

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 610790

		EQUIPMENT IN	SPECTED			
tate Number: 18236 Type of Unit: Passenger apacity: 2100 Installed: 11/19/1998 folts: 460 Floor to Floor: 1 to 2 owner: DELAFAYETTE RESTAURANT, 6112 CLIFFDALE occupant: DELAFAYETTE RESTAURANT, 6112 CLIFFDALE		9/1998 Co 1 to 2 Er CLIFFDALE RD, FAYE			Manuf: SCHINDLER Speed: 100 Rope Size:	
		INSPECTION INF				
Inspection Date Type Inspection 11/18/2008 Not Inspected			e Status Inspector Cou		unty Name County Code BERLAND 26	
		VIOLATIONS	FOUND			
Notify the Elevator B		cted Violations Form whe			e been made in	order to bring you
iolations pointed out to: *			Inspector			
		INVOIC	EE			
	No other invoice					
If not paid within 30 days from date of invoice, you eturn this stub with payment to: NC Department of Labor, 101 Mail Service Center, Raleigh, NC 27699-1101		of Labor, Budget and Pur			Invoice Number 610790	
	DELAFAYETTE RESTAURANT, 6112 CLIFFDALE RD, FAYETTEVILLE, NC,		ETTEVILLE, NC,		Date:	11/18/2008
28302 Occupant: DELAFAYET 28302	TE RESTAURANT, 611	12 CLIFFDALE RD, FAY	YETTEVILLE, NC,		Fee:	\$0