

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 **577697**

\$175

Fee:

EQUIPMENT INSPECTED					
State Number: 11322 Type of Unit: P Capacity: 2000 Installed: 08/02 Volts: 220 Floor to Floor: Owner: AMERICAN RED CROSS, 100 EDGEWOO Occupant: AMERICAN RED CROSS, 100 EDGEWOO		2/1985 Complied: 08/06/1985 1 to 2 Entrances: 1 OOD RD, ASHEVILLE, NC, 28804		Manuf: CEMCO Speed: 115 Rope Size:	
Elevator Name: ELEVATOR # 1	INSPE	ECTION INFORMATION	ſ		
Inspection Date		Certificate Status	Inspector 24 - Moore	County Name	County Code
Violation Abatement Date	e: 10/08/2008	VIOLATIONS FOU	ND		
Notify the Elevator Bureau in equipment into compliance wi	th current codes.	Violations Form when the			
Violations pointed out to: Doi	nna Franklin / 828-258	3-3888 x 111	Ins	pector	
		INVOICI	E 		
No other invoice will be issued. If not paid within 30 days from date of invoice, your certificate be Return this stub with payment to: NC Department of Labor, Budget and Pure					e Number 7697
1101 Mail Service Center, Ra			monig Division,	State Nbr:	11322

Owner: AMERICAN RED CROSS, 100 EDGEWOOD RD, ASHEVILLE, NC, 28804

Occupant: AMERICAN RED CROSS, 100 EDGEWOOD RD, ASHEVILLE, NC, 28804