

## 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 593689

		EQUIPMENT INSI	PECTED		
State Number: H2024 Type of Unit: Hand Lift Capacity: 750 Installed: 09/29/2008 Volts: 115 Floor to Floor: 1 to 2 Owner: LEE MCRAE COLLEGE, 144 WILSON ROAD, BANN Occupant: LEES MCRAE RECREATIONAL CENTER, 144 WILSON ROAD		/29/2008 rr: 1 to 2 ROAD, BANNER ELK, N		Speed: 9 Rope Size: 0	
		INSPECTION INFO	RMATION		
Inspection Date 10/06/2008	Type Inspection Compliance	Certificate Status Issued	:	County Name AVERY	County Code 6
		VIOLATIONS FO	DUND		
	reau in writing on Correct equ	ipment into compliance w	rith current codes.		
n/a No vie	olations found				
Violations pointed out to:	Clayton Stout - Vertical S	olutions # 433-257-9941		Inspector	
		INVOICE			
If not paid withi	No other invoice vn 30 days from date of inv		omes invalid.	T	Nīmala
Return this stub with payment to: NC Department of Labor, Budget and Purchasin 1101 Mail Service Center, Raleigh, NC 27699-1101			nasing Division,	593	e Number 8689 H2024
Owner: LEE MCRAE COLLEGE, 144 WILSON ROAD, BANNER ELK, NC. Occupant: LEES MCRAE RECREATIONAL CENTER, 144 WILSON ROAD, NC, 28604				Date:	10/06/2008 \$200