

# PHYSICAL REQUIREMENTS

**JOB TITLE:** Parts Clerk

**MACHINES, TOOLS, EQUIPMENT, WORK AIDS USED:**

Reports, work orders, office machines, ladders, small tools, parts (vehicles, light equipment, heavy equipment).

**MATERIALS AND/OR PRODUCTS HANDLED:**

Parts, anti-freeze, oil, hydraulic fluid, solvent, fuels.

## WORK ENVIRONMENT

**PRIMARY WORK SITE: (AMOUNT IN %)**

**INSIDE:** 85%

**OUTSIDE:** 15%

**BOTH:**

**TEMPERATURE FACTORS:**

☒ EXTREME COLD WITH

☐ OR WITHOUT

TEMPERATURE CHANGES

☒ EXTREME HEAT WITH

☐ OR WITHOUT

TEMPERATURE CHANGES

☒ EXTREME WET OR HUMID WITH

☐ OR WITHOUT

TEMPERATURE CHANGES

**NOISE FACTORS:**

SUFFICIENT NOISE LEVELS WHICH INTERRUPT CONVERSATION

☐ NOT A FACTOR

☐ CONTINUAL

☒ INTERMITTENT

**VIBRATION:**

BODY STRAIN FROM REPEATED MOTION OR SHOCK

☐ NOT A FACTOR

☐ CONTINUAL

☒ INTERMITTENT

**HAZARDS:** Heavy items, acids, solvent, anti-freeze, oil and fuel, cuts, and abrasions

**AIR QUALITY FACTORS:**

☒ FUMES

☒ DUSTS

☒ GASES

☒ ODORS

☒ MISTS

☒ POOR VENTILATION

☐ NOT A FACTOR

**WORKING SURFACE:**

☒ EVEN

☒ CARPETED

☒ FLAT/HARD

☒ INCLINED/RAMPS

☒ UNEVEN

☒ STAIRS

☒ LADDERS

☒ CATWALKS, SCAFFOLDS

☒ DRY

☒ WET

☒ GREASE

☒ DUST ☒ NATURALGROUND

**REALTIONSHPIS WITH CO-WORKERS:**

☒ WORKS ALONE

☒ WITH DIRECTION

☒ WORKS WITH A GROUP

☒ WITHOUT DIRECTION

☒ WORKS WITH A SELECT TEAM

MOBILITY FACTORS					
WALK:	25%	CLIMB:	10%	CRAWL:	5%
				RUN:	
STAND:	25%	SIT:	25%	CROUCH:	5%
				KNEEL :	5%
				PRONE:	
SPECIFIC MOVEMENTS					
KEY: O = OCCASIONALLY		F = FREQUENTLY		C = CONSTANTLY	
TRUNK:					
<input type="checkbox"/> <sup>F</sup> BEND		<input type="checkbox"/> <sup>F</sup> TWIST/ROTATE		<input type="checkbox"/> <sup>F</sup> PUSH/PULL # OF LBS <sup>100</sup>	
<input type="checkbox"/> <sup>C</sup> CARRY # OF LBS <sup>100</sup>		FOR A DISTANCE OF <sup>100</sup> FT +			
ARMS:					
<input type="checkbox"/> <sup>F</sup> REACH		<input type="checkbox"/> <sup>C</sup> WORK WITH ARMS EXTENDED		<input type="checkbox"/> <sup>C</sup> ARMS BENT	
<input type="checkbox"/> <sup>F</sup> CARRY # OF LBS <sup>50</sup>		FOR A DISTANCE OF <sup>100</sup> FT +			
<input type="checkbox"/> <sup>F</sup> PUSH/PULL # OF LBS <sup>75</sup>					
<input type="checkbox"/> <sup>C</sup> LIFT FROM FLOOR TO WAIST # OF LBS <sup>100</sup>		<input type="checkbox"/> <sup>C</sup> TWIST/ROTATE			
<input type="checkbox"/> <sup>O</sup> FROM WAIST TO OVERHEAD # OF LBS <sup>50</sup>					
<input type="checkbox"/> <sup>O</sup> HORIZONTALLY # OF LBS <sup>25</sup>					
LEGS:					
<input type="checkbox"/> <sup>F</sup> LIFT # OF LBS <sup>100</sup>		<input type="checkbox"/> <sup>F</sup> BALANCE		<input type="checkbox"/> <sup>C</sup> TWIST/ROTATE	
<input type="checkbox"/> <sup>F</sup> PUSH/PULL # OF LBS <sup>75</sup>		<input type="checkbox"/> <sup>O</sup> FOOT CONTROL			
HANDS:					
<input type="checkbox"/> <sup>F</sup> GROSS DEXTERITY		<input type="checkbox"/> <sup>C</sup> FINGER DEXTERITY		<input type="checkbox"/> <sup>F</sup> GRASP/MANIPULATE	
<input type="checkbox"/> <sup>F</sup> SPEED REQUIRED		<input type="checkbox"/> <sup>C</sup> BILATERAL COORDINATION			
<input type="checkbox"/> <sup>F</sup> EYE/HAND COORDINATION		<input checked="" type="checkbox"/> DOMINANCE		<input type="checkbox"/> RT <span style="margin-left: 100px;"><input type="checkbox"/> LT</span>	
COMMENTS ON PHYSICAL REQUIREMENTS:					
Physical requirements are a must, eyesight, two hands, two legs, two feet, must be able to bend, kneel, crouch and lift over head.					