



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
575438

EQUIPMENT INSPECTED

State Number: 21289 Type of Unit: Passenger Landings: 3 Manuf: THYSSEN KRUPP
Capacity: 2500 Installed: 06/23/2003 Complied: 06/23/2003 Speed: 160
Volts: 480 Floor to Floor: 1 to 3 Entrances: 1 Rope Size: 0
Owner: VILLAGE @ BROOKWOOD HEALTH, 1881 T EDGEWOOD AVE., BURLINGTON, NC, 27215
Occupant: VILLAGE @ BROOKWOOD HEALTH, 1881 T EDGEWOOD AVE., BURLINGTON, NC, 27215

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County Name	County Code
10/29/2008	Routine	Re-issued	36 - Kirkman	ALAMANCE	1

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.

No violations found

Violations pointed out to: office

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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State Nbr: 21289
Date: 10/29/2008
Fee: \$175