

THIS IS NOT AN

INVOICE

An invoice will be mailed to:

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 14014-36-1286 State Number 18696

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		EQUIPMENT INSPECTED		
te Number: 18696 Type of Unit: Dumbwait		Dumbwaiter	Floor to Floor: B to 2	
Capacity: 500	Manuf: ATLAS		Speed: 50	
Landings: 3	Installed: 05/08/2000		Rope Size: 1/4	
Volts: 208	Complied: 05/0	08/2000	Entrances: 2	
OWNER		OCCUPANT		
CITY OF BURLINGTON		MAY MEMORIAL L	JBRARY	
PO BOX 1352		342 S SPRING ST		
BURLINGTON, NC, 27216		BURLINGTON, NC, 27215		
]	INSPECTION INFORMATION		
Inspection Date 01/14/2014	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
		VIOLATIONS		
Notify the Elevator Bureau in writ omplainace with current codes.	ting on Corrected Violations For	m when the following corrections	have been made in order to bri	ng your equipment into

PO BOX 1352

CITY OF BURLINGTON

BURLINGTON, NC, 27216