

## N C Department of Labor Elevator Bureau 1101 Mail Service Center, Raleigh, NC 27699-1101

## INSPECTION REPORT

Invoice Number 593301

IMPORTANT: Always use State Number in any correspondence relating to your equipment www.nclabor.com/elevator.htm

		EQUIPMENT INS	SPECTED			
State Number: 10870 Type of Unit: 1 Capacity: 2500 Installed: 10/2 Volts: 208 Floor to Floor: Owner: HIDDENITE CENTER, 1503 CHURCH ST Occupant: LUCAS MANSION, 1503 CHURCH ST		/25/1984 r: B to 3 TREET, HIDDENITE, N			Manuf: OTIS Speed: 150 Rope Size: 0	
		INSPECTION INFO	DRMATION			
Inspection Date 04/14/2008	Type Inspection Routine	Certificate Status Re-issued		County Name ALEXANDER	County Code 2	
		VIOLATIONS F	FOUND			
Notify the Elevator E	Bureau in writing on Correct eq	cted Violations Form when		tions have been made	in order to bring your	
n/a No v	iolations found					
Violations pointed out to: Dwayne Coley # 828-632-6966				Inspector		
		INVOIC	E			
If not paid with	No other invoice will be issued.  If not paid within 30 days from date of invoice, your certificate by			Invo	Invoice Number	
Return this stub with payment to: NC Department of Labor, Budget and Purchasing Division, 1101 Mail Service Center, Raleigh, NC 27699-1101			State Nb	593301 :: 10870 04/14/2008		
Owner: HIDDENITE CENTER, 1503 CHURCH STREET, HIDDENITE, NC, 28636 Occupant: LUCAS MANSION, 1503 CHURCH STREET, HIDDENITE, NC, 28636				Fee:	\$175	