



A-1 Builders & Adaptations Design Studio

Designer

Summary Description

Seeking a Residential Designer for new and remodeled homes. We are a worker owned cooperative and provide the potential for personal growth. We can offer you a stellar design and construction team to work with. Together with us you will serve our local client base. As a residential designer you will offer our clients a design service that includes an extensive and thoughtful approach to designing, specifying and permitting their projects. We have found a variety of professionals can achieve success in this position because we use a team approach. Therefore, we invite architects, building designers and interior designers to apply.

1. Qualifications for Applicants:

- a. Property research using local planning departments on online resources.
- b. Client communication through meetings, emails, texts and phone calls.
- c. Create 3d renderings to enhance communications with clients.
- d. Understand and communicate sustainable materials and practices appropriate to projects.
- e. Understand and communicate high performance building methods appropriate to projects.
- f. Site measuring and simple photography
- g. Extensive experience with 3d architectural modeling programs
- h. Drafting of as-builts, concepts, plans and details to create complete drawing layouts.
- i. Research and specification of building materials, both structural and finish components.
- j. Create permit ready drawings.
- k. Create all details and documentation needed to construct the design.
- l. Familiarity with Architectural styles and eras.
- m. Familiarity with the following codes and standards: IRC, WA State Energy, WA Stormwater Management.
- n. Knowledge of building systems: HVAC, Plumbing, Electrical
- o. Familiarity with interior and exterior residential surfaces

2. Requirements for Applicants

- a. Dependable, presentable transportation
- b. Valid driver's license with an excellent record
- c. Verifiable references from previous employer(s) and client(s)
- d. 5 years of verifiable experience in the design development of significant remodels & custom homes
- e. Provide a portfolio by digital means that includes examples of your drawings and completed job photos.

3. Compensation:

- a. Wage level commensurate with qualifications and experience. Current wage range is between of \$28 to \$34/hr.
- b. Other benefits: see summary below. A full description of our benefits is contained in our Company Policy manual, which you will receive and sign if you are hired. This is simply a summary.



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WOC EMPLOYEE COMPENSATION & BENEFITS PACKAGE SUMMARY

This is simply a summary. If you are hired our Operating Policy Manual (OPM) will describe each benefit in much greater detail. [IF THERE'S A DISCREPANCY BETWEEN THIS SUMMARY AND THE OPM, THE OPM PREVAILS.](#)

- **COMPENSATION**

- Starting wage level commensurate with qualifications and experience.
- The wage range for the Designer position is \$28 to \$34/hr.
- Annual COLA (Cost of Living Adjustment) – Current year: \$0.23/hr.

- **IMMEDIATE UPON HIRE**

- **MANDATORY GOVERNMENT BENEFITS**

- **Industrial Insurance** – 80% company paid
- **Unemployment Insurance** – 100% paid
- **Sick Leave** - Every employee starts accruing 1 hr. Sick Leave for every 40hrs worked from the day of hire. This sick leave is not available for use until the employee hits 90 days
- **Social Security** – 100% match
- **Medicare** – 100% match

- **VEHICLE MILEAGE**

When you use your personal vehicle for business use you will be reimbursed at the federally-approved reimbursement rate (currently \$.535/mile).

- **CONTRACTOR PRICES FOR YOU**

Contractor prices are available for you and must be paid through your own resources at time of purchase.

- **SAFETY INCENTIVE**

Each month that the Production Division performs without an injury that causes the loss of any productive work time, we do a random drawing and award the winner with a gift certificate equal to \$10/co-worker who had worked during this injury-free

period. For example, if there was a field crew of 8 people working that month, the gift certificate would be for \$80.

- **AFTER 60 DAYS**

- **SIMPLE IRA**

You are to participate in the plan if you have earned at least \$5,000 during the last calendar year and are expected to earn at least \$5,000 during this calendar year. You may elect to defer up to \$12,500 annually. You may alter the amount of your contribution every January 1 and July 1 after you initiate your Simple IRA. A-1 Builders will match 3% of your contribution dollar for dollar, but our contribution will not exceed 3% of your compensation. This contribution may be reduced to a level below 3% - but not below 1% - in two out of every five years.

- **MEDICAL, & DENTAL INSURANCE & LIFE INSURANCE**

All full-time employees, (working 32hr or more), are eligible for covered under A-1 Builders A WOC's Regence medical plan the 1st day of the month after their 60 days. Employee may opt out if they can prove medical coverage through an eligible partner's medical plan. A waiver form is required for opting out. If you are eligible to opt out, you will receive a compensation for the amount A-1 WOC pays for your medical and dental premiums, less tax.

- **AFTER 90 DAYS**

- **BEREAVEMENT**

Bereavement leave is offered to fulltime employees. In case of death in the immediate family, an employee will, on request, be granted leave of absence with pay for a maximum of three working days per incident. Immediate family shall include any of the following persons: Father, mother, sibling or step sibling, child, step child, spouse, parent in-law, or domestic partner.

- **AFTER 6 MONTHS**

- **CAFETERIA PLAN OF VOLUNTARY BENEFITS**

We offer you a menu of voluntary, qualified benefits which allow you to pay for the selected benefit(s) on a pre-tax basis. This Cafeteria Plan is a qualified plan under Section 125 of the Internal Revenue Service Code. You are eligible for these benefits when you have worked here for 6 months, so long as you are at least 18 years old. When you reach these eligibility requirements you can choose any of the following voluntary benefits available to us through AFLAC (American Family Life Assurance Company of Columbus):

- The Cancer Protection Plan
- Accident /Disability Plan
- Hospital Intensive Care Plan
- Short term disability

- CELLPHONES

Company cellphone plans are available after 6 mo. for employees and family members. Cost for family and non-key employee plans will be deducted from payroll. Reimbursement for cellphones for key employees, management, and designers is upon hiring.

- CLOTHING ALLOWANCE

July 1st - \$150 for clothing allowance – All Employees (please see Operations Policy Doc for specifics)

- BI-ANNUAL BONUS

Bi-Annual Bonus consists of (2) \$350:

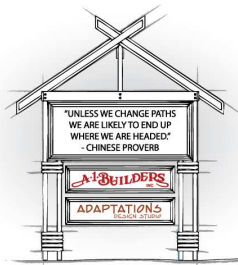
December 31st - \$350 cash

July 1 - \$350 cash

- 1 YEAR & BEYOND

- VACATION/PTO (PAID TIME OFF)

Every employee will receive 2wks PTO at their first year of employment. Every employee will receive 3wks PTO at their 5th year of employment. Every employee will receive 4wks vacation at their 10th year of employment.



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EMPLOYMENT APPLICATION

CONTACT INFO

Full Name: _____

Current Street Address: _____

City, State, Zip: _____

Mobile Phone: _____

Alternate Phone: _____

Primary Email: _____

Social Security Number: _____

Date of Birth: _____

EDUCATION AND TRAINING

HIGH SCHOOL

School Name/Location: _____

Years attended: _____

Type of Diploma/Degree: _____

Graduated? YES NO

Course of study: _____

COLLEGES/UNIVERSITIES

School Name/Location: _____

Years attended: _____

Type of Diploma/Degree: _____

Graduated? YES NO

Course of study: _____

GRADUATE/PROFESSIONAL

School Name/Location: _____

Years attended: _____

Type of Diploma/Degree: _____

Graduated? ___ YES ___ NO

Course of study: _____

OTHER

School Name/Location: _____

Years attended: _____

Type of Diploma/Degree: _____

Graduated? ___ YES ___ NO

Course of study: _____

SPECIALIZED TRAINING, APPRENTICESHIPS, INTERNSHIPS, JOB-RELATED SKILLS:

Specialized Training _____

Apprenticeships _____

Internships _____

Job-Related Skills _____

CERTIFICATES, LICENSES, PROFESSIONAL ASSOCIATIONS:

Certificates _____

Licenses _____

Professional Associations _____

Job-Related Skills _____

REFERENCES

PROFESSIONAL/PERSONAL REFERENCES

PROFESSIONAL PERSONAL

1. Name: _____ Phone _____

2. Name: _____ Phone _____

3. Name: _____ Phone _____

EMPLOYMENT EXPERIENCE

STARTING WITH YOUR PRESENT JOB.

IF YOU'RE NOT CURRENTLY WORKING, START WITH YOUR MOST RECENT JOB.

EMPLOYER: _____

Address: _____

Job title: _____

Hours worked per week: _____

Supervisor: _____

Phone number: _____

Reason for leaving: _____

Work performed: _____

Dates employed: _____

Wage or salary: starting; \$ _____ \$ _____ final Hr Yr

May we contact this Employer Yes No

If 'No' please explain: _____

EMPLOYER: _____

Address: _____

Job title: _____

Hours worked per week: _____

Supervisor: _____

Phone number: _____

Reason for leaving: _____

Work performed: _____

Dates employed: _____

Wage or salary: starting; \$ _____ \$ _____ final Hr Yr

May we contact this Employer Yes No

If 'No' please explain: _____

EMPLOYER: _____

Address: _____

Job title: _____

Hours worked per week: _____

Supervisor: _____

Phone number: _____

Reason for leaving: _____

Work performed: _____

Dates employed: _____

Wage or salary: starting; \$ _____ \$ _____ final Hr Yr

May we contact this Employer Yes No

If 'No' please explain: _____

EMPLOYER: _____

Address: _____

Job title: _____

Hours worked per week: _____

Supervisor: _____

Phone number: _____

Reason for leaving: _____

Work performed: _____

Dates employed: _____

Wage or salary: starting; \$ _____ \$ _____ final Hr Yr

May we contact this Employer Yes No

If 'No' please explain: _____

GENERAL INFORMATION

- Are you a U.S. citizen, or if not, are you eligible for legal employment in the United States?

____ Yes or ____ No

- Have you ever been discharged/fired, or asked to resign from a position?

____ Yes or ____ No (if Yes, please explain here: _____)

- Are there any time lapses between jobs which are not explained on the application?

____ Yes or ____ No (if Yes, please explain here: _____)

- Are you interested in temporary work?

____ Yes or ____ No (if No, please explain here: _____)

- Have you, within the last seven years, been convicted of a crime or released from prison?

(A conviction record will not automatically bar you from consideration for employment.)

____ Yes or ____ No (if Yes, please explain here: _____)

- Have you ever been warned about or otherwise disciplined for?

Absenteeism ____ Y ____ N Failure to notify your Employer when absent ____ Y ____ N

Tardiness ____ Y ____ N or any other attendance problem? ____ Y ____ N

If yes, please explain here: _____

- Sexual harassment, fighting, assault, or related offenses? ____ Yes or ____ No

- Violating any State, Federal, or Employer safety rules? ____ Yes or ____ No

- List other names by which you may be known: _____

I hereby authorize A-1 Builders, Inc., or its agent, to verify or to supplement information given by me in this application and any other submitted materials. I understand this information may be the basis of an employment decision, and I hereby release any and all of my employers from any liability or claim that I might have as a result of disclosure of this information. ____ Y ____ N

May we contact your present employer? Yes or No

Are there special conditions prior to contact? Yes or No

If yes, please explain: _____

AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize past employers, educational institutions, persons named as references, and any other references to release information for use in establishing my qualifications for this position.

Information released can include, but is not limited to:

- Any information that has a bearing on my suitability for the job
- Past employers
- Supervisors' names and titles
- Job titles of positions held
- Duties and responsibilities of positions held
- Dates of employment
- Attendance
- Salary history
- Reasons for leaving
- Eligibility for rehire
- Years of attendance at educational institutions
- Degree(s) obtained
- Transcript

This release removes all liability in providing information and verification in response to inquiries.

Signature

Today's Date

Name (please print)

Social Security #

Other Names Used in School or Employment

READ BEFORE SIGNING

I CERTIFY that this application and any other submitted materials contain no willful misrepresentations or falsifications, and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any misrepresentation or falsification, I may be summarily terminated or disqualified from holding any position under our jurisdiction. This application becomes part of my permanent record if hired.

A-1 Builders A WOC, Co promotes a smoke-free/drug-free work environment.

Signature

Today's Date