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
**14023-36-5484**
State Number
**4357**

## EQUIPMENT INSPECTED

State Number: **4357**
Capacity: 2500
Landings: 2
Volts: 208

Type of Unit: Freight
Manuf: PARK
Installed: 04/04/1960
Complied: 04/04/1960

Floor to Floor: 1 to 2
Speed: 50
Rope Size:
Entrances: 1

OWNER
SAX HOISERY
220 HARDEN ST
GRAHAM, NC, 27253

OCCUPANT
SAX HOISERY
220 HARDEN ST
GRAHAM, NC, 27253

## INSPECTION INFORMATION

| Inspection Date | Type Inspection | Certificate Status | Inspector | County |
|---|---|---|---|---|
| 01/23/2014 | Not Inspected | Not Issued | 36 - Kirkman | ALAMANCE |

1

## VIOLATIONS

LEFT ELEVATOR NOTIFICATION

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into complainace with current codes.

Violations pointed out to: N/A

Inspector _____

THIS IS NOT AN INVOICE

To make changes to the invoice mailing address please call: 919-733-0372

An invoice will be mailed to:
SAX HOISERY
220 HARDEN ST
GRAHAM, NC, 27253