

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 575565

		EQUIPMENT IN	NSPECTED	
State Number: H1603 Type of Unit: Hand Lift Capacity: 750 Installed: 07/06/2005 Volts: 120 Floor to Floor: 1 to 2 Owner: AMERICA'S SELF STORAGE, 2026 OLD CHAPEL HIL Occupant: AMERICA'S SELF STORAGE, 2026 OLD CHAPEL I		/06/2005 r: 1 to 2 LD CHAPEL HILL RD, I		
		INSPECTION INF	ORMATION	
Inspection Date 01/09/2009	Type Inspection Routine	Certificate Status	Inspector 36 - Kirkman	
		VIOLATIONS	FOUND	
Notify the Elevator Bu		cted Violations Form who		s have been made in order to bring your
No violations found				
Violations pointed out to: office				Inspector
		INVOIC	CE	
If not paid withi Return this stub with payr 1101 Mail Service Center Owner: AMERICA'S SE 27215	ment to: NC Department , Raleigh, NC 27699-110	nvoice, your certificate be of Labor, Budget and Pu 01	rchasing Division,	Invoice Number 575565 State Nbr: H1603 Date: 01/09/2009
Occupant: AMERICA'S S NC, 27215	SELF STORAGE, 2026 (OLD CHAPEL HILL RO	AD, BURLINGTON,	Fee: \$65