



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
566967

EQUIPMENT INSPECTED

State Number: 21779	Type of Unit: Passenger	Landings: 2	Manuf: OTIS
Capacity: 4500	Installed: 05/14/2004	Complied: 05/14/2004	Speed: 100
Volts: 480	Floor to Floor: 1 to 2	Entrances: 1	Rope Size: .
Owner: DOSHER MEMORIAL HOSPITAL, 924 N HOWE ST, SOUTHPORT, NC, 28461			
Occupant: DOSHER MEMORIAL HOSPITAL, 924 N HOWE ST, SOUTHPORT, NC, 28461			

INSPECTION INFORMATION

Inspection Date 06/11/2008	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County Name BRUNSWICK	County Code 10
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Violation Abatement Date: 06/21/2008

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.

8.6.4.15 Emergency operation of signaling devices, lighting, communication, and ventilation, shall be maintained. EMER. PHONE INOPERATIVE.

Violations pointed out to: MIKE TOMPKINS

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

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Invoice Number
566967
State Nbr: 21779
Date: 06/11/2008
Fee: \$175