



# 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](mailto:Amanda.Carroll@labor.nc.gov)). To be uploaded to the intranet and the specific Unit.

Unit: ETTA	Location of Inspection: ORB 3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> floors
Inspection Team:	Date of Inspection: December 4, 2018 – 4 <sup>th</sup> Quarter
1. Carlene Harris	Unit Manager: Wanda Lagoe
2. James Washington	Additional Comments:

### Inspection Information

<b>Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation</b>	
<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): <b>Electric cords and outlets were in working order.</b>	

<b>Fire Hazards and Egress: Check appropriate box when condition is identified and make notation</b>	
<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 checked="" type="checkbox"/> <b>Space heaters meet testing laboratories criteria</b>	<input type="checkbox"/> Block Exit doors
<input type="checkbox"/> Flammable/Combustibles stored correctly	<input checked="" type="checkbox"/> <b>Chemicals stored correctly</b>
<input type="checkbox"/> Excessively warm/overheated cords or equipment:	<input checked="" type="checkbox"/> <b>Fire extinguishers inspected (identify by Serial #): 4<sup>th</sup> Floor - AO1427 and AO1428 (monthly)</b>
Additional Comments, notations, and abatement information (including date):	
<p><b>Several of the AED's are being serviced. Signage stating where the nearest one is located on the AED cabinets.</b></p> <p><b>The carpet was replaced in the building in October and November.</b></p> <p><b>The Evacuation Route signage near the 4<sup>th</sup> floor elevator had fallen off the wall. Building Maintenance was contacted to replace.</b></p> <p><b>There were no fire hazards or other items identified.</b></p>	