

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 10168-36-451 State Number 819

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	F	EQUIPMENT INSPECTED			
State Number: 819	Type of Unit: Frei	ght	Floor to Floor: 1 to 2	2	
Capacity: 2000	Manuf: MONARCH		Speed: 50	Speed: 50	
Landings: 2	Installed: 01/21/1947		Rope Size: 1/2	Rope Size: 1/2	
Volts: 220	Complied: 01/21/	1947	Entrances: 2		
OWNER	OCCUPANT				
GLEN PROPERTIES LLC	NEWTON FURNITURE CO				
PO BOX 124	236 E FRONT ST				
BURLINGTON, NC, 27216		BURLINGTON, NC, 27215			
	INS	SPECTION INFORMATION			
Inspection Date 06/17/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE	
		VIOLATIONS			
No violations found					
otify the Elevator Bureau in wri	iting 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:	GLEN PROPERTIES LL PO BOX 124 BURLINGTON NC 272	C		