

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 11213-8-0367 State Number H2265

	EQUIPM	ENT INSPECTED		
State Number: H2265	Type of Unit: Hand Lif	ît	Floor to Floor: 1 to 2	
Capacity: 750	Manuf: NATL W-O-V		Speed: 9	
Landings: 2 Installed: 02/08/			Rope Size:	
Volts: 115	Complied: 02/08/2011		Entrances: 2	
OWNER		OCCUPANT		
ANSON COUNTY ARTS COUNC	CIL ANSONIA THEATRE			
P.O. BOX 332	112 S RUTHERFORD STREET			
WADESBORO, NC, 28170		WADESBORO, NC, 28170		
	INSPECTIO	DN INFORMATION		
Inspection Date 08/01/2011	Type Inspection Compliance	Certificate Status Prev Issued	Inspector 8 - Burris	County ANSON
	VI(OLATIONS		
Elevator Name: STAGE LIFT				
Notify the Elevator Bureau in writing omplainace with current codes.	g on Corrected Violations Form when the	following corrections have been	en made in order to bring you	r equipment into
violations pointed out to: REP		Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372			
THIS IS NOT AN	All invoice will be mailed to: All P.6	NSON COUNTY ARTS COU O. BOX 332 ADESBORO, NC, 28170		