

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 557455

		EQUIPMENT INSPE	CCTED			
Occupant: BEAUFORT	COMMUNITY COLLEGE, 53:	02/1993 Complied: 04/02 :: 1 to 2 Entrances: 1 69, WASHINGTON, NC, 27889 LEGE, 5337 HWY 264 EAST, WASHIN				
		NSPECTION INFOR	MATION			
Inspection Date 02/05/2009					County Code	
		VIOLATIONS FOU	JND			
Notify the Elevator Bu	ureau in writing on Corrected Vi equipme	olations Form when th nt into compliance wit		ons have been made in order	to bring you	
	iolations found					
Violations pointed out to:		Inspector				
		INVOICE				
No other invoice will be issue If not paid within 30 days from date of invoice, your Return this stub with payment to: NC Department of Labor, Bull 101 Mail Service Center, Raleigh, NC 27699-1101 Dwner: BEAUFORT COUNTY, POBOX 1069, WASHING Decupant: BEAUFORT COMMUNITY COLLEGE, 5337 HW27889		your certificate become or, Budget and Purchase HINGTON, NC, 27889	sing Division,	557455 State Nbr: 1496 Date: 02/0:		