

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 575424

		EQUIPMENT INS	PECTED		
tate Number: 24169 Type of Unit: Passenger Capacity: 2500 Installed: 09/20/2006 Volts: 208 Floor to Floor: 1 to 3 Dwner: CONCORD RETIREMENT RESIDENCE, LLC, 2250 Docupant: CEDAR RIDGE RETIREMENT CENTER, 2680 M		Complice Entrance 2250 MCGLILLCI	ed: 09/20/2006 es: 1 HRIST ST NE, SALEN		
INSPECTION INFORMATION					
Inspection Date 10/10/2008	Type Inspection Ce Routine	ertificate Status Re-issued	Inspector 36 - Kirkman	County Name ALAMANCE	County Code
		VIOLATIONS F	OUND		
Notify the Elevator Bu	reau in writing on Corrected Vic equipmer	olations Form when it into compliance v		ons have been made in	order to bring your
No violations found					
Violations pointed out to:	office			Inspector	
		INVOICE	<u> </u>		
No other invoice will be issue If not paid within 30 days from date of invoice, your of Return this stub with payment to: NC Department of Labor, Bu 1101 Mail Service Center, Raleigh, NC 27699-1101 Owner: CONCORD RETIREMENT RESIDENCE,LLC, 2250 SALEM, OR, 97302 Occupant: CEDAR RIDGE RETIREMENT CENTER, 2680 M NC, 27215		your certificate become, Budget and Purch, 2250 MCGLILLC	nd Purchasing Division, 575424 State Nbr: 24169 Date: 10/10// Fee: \$175		5424 24169 10/10/2008