



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: OSH Compliance West	Location of Inspection: Charlotte Field Office
Inspection Team:	Date of Inspection: 05-20-20
1. Jennie Cagle	Unit Manager: Paul Sullivan
2.	Additional Comments:
3.	No issues

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 #) XS123916, #1, #2, and the unlabeled extinguisher on the lab side beside the restrooms
Additional Comments, notations, and abatement information (including date):	



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Unit: District 1	Location of Inspection: Asheville Office
Inspection Team:	Date of Inspection: May 2020
1. Kristie Hall	Unit Manager: Kay Knezevich
2.	Additional Comments:
3.	No Issues.

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 adapters 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 NOT 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 #) Kiddie Fire Extinguishers (#RD-379022 and #RD-379023)
Additional Comments, notations, and abatement information (including date): The AED (HeartStart FR2+ defibrillator) was checked, to include located in designated location, no damage or missing parts, battery was charged, a spare battery was present, and AED pads are current.			