

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 575074

		EQUIPMENT INS	SPECTED			
State Number: 4017 Type of Unit: Freight Capacity: 3000 Installed: 03/18/1958 Volts: 550 Floor to Floor: 1 to 2 Owner: OK SALES INC., 808 E WEBB AVE (336-266-08) Occupant: OK SALES INC., 808 E WEBB AVE (336-266-08)		/1958 Comp 1 to 2 Entrai 6-266-0887, BURLINGTO (336-266-0887, BURLING	-0887, BURLINGTON, NC, 27215		Manuf: SOUTHERN Speed: 75 Rope Size:	
Elevator Name: OKSALES	BELLSOUTH.NET INSP	ECTION INFORMATION	V			
Inspection Date 05/07/2008	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County Name ALAMANCE	County Code	
		VIOLATIONS F	OUND			
Notify the Elevator B		cted Violations Form wher quipment into compliance		ons have been made in or	rder to bring you	
Violations pointed out to: office			Inspector			
		INVOICI	E			
Return this stub with pay	eturn this stub with payment to: NC Department of Labor, Budget and Purchasing Division, 01 Mail Service Center, Raleigh, NC 27699-1101 State Nbr:		5750 State Nbr: 4	ce Number 75074 4017 05/07/2008		
		36-266-0887, BURLINGT 336-266-0887, BURLING			175	