

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 919-707-7927 Report Number 10035-36-5816 State Number 2850

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EQUIPMENT INSPECTED				
State Number: 2850 Type of U Capacity: 4000 Manuf: M Landings: 3 Installed: Volts: 208 Complied		ARCH 3/1956	Floor to Floor: B to 2 Speed: 75 Rope Size: Entrances: 1	
OWNER JOHN BURTON-CHADPRTAFIELD PO BOX 2038 BURLINGTON, NC, 27215		OCCUPANT MAI STREET FLEA MARKET 612 S MAIN ST BURLINGTON, NC, 27215		
	Ι	NSPECTION INFORMATION		
Inspection Date 02/04/2010	Type Inspection Routine	Certificate Status Not Issued	Inspector 36 - Kirkman	County ALAMANCE
		VIOLATIONS		
2.7.3.4.1(b) 8.11.2.2.2 8.6 8.6	Provide a self closing, self locking ma Perform the annual no load safety test TAKE STEPS TO PROPERLY SERV REPLACE MISSING LIGHT GUAR	: VICE ELEVATOR		

To make changes to the invoice mailing address please call: 919-733-0372

THIS IS NOT AN INVOICE

complainace with current codes.

Items must be corrected by: 03/06/2010

Violations pointed out to: JOHN BURTON

JOHN BURTON-CHADPRTAFIELD

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into

An invoice will be mailed to: PO BOX 2038

BURLINGTON, NC, 27215

Inspector ___