

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 13214-36-3089 State Number 9187

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	Е	QUIPMENT INSPECTED		
State Number: 9187	Type of Unit: Fr	eight	Floor to Floor: 1 to	3
Capacity: 10000	Manuf: SOUTHERN		Speed: 60	
Landings: 3	Installed: 08/08/1978		Rope Size:	
Volts: 460	Complied: 08/08/1978		Entrances: 1	
OWNER	OCCUPANT			
CAROLINA HOISERY	BURLINGTON INDUSTRIES			
615 W HARDEN ST		615 W HARDEN ST		
GRAHAM, NC, 27253		GRAHAM, NC, 27253		
	INS	SPECTION INFORMATION		
Inspection Date 08/02/2013	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
		VIOLATIONS		
NONE FOUND				
otify the Elevator Bureau in womplainace with current codes	vriting on Corrected Violations Form v	when the following corrections ha	ave been made in order to bri	ng your equipment into
iolations pointed out to: KIE	ГН GREESON 336-260-2676			
	To make changes to the invoice ma			
THIS IS NOT AN INVOICE	An invoice will be mailed to:	CAROLINA HOISERY 615 W HARDEN ST GRAHAM, NC, 27253		