NCDOL NCDOL NA Department of John

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 11153-48-2742 State Number 23157

]	EQUIPMENT INSPECTED			
State Number: 23157 Type of Uni		Passenger	Floor to Floor:	Floor to Floor: 1 to 2	
Capacity: 2500	Manuf: SCHIN		Speed: 125		
Landings: 2	Installed: 08/25/2005		-	Rope Size: Entrances: 1	
Volts: 208 Complied					
OWNER	•	OCCUPANT			
MANTHBURG LLC	SOUTHPORT MEDICAL OFFICE 1029 NORTH HOWE STREET				
8295 SPRINGS RD					
WARRENTON, VA, NC, 20186	Ó	SOUTHPORT, NC, 28461			
	IN	SPECTION INFORMATION			
Inspection Date 06/02/2011	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK	
		VIOLATIONS			
Items must be corrected by: 0	6/22/2011				
otify the Elevator Bureau in writ mplainace with current codes.	ing on Corrected Violations Form	when the following corrections	have been made in order to	bring your equipment into	
iolations pointed out to: DEBBIE			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:	MANTHBURG LLC 8295 SPRINGS RD WARRENTON, VA. NO	C 20186		