

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 10063-36-1644 State Number 4698

1

	Е	QUIPMENT INSPECTED			
State Number: 4698	Type of Unit: Fr	eight	Floor to Floor: 1 to	2	
Capacity: 7500	Manuf: SOUTHERN		Speed: 60		
Landings: 2	Installed: 10/01/1962		Rope Size: 0		
Volts: 550	Complied: 04/08	3/2004	Entrances: 1		
OWNER		OCCUPANT			
CAROLINA FINISHING OF N	NC CAROLINA FINISHING OF NC LLC				
PO BOX 2226	220 ELMIRA ST				
BURLINGTON, NC, 27216		BURLINGTON, NC, 27217			
	INS	SPECTION INFORMATION			
Inspection Date 03/04/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE	
		VIOLATIONS			
No violations found					
Notify the Elevator Bureau in write omplainace with current codes.	ting on Corrected Violations Form v	when the following corrections h	nave been made in order to bri	ng your equipment into	
iolations pointed out to: office					
	To make changes to the invoice ma				
THIS IS NOT AN INVOICE	An invoice will be mailed to:	CAROLINA FINISHING PO BOX 2226 BURLINGTON NC 273	G OF NC		