

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 15028-16-5082 State Number N7.4

		EQUIPMENT INSPECTED			
State Number: N7.4	Type of Unit: Pa	ssenger	Floor to Floor: B to	3	
Capacity: 2000	Manuf: SOUTHERN		Speed: 300		
Landings: 4	Installed: 06/03/1975		Rope Size: 1/2		
Volts: 220	Complied: 06/03/1975		Entrances: 1		
OWNER		OCCUPANT			
CITY OF WASHINGTON	WASHINGTON MUNICIPAL BLDG				
PO BOX 1988	100 SECOND ST				
WASHINGTON, NC, 27889		WASHINGTON, NC, 27889			
	IN	SPECTION INFORMATION			
Inspection Date 01/28/2015	Type Inspection Routine	Certificate Status Re-issued	Inspector 16 - Moore	County BEAUFORT	
		VIOLATIONS			
Items must be corrected by: 02/2					
Notify the Elevator Bureau in writin complainace with current codes.	g on Corrected Violations Form	when the following corrections have	ve been made in order to brin	g your equipment in	
Violations pointed out to: William Conner			Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	n invoice will be mailed to:	CITY OF WASHINGTON PO BOX 1988 WASHINGTON, NC, 2788	9		