



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Amanda Carroll (Amanda.Carroll@labor.nc.gov) to be uploaded to the intranet and the specific Unit.

Unit: Human Resources	Location of Inspection: Labor Building
Inspection Team:	Date of Inspection: 10/11/18
1. Mary Katherine Revels	Unit Manager: Renathe Cotten
2. Britne Becker	Additional Comments:
3.	

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation			
<input type="checkbox"/>	Cords in walkways	<input type="checkbox"/>	Extension cords used as permanent wiring
<input type="checkbox"/>	Damaged cords (any type)	<input type="checkbox"/>	Exposed energized parts
<input type="checkbox"/>	Missing ground pin on electrical cord	<input type="checkbox"/>	Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/>	Excessively warm/overheated cords or equipment:	<input type="checkbox"/>	Outlet missing cover or broken cover
<input type="checkbox"/>		<input type="checkbox"/>	Two prong adapter used or two prong extension cord
Additional Comments, notations, and abatement information (including date):			

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation			
<input type="checkbox"/>	Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/>	Blocked fire extinguishers
X	Emergency Exit lighting is working correctly	X	Exit doors in working condition
X	Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/>	Block Exit doors
X	Flammable/Combustibles stored correctly	X	Chemicals stored correctly
<input type="checkbox"/>	Excessively warm/overheated cords or equipment:	<input type="checkbox"/>	Fire extinguishers inspected (identify by Serial #) License Number: 001333. Inspected and initialed by MKR.
Additional Comments, notations, and abatement information (including date):			



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Dawain Faison (dawain.faison@labor.nc.gov). to be uploaded to the intranet and the specific Unit.

Unit: Commissioner's Office & Legal Affairs	Location of Inspection: Labor Building
Inspection Team:	Date of Inspection:
1. Rose Gray	Unit Manager: Jill Cramer
2. Mildred Rivera	Additional Comments:
3.	

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation	
<input type="checkbox"/> Cords in walkways	<input type="checkbox"/> Extension cords used as permanent wiring
<input type="checkbox"/> Damaged cords (any type)	<input type="checkbox"/> Exposed energized parts
<input type="checkbox"/> Missing ground pin on electrical cord	<input type="checkbox"/> Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Outlet missing cover or broken cover
	<input type="checkbox"/> Two prong adapter used or two prong extension cord
Additional Comments, notations, and abatement information (including date):	

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation	
<input type="checkbox"/> Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/> Blocked fire extinguishers
<input type="checkbox"/> Emergency Exit lighting is working correctly	<input type="checkbox"/> Exit doors in working condition
<input type="checkbox"/> Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/> Block Exit doors
<input type="checkbox"/> Flammable/Combustibles stored correctly	<input type="checkbox"/> Chemicals stored correctly
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Fire extinguishers inspected (identify by Serial #) <i>#10482 > Not inspected since July 2016</i> <i>#10483</i>
Additional Comments, notations, and abatement information (including date):	



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Dawain Faison (dawain.faison@labor.nc.gov). to be uploaded to the intranet and the specific Unit.

Unit: Commissioner's Office & Legal Affairs	Location of Inspection: Labor Building
Inspection Team:	Date of Inspection:
1. Rose Gray	Unit Manager:
2. Mildred Rivera	Additional Comments:
3.	

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation	
<input type="checkbox"/> Cords in walkways	<input type="checkbox"/> Extension cords used as permanent wiring
<input type="checkbox"/> Damaged cords (any type)	<input type="checkbox"/> Exposed energized parts
<input type="checkbox"/> Missing ground pin on electrical cord	<input type="checkbox"/> Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Outlet missing cover or broken cover
	<input type="checkbox"/> Two prong adapter used or two prong extension cord
Additional Comments, notations, and abatement information (including date):	

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation	
<input type="checkbox"/> Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/> Blocked fire extinguishers
<input type="checkbox"/> Emergency Exit lighting is working correctly	<input type="checkbox"/> Exit doors in working condition
<input type="checkbox"/> Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/> Block Exit doors
<input type="checkbox"/> Flammable/Combustibles stored correctly	<input type="checkbox"/> Chemicals stored correctly
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	Fire extinguishers inspected (identify by Serial #) <i>#10482 not inspected since July</i> <i>#10483 " " " "</i>
Additional Comments, notations, and abatement information (including date):	



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Dawain Faison (dawain.faison@labor.nc.gov), to be uploaded to the intranet and the specific Unit.

Unit: OSH	Location of Inspection: ORB 3rd Floor
Inspection Team:	Date of Inspection: 10/30/18
1. Brian Harper	Unit Manager: Kevin Beauregard
2. Beth Henry	Additional Comments:
3.	

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation	
<input type="checkbox"/> Cords in walkways	<input type="checkbox"/> Extension cords used as permanent wiring
<input type="checkbox"/> Damaged cords (any type)	<input type="checkbox"/> Exposed energized parts
<input type="checkbox"/> Missing ground pin on electrical cord	<input type="checkbox"/> Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Outlet missing cover or broken cover
	<input type="checkbox"/> Two prong adapter used or two prong extension cord
Additional Comments, notations, and abatement information (including date): All in order 10/30/18	

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation	
<input type="checkbox"/> Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/> Blocked fire extinguishers
<input type="checkbox"/> Emergency Exit lighting is working correctly	<input type="checkbox"/> Exit doors in working condition
<input type="checkbox"/> Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/> Block Exit doors
<input type="checkbox"/> Flammable/Combustibles stored correctly	<input type="checkbox"/> Chemicals stored correctly
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Fire extinguishers inspected (identify by Serial #)
Additional Comments, notations, and abatement information (including date): ✓ 10/30/18	



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Barbara Westphal (Barbara.Westphal@labor.nc.gov). to be uploaded to the intranet and the specific Unit.

Unit: Administration	Location of Inspection: OSH Review Commission
Inspection Team:	Date of Inspection: 10/29/2018
	Unit Manager: Karissa Sluss
1. Paulette Geddes <i>PL Geddes</i>	Additional Comments:
2. Michael Hayhurst	Overall NCDOL Safety & Health Inspection Standards were met.

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation	
<input type="checkbox"/> Cords in walkways	<input type="checkbox"/> Extension cords used as permanent wiring
<input type="checkbox"/> Damaged cords (any type)	<input type="checkbox"/> Exposed energized parts
<input type="checkbox"/> Missing ground pin on electrical cord	<input type="checkbox"/> Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Outlet missing cover or broken cover
<input type="checkbox"/> Two prong adapter used or two prong extension cord	<input type="checkbox"/> Appliances plugged into a power strip (Refrigerator, microwave, toaster, space heater, etc.)
Additional Comments, notations, and abatement information;	

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation	
<input type="checkbox"/> Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/> Blocked fire extinguishers
<input checked="" type="checkbox"/> Emergency Exit lighting is working correctly	<input checked="" type="checkbox"/> Exit doors in working condition
<input type="checkbox"/> Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/> Block Exit doors
<input checked="" type="checkbox"/> Flammable/Combustibles stored correctly	<input checked="" type="checkbox"/> Chemicals stored correctly
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input checked="" type="checkbox"/> Fire extinguishers inspected (identify by Serial #) skl7p -Last inspected July 2018 skl7r -Last inspected July 2018 skl7q - Last inspected July 2018
Additional Comments, notations, and abatement information (including date):	



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Barbara Westphal (Barbara.Westphal@labor.nc.gov). to be uploaded to the intranet and the specific Unit.

Unit: PSIM	Location of Inspection: ORB Building
Inspection Team:	Date of Inspection: 10/25/18
	Unit Manager: Anne Weaver
1. Barbara Westphal	Additional Comments:
2. Felicia Gore Hoover	

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation	
<input type="checkbox"/> Cords in walkways	<input type="checkbox"/> Extension cords used as permanent wiring
<input type="checkbox"/> Damaged cords (any type)	<input type="checkbox"/> Exposed energized parts
<input type="checkbox"/> Missing ground pin on electrical cord	<input type="checkbox"/> Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Outlet missing cover or broken cover
<input type="checkbox"/> Two prong adapter used or two prong extension cord	<input type="checkbox"/> Appliances plugged into a power strip (Refrigerator, microwave, toaster, space heater, etc.)
Additional Comments, notations, and abatement information; No problems found.	

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation	
<input type="checkbox"/> Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/> Blocked fire extinguishers
<input type="checkbox"/> Emergency Exit lighting is working correctly	<input type="checkbox"/> Exit doors in working condition
<input type="checkbox"/> Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/> Block Exit doors
<input type="checkbox"/> Flammable/Combustibles stored correctly	<input type="checkbox"/> Chemicals stored correctly
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Fire extinguishers inspected (identify by Serial #) A01439, last date inspected 10/18.
Additional Comments, notations, and abatement information (including date): No problems found	



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Barbara Westphal (Barbara.Westphal@labor.nc.gov), to be uploaded to the intranet and the specific Unit.

Unit: PSIM	Location of Inspection: ORB Building
Inspection Team:	Date of Inspection: 10/25/18
	Unit Manager: Anne Weaver
1. Barbara Westphal	Additional Comments:
2. Felicia Gore Hoover	

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation	
<input type="checkbox"/> Cords in walkways	<input type="checkbox"/> Extension cords used as permanent wiring
<input type="checkbox"/> Damaged cords (any type)	<input type="checkbox"/> Exposed energized parts
<input type="checkbox"/> Missing ground pin on electrical cord	<input type="checkbox"/> Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Outlet missing cover or broken cover
<input type="checkbox"/> Two prong adapter used or two prong extension cord	<input type="checkbox"/> Appliances plugged into a power strip (Refrigerator, microwave, toaster, space heater, etc.)
Additional Comments, notations, and abatement information; No problems found.	

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation	
<input type="checkbox"/> Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/> Blocked fire extinguishers
<input type="checkbox"/> Emergency Exit lighting is working correctly	<input type="checkbox"/> Exit doors in working condition
<input type="checkbox"/> Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/> Block Exit doors
<input type="checkbox"/> Flammable/Combustibles stored correctly	<input type="checkbox"/> Chemicals stored correctly
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Fire extinguishers inspected (identify by Serial #) A01439, last date inspected 10/18.
Additional Comments, notations, and abatement information (including date): No problems found	



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Amanda Carroll (Amanda.Carroll@labor.nc.gov). To be uploaded to the intranet and the specific Unit.

Unit: <u>Communications</u>	Location of Inspection: <u>Labor Bldg 1st floor</u>
Inspection Team:	Date of Inspection: <u>10/25/18</u>
1. <u>Beth Benson</u>	Unit Manager: <u>Dolores Quesenberry</u>
2. <u>Brittany McClary</u>	Additional Comments:
3.	

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation	
<input type="checkbox"/> Cords in walkways	<input type="checkbox"/> Extension cords used as permanent wiring
<input type="checkbox"/> Damaged cords (any type)	<input type="checkbox"/> Exposed energized parts
<input type="checkbox"/> Missing ground pin on electrical cord	<input type="checkbox"/> Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Outlet missing cover or broken cover
	<input type="checkbox"/> Two prong adapter used or two prong extension cord
Additional Comments, notations, and abatement information (including date):	

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation	
<input type="checkbox"/> Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/> Blocked fire extinguishers
<input type="checkbox"/> Emergency Exit lighting is working correctly	<input type="checkbox"/> Exit doors in working condition
<input type="checkbox"/> Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/> Block Exit doors
<input type="checkbox"/> Flammable/Combustibles stored correctly	<input type="checkbox"/> Chemicals stored correctly
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Fire extinguishers inspected (identify by Serial #)
	<u>10485</u> <u>Serviced in April 2018</u>
Additional Comments, notations, and abatement information (including date): <u>Per email from Beth</u> <u>Not inspected</u> <u>no initials</u>	



Employee Safety and Health Program

Unit and Field Office Inspection Form

Provide copy of this completed form to the Bureau Chief, and the Employee Safety and Health Program via Amanda Carroll (Amanda.Carroll@labor.nc.gov). To be uploaded to the intranet and the specific Unit.

Unit: <u>Budget</u>	Location of Inspection: <u>Labor Bldg</u>
Inspection Team:	Date of Inspection: <u>10/25/18</u>
1. <u>Beth Benson</u>	Unit Manager: <u>Jennifer Stackpole</u>
2. <u>Brittany McCray</u>	Additional Comments:
3.	

Inspection Information

Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation	
<input type="checkbox"/> Cords in walkways	<input type="checkbox"/> Extension cords used as permanent wiring
<input type="checkbox"/> Damaged cords (any type)	<input type="checkbox"/> Exposed energized parts
<input type="checkbox"/> Missing ground pin on electrical cord	<input type="checkbox"/> Daisy chain (power strip plugged into another power strip)
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Outlet missing cover or broken cover
	<input type="checkbox"/> Two prong adapter used or two prong extension cord
Additional Comments, notations, and abatement information (including date):	

Fire Hazards and Egress: Check appropriate box when condition is identified and make notation	
<input type="checkbox"/> Items stored within 3 feet of a heater and/or heat source	<input type="checkbox"/> Blocked fire extinguishers
<input type="checkbox"/> Emergency Exit lighting is working correctly	<input type="checkbox"/> Exit doors in working condition
<input type="checkbox"/> Space heaters meet testing laboratories criteria (Identify)	<input type="checkbox"/> Block Exit doors
<input type="checkbox"/> Flammable/Combustibles stored correctly	<input type="checkbox"/> Chemicals stored correctly
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input type="checkbox"/> Fire extinguishers inspected (Identify by Serial #)
	<u>10486</u> <u>Serviced in April 2018</u>
Additional Comments, notations, and abatement information (including date):	
<u>per email from Beth not inspected no initials</u>	