



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  
**10313-36-3320**  
State Number  
**19632**

EQUIPMENT INSPECTED

State Number: <b>19632</b>	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 4500	Manuf: THYSSEN KRUPP	Speed: 140
Landings: 2	Installed: 03/28/2001	Rope Size:
Volts: 460	Complied: 04/11/2001	Entrances: 1
OWNER	OCCUPANT	
ALAMANCE EXTENDED CARE INC	EDGEWOOD PLACE	
1815 EDGEWOOD AVE	1815 EDGEWOOD AVE	
BURLINGTON, NC, 27215	BURLINGTON, NC, 27215	

INSPECTION INFORMATION

Inspection Date 11/09/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
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1

VIOLATIONS

None 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: Carey

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:

ALAMANCE EXTENDED CARE INC  
1815 EDGEWOOD AVE  
BURLINGTON, NC, 27215