

## 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 11298-24-4463 State Number 22571

			EQUIPMENT INSPECTED			
	nber: <b>22571</b>	Type of Unit:	Type of Unit: Passenger		Floor to Floor: 1 to 9	
Capacity:			Manuf: OTIS		Speed: 200	
Landings:			Installed: 09/14/2005		Rope Size:	
Volts: 208		Complied: 10/06/2005		Entrances:	1	
OWNER			OCCUPANT			
21 BATTERY PARK LLC				ERY PARK CONDOMIN	IIUM	
	CORP./ ATTN:ST	EPHANIE CLARK		ERY PARK		
AKDEN,	, NC, 28704-0580		ASHEVII	LLE, NC, 28801		
			INSPECTION INFORMATION			
Inspection Date 10/25/2011		Type Inspection Routine	Certificate Status Re-issued		County BUNCOMBE	11 B
			VIOLATIONS			
8.11.1.6	Provide the missi last date on 5yr.	ng metal tag in the machine space w	rith all pertinent information of the	ne test performed. (Catego	ry 3 & 5 electric elevators;	No tag /
8.6.8.9	•	gns shall be provided. Damaged or r	nissing signs shall be replaced. M	Machine room door sign no	ot legible. "AUTHORIZED	
8.6.10.1	Perform a month inspector.	y firefighters Phase 1 and 2 test with	h the key switches and a minimu	m one floor run. Documer	t test results with availabili	ty to
2.7.3.4.1(1	b) Provide a self clo	sing, self locking machine room doo	or. 2 ND NOTICE !!!!!!!			
Items	must be corrected by	v: 11/24/2011	Eleva	ator Name: ELEVATOR #	± 2	
	Elevator Bureau in ce with current code	writing on Corrected Violations Forms.	m when the following corrections	s have been made in order	to bring your equipment in	to
Violations	pointed out to: Step	ohanie Clark / 828-650-6875				
		To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE		21 BATTERY PARK LLC An invoice will be mailed to: C/O IPM CORP./ ATTN:STEPHANIE CLARK ARDEN, NC, 28704-0580				