

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 10064-4-4296 State Number 21159

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	I	EQUIPMENT INSPECTED		
State Number: 21159 Type of Unit: Passo		ssenger	Floor to Floor: 1 to 2	
Capacity: 4500			Speed: 125	
Landings: 2	Installed: 11/17/2003		Rope Size: 0	
Volts: 480	Complied: 11/17/	/2003	Entrances: 1	
OWNER		OCCUPA	ANT	
N.C. DEPARTMENT OF CO	PRRECTIONS		NDER CORRECTIONAL	
831 WEST MORGAN STREET		633 OLD	LANDFILL RD	
RALEIGH, NC, 27603		TAYLORSVILLE, NC, 28681		
	IN	SPECTION INFORMATION		
Inspection Date 03/05/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 4 - Henegar	County ALEXANDER
		VIOLATIONS		
n/a No viola	ations found			
Elevator Name: # 1				
Notify the Elevator Bureau in womplainace with current codes	vriting on Corrected Violations Form	when the following corrections l	have been made in order to b	oring your equipment into
Violations pointed out to: Dept of Corrections # 828-632-1331			Inspector	
	To make changes to the invoice ma			
THIS IS NOT AN INVOICE	N.C. DEPARTMENT OF CORRECTIONS An invoice will be mailed to: 831 WEST MORGAN STREET RALEIGH. NC. 27603			