

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 575262

EQUIPMENT INSPECTED					
Capacity: 6000 Installed: 07/09 Volts: 220 Floor to Floor: Dwner: H & J MANAGEMENT INC, PO BOX 2118 Decupant: H & J MANAGEMENT INC, PO BOX 21		/09/1973 r: 1 to 2 118, BURLINGTON, NC			Manuf: OTIS Speed: 75 Rope Size:
		INSPECTION INF	ORMATION		
Inspection Date 07/31/2008	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County Name ALAMANCE	
		VIOLATIONS	FOUND		
Notify the Elevator E	Bureau in writing on Correct ec	cted Violations Form who quipment into compliance		ns have been made	in order to bring your
NONE FOUND AT TI	ME OF INSPECTION				
Violations pointed out to:	olations pointed out to: office		Ins	spector	
		INVOIC	 CE		
No other invoice will be issued. If not paid within 30 days from date of invoice, your certificate			comes invalid.	Invoice Number 575262 State Nbr: 4688	
Return this stub with payment to: NC Department of Labor, Budget and Pu 1101 Mail Service Center, Raleigh, NC 27699-1101			chasing Division,		
Owner: H & J MANAGEMENT INC, PO BOX 2118, BURLINGTON, NC, 27216 Occupant: H & J MANAGEMENT INC, PO BOX 2118, BURLINGTON, NC, 27217				Date: Fee:	07/31/2008 \$175