



DEPARTMENT OF MOTOR VEHICLES
POSITION DUTY STATEMENT

365-8610-003

Division: Investigations Division	Classification Title: 8610 Investigator
Branch: Special Operation Command Branch	Working Title: Investigator
Unit: Office of Internal Affairs - North	Tenure/Timebase: Permanent Fulltime
Position City: Sacramento	Position County: Sacramento County
Position Number: 365-8610-003	CBID/Bargaining Unit: R07
Conflict of Interest Classification: Yes This position is designated under the Conflict of Interest Code. This position is responsible for making or participating in the making of governmental decisions that may potentially have a material effect on personal financial interests. The appointee is required to complete Form 700 within 30 days of appointment. Failure to comply with the Conflict of Interest Code requirements may void the appointment.	
Medical Evaluation: Yes	Bilingual Language: Unknown
Sensitive Position: Yes	DMV Employee Pull Notice: Yes
Fingerprint/Live Scan: Yes	Professional License: No
Work Week Group: 2	Effective Date:

Direction Statement and General Description of Duties: In accordance with Penal Code Section 13651, the incumbent shall conduct their duties with an emphasis on community interaction and collaborative problem solving. In accordance with Vehicle Code section 1655 and Penal Code Section 830.3, and under direction of the District Supervisor (Supervising Investigator I), this position requires field work greater than 50% and is responsible for the following activities:	
Percentage and Essential/Marginal Functions:	
50%	Conducting Investigations (E) Conducts complex and sensitive confidential investigations, relating to internal security, employee misconduct, document integrity, public funds, and other sensitive and



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	confidential matters. Serves warrants of arrest, conducts search warrants, and testifies as State's witness in criminal proceedings. Serves as liaison between other state and federal agencies in gathering, exchanges, and dissemination of investigative data.
30%	Reports (E) Prepares prosecution summaries and administrative accusations; files complaints with the Attorney General, District Attorneys, and Department Attorneys for criminal or administrative proceedings.
15%	Correspondence (E) Prepares documents and correspondence relative to the unit's assigned activities; prepares documents identifying risk management related deficiencies and/or record corrections. Accurately tracks and documents all case activity in the Case Management System.
5%	Other Duties (M) Acts for the Supervising Investigator when directed. Performs other job-related duties as required.

Supervision Received: The Investigator is under direction of the Supervising Investigator I, but may receive direction for the Supervising Investigator II, Deputy Chief, or Chief.

Supervision Exercised and Staff Numbers: Does not provide supervision to others, but may work as a lead / mentor, guiding other staff in completing tasks.

Physical Requirements: Work both indoors and outdoors. While indoors, the temperature and humidity is reasonably controlled, but while out of doors, the employee is exposed to climatic conditions. May occasionally be exposed to toxic materials or chemicals. While driving, the employee is exposed to dust and fumes. Exposed to gun powder and fumes during quarterly weapons qualifications and periodic tear gas training. May be exposed to crisis/trauma situations.

Special Requirements: The employee must possess or have corrected to possess best visual acuity in each eye. All employees must be able to hear the conversational voice.

Personal Contacts: Will interact with departmental staff as well as the public by phone, email, in person,



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and mail as needed. Interactions may be general, confidential, sensitive, or informative.

EMPLOYEE ACKNOWLEDGMENT

I have read and understand the duties listed above and I certify that I possess essential personal qualifications including integrity, initiative, dependability, good judgment, and the ability to work cooperatively with others; and a state of health consistent with the ability to perform the assigned duties as described above with or without reasonable accommodation. (If you believe you may need to request reasonable accommodation to perform the duties of this position, discuss your request with your manager/supervisor who will engage with you in the interactive process.)

EMPLOYEE NAME	EMPLOYEE SIGNATURE	DATE

MANAGER/SUPERVISOR ACKNOWLEDGMENT

I certify this duty statement represents a current and accurate description of the essential functions of the position. I have discussed the duties of this position with the employee and provided the employee a copy of this duty statement

MANAGER/SUPERVISOR NAME	MANAGER/SUPERVISOR SIGNATURE	DATE