

## 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 575562

		EQUIPMENT INS	SPECTED			
State Number: H1241 Type of Unit: Hand Lift Capacity: 750 Installed: 04/24/2002 Volts: 18 Floor to Floor: 3 to 3 Owner: GROVE PARK BAPTIST CHURCH, 108 TRAIL ONE, BU Occupant: GROVE PARK BAPTIST CHURCH, 108 TRAIL ONE,		04/24/2002 Oor: 3 to 3 8 TRAIL ONE, BURLING		Manuf: GARAVENTA Speed: 1 Rope Size:		
		INSPECTION INFO	PRMATION			
Inspection Date 01/09/2009	Type Inspection Routine	Certificate Status	Inspector 36 - Kirkman	County Name	County Code	
		VIOLATIONS F	OUND			
Notify the Elevator Bu		cted Violations Form wher quipment into compliance		ons have been made in o	rder to bring your	
No violations found						
Violations pointed out to: office			Inspector			
		INVOICI	∃			
No other invoice will be issued.  If not paid within 30 days from date of invoice, your certificate			omes invalid.	Invoice	Number	
Return this stub with payment to: NC Department of Labor, Budget and 1101 Mail Service Center, Raleigh, NC 27699-1101			hasing Division,	5753 State Nbr: I	575562	
Owner: GROVE PARK BAPTIST CHURCH, 108 TRAIL ONE, BURLING Occupant: GROVE PARK BAPTIST CHURCH, 108 TRAIL ONE, BURLING						