

THIS IS NOT AN

INVOICE

## 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 10047-36-2418 State Number 22766

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			EQUIPMENT INSPECTED			
State Number: 22766		Type of Unit: Passenger		Floor to Floor: 1 to 2		
Capacity: 2500		Manuf: OTIS	Manuf: OTIS		Speed: 100	
Landings: 2		Installed: 02/0	Installed: 02/07/2005		Rope Size:	
Volts: 480 Complied		Complied: 02/	/07/2005	Entrances: 1	Entrances: 1	
OWNER			OCCUPANT			
S P M INVESTMENTS, LLC			CAROLINA NUCLEAR MEDICINE			
1011 WEST DAVIS DRIVE		CROUSE LN KIRKPATRICK RD				
BURLINGTON, NC, 27215		BURLINGTON, NC, 27215				
		IN	NSPECTION INFORMATION			
Inspection Date 02/16/2010		Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE	
			VIOLATIONS			
2.27.1.1.2	Put the in o	car emergency telephone in proper working order.				
8.6.1.2.1	Provide a v	written maintenance program.				
8.6.10.1	Update the	monthly fire service log.				
8.11.2.2.2	Perform th	e annual no load safety test				
Items must be corrected by: 03/18/2010			Elevator Name: DR. MORAYATI			
Notify the Elevato complainace with	or Bureau in writir current codes.	ng on Corrected Violations Form	when the following corrections l	nave been made in order to brir	ng your equipment int	
Violations pointed out to: office			Inspector			

S P M INVESTMENTS, LLC

1011 WEST DAVIS DRIVE

BURLINGTON, NC, 27215

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

An invoice will be mailed to: