



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
10070-4-4123
State Number
H1711

EQUIPMENT INSPECTED

| | | |
|-----------------------------|-------------------------------|------------------------|
| State Number: H1711 | Type of Unit: Hand Lift | Floor to Floor: 1 to 2 |
| Capacity: 750 | Manuf: NATL W-O-V | Speed: 20 |
| Landings: 2 | Installed: 07/05/2006 | Rope Size: 0 |
| Volts: 115 | Complied: | Entrances: 1 |
| OWNER | OCCUPANT | |
| GRANDFATHER HIGHLAND CENTER | GRANDFATHER HIGHLAND BUILDING | |
| P.O.BOX 1095 | 73 ARLENE GREENE LANE | |
| LINVILLE, NC, 28646 | LINVILLE, NC, 28646 | |

INSPECTION INFORMATION

| | | | | |
|-------------------------------|----------------------------|---------------------------------|--------------------------|-----------------|
| Inspection Date 03/11/2010 | Type Inspection Routine | Certificate Status Re-issued | Inspector 4 - Henegar | County AVERY |
|-------------------------------|----------------------------|---------------------------------|--------------------------|-----------------|

6

VIOLATIONS

n/a No violations found

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

Violations pointed out to: Grandfather Highland Ctr. # 828-733-1333

Inspector _____

THIS IS NOT AN
INVOICE

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

An invoice will be mailed to:

GRANDFATHER HIGHLAND CENTER
P.O.BOX 1095
LINVILLE, NC, 28646