

## 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 13267-48-3991 State Number 28424

|  |  | EQUIPMENT INSPECTED             |                                   |                     |
|--|--|---------------------------------|-----------------------------------|---------------------|
| State Number: 28424  | Type of Unit:                                  | Passenger                       | Floor to Floor                    | : 1 to 2            |
| Capacity: 14   | Manuf: SAVARIA Installed: 07/24/2012 Complied: |                                 | Speed: 30 Rope Size: Entrances: 1 |                     |
| Landings: 2  |  |                                 |                                   |                     |
| Volts: 240   |  |                                 |                                   |                     |
| OWNER  | 1  | 0                               | CCUPANT                           |                     |
| MARK BRISSON   |  |                                 | RY N PAN                          |                     |
|  | 95 S LUMINA AVE UNIT 2H                        |                                 | 19 W BAY STREET                   |                     |
| WRIGHTSVILLE BEACH, NC, 28408  |  |                                 | SOUTHPORT, NC, 28461              |                     |
|  |  |                                 |                                   |                     |
|  | n  | NSPECTION INFORMATION           |                                   |                     |
| Inspection Date 09/24/2013   | Type Inspection<br>Routine                     | Certificate Status<br>Re-issued | Inspector<br>48 - Martin          | County<br>BRUNSWICK |
|  |  | VIOLATIONS                      |                                   |                     |
|  |  |                                 |                                   |                     |
|  |  |                                 |                                   |                     |
| Items must be corrected by: 1 Notify the Elevator Bureau in wri complainace with current codes. Violations pointed out to: Craig | ting on Corrected Violations Forn              | -                               | Inspector                         |                     |