

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 575030

<u></u>		EQUIPMENT INS	PECTED			
	city: 2100 Installed: 08/18/2003					
		INSPECTION INFO	RMATION			
Inspection Date 04/23/2008	Type Inspection C	Certificate Status Re-issued	Inspector 36 - Kirkman	County Name ALAMANCE	County Cod 1	
		VIOLATIONS F	OUND			
Notify the Elevator Bu	ureau in writing on Corrected V equipme	iolations Form when ent into compliance w		ons have been made in o	order to bring you	
n/a No vi	iolations found					
iolations pointed out to: office			Inspector			
		INVOICE				
Return this stub with pay 1101 Mail Service Center	No other invoice will be in 30 days from date of invoice ment to: NC Department of Labr, Raleigh, NC 27699-1101	, your certificate beco oor, Budget and Purcl	nasing Division,	575 State Nbr:	e Number 5030 21832 04/23/2008	