



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: 01/17/19
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): Space heater forms kept with Doris Kester. One space heater was plugged into a power strip, it was promptly removed and plugged directly into a wall outlet.			

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
<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 #) 10488 Inspected 1/17/19
Additional Comments, notations, and abatement information (including date):			



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Unit: <u>Budget</u>	Location of Inspection: <u>2nd floor Labor Bldg</u>
Inspection Team:	Date of Inspection: <u>1/11/19</u>
1. <u>Beth Benson</u>	Unit Manager: <u>Jennifer Stackpole</u>
2. <u>Crystal Williams</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>10487 + 10486</u> <u>no monthly inspection</u> <u>Serviced April 2018</u>
Additional Comments, notations, and abatement information (including date):	



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Unit: <u>Communications</u>	Location of Inspection: <u>1st floor Labor Bldg</u>
Inspection Team:	Date of Inspection: <u>11/11/19</u>
1. <u>Beth Benson</u>	Unit Manager: <u>D. Quisenberry</u>
2. <u>Crystal Williams</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>no monthly inspection (no initials)</u> <u>Serviced April 2018</u>
Additional Comments, notations, and abatement information (including date):	