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
14294-48-2244
State Number
22759

EQUIPMENT INSPECTED

State Number: **22759**
Capacity: 2100
Landings: 2
Volts: 208

Type of Unit: Passenger
Manuf: OTIS
Installed: 04/08/2005
Complied: 04/08/2005

Floor to Floor: 1 to 2
Speed: 100
Rope Size:
Entrances: 1

OWNER
ASSISTED CARE HQ
1003 OLD WATERFORD WAY
LELAND, NC, 28451

OCCUPANT
ASSISTED CARE HQ
1003 OLD WATERFORD WAY
LELAND, NC, 28451

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County	
10/21/2014	Routine	Re-issued	48 - Martin	BRUNSWICK	10

VIOLATIONS

n/a No violations found

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: MGMT.

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:
ASSISTED CARE HQ
1003 OLD WATERFORD WAY
LELAND, NC, 28451