

## 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 593691

		EQUIPMENT INSI	PECTED			
State Number: H1711 Type of Unit: Hand Capacity: 750 Installed: 07/05/200 Volts: 115 Floor to Floor: 1 to Owner: GRANDFATHER HIGHLAND CENTER, P.O.BO Occupant: GRANDFATHER HIGHLAND BUILDING, 7		/05/2006 rr: 1 to 2 , P.O.BOX 65, LINVILLE		Manuf: NATL W-O-V Speed: 20 Rope Size: 0		
		INSPECTION INFO				
Inspection Date 10/06/2008	Type Inspection Routine	Certificate Status Re-issued	Inspector 4 - Henegar	County Name AVERY	County Code 6	
		VIOLATIONS FO				
Notify the Elevator Bu	reau in writing on Correct equ	ed Violations Form when tipment into compliance w		ons have been made in	order to bring your	
n/a No vi	olations found					
Violations pointed out to:	Frank Vance # 828-733-0	220		Inspector		
		INVOICE				
No other invoice will be issued.  If not paid within 30 days from date of invoice, your certificate eturn this stub with payment to: NC Department of Labor, Budget and I lol Mail Service Center, Raleigh, NC 27699-1101  wner: GRANDFATHER HIGHLAND CENTER, P.O.BOX 65, LINV ccupant: GRANDFATHER HIGHLAND BUILDING, 73 ARLENE GIINVILLE, NC, 28646		voice, your certificate become f Labor, Budget and Purch	nasing Division, E, NC, 28646	593	10.00.2000	