

## 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 10349-36-1544 State Number 24497

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	E	QUIPMENT INSPECTED			
State Number: 24497	Type of Unit: P	Type of Unit: Passenger		Floor to Floor: 1 to 3	
Capacity: 2000	Manuf: OTIS			Speed: 125	
Landings: 3	Installed: 01/12	Installed: 01/12/2007			
Volts: 208	Complied: 01/1	Complied: 01/12/2007			
OWNER		OCCUPANT			
ELON UNIVERSITY	OAKS @ ELON UNIVERSITY				
803 HAGGARD AVENUE	204 NORTH WILLIAMSON DRIVE				
ELON, NC, 27244		ELON, NC, 27244			
	INS	PECTION INFORMATION			
Inspection Date 12/15/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE	
		VIOLATIONS			
NONE FOUND					
Elevator Name: BUILDIN	IG F				
Notify the Elevator Bureau in volume	vriting 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: Bob	336.278.2000		Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN	mane changes to the myolee ma	ELON UNIVERSITY	·= ·= /=		
INVOICE	An invoice will be mailed to:	803 HAGGARD AVENU ELON, NC, 27244	JE		