

## 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 **567067** 

		EQUIPMENT INS	PECTED		
	y: 2500 Installed: 09/17/199			992	Manuf: OTIS Speed: 125 Rope Size:
		INSPECTION INFO	RMATION		
Inspection Date 08/13/2008	Type Inspection Compliance	Certificate Status Prev Issued	Inspector 48 - Martin	County Name BLADEN	County Code 9
		VIOLATIONS F	OUND		
Notify the Elevator B	ureau in writing on Correct equ	ted Violations Form when aipment into compliance v		ons have been made	in order to bring your
n/a No vi	olations found				
Violations pointed out to:	iolations pointed out to: MANAGEMENT			spector	
		INVOICE	;		
If not paid with	No other invoice vain 30 days from date of inv		mes invalid.	Invo	pice Number
Return this stub with payment to: NC Department of Labor, Budget and Pur 1101 Mail Service Center, Raleigh, NC 27699-1101			nasing Division,	State Nb	567067
	OD PROCESSORS, NC F OOD PROCESSOR, PO E			Date: Fee:	\$0