N C Department of Labor Elevator Bureau
1101 Mail Service Center, Raleigh, NC 27699-1101

INSPECTION REPORT

IMPORTANT: Always use State Number in
any correspondence relating to your equipment
www.nclabor.com/elevator.htm

Invoice Number
557333

EQUIPMENT INSPECTED

State Number: 2973	Type of Unit: Passenger	Landings: 4	Manuf: OTIS
Capacity: 4000	Installed: 10/18/1957	Complied: 10/24/2002	Speed: 200
Volts: 208	Floor to Floor: 1 to 4	Entrances: 1	Rope Size: 5/8

Owner: BEAUFORT COUNTY HOSPITAL, 628 E 12TH ST, WASHINGTON, NC, 27889
Occupant: BEAUFORT COUNTY HOSPITAL, 628 E 12TH ST, WASHINGTON, NC, 27889

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County Name	County Code
11/17/2008	Routine	Re-issued	16 - Moore	BEAUFORT	7

VIOLATIONS FOUND

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into compliance with current codes.

---

n/a No violations found

Violations pointed out to: Stan Head of Maintenance Inspector _____

INVOICE

No other invoice will be issued.
If not paid within 30 days from date of invoice, your certificate becomes invalid.

Return this stub with payment to: NC Department of Labor, Budget and Purchasing Division,
1101 Mail Service Center, Raleigh, NC 27699-1101

Owner: BEAUFORT COUNTY HOSPITAL, 628 E 12TH ST, WASHINGTON, NC, 27889
Occupant: BEAUFORT COUNTY HOSPITAL, 628 E 12TH ST, WASHINGTON, NC, 27889

Invoice Number
557333
State Nbr: 2973
Date: 11/17/2008
Fee: $200
