

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 14283-36-4566 State Number 21423

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| | E | QUIPMENT INSPECTED | | | |
|----------------------------------|--|---------------------------------------|--------------------------------|------------------------|--|
| State Number: 21423 | Type of Unit: Passenger | | Floor to Floor: | Floor to Floor: 1 to 2 | |
| Capacity: 2500 | Manuf: THYSSE | Manuf: THYSSEN KRUPP | | Speed: 75 | |
| Landings: 2 | Installed: 01/21/20 | Installed: 01/21/2003 | | Rope Size: 0 | |
| Volts: 208 | Complied: 01/21/2003 | | Entrances: 2 | | |
| OWNER | | OCCUPANT | | | |
| S.POWEL .INC. | | GREGORY BUILDING | | | |
| 1635 NOVA LANE | | 154 HUFFMAN MILL ROAD | | | |
| BURLINGTON, NC, 27215 | | BURLINGTON, NC, 27215 | | | |
| | INS | SPECTION INFORMATION | | | |
| Inspection Date 10/10/2014 | Type Inspection Routine | Certificate Status Re-issued | Inspector 36 - Kirkman | County ALAMANCE | |
| | | VIOLATIONS | | | |
| None Found | | | | | |
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| Notify the Elevator Bureau in wo | vriting on Corrected Violations Form v | when the following corrections l | nave been made in order to bri | ng your equipment into | |
| violations pointed out to: CHR | RIS POWELL 336-684-7783 | | | | |
| | To make changes to the invoice mailing address please call: 919-733-0372 | | | | |
| THIS IS NOT AN | | S.POWEL .INC. | | | |
| INVOICE | An invoice will be mailed to: | 1635 NOVA LANE BURLINGTON, NC, 272 | 215 | | |