



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](http://www.nclabor.com/elevator.htm)  
919-707-7927

Report Number  
**12201-8-4419**  
State Number  
**2050**

EQUIPMENT INSPECTED

State Number: <b>2050</b>	Type of Unit: Freight	Floor to Floor: B to 2
Capacity: 1500	Manuf: ROTARY	Speed: 50
Landings: 2	Installed: 04/03/1953	Rope Size:
Volts: 220	Complied: 04/03/1989	Entrances: 2
OWNER	OCCUPANT	
ANSON CO ADMIN BLDG	ANSON CO ADMIN BLDG	
101 S.GRENE ST	101 S.GRENE ST ROOM 30	
WADESBORO, NC, 28170	WADESBORO, NC, 28170	

INSPECTION INFORMATION

Inspection Date 07/19/2012	Type Inspection Routine	Certificate Status Re-issued	Inspector 8 - Burris	County ANSON
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4

VIOLATIONS

8.11.1.2      PERFORM ANNUAL PRESSURE RELIEF VALVE TEST

Items must be corrected by: 08/18/2012

Elevator Name: SIDEWALK ELEV

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: REP- JEFF WAISNER

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:

ANSON CO ADMIN BLDG  
101 S.GRENE ST  
WADESBORO, NC, 28170