



**N.C. DEPARTMENT OF LABOR  
OCCUPATIONAL SAFETY AND HEALTH DIVISION**

**RECEIPT OF PUBLIC AGENCY RECORDS**

Establishment Name: \_\_\_\_\_ Inspection No.: \_\_\_\_\_ Opening Date: \_\_\_\_\_

Site Address: \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Agency Providing the Information: \_\_\_\_\_  
Agency Name \_\_\_\_\_

Person Providing the Information: \_\_\_\_\_  
Agency Official's Name and Title \_\_\_\_\_

\_\_\_\_\_ Mailing Address \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_ Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Persons/Organizations Receiving Information: \_\_\_\_\_  
N.C. Department of Labor – Occupational Safety and Health Division  
Department/Division Name \_\_\_\_\_

\_\_\_\_\_ Principal OSH Investigator Name \_\_\_\_\_

\_\_\_\_\_ Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Specific Description of Information Being Provided:

Complete Investigation Records (e.g., investigative reports, witness statements, videos, photographs)  
 Other (Please Specify): \_\_\_\_\_

I understand that records provided to the N.C. Department of Labor are subject to disclosure pursuant to N.C. Gen. Stat. §95-136, the Occupational Safety and Health Act. That act provides, in part, that files and other records relating to investigations and enforcement proceedings shall not be subject to inspection and examination as authorized by G.S. 132-6 while such investigations and proceedings are pending, except that, subject to the provisions of G.S. 95-136(e1), an employer cited under the provisions of the OSH Act is entitled to receive a copy of the official inspection report which is the basis for citations received by the employer following the issuance of citations.

I have read and understand the information in this Authorization.

\_\_\_\_\_  
Signature of Agency Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Agency Representative

**FORM MUST BE COMPLETED IN ITS ENTIRETY**

**THIS FORM SHOULD BE ATTACHED TO THE FRONT OF ANY RECORDS RECEIVED**