

INSPECTION REPORT

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

Invoice Number
567094

EQUIPMENT INSPECTED

State Number: 11519 Type of Unit: Passenger Landings: 6 Manuf: SOUTHERN
Capacity: 4000 Installed: 09/04/1986 Complied: 10/16/1986 Speed: 100
Volts: 480 Floor to Floor: 1 to 6 Entrances: 1 Rope Size: 5/8
Owner: ELIZABETHTOWN LUMBERTON POWER, PO BOX 1899, ELIZABETHTOWN, NC, 28337
Occupant: ELIZABETHTOWN LUMBERTON POWER, 3100 W BROAD ST, ELIZABETHTOWN, NC, 28337

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County Name	County Code
08/27/2008	Routine	Re-issued	48 - Martin	BLADEN	9

Violation Abatement Date: 09/26/2008

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.

- 8.6.4.7.4 Take steps to eliminate the accumulation of water on the pit floor and remove same. WATER IN PIT.
- 8.11.3.2.1 Perform the annual relief valve test
- 8.6.4.15 Emergency operation of signaling devices, lighting, communication, and ventilation, shall be maintained. EMER. BELL & STOP SW. INOPERATIVE.
- 8.6.8.9 Signs. Caution signs shall be provided. Damaged or missing signs shall be replaced. 3RD. & 4TH. FLS.
- 8.6.1.6.5 Provide a class "ABC" fire extinguisher in the machine room or control space convenient to the access door. MOUNT EXT.

Violations pointed out to: MANAGEMENT

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
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State Nbr: 11519
Date: 08/27/2008
Fee: \$200