

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 11040-7-2429 State Number N5.1

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	E	QUIPMENT INSPECTED			
State Number: N5.1	Type of Unit: Fro	eight	Floor to Floor: 1 to 2		
Capacity: 2000	Manuf: PARK		Speed: 40		
Landings: 4	Installed: 07/22/			Rope Size: 5/8	
Volts: 220	Complied: 07/22	Complied: 07/22/1952			
OWNER		OCCUPANT			
GENOS INC		GENOS INC			
464 WINDY ACRES RIDGE RD		302 S JEFFERSON ST			
FLEETWOOD, NC, 28694		WEST JEFFERSON, NC,	WEST JEFFERSON, NC, 28694		
	INS	PECTION INFORMATION			
Inspection Date 02/09/2011	Type Inspection Properly Landed	Certificate Status Not Issued	Inspector 7 - Hoffman	County ASHE	
·		VIOLATIONS			
lotify the Elevator Bureau in writing	on Corrected Violations Form w	hen the following corrections have been	made in order to bring your ec	quipment into	
omplainace with current codes.		S	2,7	1 1	
iolations pointed out to: NCDOL			Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE An	invoice will be mailed to:	GENOS INC 464 WINDY ACRES RIDGE RD FLEETWOOD, NC, 28694			