

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 10069-16-2317 State Number 4141

EQUIPMENT INSPECTED				
State Number: 4141	Type of Unit: Pas	ssenger	Floor to Floor: 1 to	2
Capacity: 1200	Manuf: SOUTHE	ERN	Speed: 50	
andings: 2	Installed: 02/17/1	959	Rope Size: 0	
olts: 208	Complied: 02/17/	1959	Entrances: 1	
OWNER		OCCUPANT		
ORR LODGE 104		ORR LODGE 104		
PO BOX 1913		3RD BONNER STS		
WASHINGTON, NC, 27889		WASHINGTON, NO	C, 27889	
	IN	SPECTION INFORMATION		
Inspection Date 03/10/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 16 - Moore	County
03/10/2010		Re-Issueu	10 - Moore	BEAUFORT
		VIOLATIONS		
a No violatio	ons found			
tify the Elevator Bureau in writ nplainace with current codes.	ing on Corrected Violations Form	when the following corrections hav	e been made in order to brit	ng your equipment into
iolations pointed out to: Ray Briley		Inspector		
		iling address places call: 010 733		
THIS IS NOT AN	To make changes to the invoice mailing address please call: 919-733-0372 ORR LODGE 104			
INVOICE	An invoice will be mailed to:	PO BOX 1913 WASHINGTON NC 2788	9	