NCD DL NC Oppartment of Labor

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 12101-36-3952 State Number N1.15

	EQ	UIPMENT INSPECTED			
State Number: N1.15 Type of Unit: Freight		eight	Floor to Floor: 1 to 3		
Capacity: 2500	Manuf: MONAI	•	Speed: 75		
Landings: 4	Installed: 11/12/1976 Complied: 11/12/1976		Rope Size: 1/2		
Volts: 550			Entrances: 1		
OWNER	_	OCCUPANT CAROLINA FINISHING OF NC			
CAROLINA FINISHING					
PO BOX 2226 220 ELMIRA ST					
BURLINGTON, NC, 27216	BURLINGTON, NC, 27217				
	INSP	ECTION INFORMATION			
Inspection Date 04/10/2012	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE	
		VIOLATIONS			
8.6.4.7.1 Clean the elevator hoise	hine room. Clean the machine room (nAGED OUT ON 5-10-2012 tway, CAR GATES, OF (PIGEON Dind safety test according to the application)	UNG)			
Items must be corrected by: 0	5/10/2012				
Notify the Elevator Bureau in write complainace with current codes.	ting on Corrected Violations Form wh	en the following corrections	have been made in order to bri	ng your equipment into	
Violations pointed out to: RHON	DA PERRY 336-227-2770				
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	An invoice will be mailed to:	CAROLINA FINISHING PO BOX 2226 BURLINGTON, NC, 27:			