



CITY OF

savannah

Recruiter: Kenneth Lucas

Processing Start Date: 8-30-2017

APPLICATION PROCESSING LIST

Applicant Name: Todd Desautels # 63446

Position Title: Property Maintenance Administrator

Department Name: Property Maintenance Department #: 7110

Requisition #: 1604973 Position #: 7110-1635-001

Former Employee? YES NO

If yes, date employee file was requested: _____ Former Employee #: _____

Applicant Authorization Forms Complete? YES NO Recruiter Initials: KL

****All required forms (authorizations, employment history form, application) must be complete and attached to this form before background is started.**

(Recruiter Check All that Apply)

REQUIRED

- Criminal History
- MVR - Georgia Out of State (Circle One)
- Employment Verification
- Sex Offender Check
- Credit Check

COMPLETED DATE/INITIALS

9/1/8
9/1/8
9/1/17

CIRCLE ONE

PASS FAIL
PASS FAIL
PASS FAIL
PASS FAIL
PASS FAIL

Background Check Notes: _____

- Drug Screen Res _____ PASS FAIL
- City of Savannah Medical Screening (Regular Emps) _____ PASS FAIL
- Outside Agency Medical Screening (Plant Operator Trainee) _____ PASS FAIL
- Outside Agency Medical Screening (Communications Officer) _____ PASS FAIL
- Old Employee File Merged with New _____
- In-processing Paperwork/Employee Badge _____
- New Employee Orientation/Harassment Training _____
- NEO Date _____ Harassment Training Date _____
- Personnel Action _____

Notes: 9-18-2017
60,588.00 9

CITY OF SAVANNAH SEPARATION CLEARANCE CHECKLIST

Complete this checklist and fax it within two (2) days of employee's separation (or upon receipt of all City property) to Payroll and Human Resources for timely processing of final pack check and pension refund. Mail the employee the original document. The employee **WILL NOT** be issued a pension refund check until all required items have been received/completed.

EMPLOYEE NAME: Todd Desautels Employee No.: 63416

MAILING ADDRESS [REDACTED] Privacy Information
(Number/Street/Apartment) (City, State, Zip Code)

DEPARTMENT NAME: Code Compliance SEPARATION DATE: 5/12/2022

Check Appropriate Column Below and Sign/Date

	Received/Completed	Not Applicable	Dept. Representative's Signature and Date
*City Separation Record	5/13/22		Lamisha Ettl
*DOL Separation Notice <i>(Indicate reason for termination in #4 on form)</i>	5/13/22		Lamisha Ettl
*Copy of Resignation Letter			
Equipment/Manuals/Uniforms/Etc. (Attach additional sheet if necessary) <i>(List equipment/uniforms/etc. NOT returned & cost below)</i>	N/A		Lamisha Ettl
Online Exit Interview Survey <i>(Contact HR for Link to Survey)</i>	5/13/22		Lamisha Ettl
Logo Items – Payroll Deductions: Check for Balance Due	N/A		Lamisha Ettl
Employer Assisted Home Purchase Program (EAHPP) Down Payment	N/A		Lamisha Ettl
Management Development Program (MDP)	N/A		Lamisha Ettl
Remove name from Authorized Signature List – notify Finance at 651-6429 <i>emailed</i>	5/13/22		Lamisha Ettl
Assignments	N/A		Lamisha Ettl
Delete computer log-in - notify IT			
Keys <i>1-004 Vault Key 1-Office Key</i> <i>1-truck key 6704</i>	5/13/22		Lamisha Ettl
HR Separation Information Memo	5/13/22		Lamisha Ettl
Deactivate ID Photo			
Financial claims (Travel Advances, etc.)	N/A		Lamisha Ettl
Credit Cards	N/A		Lamisha Ettl
Fuel Cards	N/A		Lamisha Ettl
List equipment/uniforms NOT returned and cost:			
<p>NOTE: The Pension Refund Request form and ICMA Withdrawal Packet may be picked up in Human Resources by the separating employee. If they do not pick them up prior to separation date, the documents will be mailed to the employee by HR.</p>			

*Distribution: Original to Employee; copies faxed to Human Resources (525-1750) and Payroll (644-5962) within 2 days of separation for timely processing of final pay check, pension refund, and cancellation of medical/dental benefits.

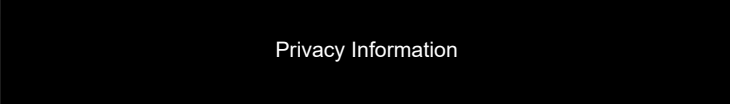
CITY OF SAVANNAH
SEPARATION RECORD

Employee Name: Todd Desautels

Date: 05/13/2022

Employee #: 63416 Position Control #: 31101835001

Dept. #: 3110

Mailing Address: 
(City) (State) (Zip code)

Effective Date of Separation: 05/12/2022

FLSA Status: Exempt Non-Exempt
(Select one)

Resignation in good standing:

- Other employment (ROE) Family related (RFAM)
- Further education/return to school (RED) Relocation/move out of town (RREL)
- Other (ROTH) reason: Resigned

Resignation not in good standing (RNGS):

Insufficient notice Other reason: _____

Retirement: Regular (RT) Disability (RTD) Non-Occupational Disability (RTND)

Dismissed:*

- Unsatisfactory probation (DIUP)
- Violation of City/Dept. policies/rules (DIB) reason: _____
- Unsafe acts (DIC) reason: _____
- Attendance (DIA) reason: _____
- Other reason: _____

Job abandonment: (DJA) Failed to report to work or call in for 2 consecutive days.


Death (DE)


Other Reason: _____


Layoff:


- End of temporary position (TM)
- Reduction in force (LO)


Pay for the following accrued leave:

 Hours vacation (not eligible if employed less than 6 months)

 Hours extra/incentive

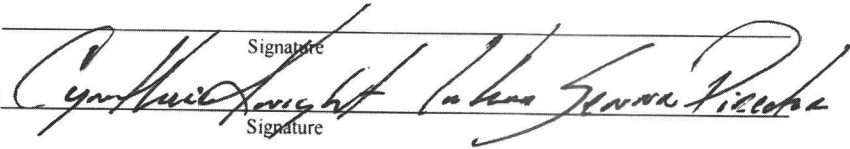
 Comp time (only FLSA Non-Exempt employees - **no payout for Exempt comp time**)

 Hours holiday

 Hours other: Specify _____

**Under the Civil Service Rules and Regulations you are notified that, if you are a non-probationary regular status Civil Service-covered employee, you have 10 days from receipt of this notice to appeal to the Civil Service Board by notifying the Human Resources Director in writing to this effect.*

Supervisor: _____
Signature

Dept. Head: 
Signature

Date

5/13/2022
Date



State of Georgia
Department of Labor

SEPARATION NOTICE

1. Employee's Name Todd Desautels 2. SSN Privacy Information

a. State any other name(s) under which employee worked. _____

3. Period of Last Employment: From 09/18/2017 To 05/12/2022

4. REASON FOR SEPARATION:

a. LACK OF WORK

b. If for other than lack of work, state fully and clearly the circumstances of the separation: Resigned

5. Employee received payment for: (Severance Pay, Separation Pay, Wages-In-Lieu of Notice, bonus, profit sharing, etc.)
(DO NOT include vacation pay or earned wages)

_____ in the amount of \$ _____ for period from _____ to _____
(type of payment)

Date above payment(s) was/will be issued to employee _____

IF EMPLOYEE RETIRED, furnish amount of retirement pay and what percentage of contributions were paid by the employer.
_____ per month _____ % of contributions paid by employer

6. Did this employee earn at least \$7,300.00 in your employ? YES NO If NO, how much? \$ _____
Average Weekly Wage _____

Employer's Name City of Savannah

Address P.O. BOX 1027
(Street or RFD)

City Savannah State GA | 31402
ZIP Code

Employer's Telephone No. 912-651-6484
(Area Code) (Number)

NOTICE TO EMPLOYER

At the time of separation, you are required by the Employment Security Law, OCGA Section 34-8-190(c), to provide the employee with this document, properly executed, giving the reasons for separation. If you subsequently receive a request for the same information on a DOL-1199FF, you may attach a copy of this form (DOL-800) as a part of your response.

Ga. D. O. L. Account Number _____

This is the number assigned to the employer by Georgia Department of Labor.

I CERTIFY that the above worker has been separated from work and the information furnished hereon is true and correct. This report has been handed to or mailed to the worker.

[Signature]
Signature of Official, Employee of the Employer or authorized agent for the employer

Interim Code Compliance Director
Title of Person Signing

05/13/2022
Date Completed and Released to Employee

NOTICE TO EMPLOYEE
OCGA SECTION 34-8-190(c) OF THE EMPLOYMENT SECURITY LAW REQUIRES THAT YOU TAKE THIS NOTICE TO THE GEORGIA DEPARTMENT OF LABOR FIELD SERVICE OFFICE IF YOU FILE A CLAIM FOR UNEMPLOYMENT INSURANCE BENEFITS.

SEE REVERSE SIDE FOR ADDITIONAL INFORMATION.

INSTRUCTIONS TO EMPLOYER FOR COMPLETION
OF THIS SEPARATION NOTICE

In accordance with the Employment Security Law, OCGA Section 34-8-190(c) and Rules pursuant thereto, a Separation Notice **must** be completed for each worker who leaves your employment, regardless of the reason for the separation. This notice shall be used where the employer-employee relationship is terminated and shall not be used when partial (DOL-408) or mass separation (DOL-402) notices are filed.

- Item 1. Enter employee's name as it appears on your records. If it is different from the name appearing on the employee's Social Security Card, report both names.
- Item 2. Enter the employee's Social Security Number. **Verify for correctness.**
- Item 3. Enter the dates of employee's most recent work period.
- Item 4. a. If the reason for separation is for "LACK OF WORK," check box indicated.
b. If the reason for separation is OTHER THAN "lack of work," give complete details about the separation in space provided. If needed, add a separate sheet of paper.
- Item 5. If any type payment, (i.e. Separation Pay, Wages-in-lieu of Notice, etc.) was made, indicate the type of payment and the period for which payment was made beyond the last day. Give the date on which the payment was/will be issued to the employee. **DO NOT** include vacation pay or earned wages.
- Item 6. Check the appropriate block YES or NO to indicate whether this employee earned at least \$7,300.00 in your employ. If you check NO, enter amount earned in your employ. Give average weekly wage (without overtime) at the time of separation.

Employer's Name. Give full name of employer under which the business is operated.

Address. Give full mailing address of the employer where communications are to be sent in regard to any potential claim.

Company's Georgia DOL Account Number. Your state DOL Unemployment Insurance Account Number as it appears on your Quarterly Tax and Wage Report, Form DOL-4.

Signature. This notice must be signed by an officer or employee of the employer or authorized agent for the employer, and this person's title or position held with the employer must be shown.

Date. This notice must be dated as of the date it is handed to the worker. If the employee is no longer available at the time employment ceases, mail this form (DOL-800) to the employee's last known address and enter date the form is mailed.

.....
OCGA Section 34-8-256(b)

PENALTY FOR OFFENSES BY EMPLOYERS. "Any employing unit or any officer or agent of an employing unit or any other person who knowingly makes a false statement or representation or who knowingly fails to disclose a material fact in order to prevent or reduce the payment of benefits to any individual entitled thereto or to avoid becoming or remaining subject to this chapter or to avoid or reduce any contribution or other payment required from an employing unit under this chapter or who willfully fails or refuses to make any such contributions or other payment or to furnish any reports required under this chapter or to produce or permit the inspection or copying of records as required under this chapter shall upon conviction be guilty of a misdemeanor and shall be punished by imprisonment not to exceed one year or fined not more than \$1,000.00 or shall be subject to both such fine and imprisonment. Each such act shall constitute a separate offense."

OCGA Section 34-8-122(a)

PRIVILEGED STATUS OF LETTERS, REPORTS, ETC., RELATING TO ADMINISTRATION OF CHAPTER. "All letters, reports, communications, or any other matters, either oral or written, from the employer or employee to each other or to the department or any of its agents, representatives, or employees, which letters, reports, or other communications shall have been written, sent, delivered, or made in connection with the requirements of the administration of this chapter, shall be absolutely privileged and shall not be made the subject matter or basis for any action for slander or libel in any court of the State of Georgia."

X

RECEIVED ON THIS DATE
MAY 23 2022
BY HUMAN RESOURCES

SEVERANCE AGREEMENT

THIS AGREEMENT made this 11 day of May by and
between Todd Desautels an adult individual who resides at Privacy Information
hereinafter referred to as "Desautels"

AND

The Mayor and Alderman of the City of Savannah, hereinafter referred to as "City".

WITNESSETH THAT:

WHEREAS, Desautels has been the Code Compliance Manager at the City for a
period of in
excess of 4 years, having commenced employment on 09/18/2017; and

WHEREAS, Desautels shall voluntarily terminate his employment with the
City, and

WHEREAS, both Desautels and the City are
desirous of affecting a Severance Agreement relative to the compensation and benefits to
be paid to compensation by the City,

and

NOW THEREFORE, in consideration of the above and intending to be legally bound hereby, the

parties hereto agree as follows:

1. Desautels shall voluntarily resign from his position as Code Compliance Manager of the City by announcing his resignation not later than the 11th day of May.

2. Desautels shall be entitled to four (4) months' severance pay at his current rate of pay, \$3,526.54 month, and four (4) months of medical coverage calculated from the effective date of his resignation. He shall receive a lump sum payment of this severance pay within five (5) working days from his last date of employment with the City.

3. To the extent permitted by law, this Agreement shall be kept confidential by the parties.

4. Following his voluntarily termination of employment with the City, the City will not contest his application for Unemployment Compensation to the extent that it is permitted by law.

5. In consideration for the severance payments made in this agreement, hereby unconditionally and generally releases the City and its Officers, Council members and

employees from all actions, causes of actions, claims and demands of any nature, whether known or unknown, that he has or may have against them or any of them up to and including the date of this Agreement, including without limitation any and all claims relating directly or indirectly to the City employment by Desautels including but not limited to claims, whether Federal or State, statutory, common law or otherwise, for breach of contract, any tortuous activity by the City or its Officers, Councilmen or employees, defamation, fraud, misrepresentation and unlawful discrimination.

6. Desautels certifies that he (a) has read the terms of this Agreement, (b) understands that it contains release and waiver of any claims he has or may have against the City and related persons and entities, (c) has been advised to consult with an attorney concerning it, (d) has had an opportunity to discuss it with an attorney, the City, and (e) understands its terms and effects.

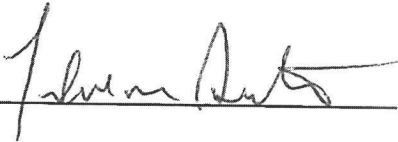
7. Desautels acknowledges that he executes this Agreement with its general release of his own volition, with a full understanding of its terms and effects and in exchange for the consideration that is described in this Agreement and that he acknowledges as adequate and satisfactory to him.

8. This Agreement will not be construed as an admission of any liability by or any other agent or employees of the City, or as an admission of any violation of any federal, state, or local statute, regulation or ordinance.

9. This Agreement may not be modified or altered except by a subsequent writing to be signed by all parties to this Agreement.

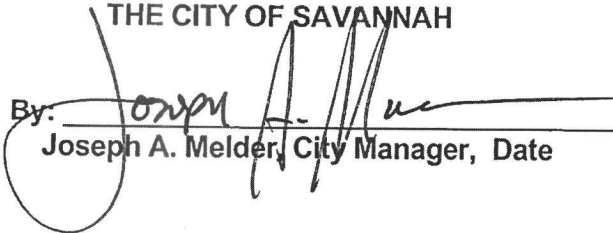
IN WITNESS WHEREOF, the parties hereto have set their hands and seals the day and year first above written.

TODD DESAUTELS

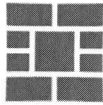


ATTEST:

**THE MAYOR AND ALDERMEN OF
THE CITY OF SAVANNAH**

By: 

Joseph A. Melder, City Manager, Date

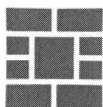


MEMORANDUM

To: Todd Desautels Personnel File
From: Jeffery Grant, HR Director
Date: 05/11/2022
Re: Todd Desautels Ongoing Misconduct

The memorandum's purpose is to detail the Office of Human Resources review of Mr. Todd Desautels's ongoing misconduct and behavior as a Code Compliance Manager.

- **March 24, 2021 - Internal Investigation #1 - Civic Center Weapon Incident.
- May 5, 2021 - Employee survey cites behavior and communications Todd Desautels, Code Compliance Manager:
 - Email and communications from management that are sometimes harsh.
 - The property manager is a bully and several people have nasty emails from him.
 - We have toxic manager that has a history of nasty and unprofessional emails.
 - Tone of emails and how people are addressed is concerning. Thought of the perception of how people are addressed and what audience is being targeted is not made.
 - Managers retaliate against those that are willing to speak up.
 - Emails that are received from management have a threatening tone.
 - Managers belittle the members of their team in front of other employees.
- **June 11, 2021 - Internal Investigation #2 – A group of emails were sent anonymously to the City Manager's office citing a plea for help as alleging a hostile work environment due to email communications. The Office of Human Resources was tasked to investigate the group of emails. After review of the emails and interviewing Mr. Desautels, it was determined that Mr. Desautels violated COS Employee Standards by not fostering open and effective communication, being respectful, courteous, and conducting himself in a professional manner through his email communications. Written disciplinary action was recommended but not administered by the department.
- **August 5, 2021 - Inquiry made into Mr. Todd Desautels's tape recording of an employee conversation. While it's legal in Georgia, the Office of Human Resources discouraged the Department Director from allowing the Manager to practice this behavior. The Office of Human Resources cited that the practice does not build rapport and creates an environment of distrust. Counseling was recommended to the department to administer.



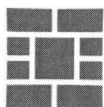
- **September 2, 2021 – Verbal Counseling Document Issued by Kevin Milton addressing:
 - Employee survey comments from staff, citing Mr. Desautels's email communications and tone as disrespectful.
 - The investigation initiated by the City Manager's Office, citing a hostile work environment due to Mr. Desautels's email communications.
 - Disrespectful conduct during a Disciplinary Action Appeal Hearing towards the Assistant City Manager.
 - Hostile comments made during an HR investigation interview.
 - Unacceptable response to an ongoing investigation directly to the complainant.
 - Mr. Desautels's conduct and communications, citing they were damaging his reputation and limiting his effectiveness as a Manager in the Department.
 - Concerns with Mr. Desautels's communications and behaviors, citing no improvement in his actions and communications after months of discussions.
 - Recent conduct as unacceptable as a Manager.
 - All forms of communication by establishing clear expectations for Mr. Desautels moving forward.

- **September 20, 2021 - Internal Investigation #3 – Determination cites Mr. Desautels for emailing and using confidential information during an ongoing HR investigation in a response to the complainant.

- On August 2, 2021, a Code Compliance employee received a case review from Mr. Desautels of a Westside B team officer, where his critiques were made in red font. The employee asked him to refrain from using red font. The same employee previously filed a discrimination complaint to the Office of Human Resources. Mr. Desautels replied by making the employee aware it has been a normal practice to use red font and further stated in an email, "Since you have made complaints to HR about my dislike for people of color and older individuals, I want you to know I took it upon myself to let them know your dislike for the color red emails. They have not indicated I need to stop." The response was a form of intimidation and retaliation towards the complainant. Two-day suspension was recommended but not administered by the department.

- **December 21, 2021 - Follow-up employee survey confirms ongoing behavior, communications and cites "Managers as not having no respect for officers and the work they do, and this is exemplified by how they speak to employees during court prep, and the questions they ask regarding cases." As a part of the resurvey, in February & March 2022, all Code Compliance employees were also provided the opportunity to meet with HR representatives anonymously in addition to the written surveys. Many employees interviewed in February/March shared instances where they were publicly reprimanded or felt disrespected in public or by email.

- **April 2022 - After the follow-up survey, the Office of Human Resources scheduled a meeting to share the results with the Code Compliance leadership team. During the meeting and after reviewing the results, Mr. Desautels verbally expressed with Human Resources and Code Compliance leadership members that the results made him want to make some changes *"to show them (code employees) how good they really have it."* Others in attendance expressed concerns that, despite being cautioned not to take any resulting action based on the survey results, punitive measures were later implemented. The Office of Human Resources, HR Director was made aware of these instances on April 8, 2022. As result, a comprehensive review Mr. Desautels's ongoing misconduct was initiated.



**Signifies the dates in which the final determination, information, or recommendation was issued to the Department Director to administer disciplinary or corrective action.

Determination:

According to the City Code of Conduct policy, as City employees, we shall:

- Conduct ourselves in a manner which is respectful, courteous, and professional.
- Appropriate behavior shall be exhibited towards all our customers: both fellow City employees and members of the public.
- Communicate clearly, regularly, politely, and honestly with each other and our customers.
- Be positive examples to those we lead.

Furthermore, according to City of Savannah Employee Standards, as leaders, we shall:

- Value employees as the City's most valuable resource.
- Foster open and effective communication.
- Strive to develop respect, trust, honesty, and integrity with our citizens and each other.
- Inspire and ensure cooperation and teamwork.

Todd Desautels, Code Compliance Manager has not reflected City Employee Standards, Code of Ethics, and Leadership principles over an extended period. Mr. Desautels has continued to be disrespectful, retaliatory, hostile, and communicate in a way that does not build trust or rapport with his Department. Kevin Milton, Director of Code Compliance, even summarized and documented Mr. Desautels's ongoing behavior due to its impact on the overall well-being of department employees and the organization. As a result, Mr. Milton stated that Mr. Desautels has damaged his reputation and performance as a Manager in the Department and the organization. Mr. Milton also outlined clear expectations for Mr. Desautels moving forward.

Despite receiving clear directions on how to communicate as a leader, Mr. Desautels expressed in an open meeting amongst Code Compliance leaders and Human Resources staff that the resurvey results made him want to make some changes "to show them (code employees) how good they really have it." Code Compliance leadership members in attendance expressed concern of Mr. Desautels retaliatory remarks. Employees recently interviewed, also shared similar sentiments of feeling uncomfortable for fear of losing their job or retaliation. Furthermore, City policy prohibits any form of retaliation against employees.

It is evident the following conduct and behavior continues to adversely impact the Code Compliance work environment and overall well-being of department employees. After reviewing the documents and timelines of the ongoing misconduct, I recommend Mr. Desautels be terminated from the City of Savannah.

Performance Review

REVIEW PERIOD 09/18/17 TO 010/5/2017

Name	Todd Desautels		
Bureau	Sanitation		
Department	Property Maintenance		
Employee Number	63416	Supervisor (check) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Supervisors must complete Supervisory Standards on page 4.
Job Title	Principal Property Maintenance Administrator		

Purpose of a Yearly Performance Review (PR)

The purpose of the Performance Review is to identify ways that you can improve your performance by looking back on past performance over the review period (12 months), **and create a plan to address areas requiring improvement, maintaining current levels of proficiency or developing advanced skills.**

The Program is not to be used for disciplinary actions. It is instead a tool to be used to help you better perform your job.

Employee Instructions

- I. **Review your job description with your Supervisor before completing this form.**
- II. Fill out your response for each section in the Self Evaluation section (white blocks) by placing an (X) in the box you select.
- III. You may choose from Exceeds Requirements, Meets Requirements, or Development Needed.
 - **Exceeds Requirements means that you always do more than what is expected of you.**
 - Meets Requirements means that you do what is expected for your job.
 - Development Needed means that you could do the job better or could exceed requirements with more knowledge or training.
- IV. After reviewing your responses and job description, your Supervisor will make his/her ratings and comments to your responses in the gray blocks.
- V. **You and your Supervisor meet to discuss the Performance Review.** You may meet with your Supervisor ahead of time to discuss or review your job description.
- VI. The **Performance Review** is reviewed and signed by you, your Supervisor, Department Director or Bureau Chief. Send the original Performance Review to the Human Resources Department for your personnel file. You and your supervisor should keep a copy to review periodically.

Performance Rating

Core Standards		Self-Evaluation (white blocks)			Supervisor Evaluation (gray blocks)		
		Exceeds Requirements	Meets Requirements	Development Needed	Exceeds Requirements	Meets Requirements	Development Needed
Competency	Definition						
Job Knowledge	Understands the responsibilities specific to a job, as well as the ability to stay current of changes in job functions.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments							
Attention to Detail/ Safety	Focuses on the details of a job or task to make sure the job is done safely, correctly and completely.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments							
Attendance/ Timeliness	Arrives early or on time for work; completes work assignments on time to meet deadlines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments							
Initiative	Looks for opportunities to make work better and to develop personally and professionally. Doesn't wait to be told to do something.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments							
Communication/ Listening Skills	Listens and talks to others in ways that are appropriate; is courteous and treats everyone with respect.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments							
Dependability	Completes work, keeps promises, has good attendance, and is responsible.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments							
Customer Service	Delivers personable, direct attention that ensures customer satisfaction.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comments							

Performance Development

List any developmental activities, training or certifications you would like to receive in the next 12 months that will help you, in your current position, perform your job better. You and your supervisor will review the activities and determine which activities to plan for the coming year.

Requested Development Activities	Recommendations
1 Need to take IPMC exam	1 Agreed, continue to study and pass by March 17, 2018.
2 Want to learn what I can take to develop in new role as Administrator and learn aspects of City Government	2 Agreed
3 Want to take courses in Georgia Association of Code Enforcement	3 Agreed, next Conference in March 2018
4 FEMA courses	4 Take online courses and attend as offered the GEMA and Savannah Emergency Management offers course.
Comments	

Additional Comments

Additional Employee Comments:

Please Complete: Overall, my performance (check one)

Exceeds Requirements	Meets Requirements	Development Needed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Supervisor Comments:

Please Complete: Overall, my performance (check one)

Exceeds Requirements	Meets Requirements	Development Needed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If you need more space, please attach additional pages. # of attachments _____

Supervisory Standards (Supervisory Positions Only)

Leadership Standards (Required for all managers and supervisors.)	Self-Evaluation (white blocks)			Supervisor Evaluation (gray blocks)		
	Exceeds Requirements	Meets Requirements	Development Needed	Exceeds Requirements	Meets Requirements	Development Needed
Administers discipline in a firm, but fair manner.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is a positive example.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Values employees as the City's most valuable resource.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fosters open and effective communication.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Encourages creative and innovative thinking.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Strives to develop respect, trust, honesty, and integrity with citizens and employees.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Inspires and ensures cooperation and teamwork.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Develops employees through training, coaching, and counseling complemented by positive reinforcement and recognition.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Encourages education for all employees as an investment in the future and to enhance personal growth.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Defines organizational systems and operations and the employees' roles and responsibilities within the organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Continuously improves systems and processes by utilizing an analytical approach.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Employee Comments:

Supervisor Comments:

Mr. Desautels has only been with Property Maintenance 3 weeks but has already begun to improve forms and report requirements for Supervisors as well as creating a Field Training Officer program for the Property Maintenance Department.

Acknowledgement

- ❖ By signing below, I acknowledge that this **Performance Review** has been reviewed with me by my supervisor and that I have had sufficient opportunity to discuss and record any concerns that I may have during this meeting.
- ❖ **The original should be sent to the Human Resources Department for the Employee's personnel file, and a copy should be given to the Employee at the review meeting between the Employee and Supervisor.** Supervisors and Employees are strongly encouraged to meet throughout the year to discuss progress being made toward the recommended Performance Development.

VERIFICATION OF REVIEW

By signing this form, you confirm that you have discussed this review in detail with your supervisor. Signing this form does not necessarily indicate that you agree with this evaluation.

Employee Signature <i>Todd Desautels</i>	Print Last Name Todd Desautels	Payroll #	Date <u>Select Date</u> 10/5/17
Supervisor Signature <i>Kimberly Corbin</i>	Print Last Name Kimberly Corbin	Payroll #	Date <u>Select Date</u> 10/5/17
Director or above Signature <i>J. Prevatt</i>	Print Last Name Prevatt	Payroll # 1728	Date 8 Dec 17
Additional Review Signature	Print Last Name	Payroll #	Date

CITY OF SAVANNAH
EMPLOYEE PERSONAL DATA

2571

SOCIAL SECURITY NUMBER: Privacy Information

NAME: Todd M Desautels

DATE OF BIRTH: Privacy Information

RACE: W SEX: M

MARITAL STATUS: SINGLE: _____
MARRIED: X

HOME ADDRESS: Privacy Information
CITY STATE ZIP

HOME PHONE: Privacy Information UNLISTED: (YES) (NO) _____

RELATIVE TO NOTIFY IN CASE OF EMERGENCY:
Privacy Information

Office Use Only

EMPLOYEE NUMBER 63416 HIRE DATE: 9 18 2017

TITLE: Property Maintenance Admin(1835) DEPARTMENT # 7110

FP-FULLTIME PP PART-TIME _____ TEMPORARY _____

BENEFITS () YES () NO

WORK SCHEDULE: WKLY () BWKLY ()

Employer Address: (Please indicate the address where the Wage Withholding Orders should be sent)

H U M A N R E S O U R C E S D E P T

P O B O X 1 0 2 7

Employer City:

S A V A N N A H

State:

G A

Zip Code:

3 1 4 0 2

Employer Phone (optional):

9 1 2 6 5 1 6 4 8 4

Extension:

Employer Fax (optional):

9 1 2 6 5 1 6 7 0 6

Email Address:

EMPLOYEE INFORMATION

Employee Social Security Number (SSN):

Privacy Information

Employee Starting Salary (Monthly):*

.00

Employee First Name:

Todd

Middle Initial

M

Employee Last Name:

Desautels

Employee Address:

Privacy Information

Employee City:

Privacy Information

State:

Zip Code:

Start Date (MMDDYY):

9 18 2017

Date of Birth:

Privacy Information

*Optional

Medical Insurance Company Name:*

Reports must be submitted within 10 days of hire or rehire date.

REPORTS WILL NOT BE PROCESSED IF REQUIRED INFORMATION IS MISSING

Questions? Call us at (404) 525-2985 or toll-free at (888) 541-0469

DATE, TIME
FAX NO./NAME
DURATION
PAGE(S)
RESULT
MODE

09/19 10:14
914045252983
00:00:32
OK
STANDARD
ECM

TIME : 09/19/2017 10:14
NAME : HR
FAX : 19126516706
TEL : 19126516706
SER.# : BR0L9J999441

TRANSMISSION VERIFICATION REPORT



WOSIW-18

September 19, 2017

To: Todd Desautels #63416
Department: Property Maintenance Administration
From: Joy Wilkinson, Interim Human Resources Director
Subject: Orientation and Training for New Employees

Welcome to your new job with the City of Savannah! To help you get off to a great start, we conduct an orientation for all new employees. During this orientation you will learn about the City's mission and structure, City policies, employee benefits and your responsibilities as a City employee.

Important Information Regarding Your Medical/Dental Benefits

Employees will enroll in medical and/or dental benefits using our on-line enrollment system during orientation. In order to ensure that your enrollment is processed in a timely manner, you must provide the following information for yourself and all dependents you plan to enroll in the medical and dental plans, including life insurance and pension beneficiaries: name, address, social security number, date of birth, and relationship. Please complete the attached (on the back of this memo) On-line Information Form and bring with you to orientation.

This orientation is scheduled for:

Monday, September 25, 2017
8:00 a.m. – 5:00 p.m.
Savannah Chatham Metropolitan Police Department (SCMPD) Complex
3401 Edwin Street
Savannah, GA 31405

You have also been scheduled for Customer Service and Harassment Free Workplace training. This training will be held:

Tuesday, September 26, 2017
8:00 a.m. – 11:00 a.m. (8:00 a.m. to 12:00 p.m. for supervisors)
) Savannah Chatham Metropolitan Police Department (SCMPD) Complex
3401 Edwin Street
Savannah, GA 31405

We look forward to seeing you at both the orientation and training. **If you are unable to attend either class, please contact Marla Hungerford at 651-6484 to cancel and reschedule. If you miss the orientation, contact the Benefit Division at 651-6484 to discuss your health benefits options as you are eligible for health benefits 30 days after your date of hire.**

Parking is available in the **State Street Garage on the 6th floor ONLY** for both classes. Bring your parking ticket to the orientation for validation.

Important Notice: All employees are required to complete the City's New Employee Orientation and Harassment Free Workplace programs within their probationary period. Employees who fail to meet this requirement will not attain regular status and could be released from City service.

cc: Department Head
Marla Hungerford
File

**Congratulations and Welcome to the City of Savannah!
Information Form for Employee Benefits**

What an exciting time this is to be starting your employment here with us at the City of Savannah. Those first days are just a whirlwind and filled with a lot of valuable information with benefits being a portion of all that. To assist you in getting prepared for orientation and enrolling you and your family (if applicable) into our benefit package we have designed this form for you to bring (**COMPLETED**) with you on the first day of your orientation. The information that we gather below is required to enroll you and your dependents (if applicable) into our benefit package.

Medical, dental are elective, life insurance and pension are required fields and we will need the information as stated below. Note: if you have a dependent that has a different last name we will require a copy of supporting documents (marriage license, birth certificate, etc.) before your benefits can be processed.

Your Name: _____

Department: _____

If dependent address is different please note. Circle the correct dependent status corresponding with the name.

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____

Name (spouse, child, step-child): _____
Social Security No.: _____ DOB: _____



Welcome to the City Service!

As a new employee with the City of Savannah, it is important for you to be informed of the City's policies and procedures, as well as various Federal laws and regulations related to these policies and procedures

Below is a brief overview of the Fair Labor Standards Act (FLSA), as well as information regarding the City of Savannah's Compensatory Time Policy. Please read the information below carefully. If you have any questions, contact the Human Resources Department.

FLSA COVERAGE

The Fair Labor Standards Act (FLSA) regulates the pay, hours worked, hours compensated at straight or overtime rates, compensatory time, and record-keeping for non-exempt employees covered by the Act. The FLSA does not apply to non-covered exempt employees.

Employees are covered by the FLSA unless they are determined to be exempt because of executive, administrative, professional or computer status and are paid on a salary basis. This status is determined by asking a series of questions, as established by the FLSA, about the position. If a position meets certain conditions, it is exempt from the law; if it does not meet certain conditions, the position is non-exempt and is covered by the FLSA provisions. The FLSA status for your current position of

Property Maintenance Admin(1835) is Exempt.

It is the City's policy to comply with the salary basis requirements of the FLSA. Therefore, the City prohibits all managers from making any improper deductions which violate the FLSA from the salaries of exempt employees. If you believe an improper deduction has been made to your salary, you should immediately report this information to the City's Human Resources Director. Reports of improper deductions will be promptly investigated. If it is determined an improper deduction has occurred, you will be promptly reimbursed.

It is important to note that exempt and non-exempt status under the FLSA does not correlate to classified and unclassified status under the City of Savannah's Civil Service Act. The first is a federal law regulating compensation while the second is a local law regulating employment rights.

HOURS WORKED AND COMPENSATED FOR FLSA NON-EXEMPT EMPLOYEES

Employees covered by the FLSA must be compensated for hours worked in a normal work schedule. Generally, "hours worked" includes all time during which an employee is required to be on the employer's premises or at some other prescribed work place and all time during which an employee is "suffered or permitted" to work. For non-exempt employees, hours worked in excess of 40 hours per week (204 hours in a 27 day work period for firefighting employees) are overtime. This means premium overtime (time and one half) will be provided for all hours physically worked over the normal work schedule. Under the FLSA, the City may substitute compensatory time for pay. Non-exempt employees must be paid for this time upon termination.

The City may credit general non-exempt employees compensatory time up to 160 hours of actual overtime worked (240 hours total after time and one half is applied). Non-exempt uniformed Police and

Firefighting employees may be credited compensatory time up to 320 hours of actual overtime worked (480 total hours after time and one half is applied).

COMPENSATORY TIME POLICY FOR EXEMPT EMPLOYEES NOT COVERED UNDER THE FLSA

The City provides compensatory time off at a straight time rate for overtime worked for exempt employees (primarily professional and supervisory employees) who are below the administrator level. This is a City policy, is not regulated by federal law, and may be changed at the City Manager's discretion. Exempt employees are not paid for this compensatory time. There is no overtime pay provided for exempt employees of the City of Savannah unless authorized by the City Manager.

I have read and understand the Fair Labor Standards Act (FLSA) and Compensatory Time information provided to me by the City of Savannah. I also understand and agree that if I am a non-exempt employee, the City may substitute compensatory time in lieu of pay for overtime worked in accordance with FLSA.

Todd M Desautels

Print Your Name



Signature

9/19/17

Date

OUTSIDE EMPLOYMENT APPROVAL FORM

Name Employee #

Home Address

Department Position

Do you have other employment or business interests including additional jobs with the City of Savannah?

NO YES

If yes, complete the following **OUTSIDE EMPLOYMENT INFORMATION** (If self-employed, so state):

Name of Firm

Address: Telephone #

Estimated hours per week of employment _____ Duties involved in outside employment (Describe in detail):

I have carefully read the policy governing outside employment and sincerely believe that none of the stated conditions will be violated by approval. I understand that any injury or illness incurred by me while performing duties in outside employment for myself or others are not covered for treatment by the CITY'S medical benefits program or workers' compensation program and does not qualify for sick leave and I will not file claims or request sick leave for such injury or illness.

Date

Signature of Employee

Recommendation of Immediate Supervisor: Approved _____ Disapproved _____
(Give reasons for approval or disapproval)

Date

Signature of Immediate Supervisor

Recommendation of Department/Division Head: Approved _____ Disapproved _____
(Give reasons for approval or disapproval)

Date

Signature of Department/Division Head

Decision of Bureau Head: Approved _____ Disapproved _____

Date

Signature of Bureau Chief

CITY OF SAVANNAH

NEPOTISM REVIEW REQUEST FORM

No applicant will be employed in a position where a member of his/her immediate family would serve in a supervisory position which could directly affect his/her job performance, job assignments, performance evaluation, leave approval or work schedule. The City will not permit the employment of family members in the same department where either member finds them under intermittent or infrequent informal direction of the other family member or where the proximity of the family members gives the appearance that one person's employment is under the supervision or direction of the other. No City employee will be promoted or transferred into a position involving supervision by or of a relative. ***Once employed, any change in status must be reported to the Human Resources Director by submitting a new Nepotism Review Request form.***

Please complete the following:

1. The following immediate family members are employed by the City of Savannah;

Name	Relationship	Position Title	Position Location
------	--------------	----------------	-------------------

2. The following relatives by marriage are employed by the City of Savannah;

Name	Relationship	Position Title	Position Location
------	--------------	----------------	-------------------

3. The following live regularly in my household and are employed by the City of Savannah;

Name	Relationship	Position Title	Position Location
------	--------------	----------------	-------------------

4. I do not have any immediate family members, as defined above, who are employed by the City of Savannah. (Check if applicable).

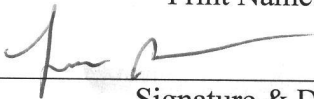
I affirm that the information provided by me on this form is correct to the best of my knowledge.

Todd	M	Desautels
------	---	-----------

Print Name

Property Maintenance Admin(1835)

Position Title



Signature & Date

Department

Return this form to the Human Resources Director.

Rev 6/12/07



+ Sign Date +

PROPERTY MAINTENANCE ADMINISTRATOR

Class
Code:
1835
PM/2

Bargaining Unit: Unclassified

CITY OF SAVANNAH
Established Date: Sep 1, 2007
Revision Date: Dec 27, 2007

SALARY RANGE

\$29.61 - \$45.89 Hourly
\$2,368.77 - \$3,671.58 Biweekly
\$5,132.33 - \$7,955.08 Monthly
\$61,588.00 - \$95,461.00 Annually

PURPOSE:

This position is responsible for administering the day-to-day activities of the department.

ESSENTIAL JOB FUNCTIONS:

Supervises, directs, and evaluates assigned staff; handles employee concerns and problems; directs work; counsels and disciplines staff; completes employee performance appraisals; recruits, appoints, and trains staff.

Schedules and supervises property maintenance code enforcement activities.

Assists in the preparation of the departmental annual budget; assists in monitoring expenditures in adherence with budget guidelines.

Assists in the review and approval of all structural demolitions or structural securing work on unsafe vacant structures.

Approves departmental purchases.

Prepares case and enforcement documentation for legal review.

Presents cases in Recorders and Administrative Court.

Reviews title searches for verification of property ownership.

Researches best practices from comparable municipal governments and code enforcement departments.

Works with Information Technology to develop and improve automated case management tracking.

Schedules and attends neighborhood meetings.

Supervises the archiving of case documents for retrieval.

Prepares and makes presentations for community groups, city workshops, and job fairs.

Conducts property field inspections as required.

Responds to citizen complaints.

Responds to inquiries from the news media and gives interviews for television and newspapers.

Performs the duties of the Property Maintenance Director in his or her absence.

Performs other related duties as assigned.

MINIMUM QUALIFICATIONS:

Bachelor's degree in Urban Planning, Property Management, Public or Business Administration; (Master's Degree preferred) with three years of experience in property maintenance or building management; including a minimum of one year supervising staff; or an equivalent combination of education, training, and experience. Must possess a valid driver's license.

KNOWLEDGE, SKILLS & ABILITIES:

Knowledge of city and department policies and procedures.

Knowledge of the International Property Maintenance Code, the Savannah City Code, the Residential Housing Code, and the Georgia Code.

Knowledge of city budgeting and purchasing procedures.

Knowledge of the principles and practices of property maintenance code enforcement.

Skill in management and supervision.

Skill in decision making.

Skill in compiling information and preparing reports.

Skill in operating such office equipment as a typewriter, calculator, copier, and facsimile machine.

Skill in interpersonal relations.

Skill in oral and written communication.

MINIMUM STANDARDS:

SUPERVISORY CONTROLS: The Property Maintenance Director assigns work in terms of department goals and objectives. The work is reviewed through conferences, reports, audits, and observation of department activities.

GUIDELINES: Guidelines include the International Property Code, the Georgia Code, the Savannah Code, the city Code of Ethics, and guidelines for personnel and financial management. These guidelines require judgment, selection, and interpretation in application.

COMPLEXITY: The work consists of varied supervisory, management, and code enforcement activities. The need for accuracy contributes to the complexity of the position.

SCOPE AND EFFECT: The purpose of this position is to administer the day-to-day activities of the department. Success in this position contributes to a safe, clean, and healthy environment for city residents and visitors.

PERSONAL CONTACTS: Contacts are typically with co-workers, other city personnel, elected and appointed officials, members of the news media, neighborhood leaders, representatives of non-profit housing development corporations, county government officials, and the general public.

PURPOSE OF CONTACTS: Contacts are typically to give or exchange information, provide

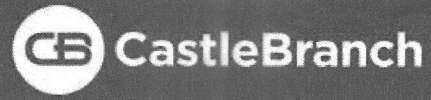
services, resolve problems, motivate personnel, and justify or defend matters.

PHYSICAL DEMANDS: The work is typically performed while sitting at a desk or table or while intermittently sitting, standing, walking, bending, crouching, or stooping. The employee occasionally lifts light objects, uses tools or equipment requiring a high degree of dexterity, and distinguishes between shades of color.

WORK ENVIRONMENT: The work is typically performed in an office or at inspection sites, where the employee may be exposed to hazardous or unhealthy environments.

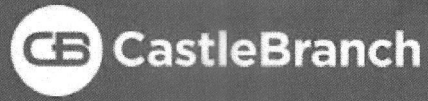
SUPERVISORY AND MANAGEMENT RESPONSIBILITY: This position has direct supervision over Property Maintenance Coordinator, Principal Property Maintenance Inspector, Property Maintenance Inspector, Property Maintenance Technician, Administrative Assistant, and Customer Service Representative.

John A. [Signature]
9/19/17



Order Confirmation

[Privacy Information](#)



Order Confirmation

Privacy Information

Application Detail

View Exam Plan View All Applicants View Applicants By Step Education Scoring Work Experience Rating Special Credit Rating Add Skills View Master Profile Application 1 of 1 Print View

2017-PMA-PM-AUG - Property Maintenance Administrator

Contact Information - Person ID: 32113308

Name: Todd Michael Desautels Address: Privacy Information
Home Phone: Privacy Information Alternate Phone: Privacy Information
Email: Privacy Information Former Last Name:
Month and Day of Birth: Privacy Information

Personal Information

Driver's License: Privacy Information
Can you, after employment, submit proof of your legal right to work in the United States? Yes
What is your highest level of education? Bachelor's Degree

Preferences

Preferred Salary: \$60,000.00 per year
Are you willing to relocate? No
Types of positions you will accept: Regular
Types of work you will accept: Full Time
Types of shifts you will accept: Day, Evening, Night, Rotating, Weekends, On Call (as needed)

Objective

To expand my personal experiences and build a new career where I can use my military and law enforcement background to help me excel.

Education

College: St. Leo University, 3/1991 - 5/2008, Savannah, Georgia
Did you graduate: Yes
College Major/Minor: Criminal Justice
Degree Received: Bachelor's

Work Experience

Corporal, 5/2002 - Present
Hours worked per week: 40
Monthly Salary: \$3,580.00
of Employees Supervised: 6
Chatham County Sheriff's Office, 1050 Carl Griffin Dr., Savannah, Georgia 31405, (912) 652-7750
Name of Supervisor: Herbert Harley - Lieutenant
May we contact this employer? No

Duties

Corporal, Watch Supervisor, Chatham County Detention Center
Supervising the daily activities of 6 deputies and over 200 inmates, over 50 with mental health issues. Responsible for assigning daily duties to each deputy and ensuring these assignments are completed, maintain a running log of all activities that occur within the unit, writing reports documenting any unusual activities, completing and/or reviewing and approving several daily activity reports, ensuring the unit has the necessary supplies to operate and the ordering of replacement supplies approving incident reports and disciplinary reports,

Reason for Leaving

Still employed

Corporal

5/1996 - 1/2002
Hours worked per week: 40
Monthly Salary: \$2,638.00
of Employees Supervised: 3
Tybee Islands Police Department, 78 Van Home Dr., Tybee Island, Georgia 31328, (912) 786-5635
Name of Supervisor: J. Price - Chief
May we contact this employer? Yes

Duties

Corporal, Patrol Supervisor
Regularly interacted with the community, responded to 911 and nonemergency calls for law enforcement and first responder needs. Delegated areas of responsibility and specific duties for 1 to 6 other officers per shift, reviewed investigative and arrest reports for content, accuracy and relevant material, assisted in criminal investigations worked by CID, typed detailed reports, interviewed suspects, victims, and witnesses, testified in court as necessary.

Reason for Leaving

Resigned, continued law enforcement career with larger agency.

Certificates and Licenses

Type: Basic Law Enforcement
Number: PBLE950598S
Issued by: Georgia Peace Officer Standards and Training Council
Date Issued: 6 /1996 Date Expires:

Type: Intermediate Law Enforcement
Number: PA01100033S
Issued by: Georgia Peace Officer Standards and Training Council
Date Issued: 3 /2010 Date Expires:

Type: Senior Deputy Certificate
Number: PS17030020D
Issued by: Georgia Peace Officer Standards and Training Council
Date Issued: 7 /2003 Date Expires:

Type: Supervisory Certificate
Number: PA03100039S
Issued by: Georgia Peace Officer Standards and Training Council
Date Issued: 3 /2010 Date Expires:

Skills

Office Skills

Typing:
Data Entry:

Additional Information

References



Privacy Information

Resume

Text Resume

Attachments

Attachment	File Name	File Type	Created By	Action
img003.jpg	img003.jpg	Other	Job Seeker	Edit
img001.jpg	img001.jpg	Other	Job Seeker	Edit
img002.jpg	img002.jpg	Other	Job Seeker	Edit
img004.jpg	img004.jpg	Other	Job Seeker	Edit
img005.jpg	img005.jpg	Other	Job Seeker	Edit
img006.jpg	img006.jpg	Other	Job Seeker	Edit
img007.jpg	img007.jpg	Other	Job Seeker	Edit
resume update sav city.doc	resume update sav city.doc	Resume	Job Seeker	Edit
DD214.jpg	DD214.jpg	Other	Job Seeker	Edit

Agency-Wide Questions

1. Q: Do you have any relatives who work for the City of Savannah?

A: No

2. Q: If you answered "yes" to question #1, please provide the family member's name, the department they work for, and their relationship to you. If you answered "no" to question #1, just type n/a.

A: n/a

3. Q: Are you a current City of Savannah employee?

A: No

4. Q: Are you a former City of Savannah employee?

A: No

5. Q: Are you currently working for the City of Savannah as a temporary employee through a temp agency?

A: No

6. Q: **If you answered "yes" to question #5, please state the department where you are working. If you answered "no" to question #5, just type n/a.**

A: n/a

7. Q: Do you fluently speak more than one language?

A: No

8. Q: How did you learn about this position?

A: Friend

Supplemental Questions

1. Q: Do you have a valid driver's license?

A: Yes

2. Q: Are you ICC Certified in International Property Maintenance Code?

A: No

3. Q: Please describe your experience in Property Maintenance or Building Management (Must be listed under work history on official application).

A: n/a

4. Q: How much experience supervising do you have (Must be listed under work history on official application)?

A: I have four or more years of supervisory experience.

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View/Edit Requisition

Creator: Lucas, Kenneth

[Referred List Columns/Sort](#) [Referred List Columns/Sort \(OHC\)](#) [Eliq List Type Sort](#) [Edit](#)

* Required

* Requisition #: 1604973

* Department: Property Maintenance

Division:

* Class Spec: 1835 PM/2 - PROPERTY MAINTENANCE ADMINISTRATOR

Working Title:

Desired Start Date:

* Hiring Managers: Corbin, Kimberly
Pittman, Jessica

Job Term:

List Type:

Vacancies: 1

Position Type:

Position Control:	Position #	First Name	Last Name	Vacancy Date
Skills:				
Comments:				
Authorization Comments:				
Department #:	7110			
Work Schedule:	M-F			
Hours per Week:	40			
Grade:	120			
Pay Cycle:	Bi-weekly			
Selection Method:	Open Competitive			
If interim-state expiration date:				
Work Location:	Gamble			
Class of driver's license required:	Class C			
Critical Workforce Position:	Yes			
Required Building Access:	None			
Research and Budget Ref. No. and comments:				
Safety Sensitive Position:	No			
Computer Log-In Required:	Yes			
FTE:	1			
Does this position supervise employees?	Yes			
Approvals	None			

Date: December 16, 2019

To: Desautels, Todd M.

From: City of Savannah Human Resources

Subject: Results of the Classification/Compensation Study by MAG

The purpose of this letter is to provide you with an update concerning our classification and compensation study. As you may recall, our consultants, Management Advisory Group International, Inc., (MAG) made a presentation to the City of Savannah Mayor and Council on September 26, 2019 concerning the results/recommendations of the study. Information regarding the general results/recommendations of this study, as well as an "Overview of the Study" were posted on CINC for your review. In the letter is a table which includes information contained in the report which specifically relates to you. This information includes your current position and salary information as well as your proposed position and salary information as determined by MAG.

Please note that everyone is assigned a new proposed pay grade. As a result of the study, there *may* be a change to your job classification, job title, and/or annual salary/pay rate. ***New Pay Grades are not comparable to old Pay Grades. It's an entirely new pay plan. No employee's salary was recommended to be reduced. If there is no change shown to your annual salary, it is because your annual salary is already consistent with the study analysis and associated recommendations.**

We are on schedule for pay adjustments to appear on paychecks issued the first pay period in January 2020. Also, if you accept a different position, including a promotion, after mid-November, the table below may not be applicable.

The proposed recommendation relating to your job classification, pay grade and annual salary is as follows:

Code Compliance Admini Div.	CURRENT	PROPOSED
JOB CLASSIFICATION TITLE	Property Maintenance Admin	Code Compliance Manager
PAY GRADE	*120	*120
MINIMUM/MAXIMUM ANNUALIZED PAY RATE	Minimum - Maximum \$61,588 - \$95,461	Minimum - Maximum \$67,206 - \$104,237

Code Compliance Admini Div.	CURRENT	PROPOSED
EMPLOYEE'S PAY RATE	\$65018.4516	\$68900.416
NET PAY CHANGE		\$3881

If you have any questions, please contact your department or division manager. Furthermore, department directors and managers please contact your designated HR liaison if you should have questions.

I want to thank you for your participation in the study as well as for your constructive thoughts and patience. I also want to thank everyone who helped in the Job Analysis Questionnaire (JAQ) process.

Best regards,

Jeffery Grant, Director
Office of Human Resources

Cc: Personnel File

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Public Records Exemptions

Enclosed please find a copy of the response documents for your public records request. The following information is provided to explain the process employed to review and produce the response documents.

Reason	Description	Pages
Privacy Information	<p>O.C.G.A. § 50-18-72(a)(20)(A) Records that reveal an individual's social security number, mother's birth name, credit card information, debit card information, bank account information, account number, utility account number, password used to access his or her account, financial data or information, insurance or medical information in all records, unlisted telephone number if so designated in a public record, personal e-mail address or cellular telephone number, day and month of birth, and information regarding public utility, television, Internet, or telephone accounts held by private customers, provided that nonitemized bills showing amounts owed and amounts paid shall be available.</p> <p>O.C.G.A. § 50-18-72(a)(21) Records concerning public employees that reveal the public employee's home address, home telephone number, day and month of birth, social security number, insurance or medical information, mother's birth name, credit card information, debit card information, bank account information, account number, utility account number, password used to access his or her account, financial data or information other than compensation by a government agency, unlisted telephone number if so designated in a public record, and the identity of the public employee's immediate family members or dependents.</p>	2-4, 6, 17-19, 25, 30-39