

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 10152-24-4526 State Number H1519

		EQUIPMENT INSPECTED			
Capacity: 750 Manuf: AC Landings: 2 Installed: G		nit: Hand Lift Floor to		o Floor: 1 to 2	
			Speed: 12		
		06/23/2004	Rope Size:		
		06/23/2004 Entrances: 0		0	
		OCCU	JPANT		
		40 NORTH FRENCH BROAD 40 N FRENCH BROAD			
		ASHEVILLE, NC, 28801			
		INSPECTION INFORMATION	1		
Inspection Date 06/01/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 24 - Moore	County BUNCOMBE	11
		VIOLATIONS			
A18.1 Provide proper alarm					
Itams must be corrected by	ov: 07/01/2010	Elevator Name: I	NISABI ED DEDSONS I I	ET.	
Items must be corrected by: 07/01/2010		Elevator Name: DISABLED PERSONS LIFT orm when the following corrections have been made in order to bring your equipment into			
complainace with current codes. Violations pointed out to: Mailed to Owner					
violations pointed out to: Ma					-
THIS IS NOT AN INVOICE	To make changes to the invoice An invoice will be mailed to:	e mailing address please call: 919 ASHEVILLE BROAD 1881 NE 26ST ST. SU	CENTER, LLC		

1881 NE 26ST ST. SUITE 21 FORT LAUDERDALE, FL, 33305

An invoice will be mailed to: