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
14093-36-456
State Number
H1562

EQUIPMENT INSPECTED

State Number: **H1562**
Capacity: 750
Landings: 2
Volts: 115

Type of Unit: Hand Lift
Manuf: ACCESS
Installed: 01/20/2005
Complied: 01/20/2005

Floor to Floor: 1 to 2
Speed: 12
Rope Size:
Entrances: 2

OWNER
ROCK CREEK UMC
7315 ROCK CREEK
SNOW CAMP, NC, 27340

OCCUPANT
ROCK CREEK UMC
7315 ROCK CREEK
SNOW CAMP, NC, 27340

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County
04/03/2014	Not Inspected	Not Issued	36 - Kirkman	ALAMANCE

1

VIOLATIONS

HANDICAP LIFT WOULD NOT WORK. SPOKE WITH CHURCH AND THEY ARE GETTING IT FIXED. WILL CALL WHEN READY!!

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:
ROCK CREEK UMC
7315 ROCK CREEK
SNOW CAMP, NC, 27340