



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
12156-48-4614
State Number
6853

EQUIPMENT INSPECTED

| | | |
|---------------------------|-------------------------|------------------------|
| State Number: 6853 | Type of Unit: Passenger | Floor to Floor: 1 to 2 |
| Capacity: 4000 | Manuf: WESTBROOK | Speed: 100 |
| Landings: 2 | Installed: 11/10/1970 | Rope Size: |
| Volts: 240 | Complied: 11/16/1970 | Entrances: 1 |

OWNER
BLADEN COUNTY HOSPITAL
PO BOX 398
ELIZABETHTOWN, NC, 28327

OCCUPANT
BLADEN COUNTY HOSPITAL
HIGHWAY 701 SOUTH
ELIZABETHTOWN, NC, 28327

INSPECTION INFORMATION

| | | | | |
|-------------------------------|----------------------------|---------------------------------|--------------------------|------------------|
| Inspection Date 06/04/2012 | Type Inspection Routine | Certificate Status Re-issued | Inspector 48 - Martin | County BLADEN |
|-------------------------------|----------------------------|---------------------------------|--------------------------|------------------|

9

VIOLATIONS

| | |
|------------|--|
| 8.6.4.7.1 | Clean the elevator pit. |
| 8.11.2.2.2 | Perform the annual no load safety test |

Items must be corrected by: 07/04/2012

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

Violations pointed out to: STEVE

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:
BLADEN COUNTY HOSPITAL
PO BOX 398
ELIZABETHTOWN, NC, 28327