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|  | **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.

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| Unit: Compliance - West | Location of Inspection: Charlotte Field Office |
| Inspection Team: | Date of Inspection: May 31, 2023 |
| 1. Griselle Negron |
| Unit Manager: Lee Peacock |
|  | Additional Comments: |
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**Inspection Information**

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| **Electrical Cords and Outlets: Check appropriate box when condition is identified and add notation** | | | |
|  | Cords in walkways |  | Extension cords used as permanent wiring |
|  | Damaged cords (any type) |  | Exposed energized parts |
|  | Missing ground pin on 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 adapters used or two prong extension cord |
| Additional Comments, notations, and abatement information (including date): No issues. | | | |

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| **Fire Hazards and Egress: Check appropriate box when condition is identified and make notation** | | | |
|  | Items stored within 3 feet of a heater and/or heat source |  | Blocked fire extinguishers |
| **X** | 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 #)  # |
| Additional Comments, notations, and abatement information (including date): **Emergency lights in the hallway toward the back door of the office don’t work. Landlord of the building was notified.** | | | |

**Inspection Division/Bureau: NC DOL/OSH/Employee Safety and Health Steering Committee Document Name: Unit Inspection form Document Owner: Safety and Health Steering Committee**