

## 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 12061-24-0172 State Number 16683

|   |  | 919-707-7927   | _                       |                            | _    |  |
|---|--|--|-------------------------|----------------------------|------|--|
|   | EÇ   | QUIPMENT INSPECTED                                   | )                       |                            |      |  |
| State Number: 16683   | Type of Unit: Pas  | ssenger  | Floor to Flo            | or: 1 to 3                 |      |  |
| Capacity: 2000  | Manuf: KONE  |  | Speed: 125              | Speed: 125                 |      |  |
| Landings: 3   | Installed: 09/16/1997  |  | Rope Size:              | Rope Size:                 |      |  |
| Volts: 208  | Complied: 10/31  | /1997  | Entrances:              | Į.                         |      |  |
| OWNER   |  |  | OCCUPANT                |                            |      |  |
| 32 BROADWAY CONDO ASSOC   | JE   |  | JENKINS BLDG            |                            |      |  |
| 32 BROADWAY ST UNIT 100   |  |  | 32 BROADWAY ST          |                            |      |  |
| ASHEVILLE, NC, 28801  |  |  | ASHEVILLE, NC, 28801    |                            |      |  |
|   | INSI   | PECTION INFORMATION                                  | <br>DN                  |                            |      |  |
| Inspection Date 03/01/2012  | Type Inspection Routine  | Certificate Status<br>Re-issued                      | Inspector<br>24 - Moore | County<br>BUNCOMBE         | 11 B |  |
|   |  | VIOLATIONS   |                         |                            |      |  |
| 8.6.5.16.5 Perform the 5 yr full load ove the controller or valve. 30 day                                     | s to perform test.   |  |                         |                            |      |  |
| Items must be corrected by: 03/11/20 Notify the Elevator Bureau in writing on complainace with current codes. | Corrected Violations Form wl   |  | _                       | to bring your equipment in | nto  |  |
| Violations pointed out to: John Ewing / 8   |  |  |                         |                            |      |  |
|   | To make changes to the invoice mailing address please call: 919-733-0372 |  |                         |                            |      |  |
| THIS IS NOT AN INVOICE An inv   | oice will be mailed to:  | 32 BROADWAY CO<br>32 BROADWAY SO<br>ASHEVILLE, NC, 2 | ΓUNIT 100               |                            |      |  |