

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 14281-59-543 State Number H1519

| | F | EQUIPMENT INSPECTED | | | |
|--|--|---|--|--------------------|----------|
| State Number: H1519 Capacity: 750 Landings: 2 Volts: 115 OWNER ASHEVILLE BROAD CENTER, LLC 1881 NE 26ST ST. SUITE 21 FORT LAUDERDALE, FL, 33305 Type of Unit: Hand Manuf: ACCESS Installed: 06/23/200 Complied: 06/23/200 | | Hand Lift | nd Lift Floor to Floor: 1 to 2 | | |
| | | | Speed: 12 | | |
| | | 23/2004 | 1 | | |
| | | /23/2004 | | | |
| | | OCCUPANT | | | |
| | | 40 NC | 40 NORTH FRENCH BROAD 40 N FRENCH BROAD | | |
| | | | | | |
| | | ASHEVILLE, NC, 28801 | | | |
| | IN | SPECTION INFORMATION | V | | |
| Inspection Date 10/08/2014 | Type Inspection Routine | Certificate Status Re-issued | Inspector 59 - Cannon | County BUNCOMBE | 11 B |
| | | VIOLATIONS | | | |
| note | no violations | | | | |
| complainace with current codes. | | Elevator Name: DISABLED PERSONS LIFT hen the following corrections have been made in order to bring your equipment into | | | |
| Violations pointed out to: Dan | Strom | | | | |
| | To make changes to the invoice mailing address please call: 919-733-0372 | | | | |
| THIS IS NOT AN INVOICE | ASHEVILLE BROAD CENTER, LLC An invoice will be mailed to: 1881 NE 26ST ST. SUITE 21 FORT LAUDERDALE, FL, 33305 | | | | |