistance program, sick and vacation leave policies, work boot and clothing provisions, flexible benefits plan, a voluntary deferred compensation plan and NYS Retirement Plan.

Interested candidates who meet the minimum qualifications are encouraged to submit an Application for Employment (available at www.colonie.org/civilservice) and resume to:

Personnel Officer
Town of Colonie
Memorial Town Hall
534 New Loudon Road
Latham, NY 12110.

Resumes without a signed application will not be considered.

An Equal Opportunity Employer

SANITARY ENGINEER

DISTINGUISHING FEATURES OF THE CLASS: Responsible for technical engineering and administrative duties in assisting the Sewer District Superintendent with the overall operation of the Town Sewer District. The engineering aspect pertains to the sewer collection system and wastewater treatment plant design, operation, and maintenance. The administrative duties pertain to supervising staff, assisting in budget preparation and various reporting requirements. Direct supervision is exercised over the Sewer Inspectors, and Senior Civil Engineering Technician. Direct supervision may be exercised over various staff temporarily assigned to assist with investigations. Responsible for District operations in the absence of the Sewer District Superintendent. The incumbent performs related work as required.

TYPICAL WORK ACTIVITIES:

Assists the Sewer District Superintendent with administration of the Sewer District operations and provides technical assistance as required;

Assists in master planning for sanitary sewer system improvements, expansions and rehabilitation;

Manages all technical, administrative and financial aspects of a major public infrastructure expansion and rehabilitation projects;

Manages consultants, engineers, architects, and contractors involving collection system and treatment plant modifications, expansions and rehabilitation projects;

Performs complex engineering calculations and prepares detailed design drawings for collection system rehabilitation and treatment plant expansion and improvements projects;

Negotiates with local, state and federal regulatory authorities and establishes protocols in compliance with regulatory requirements, including modification of regulatory permits;

Supervises and performs review of commercial developments and residential subdivision proposals for the extension of, and connection to, the public sanitary system;

Assists in the development of standards and specifications, procedures, protocols and policies concerning district operations and regulations;

Responsible for assessing customers' needs and assists in improving customer service and relations; establishes programs related to these needs;

Analyzes collection and treatment systems for operational efficiency and prepares recommendations to the Superintendent to increase efficiency and performance;

Develops specifications for procurement of goods and services including preparation of bid proposals, negotiations with bidders and recommendation of bid awards;

Manages the Geographic Information System (GIS) development and management; including sewer collection system asset inventory and preventative maintenance programs;

Maintains technical materials and assists with technical research and guidelines on current issues;

Participates in union negotiations as required and administers collective bargaining agreements;

Responds to emergencies during and after normal work hours.

FULL PERFORMANCE KNOWLEDGE, SKILLS, ABILITIES AND PERSONAL CHARACTERISTICS: Thorough knowledge of engineering relating to the design, operation and maintenance of sanitary sewer collection system and wastewater treatment plant physical, biological and chemical processes; Thorough knowledge of methods, equipment and terminology used in wastewater collection and treatment; Thorough knowledge of construction specifications, plans, codes, rules and regulations; ability to supervise, direct and inspect work on projects; ability to make involved engineering computations, prepare engineering records and technical reports; Ability to manage multiple projects and staff; Ability to supervise in a manner conducive to full performance while maintaining high morale; Mechanical aptitude; Strong organizational, interpersonal and management skills; Ability to meet deadlines and lead effectively under pressure in emergencies; Good judgment; Reliability; Proficiency utilizing computer hardware and software systems associated with wastewater treatment including knowledge and use of AutoCAD.

MINIMUM QUALIFICATIONS: Graduation from a regionally accredited or a New York State registered college or university with a Bachelor of Science in Engineering; AND a minimum of six (6) years of engineering experience in/or related to the wastewater collection system and treatment plant design, operation, and maintenance, including two (2) years of supervisory experience. Must be a registered Professional Engineer in New York State and must maintain registration during the course of employment.

Town of Colonie
Personnel Officer
Amended 12/16/14
Amended 1/31/23

TOWN OF COLONIE

CIVIL SERVICE DEPARTMENT
APPLICATION FOR EXAMINATION OR EMPLOYMENT
COLONIE MEMORIAL TOWN HALL, 534 Loudon Road
Latham, New York 12110



CIVIL SERVICE USE ONLY
APPLICATION NO. Date Rec'd
Fee Waiver (note log)
Approved Conditional Disapproved
PST/Date By:

Position Title Examination Number (If applicable)

Type of Position: Full Time Part Time Seasonal

This application is part of your examination. Check to make sure that all appropriate questions have been answered. An incomplete application may result in its disapproval. Attach additional sheets if necessary in order to give complete and detailed information. All statements are subject to verification.

Are you applying with other civil service agencies for examinations that are being held on the same date? Yes No If yes, please attach a crossfiler application and list all examinations. (see forms on www.colonie.org/civilservice website)

1. Name, Mailing Address and Phone (Please Print)

Last Name First Name M.I.

Street Address

Mailing Address

City State Zip Code

Home Phone: Other: Specify (work, cell, etc.)

2. SOCIAL SECURITY NUMBER:

3. Are you now, or have you ever been enrolled in a public retirement system? Yes No

4. Are you under 18? Yes No If yes, or if minimum and/or maximum age limits are established for the position applied for, enter your date of birth here:

Mo. Day Year

5. If a motor vehicle license is required for the position for which you are applying, the Town must review your driving record. I understand that by signing this application I am giving the Town of Colonie permission to obtain my NYS DMV records, including my personal information and driving record, from time to time to evaluate my application and for other permissible purposes.

Driver's License # Issuing State: Class Date of Expiration

6. SPECIAL ARRANGEMENTS (Optional-See Instruction D on pg4) Military Member Person with Disability Religious Observer

7. If you are not a citizen of the United States, do you have the legal right to accept employment in the United States? Yes No (Non-citizens may be required to produce 1-151 or 1-551 Alien Registration Cards at time of appointment)

8. State your actual permanent legal residence and indicate for how long you have resided there continually, up to and including the date of this application.

Table with columns: City or Village of, Name, Years, Months. Rows for Town of, County of, State of.

9. Check appropriate box to the right of each question: A. Were you ever dismissed or discharged from any employment for reasons other than lack of work or funds? B. Did you ever resign from any employment rather than face dismissal? C. Did you ever receive a discharge from the Armed Forces of the United States which was other than "Honorable" or which was issued under other than Honorable circumstances? D. Have you ever been convicted of any crime (felony or misdemeanor)? E. Are you now under charges for any crime? If you answered "Yes" to any of the Questions 9A-E above, you may give specifics under "Remarks" on page 4 of this application. If you elect not to provide specifics, however, or if such explanation is insufficient, you may be required to submit further information. None of the above circumstances represents an automatic bar to employment. Each case is considered and evaluated on individual merits in relation to the duties and responsibilities of the position(s) for which you are applying.

10. VETERANS CREDITS (See Instruction E, page 4) If for this examination, you wish to claim additional credit as an honorably discharged veteran, or apply for veteran's credits and be conditionally granted such credit, check the appropriate box below and answer questions A-D. You must submit a Veterans Credit Application (ask for one in our office or download off our webpage along with copy of DD214) Non-disabled War Veteran Disabled War Veteran Active Duty Currently in Armed Forces, describe situation on back page.

DO NOT COMPLETE THIS SECTION UNLESS YOU: 1. Wish to claim War Time Veterans Credits, AND 2. Have NOT used veterans credits for appointment to a position in NY State or local government employment since January 1, 1951.

EXTRA CREDITS FOR WAR TIME VETERANS YOUR ANSWERS MUST BE 'YES' TO BE ELIGIBLE FOR ADDITIONAL CREDITS.

- A. I received a discharge which was honorable or I was released under honorable circumstances from the Armed Forces of the United States. (The "Armed Forces of the United States" means the Army, Navy, Marine Corps, Air Force and Coast Guard, including all components thereof, and the National Guard when in the service of the United States pursuant to call as provided by law on a full-time active duty basis other than active duty for training purposes.) Yes No
B. I served on an active duty basis other than active duty for training purposes during one or more of the following Time of War periods: In the Armed Forces: Aug. 2, 1990 to the date when hostilities end: Feb. 28, 1961 to May 7, 1975; June 27, 1950 to Jan. 31, 1955; Dec 7, 1941 to Dec. 31, 1946; Or earned the Armed Forces, Navy or Marine Corps expeditionary medal for service in: (Panama) Dec. 20, 1989 to Jan.31, 1990; (Lebanon) June 1, 1983 to Dec.1, 1987; (Grenada) Oct.23, 1983 to Nov.21, 1983; Or in the U.S. Public Health Service; June 26, 1950 to July 3, 1952; July 29, 1945 to Sept.2, 1945 Yes No
C. I am a United States citizen or an alien lawfully admitted for permanent residence. Yes No
D. I am a New York State resident Yes No

11. Read the exam announcement for educational requirements, if any. If specialized coursework is required, attach a copy of the transcript or a list of the required courses and the number of credit hours you completed.

Have you graduated from high school? Yes No Name & location of high school _____

If not, what grade did you complete? _____

If you have a high school equivalency diploma, indicate issuing Government Authority: _____
 Number and/or date of issue: _____

College/University/Professional or Technical School(s)

Name of School and City in which located	Dates of Attendance (Month/Year)		Type of course or major	Number of college credits received	Did you graduate	Type of degree received	Date degree received or expected
	From	To					

Do you have a license, certificate, or other authorization to practice trade or profession? Yes No

Name of trade or profession _____ Granted by (licensing agency) _____ City or State of _____

Date license first issued: _____ Licensed: From _____ To _____

Date EMT license first issued: _____ Paramedic License first issued _____

12. **Description of Experience:** Beginning with the **most recent**, describe below in detail all employment. If the examination announcement states that volunteer or unpaid experience is acceptable as qualifying, describe it in the same way as paid work, showing its volunteer nature in the "earnings" box. You are responsible for submitting an accurate, adequate and clear description of your experience. Omissions and vagueness will NOT be interpreted in your favor. Under "Duties" for each employment describe the nature of the work personally performed by you, with estimated percentage of time spent on each type of work. State size and kind of working force, if any supervised by you and the extent of such supervision.

FIRM NAME:	YOUR EXACT TITLE:	LENGTH OF EMPLOYMENT: From: Mo: Yr: To: Mo: Yr:	CIRCLE ONE: FT / PT / Volunteer Number of hours worked weekly: _____
FIRM ADDRESS:	TYPE OF BUSINESS:	SUPERVISOR'S NAME	SUPERVISOR'S TITLE:
DUTIES:			

FIRM NAME:	YOUR EXACT TITLE:	LENGTH OF EMPLOYMENT: From: Mo: Yr: To: Mo: Yr:	CIRCLE ONE: FT / PT / Volunteer Number of hours worked weekly: _____
FIRM ADDRESS:	TYPE OF BUSINESS:	SUPERVISOR'S NAME	SUPERVISOR'S TITLE:
DUTIES:			

FIRM NAME:	Your Exact Title	Length of Employment: From: Mo: Yr: To: Mo: Yr:	Circle One: FT / PT / Volunteer Number of hours worked weekly: _____
FIRM ADDRESS:	TYPE OF BUSINESS:	SUPERVISOR'S NAME	SUPERVISOR'S TITLE:
DUTIES:			

A resume is not a substitute. If more space is needed or you need to provide additional information, please use this space.

13. Whether or not you are claiming veterans credits for examination, use this space to describe military service.

Dates of Service: _____ Branch of Service: _____

Rank at Discharge: _____

Duties, Schools or Special Training: _____

14. Are you eligible to claim an exempt volunteer fire fighter status as defined by NYS General Municipal Law Article 10: ____ Yes ____ No

If so, please list location where you volunteer: _____ Dates of service _____

Name of the volunteer company that issued your certificate: _____

THIS AFFIRMATION MUST BE COMPLETED

I affirm under penalties of perjury that all statements made on this application (including any attached papers) are true. I understand that all statements made by me in connection with this application are subject to investigation and verification and that a material misstatement or fraud may disqualify me from appointment and/or lead to revocation of my appointment.

X _____ Date _____
Signature of Applicant

Please print any other last name by which you are or have been known. _____

INSTRUCTIONS AND INFORMATION

A. ANNOUNCEMENT OF EXAMINATION

Before filling out your application, read carefully the announcement for this examination.

When completing your application be sure to enter, at the top of page 1, the examination number which identifies the examination for which you are filing.

B. ADMISSION TO EXAMINATION

Do not interpret a notice to appear for, or actual participation in the examination, to mean that you have been found to meet fully the announcement requirements. Depending on the time available before an examination, applicants may be admitted to the examination on the basis of statements made on the application or conditionally, without prior review of the application. Such statements may not be reviewed and/or verified until after the examination is held. At that time those candidates not meeting the examination is held. At that time those candidates not meeting the requirements will be disqualified and notified of such disqualification. Those candidates who are subsequently disqualified after taking the test will NOT be notified of their score. Call or write this office immediately if you do not receive a notice within three days of the date of examination informing you whether or not you are to be admitted to the examination.

C. CHANGE OF ADDRESS

Notify this office immediately of any change of address. When writing, give the year, number, and title of examination. Use "change of address notification form" on our webpage.

D. SPECIAL ARRANGEMENTS

If you need special arrangements because you are a religious observer or a person with a disability, or military member (require special arrangements in order to participate in the examination), you must EITHER

1. Check the appropriate box in #6 and indicate the special arrangement you require in the REMARKS section below;
OR
2. Write to this office no later than the last date of filing for this examination. Your request must include the examination date, number and title, and the type of special arrangements required.

E. VETERANS CREDIT

If you are making a claim for veteran's credits with this application, be sure you read the following information very carefully: Complete a Veteran's Credit Application (obtained in our office OR on our webpage under "forms") along with discharge documents. Any claim for additional credits as a disabled or non-disabled war veteran for the examination should be made with this application. If you are claiming veteran's credits, you must check appropriate category in #10 and answer questions #10A-D. Failure to do so accurately and completely may result in a denial of your claim. If you are claiming credits as a **disabled war veteran** you must, **in addition** to meeting the requirements as indicated by "yes" answer to questions #10A-D be certified by the U.S. Dept of Veteran's Affairs for a service-connected disability rated at ten(10) percent or more incurred during a "time of war" as indicated in #10B.

All claims and grants of veteran's credits are tentative and must be verified through inspection of discharge papers and other related documents as necessary prior to the establishment of the eligible list. All statements you make in support of your claim for additional credits are subject to investigation and substantiation by this agency. In the event of subsequent disclosure of any material misstatement or fraud in this claim, your appointment may be rescinded and you may be disqualified from further appointment from any eligible list on which you have been granted additional credits as a result of such material misstatement or fraud.

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

It is the policy of the Town of Colonie to provide accommodation in testing to individuals with disabilities and religious observers and to provide for and promote equal opportunity in employment, compensation and other terms and conditions of employment without discrimination because of age, race, creed, color, national origin, gender, sexual orientation, disability, marital status, military status, domestic violence victim status or predisposing genetic characteristics.

PERSONAL PRIVACY PROTECTION LAW NOTIFICATION

The information which you are providing on this application is being requested pursuant to §50.3 of the NYS Civil Service Law for the principal purpose of determining the eligibility of applicants to participate in the examination(s) for which they have applied. This information will be used in accordance with §96(1) of the Personal Privacy Protection Law, particularly subdivision (b), (e), and (f). Failure to provide this information may result in disapproval of the application. This information will be maintained by the Town of Colonie.

REMARKS: