



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](http://www.nclabor.com/elevator.htm)  
919-707-7927

Report Number  
**10235-36-1596**  
State Number  
**5337**

EQUIPMENT INSPECTED

State Number: <b>5337</b>	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 1000	Manuf: SOUTHERN	Speed: 75
Landings: 2	Installed: 07/30/1965	Rope Size:
Volts: 220	Complied: 09/28/1965	Entrances: 1
OWNER	OCCUPANT	
SUE-LYNN INC	SUE-LYNN INC	
BOX 939	BOX 939	
HAW RIVER, NC, 27258	HAW RIVER, NC, 27258	

INSPECTION INFORMATION

Inspection Date 08/23/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
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1

VIOLATIONS

8.11.2.2.2 Perform the annual no load safety test (SECOND NOTICE)  
Thurman B OAKLEY 336-263-3060

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: Thurman B OAKLEY 336-263-3060

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:

SUE-LYNN INC  
BOX 939  
HAW RIVER, NC, 27258