



# Employee Safety and Health Program

## Unit and Field Office Inspection Form

Provide a 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: 07/23/2019
	Unit Manager: Karissa Sluss
1. Paulette Geddes	Additional Comments:
2. Michael Hayhurst	NCDOL Safety & Health Inspection Standards were met.

### Inspection Information

Electrical Cords and Outlets: Check the appropriate box when the condition is identified and add a notation	
Cords in walkways	Extension cords used as permanent wiring
Damaged cords (any type)	Exposed energized parts
Missing ground pin on an electrical cord	Daisy chain (power strip plugged into another power strip)
Excessively warm/overheated cords or equipment:	Outlet missing cover or broken cover
Two prong adapter used or two prong extension cord	Appliances plugged into a power strip (Refrigerator, microwave, toaster, space heater, etc.)
Additional Comments, notations, and abatement information; None	

Fire Hazards and Egress: Check the appropriate box when the condition is identified and make a notation	
Items stored within 3 feet of a heater and/or heat source	Blocked fire extinguishers
Emergency Exit lighting is working correctly	Exit doors in working condition
Space heaters meet testing laboratories criteria (Identify)	Block Exit doors
Flammable/Combustibles stored correctly	Chemicals stored correctly
Excessively warm/overheated cords or equipment:	Fire extinguishers inspected (identify by Serial #) skl7p -Last inspected July 2019 skl7r -Last inspected July 2019 skl7q -Last inspected July 2019
Additional Comments, notations, and abatement information (including date): None	



# 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: <b>Commissioner's Office</b>	Location of Inspection: <b>Labor Building</b>
Inspection Team:	Date of Inspection: <b>7/12/19</b>
1. <b>Rose Gray</b>	Unit Manager: <b>Cherry Berry</b>
2. <b>Mildred Rivera</b>	Additional Comments:
3.	Fire extinguisher needs to be inspected. Everything else looks good.

## 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
<input 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 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 #) #10482 was last inspected on 5/7/19. This needs to be done every month.
<input type="checkbox"/>		<input type="checkbox"/>	
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 Amanda Carroll (Amanda.Carroll@labor.nc.gov). To be uploaded to the intranet and the specific Unit.

Unit: <i>Communications</i>	Location of Inspection: <i>Labor Bldg 1st Floor</i>
Inspection Team:	Date of Inspection: <i>7/17/2019</i>
1. <i>Terr Harris</i>	Unit Manager: <i>Dolores Quesenberry</i>
2. <i>Doris Kester</i>	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): <i>no issues</i>	

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>10486</i> <i>Last inspected 5/19/19 by Carter Grimes</i>
Additional Comments, notations, and abatement information (including date): <i>Remember to inspect fire extinguisher monthly.</i>	



# 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: <i>Financial Svcs</i>	Location of Inspection: <i>Labor Bldg 3rd Floor</i>
Inspection Team:	Date of Inspection: <i>7/17/2019</i>
1. <i>Terri Harris</i>	Unit Manager: <i>Jennifer Stackpole</i>
2. <i>Doris Kester</i>	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): <i>none</i>	

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>10486</i> <i>Inspected by Carter Grimes 7/19/19</i> <i>Remember to inspect monthly</i>
Additional Comments, notations, and abatement information (including date): <i>Fire extinguisher needs to be inspected.</i>	



## 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: <b>Legal Affairs</b>	Location of Inspection: <b>Labor Building</b>
Inspection Team:	Date of Inspection: <b>7/12/19</b>
1. <b>Rose Gray</b>	Unit Manager: <b>Jill Cramer</b>
2. <b>Mildred Rivera</b>	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 #)
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](mailto:dawain.faison@labor.nc.gov)), to be uploaded to the intranet and the specific Unit.

Unit: <b>OSH</b>	Location of Inspection: <b>ORB 3<sup>rd</sup> Floor</b>
Inspection Team:	Date of Inspection:
1. <i>Beth Henley</i>	Unit Manager: <b>Kevin Beauregard</b>
2. <i>Avery Horton</i>	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): <i>No violations found</i>	

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>Serial # A01432</i> <i>Last inspected 7/24/19</i>
Additional Comments, notations, and abatement information (including date): <i>No violations found</i>	



## 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: 7/25/19
	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 7/2019.
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>IT &amp; Research and Policy</u>	Location of Inspection: <u>Research &amp; Policy + IT (4th floor Labor Bldg)</u>
Inspection Team:	Date of Inspection: <u>7/25/19</u>
1. <u>Angela Hamilton</u>	Unit Manager: <u>Gary Franks, Todd McNoldy</u>
2.	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): <u>no violations noted.</u>	

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>4/9/19 CG #10484</u> <u>4/9/19 CG #10489</u>
Additional Comments, notations, and abatement information (including date): <u>no violations noted.</u>	