

## 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 11159-16-2978 State Number H1549

EQUIPMENT INSPECTED					
tate Number: <b>H1549</b> Type of Unit: 1			Floor to Floor: 1 t	o S	
Capacity: 750	Manuf: NAT		Speed: 9		
andings: 2	Installed: 12/0		Rope Size: 0		
olts: 120	Complied: 12	2/02/2004	Entrances: 2		
OWNER		OCCUPANT			
BELHAVEN MISSIONARY BAPTIST		BELHAVEN MISSI	BELHAVEN MISSIONARY BAPTIST		
PO BOX 400		251 EDWARDS ST.			
BELHAVEN, NC, 27810		BELHAVEN, NC, 2 <sup>r</sup>	7810		
	IN	SPECTION INFORMATION			
Inspection Date	Type Inspection	Certificate Status	Inspector	County	
06/08/2011	Routine	Re-issued	16 - Moore	BEAUFORT	
		VIOLATIONS			
'a No viola	ations found				
otify the Elevator Bureau in w	riting on Corrected Violations Form	when the following corrections hav	e been made in order to brii	ng your equipment into	
Violations pointed out to: Alice in Church Office			Inspector		
		ailing address please call: 919-733-			
THIS IS NOT AN	To make changes to the invoice mailing address please call: 919-733-0372  BELHAVEN MISSIONARY BAPTIST				
INVOICE	An invoice will be mailed to:  PO BOX 400  BEI HAVEN NC 27810				