

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 11049-36-5028 State Number 4357

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	E	QUIPMENT INSPECTED			
State Number: 4357	Type of Unit: Freight		Floor to Floor: 1 to	Floor to Floor: 1 to 2	
Capacity: 2500	Manuf: PARK		Speed: 50		
Landings: 2	Installed: 04/04/1960		Rope Size:		
Volts: 208	Complied: 04/04/1960		Entrances: 1		
OWNER	OCCUPANT				
SAX HOISERY		SAX HOISERY			
220 HARDEN ST	220 HARDEN ST				
GRAHAM, NC, 27253		GRAHAM, NC, 27253			
	INS	PECTION INFORMATION			
Inspection Date 02/18/2011	Type Inspection Not Inspected	Certificate Status Not Issued	Inspector 36 - Kirkman	County ALAMANCE	
		VIOLATIONS			
omplainace with current code		when the following corrections h	ave been made in order to br	ing your equipment into	
Violations pointed out to: N/A	A 				
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	An invoice will be mailed to:	SAX HOISERY 220 HARDEN ST			

GRAHAM, NC, 27253