

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 13077-36-4743 State Number 4859

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	E	QUIPMENT INSPECTED			
State Number: 4859	Type of Unit: Passenger		Floor to Floor: 1 t	Floor to Floor: 1 to 2	
Capacity: 1800	Manuf: SOUTHE	RN	Speed: 100		
Landings: 2	Installed: 05/27/19	963	Rope Size:		
Volts: 220	Complied: 05/27/	1963	Entrances: 1		
OWNER		OCCUPANT			
CAROLINA BIO SUPPLY		CAROLINA BIO SUPPLY			
2700 YORK RD		2700 YORK RD			
BURLINGTON, NC, 27215		BURLINGTON, NC, 27215			
	INS	PECTION INFORMATION			
Inspection Date 03/18/2013	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE	
		VIOLATIONS			
none found					
Notify the Elevator Bureau in wromplainace with current codes.	iting on Corrected Violations Form w	when the following corrections h	ave been made in order to bri	ing your equipment into	
Violations pointed out to: Glenn					
	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 BIO SUPPL 2700 YORK RD BURLINGTON, NC, 272			