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
11088-52-0279
State Number
26961

EQUIPMENT INSPECTED

State Number: **26961**	Type of Unit: Passenger	Floor to Floor: 1 to 3
Capacity: 2500	Manuf: TKE	Speed: 150
Landings: 3	Installed: 04/01/2010	Rope Size: 0
Volts: 208	Complied:	Entrances: 1

OWNER
GRANDFATHER MOUNTAIN
P.O. BOX 129
LINVILLE, NC, 28646

OCCUPANT
GRANDFATHER MOUNTAIN TOP SHOP
2050 BLOWING ROCK HWY
LINVILLE, NC, 28646

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County
03/29/2011	Routine	Re-issued	52 - Sosebee	AVERY

6

VIOLATIONS

8.6.1.4.1[d]	Document written record of the findings on the firefighters service operation required by 8.6.10.1
8.11.1.6	Provide the appropriate test tag.

Items must be corrected by: 04/28/2011

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into complainace with current codes.

Violations pointed out to: G.M.T.S. 828-733-2800 Inspector _____

THIS IS NOT AN INVOICE

To make changes to the invoice mailing address please call: 919-733-0372

An invoice will be mailed to: GRANDFATHER MOUNTAIN
P.O. BOX 129
LINVILLE, NC, 28646