

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 13353-52-4755 State Number H2510

| | EÇ | QUIPMENT INSPECTED | | | |
|---|---|---|---------------------------------|----------------------------------|--|
| State Number: H2510 | Type of Unit: H | Type of Unit: Hand Lift Manuf: GARAVENTA Installed: 12/19/2013 Complied: 12/19/2013 | | Floor to Floor: 1 to 2 Speed: 30 | |
| Capacity: 750 | | | | | |
| Landings: 2 | Installed: 12/19 | | | | |
| Volts: 230 | Complied: 12/1 | | | Rope Size: 3/8 Entrances: 2 | |
| OWNER | | OCCUPANT | | | |
| VISTAS @ BANNER ELK | | VISTAS @ BANNER ELK #6 | | | |
| 319 PENNY LANE | | 410 PENNY LANE | | | |
| BANNER ELK, NC, 28604 | | BANNER ELK, NC, 28604 | | | |
| | INSI | PECTION INFORMATION | | | |
| Inspection Date 12/19/2013 | Type Inspection New | Certificate Status Issued | Inspector 52 - Sosebee | County AVERY | |
| | | VIOLATIONS | | | |
| Unit in Compliance | | | | | |
| 1 | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Elevator Name: 6 | | | | | |
| Notify the Elevator Bureau in complainace with current code | writing on Corrected Violations Form wl | nen the following corrections have b | een made in order to bring your | equipment into | |
| Violations pointed out to: Jef | | | Inspector | | |
| | To make shames to the invoice mail | | | | |
| THIS IS NOT AN | to make changes to the invoice mail | To make changes to the invoice mailing address please call: 919-733-0372 | | | |
| INVOICE | An invoice will be mailed to: | VISTAS @ BANNER ELK 319 PENNY LANE BANNER ELK. NC. 28604 | | | |