

INSPECTION REPORT

IMPORTANT: Always use State Number in  
any correspondence relating to your equipment  
www.nclabor.com/elevator.htm  
919-807-2770

Report Number  
**12080-52-5695**  
State Number  
**H1711**

EQUIPMENT INSPECTED

State Number: <b>H1711</b>	Type of Unit: Hand Lift	Floor to Floor: 1 to 2
Capacity: 750	Manuf: NATL W-O-V	Speed: 20
Landings: 2	Installed: 07/05/2006	Rope Size: 0
Volts: 115	Complied:	Entrances: 1
OWNER	OCCUPANT	
GRANDFATHER HIGHLAND CENTER	GRANDFATHER HIGHLAND GAMES	
P.O.BOX 1095	4210 MITCHEL AVENUE	
LINVILLE, NC, 28646	LINVILLE, NC, 28646	

INSPECTION INFORMATION

Inspection Date 03/20/2012	Type Inspection Routine	Certificate Status Re-issued	Inspector 52 - Sosebee	County AVERY	6
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VIOLATIONS

n/a No violations found

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into complainance with current codes.

Violations pointed out to: G F Highland Games 828-733-1333 Inspector \_\_\_\_\_

THIS IS NOT AN  
INVOICE

To make changes to the invoice mailing address please call: 919-733-0372

An invoice will be mailed to:

GRANDFATHER HIGHLAND CENTER  
P.O.BOX 1095  
LINVILLE, NC, 28646