

## 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 575576

EQUIPMENT INSPECTED							
State Number: 1442 Type of Unit:		Passenger	Landings: 5	]	Manuf: ASK		
Capacity: 4000 Installed: 02/		01/1951	Complied: 09/23/1997		Speed: 200		
Volts: 208 Floor to Floor		G to 4	Entrances: 1	]	Rope Size: 5/8		
		O, 124 W ELM ST, GRA					
Occupant: HU	MAN SEF	RVICES FACILITY, 319	N GRAHAM / HOPEDA	LE RD, BURLINGTON	, NC, 27217		
			INSPECTION INFO	ORMATION			
Inspection Date 01/15/2009		Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County Name ALAMANCE	County Code 1	
Violation A	Abatement	Date: 02/14/2009	VIOLATIONS FOU	JND			
		u in writing on Corrected e with current codes.	Violations Form when th	e following corrections ha	ave been made in	order to bring your	
8.6.4.13.1[k]	Properly maintain door closers, where required. Ist floor missing spring. Tighten second floor spring!						
8.11.2.3.2	Provide the five year full load test.						
2.27.1.1.2	Put the i	Put the in car emergency telephone in proper working order.					
Violations pointed out to: betty					Inspector		

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

Owner: ALAMANCE CO, 124 W ELM ST, GRAHAM, NC, 27253

Occupant: HUMAN SERVICES FACILITY, 319 N GRAHAM / HOPEDALE RD,

BURLINGTON, NC, 27217

Invoice Number 575576 State Nbr: 1442

State Nbr: 1442 Date: 01/15/2009 Fee: \$200