

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 10201-7-4196 State Number H1805

	E	QUIPMENT INSPECTED			
State Number: H1805	Type of Unit: 1	Type of Unit: Hand Lift Manuf: GARAVENTA		Floor to Floor: 1 to 2 Speed: 10	
Capacity: 750	Manuf: GARA				
Landings: 2	Installed: 11/21/2006 Complied: 11/21/2006		Rope Size: 0 Entrances: 2		
Volts: 120					
OWNER	OCCUI	OCCUPANT			
ALLEGHENY COUNTY	ALLEG	ALLEGHANY COUNTY COURT HOUSE			
90 S MAIN STREET	12 N M	12 N MAIN STREET			
SPARTA, NC, 29063	SPART	TA, NC, 29063			
	INS	SPECTION INFORMATION			
Inspection Date 07/20/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 7 - Hoffman	County ALLEGHANY	
		VIOLATIONS			
NONE					
lotify the Elevator Bureau in vomplainace with current codes	writing on Corrected Violations Form v	when the following corrections have	ve been made in order to b	ring your equipment into	
violations pointed out to: LAF					
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	An invoice will be mailed to:	ALLEGHENY COUNTY 90 S MAIN STREET SPARTA, NC, 29063			