



POSITION DUTY STATEMENT

Division: Field Operations Division	Classification Title: 8734 Manager III DMV
Branch: Region VI	Working Title: Administrative Manager
Unit: Torrance	Tenure/Timebase: Permanent Fulltime
Position City: Torrance	Position County: Los Angeles County
Position Number: 608-8734-001	CBID/Bargaining Unit: S01
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: No	Bilingual Language: Unknown
Sensitive Position: No	DMV Employee Pull Notice: No
Fingerprint/Live Scan: Yes	Professional License: No
Work Week Group: 2	Date Approved: 05/26/2022

Direction Statement and General Description of Duties: Functions as an Administrative Manager of a Grade IV field office providing drivers license, vehicle registration and other services to the public. Under the direction of the office manager, performs all or combination of the following duties:	
Percentage and Essential/Marginal Functions:	
50%	(E) Daily Supervision and Cashiering Responsible for the daily operation of the field office through planning, organizing, assigning and directing the work of staff; including new program implementation, determining the accuracy and completeness of data entered into an automated system. Makes decisions on the more difficult problems requiring



POSITION DUTY STATEMENT

	interpretation and application of the law and departmental policy. Functional responsibility for the Control Room, Start Here Stations and Single Inventory Station, as well as direct supervision of the employees assigned to these areas. Performs tasks in control cashiering, registration, driver licensing and occupational licensing. Provides assistance in the office manager's absence by assuming responsibility and authority of the office.
15%	(E) Scheduling and Training Assists the office manager in planning and preparation for final selection and placement of personnel for the field office. Coordinates the vacation schedules and work schedules to ensure prompt, courteous and complete service to the public. Monitors training. Makes or recommends changes in work methods, work standards staffing and equipment requirements, and the use of intermittent and seasonal help.
10%	(E) Equipment Monitoring Responsible for general office and automated equipment, including installation, ongoing and preventative maintenance, and relocation. Responsible for following approved procedures in identifying and initiating any needed corrections or improvements to the facility. Ensures that appropriate day-to-day facility maintenance is provided.
10%	(E) Office Liaison and Security Personnel Responsible for security procedures for accountable items, inventory, change fund and fees received, money chest combination and exterior door keys. Provides second level of review and approval for sensitive changes made to the headquarters data base. Serves as a liaison between field office personnel and the Network Control Center, for resolutions of immediate problems related to automation and will be a resource in resolving problems which are not of an immediate nature.



POSITION DUTY STATEMENT

10%	(E) Quality Review Implements updates/program/procedural changes to the automated system and advises field office personnel of same. Reviews office documents, reports, funds received and bank deposits to ensure that correct procedures are being followed. Reviews daily work output for quality and quantity. Continually evaluates office methods and procedures for maximum efficiency and makes adjustments as necessary. Prepares and maintains appropriate manually or electronically generated records and reports concerning the operations of an office and special projects.
5%	(M) Miscellaneous Other duties as required.

Supervision Received: The Manager III, Department of Motor Vehicles (DMV), Administrative Manager, performs tasks under the general direction of the Office Manager, DMV.

Supervision Exercised and Staff Numbers: Allocated to supervise a staff of 40-55 employee's. Typical reports consist of Manager I's, Senior Motor Vehicle Technicians, Control Cashiers, Motor Vehicle Representatives, Licensing Registration Examiners, and Custodians, .

Physical Requirements: Works in an office setting assisting both internal and external customers with DMV related matters. May sit for extended periods of time.

Special Requirements: May be required to drive a motor vehicle in the conduct of State business. May be required to work after hours based on business needs and workload fluctuations.

Personal Contacts: Will interact with staff, peers, other departmental employees, and the public in person, by telephone, e-mail, 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.)



DEPARTMENT OF MOTOR VEHICLES
POSITION DUTY STATEMENT

608-8734-001

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



POSITION DUTY STATEMENT

Division: Field Operations Division	Classification Title: 8734 Manager III DMV
Branch: Region VI	Working Title: Administrative Manager
Unit: Torrance	Tenure/Timebase: Permanent Fulltime
Position City: Torrance	Position County: Los Angeles County
Position Number: 608-8734-001	CBID/Bargaining Unit: S01
Conflict of Interest Classification: 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:	Bilingual Language: Unknown
Sensitive Position:	DMV Employee Pull Notice: No
Fingerprint/Live Scan: Yes	Professional License:
Work Week Group:	Date Approved: 05-26-2022

Direction Statement and General Description of Duties:	
Percentage and Essential/Marginal Functions:	
%	

Supervision Received:



DEPARTMENT OF MOTOR VEHICLES
POSITION DUTY STATEMENT

608-8734-001

Supervision Exercised and Staff Numbers:
Physical Requirements:
Special Requirements:
Personal Contacts:

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