

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 10350-16-4750 State Number 2973

	EQ	UIPMENT INSPECTED			
State Number: 2973	Type of Unit: Passe	nger	Floor to Floor: 1 to	4	
Capacity: 4000	Manuf: OTIS		Speed: 200		
Landings: 4	Installed: 10/18/195	57	Rope Size: 5/8		
Volts: 208	Complied: 10/24/20	002	Entrances: 1		
OWNER		OCCUPANT			
BEAUFORT COUNTY HOSPITA	L	BEAUFORT COUNTY HOSPITAL			
628 E 12TH ST		628 E 12TH ST			
WASHINGTON, NC, 27889		WASHINGTON, NC, 27889			
	INSP	ECTION INFORMATION			
Inspection Date 12/16/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 16 - Moore	County BEAUFORT	
		VIOLATIONS			
Notify the Elevator Bureau in writing complainace with current codes. Violations pointed out to: Stan Main		en the following corrections hav		ng your equipment into	
		ng address please call: 010-733-			
THIS IS NOT AN	BEAUFORT COUNTY HOSPITAL avoice will be mailed to: 628 E 12TH ST				