

## 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 11048-48-091 State Number 27360

	E	QUIPMENT INSPECTED		
State Number: 27360	umber: 27360 Type of Unit: Pas		nger Floor to Floor: 1 to 3	
Capacity: 4500	Manuf: OTIS		Speed: 125	
Landings: 3 Installed: 02/17/2011		/2011	Rope Size:	
Volts: 480	Complied: 02/1	Complied: 02/17/2011		
OWNER		CCUPANT		
NOVANT HEALTH NOVAN		IOVANT HOSPITAL BRUNSWICK COUNTY		
		OCEAN HWY 17		
WINSTON SALEM, NC, 2710	BOLIVIA, NC, 28422			
	INS	SPECTION INFORMATION		
Inspection Date 02/17/2011	Type Inspection New	Certificate Status Issued	Inspector 48 - Martin	County BRUNSWICK
		VIOLATIONS		
Elevator Name: # 2				
Notify the Elevator Bureau in wr complainace with current codes.	iting on Corrected Violations Form v	when the following corrections	have been made in order to	bring your equipment into
Violations pointed out to: MIKE	E.M. [OTIS]			
THIS IS NOT AN INVOICE	To make changes to the invoice ma		733-0372 VENUE	